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Before the Committee on Appropriations

Department of Defense Appropriations

Fiscal Year 2010

111th CONGRESS, FIRST SESSION

H.R. 3326

DEPARTMENT OF DEFENSE
NONDEPARTMENTAL WITNESSES

Department of Defense Appropriations, 2010 (H.R. 3326)

**DEPARTMENT OF DEFENSE APPROPRIATIONS FOR
FISCAL YEAR 2010**

HEARINGS
BEFORE A
SUBCOMMITTEE OF THE
COMMITTEE ON APPROPRIATIONS
UNITED STATES SENATE
ONE HUNDRED ELEVENTH CONGRESS

FIRST SESSION

ON

H.R. 3326

AN ACT MAKING APPROPRIATIONS FOR THE DEPARTMENT OF DEFENSE
FOR THE FISCAL YEAR ENDING SEPTEMBER 30, 2010, AND FOR
OTHER PURPOSES

**Department of Defense
Nondepartmental Witnesses**

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**DEPARTMENT OF DEFENSE APPROPRIATIONS
FOR FISCAL YEAR 2010**

WEDNESDAY, MARCH 18, 2009

U.S. SENATE,
SUBCOMMITTEE OF THE COMMITTEE ON APPROPRIATIONS,
Washington, DC.

The subcommittee met at 10:30 a.m., in room SD-192, Dirksen Senate Office Building, Hon. Daniel K. Inouye (chairman) presiding.

Present: Senators Inouye, Murray, Cochran, and Bennett.

DEPARTMENT OF DEFENSE

MEDICAL HEALTH PROGRAMS

**STATEMENT OF LIEUTENANT GENERAL ERIC B. SCHOOMAKER, M.D.,
Ph.D., SURGEON GENERAL, U.S. ARMY MEDICAL COMMAND**

OPENING STATEMENT OF SENATOR DANIEL K. INOUYE

Chairman INOUYE. I'd like to welcome all of the witnesses today as we review the Department of Defense (DOD) medical programs. There'll be two panels this morning. First we'll hear from the service surgeon generals: General Eric Schoomaker, Vice Admiral Adam Robinson, Jr., General James Roudebush. Then we'll hear from our chiefs of the Nurse Corps: General Patricia Horoho, Rear Admiral Christine M. Bruzek-Kohler, and General Kimberly Siniscalchi. Did I get it correct?

I'd like to welcome back all of the three surgeon generals to our subcommittee once again. I look forward to continuing our work together to ensure the future of our military medical programs and personnel.

As you may have noted, this is the first defense hearing that the subcommittee will be holding this year. We deliberately selected the medical programs as our inaugural topic to underscore the importance that this issue has to our subcommittee. Our surgeon generals and the chiefs of the Nurse Corps have been called upon to share their insight on what is working and what is not working.

Military medicine is a critical element in our defense strength. Our ability to care for our wounded soldiers on the modern battlefield is a testament both to the hard work and dedication of our men and women in uniform and to the application of the new technology which is a hallmark of the U.S. armed forces, and so to our medical programs' demonstrated commitment to provide for our servicemembers and their families, which is unsurpassed in any

other military. It is a vital component in our military compensation package, one that is necessary to sustain the all-volunteer force, a force, I might add, which by all measurement is the finest in the world.

This is a unique medical hearing because we have not received the details of the fiscal year 2010 DOD budget, nor have we received the remaining fiscal year 2009 supplemental request. While we may not be able to discuss detailed budget issues, we'll focus on various medical personnel and medical technology issues facing the Department, our servicemembers and their families.

On a personal note, when I was in the Army some time ago 4 percent of the men in my regiment were married, just 4 percent. I think that was about the average in the United States Army. Now 56 percent of the Army, 54 percent of the Navy, and 45 percent of the Marine Corps, and 59 percent of the Air Force are married. This completely alters the dynamic of the service I remember to the one you see today.

Not only that, but the demographics of our servicemembers have drastically changed. We also have more than a few dual-service parents and couples, both of which deploy to theater.

We've all read about the rising rates of suicide, divorce, substance abuse in our military. This is not something that can only be addressed with the service member. This must be approached with the service member, their family, their fellow soldiers, sailors, marines, and airmen. The solutions are not one size fits all or one service fits all. Instead, all ideas must be on the table for everyone to consider. What works for the Army may not necessarily work for the Navy.

In addition, we need to take a unified approach to medical research in areas directly tied to the warfighter that we are currently tackling and those that could be right around the corner. This coordinated approach should cross the entire Federal Government, utilizing the resources and expertise of the Department of Veterans Affairs, the National Institutes of Health, Department of Homeland Security, and the Substance Abuse and Mental Health Services Administration, just to name a few.

The Department stands at a very pivotal juncture in its efforts to modernize the medical technology enterprise architecture. I'm certain each one of you can share a story or two about the various versions of the Department's medical health records and how challenging it can be, at the least. Now you are tasked to both modernize the system and make it interoperable with the Veterans Administration (VA) to facilitate seamless transitions for our servicemembers and to enable joint DOD-VA locations to care for both veterans and servicemembers.

These are not simple tasks and I know that there are many challenges ahead. These are some of the issues we'll face in the years ahead. We continue to hold this valuable hearing with the service surgeon generals and the chiefs of the Nurse Corps as an opportunity to raise and address these and many other issues.

I look forward to your statements and note that your full statements will be made part of the record.

Before we proceed with witnesses, may I call upon the vice chairman of the subcommittee, Senator Cochran.

STATEMENT OF SENATOR THAD COCHRAN

Senator COCHRAN. Mr. Chairman, thank you very much. I'm pleased to join you in welcoming our two panels of witnesses today, the service surgeon generals and the chiefs of the Nurse Corps. We have an important duty to provide for the medical needs of our active, Guard, and Reserve personnel. The joint approach in managing the military medical programs has been very important in supporting our soldiers, sailors, airmen, and marines, especially during wartime.

The men and women of the medical service corps deserve our thanks for their services they've provided and continue to provide. I'm pleased to join the chairman in being here to receive your testimony and working with you as we try to identify the priorities that need special attention in the funding cycle that we are approaching.

Thank you very much.

Chairman INOUE. Thank you very much.

I am especially pleased to have with us in the subcommittee this morning Senator Bennett of Utah. He's our newest member. Welcome, sir. Would you like to make a statement?

Senator BENNETT. Your being pleased is only exceeded by my being pleased at the opportunity to be here. Thank you for your welcome.

Chairman INOUE. Thank you very much.

May I call upon the first witness, Lieutenant General Eric B. Schoemaker. He's a doctor, a Ph.D. He's also the Surgeon General of the U.S. Army.

General SCHOOMAKER. Thank you, sir. Chairman Inouye, Vice Chairman Cochran, Senator Bennett: Thank you for providing all of us here a forum for discussing our service medical programs and to allow me to discuss Army medicine and the defense health program (DHP).

As you mentioned earlier, sir, I'm joined by our Chief of the Army Nurse Corps, Major General Patty Horoho, and the Commander of the Western Regional Medical Command at Madigan Army Medical Center at Fort Lewis, Washington.

Also, in recognition of the Army's having declared 2009 as the year of the NCO, the noncommissioned officer, I'm joined today by my senior—the senior enlisted medic in the Army, who is my command sergeant major, Althea Dixon. She is one of the finest soldiers and leaders with whom I have had the pleasure to serve and is an invaluable member of my command team. Command Sergeant Major Dixon has been my battle buddy and my conscience and my unwavering standardbearer throughout these last three commands and through some of the most difficult challenges that Army medicine has faced. We've traveled together throughout the United States, especially throughout the southeast United States when we worked together in the Southeast Regional Medical Command, but also in Europe and in Kenya, Thailand, Korea, and most recently in Afghanistan and in Iraq.

She embodies really the ethos of the noncommissioned officer. She's the person to whom I turn for unvarnished truth about my command and my effectiveness as a commander. She's my constant

reminder of what is one of the most distinguishing and powerful features of our Army, which is our noncommissioned officer corps.

For my oral statement today I'd like to highlight just a handful of key points that I raise in my written testimony. First I'd like to thank the Congress and this subcommittee in particular for the very generous and much appreciated funding support that you provided for the military health system and for Army medicine over the last year. Congress has been attentive to the needs we have in military medicine, particularly in our sustainment, restoration, and modernization (SRM) funding, SRM funding for facilities, and our research and development funds for research.

Our sustainment, restoration, and modernization funding really gets put to great use by our facilities managers who keep our facilities operating safely and reliable. Some of our older hospitals are not ideal for practicing a 21st century form of medicine, but our SRM funding has really allowed us to keep them in good shape and running safely and smoothly.

Our research and development dollars are going toward some very promising research. I think the chairman alluded to that earlier. It's aimed at saving and improving the lives of soldiers on future battlefields. Frankly, although I use the term "soldiers" to describe the recipients of these efforts, increasingly we conduct our research programs really as a joint effort among my three colleagues here, so that all warriors—soldiers, sailors, airmen, marines, coast guardsmen, and other Federal agency partners—as well as the public at large are beneficiaries of our work.

Examples are biomarkers for traumatic brain injury, tissue re-engineering, interventions to build resilience and prevent psychiatric hazards—just a few examples of where innovative research initiatives that were funded through our fiscal year 2009 core medical research budget are working. I eagerly await the outcomes of these and other research efforts that can better the lives of our soldiers and other warriors.

Next I'd like to briefly mention the latest developments in our warrior care and transition program. This is probably one of the most important advances that we've made over the last several years. In our first year of standing up the warrior care and transition program through the Army medical action plan, we heavily invested in the structure of our units. We focused on proper ratios of care providers and cadre that oversee our warriors in transition. That's what we call our soldiers who are in these programs. They are transitioning into uniform, back into uniform, or into civilian life, or into continued care in the private sector or in the VA.

Now in our second year, we're directing our efforts at optimizing the transition for our soldiers and families. In March 2008 we launched a comprehensive transition plan initiative for our warriors in transition. Instead of focusing solely on their injury or illness, the comprehensive transition plan fosters an holistic approach to a warrior's rehabilitation and transition. These are the lessons which wounded, ill, and injured soldiers from former wars, such as the chairman himself and Senator Dole, general retired, now Secretary, Shinseki, and general retired Fred Franks, have told us were the most important lessons to be gained from their own experiences in recovery and rehabilitation.

This is accomplished through a collaboration of a multidisciplinary team of physicians, of case managers, specialty care providers, occupational therapists, and others. Together with a soldier and the family, we develop an individually tailored set of goals, emphasize the transition phase to civilian life or return to duty. I'm confident that this is really where we need to be doing that and it's going to come up with the right outcomes for our folks.

An even newer Army program that I have high expectations for is our comprehensive soldier fitness program. The Army Chief of Staff, General George Casey, has established a vision of an Army comprised of balanced, healthy, self-confident soldiers and families and Army civilians whose resilience and total fitness enable them to thrive even in this area of high operational tempo and persistent conflict and engagement.

To achieve this ambitious vision, he's instituting a comprehensive soldier fitness program. The intent of this program is to increase the resilience of soldiers and families by developing the five dimensions of strength: physical, emotional, social, spiritual, and family.

It's currently in development. It's under the leadership of Brigadier General Rhonda Cornum, an Army Medical Department physician. I expect this program to have a positive effect and a profound effect upon our soldiers, their families, and our Army civilians.

Last, I wanted to share with you a copy of our new combat medic handbook. Our combat medics, which we call 68-Whiskeys, 68-Ws, are the best trained battlefield medics in the world, alongside our Navy and Air Force colleagues of course. As the Army and the joint force have labored to provide better body armor and protection from ballistic and burn and blast injury and have altered the tactics, techniques, and procedures in a complex urban terrain to reduce combat casualties and improve on our killed in action rates, that is survival from the initial wounding incident, our medics have enhanced these improvements and have further contributed to a historically low died of wound rates despite more destructive weapons that are wielded by our enemies.

The medics of this 68-Whiskey generation are trained to perform advanced airway skills, hemorrhage control techniques, shock management, and evacuation. Examples are: Sergeant First Class Nadine Kahla and Sergeant First Class Jason Reisler, who are 68-Whiskey NCOs assigned to the Army Medical Department Center and School in San Antonio, Texas. They are representatives of the other 17 68-Whiskey NCO authors that contributed to this new advanced fieldcraft combat skills textbook, a state-of-the-art manual for combat medics. This delineation of combat medic skills is newly published. It'll be issued to every graduating new combat medic beginning this month. It's an incredible resource developed by some truly incredible NCOs.

In closing, I wanted to thank the subcommittee for the terrific support that you have given to the defense health program and to Army medicine. I greatly value the insight of this subcommittee and I look forward to working with you closely over the next year.

I also want to salute our noncommissioned officers for their professionalism, competence, and leadership. They're truly the backbone of the Army and of Army medicine.

PREPARED STATEMENT

Thank you for holding this hearing. Thank you for your continued support of Army medicine and the warriors and families that we're most honored to serve. Thank you, sir.

Chairman INOUE. Thank you very much, General Schoomaker. [The statement follows:]

PREPARED STATEMENT OF LIEUTENANT GENERAL ERIC B. SCHOOMAKER, M.D., PH.D.

Chairman Inouye, Vice Chairman Cochran, and distinguished members of the Subcommittee, thank you for providing me this forum to discuss Army Medicine and the Defense Health Program. I appreciate this opportunity to talk with you today about some of the very important work being performed by the dedicated men and women—military and civilian—of the U.S. Army Medical Department (AMEDD) who personify the AMEDD value “selfless service.” In recognition of 2009 being “The Year of the NCO”, throughout my testimony I will highlight the contributions of the AMEDD’s Non-Commissioned Officer Corps, the backbone of Army Medicine. Non-Commissioned Officers comprise 18 percent of the Army Medical Department and play critical roles in every aspect of the organization. I am joined today by the senior enlisted medic in the Army, my Command Sergeant Major Althea Dixon, one of the finest Soldiers and leaders with whom I have had the privilege to serve and an invaluable member of my command team.

As the Commander of the U.S. Army Medical Command (MEDCOM), I oversee with the assistance of Command Sergeant Major Dixon a \$10 billion international healthcare organization staffed by 70,000 dedicated Soldiers, civilians, and contractors. We are experts in medical research and development, medical logistics, training and doctrine, the critical elements of public health—health promotion and preventive medicine, dental care, and veterinary care—in addition to delivering industry-leading healthcare services to 3.5 million beneficiaries around the world. But central to everything we do in Army Medicine is the warfighter—we exist as a military medical department to support the warfighter. I am happy to report that we are accomplishing that mission phenomenally well. I can say this with great confidence after spending the first week of this month with the U.S. Central Command (CENTCOM) Surgeon at the Multi-National Force/Multi-National Corps—Iraq Surgeon’s Conference in Iraq. Seeing first hand the care and civil-military medical outreach from Brigade and Division to Corps and Theater was a clear demonstration of the Joint Medical Force providing top-notch medical support across the full-continuum of care and nation building.

To determine how successful we are at executing our mission, Army Medicine uses the Balance Scorecard (BSC) approach developed in the 1990s by Harvard’s Doctors Robert Kaplan and David Norton. Simply put, the BSC serves as an organizational strategic management system which can help improve organizational performance while remaining aligned to our strategy. The MEDCOM began BSC implementation in 2001 under LTG (Ret) James Peake’s leadership. Since then, we have continued to refine the BSC to grow and direct our dynamic organization. I use the enclosed Army Medicine Strategy Map (published in April 2008 and revised in January 2009) and Scorecard as the principal tool by which to guide and track the Command to improve operational and fiscal effectiveness, and better meet the needs of our patients, customers, and stakeholders. The BSC communicates to our MEDCOM workforce and drives top-to-bottom organizational understanding and alignment, focusing our day-to-day efforts to ensure we execute our Mission successfully.

ARMY MEDICINE BALANCED SCORECARD (BSC) OVERVIEW

Purpose

The Balanced Scorecard strategic management framework has been and continues to serve as the centerpiece of the Army Medicine's enterprise-wide Strategic Management System. The first AMEDD strategy map was approved by LTG James B. Peake on April 2001 and the framework has continued through today with LTG Eric B. Schoomaker's January 2009 strategy map. The BSC is used to drive top-to-bottom organizational understanding and alignment, focus day-to-day efforts, and ensure that we are executing our Mission.

Overview

The BSC is a concept introduced by Doctors Robert Kaplan and David Norton in 1992. The BSC is a framework to translate the organization's strategy into terms that can be easily understood, communicated, and acted upon (measurable action).

The foundation and main driver of a BSC is the organization's Mission and Vision. Four perspectives then define the organization: Patient/Customer/Stakeholder (Ends), Internal Processes (Ways), Learning and Growth (Means), and Resource (Means). The April 2008 strategy map (one page schematic) describes Army Medicine's strategy via the strategic objectives (located in the bubbles on the strategy map) in each perspective. Behind each strategic objective is a detailed objective statement that clearly defines the meaning of the strategic objective and measure, which will drive behavior to accomplish each objective. Each measure will have a target and supporting initiatives that will drive the change required to allow the organization to move closer to its intended outcomes (ends).

The BSC is a dynamic, living document that will be refined due to mission and priority changes, organizational learning, as well as when targets are met. Periodic reviews are conducted to ensure proactive change.

Organizational Cascading and Alignment

To ensure enterprise-wide alignment to the Army Medicine BSC, Major Subordinate Command Commanders and Corps Chiefs are required to build a supporting BSC and conduct an alignment brief with TSG.

Additional Information

Detailed information, to include the Army Medicine BSC, is located at <https://ke2.army.mil/bsc>.

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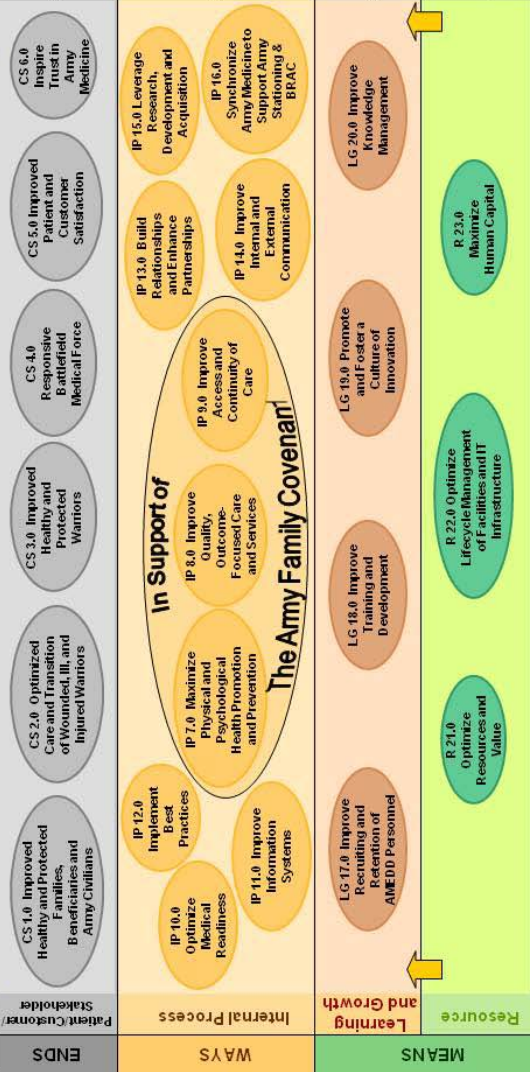
Army Medicine Strategy Map January 2009

Mission
 - Promote, Sustain and Enhance Soldier Health
 - Train, Develop and Equip a Medical Force that Supports Full Spectrum Operations
 - Deliver Leading Edge Health Services to Our Warriors and Military Family to Optimize Outcomes

Vision
 America's Premier Medical Team Saving Lives and Fostering Healthy and Resilient People
 Army Medicine...Army Strong!

Strategic Themes
 Maximize Value in Health Services Provide Global Operational Forces Build the Team Balance Innovation with Standardization Optimize Communication and Knowledge Management

SUSTAIN PREPARE RESET TRANSFORM



This is a dynamic, living document UNCLASSIFIED FOUO Slide 1 of 18 For more information go to: <https://ke2.army.mil/hsc>

The Army Medicine BSC measures and improves organizational performance in four “balanced” Strategic Perspectives: “Resources” and “Learning and Growth” which are the “Means”; “Internal Processes” which is the “Ways”; and “Patients, Customers and Stakeholders” which is the “Ends” by which we show best value in products and services. These “Ends” are how I’ve organized my statement in order to best communicate the significant and varied accomplishments of Army Medicine over the last year.

The Six Army Medicine “Ends”: Improved Healthy and Protected Families, Beneficiaries, and Army Civilians; Optimized Care & Transition of Wounded, Ill, and Injured Warriors; Improved Healthy and Protected Warriors; Responsive Battlefield Medical Force; Improved Patient and Customer Satisfaction; and Inspire Trust in Army Medicine.

IMPROVED HEALTHY AND PROTECTED FAMILIES, BENEFICIARIES, AND ARMY CIVILIANS

Improve the health of beneficiaries thru cost-effective evidence-based care, proactive disease management, demand management, and public health programs.

Use of HEDIS[®] Measures.—The Healthcare Effectiveness and Data Information Set (HEDIS[®]) is a tool used by more than 90 percent of America’s health plans (> 400 plans) to measure performance on important dimensions of care. The measures are very specifically defined, thus permitting comparison across health plans. The DOD is not a member of the HEDIS program, but uses the HEDIS methodology to measure and compare its performance to the HEDIS benchmarks. The Military Health System (MHS) Population Health Portal takes administrative data and electronic health record data and provides reports on the status of our beneficiaries on each measure. Currently, we track 9 measures and compare our performance to HEDIS benchmarks. In October 2008, the Army was in the 90th percentile compared to HEDIS health plans for 2 of 9 measures. We are in the 50th to 90th percentile for 6 measures and below the HEDIS 50th percentile for one measure. Marked improvement is seen in colorectal cancer screening which improved 8.9 percent (October 2005 to October 2008) and approaches the HEDIS 90th percentile. In addition, the Army has very high compliance with Pneumovax, the vaccine against pneumococcal pneumonia, for our enrolled patients over age 65. Since 2007, we’ve been providing financial incentives to our hospitals for superior compliance in key HEDIS measures. The Army was the pioneer for what the Assistant Secretary of Defense for Health Affairs is now terming Pay-for-Performance. We have shown that these incentives work to change behavior and achieve desired outcomes in our system.

MEDCOM Reorganization.—The MEDCOM is engaged in a phased reorganization designed to optimize the delivery of healthcare to our Army and to support a deploying force. With the support of senior Army leadership, I approved phase one of this reorganization which aligns CONUS Regional Medical Commands (RMCs) with their supporting TRICARE regions. MEDCOM is restructuring in order to be better aligned and positioned to support our transforming Army. Command Sergeant Major Matthew T. Brady was instrumental in developing the structure and functions for the newly designed Western RMC headquarters—his contributions are emblematic of the significant role played by NCOs across the MEDCOM in our restructuring efforts.

Healthcare support today is outstanding and it must remain so for our Army to succeed during an era of persistent conflict. As the Army changes its structures, relationships and organizational designs through transformation and other initiatives to better support our Nation in the 21st Century, the AMEDD must adapt to ensure it remains reliable and relevant for our Army. The main restructuring is from 4 CONUS RMCs to 3 CONUS RMCs. While reorganizing RMCs, we intend to further integrate healthcare resources, capabilities and assets to foster greater unity of effort and synergy of our healthcare mission. The restructuring will posture us to better provide the best support for Army Force Generation (ARFORGEN) and improve readiness through enhanced health care services for our Soldiers, their Families, and Army units.

Clinical Information Systems.—The AMEDD has long recognized a need for an information system to help us grow as a knowledge-driven organization. The AMEDD energetically assumed lead for the DOD during the implementation of the Composite Health Care System I (CHCS I), now known as AHLTA. Unfortunately, AHLTA has not always kept pace with expectations at the user-level or at the corporate level for data mining and other uses. The Army has taken significant steps to leverage the data from AHLTA and other clinical information systems to improve clinical quality and outcomes as well as patient safety. To address identified shortcomings with AHLTA at the provider level, the AMEDD has invested in the

MEDCOM AHLTA Provider Satisfaction (MAPS) initiative. This includes investment in tools like Dragon Medical™ and As-U-Type®, individualized training and business process re-engineering led by clinical champions, and use of wireless and desktop virtualization. At the Heidelberg Health Center in Germany, Staff Sergeant Kenneth M. Melick is the workhorse who took the physician vision for business process reengineering from construction to final implementation and ensured success. MAPS is beginning to show significant improvements in provider usability and satisfaction. Direct interviews with providers and staff reveal that MAPS implementation has generated a dramatic change in attitude among our staff.

The most recent version of AHLTA has presented us with challenges, but it is showing improvements and gaining provider acceptance. AHLTA provides significant benefit to beneficiaries, especially in the areas of patient safety, security, improved clinical and readiness outcomes, and global availability of records. In addition, a new enterprise architecture for the MHS will likely result in a significant improvement in managing our information systems. The next update to AHLTA (3.3) is being deployed and its additional functionality and improved speed is well-liked by the providers who have tested it.

Force Health Protection and Public Health Programs.—The U.S. Army's Center for Health Promotion and Preventive Medicine (CHPPM) is a subordinate command of the MEDCOM that affects the lives of Soldiers and Families everyday. Its mission is to provide worldwide technical support for implementing preventive medicine, public health, and health promotion/wellness services into all aspects of America's Army and the Army community. The CHPPM team supports readiness by keeping Soldiers fit to fight, while also promoting wellness among their Families and the Federal civilian workforce. CHPPM integrates public health efforts to develop and export primary prevention based products by using epidemiologic data of disease and injury to identify the best prevention programs to implement for overall population health improvement. One member of the CHPPM team—Sergeant Kerri Washington—made a notable impact on the health and safety of our U.S. Army and Iraqi Forces in the Multi National Division—Baghdad area of responsibility. Sergeant Washington deployed as a Preventive Medicine (PM) Specialist with the 61st Medical Detachment (PM) and applied his preventive medicine skills, leadership ability, and unique health surveillance training to enhance Soldier health and disease prevention.

CHPPM is establishing a Public Health Management System to evaluate the programs and policies developed to promote optimal health in the Army community which will use the public health process to provide metrics indicating the success or lack of success in these endeavors. This will allow leaders to make informed decisions on effective or ineffective public health issues in the Army. Army veterinarians play a key role in public health as well, ensuring the safety of food and water and the prevention of animal-borne diseases. As part of the MEDCOM Reorganization addressed earlier, I have directed my staff to assess the feasibility and benefits of establishing a Public Health Command which better synchronizes and integrates the efforts of all AMEDD members who contribute to public health programs. This will enhance comprehensive health and wellness and optimize delivery of public health support to the Army.

OPTIMIZED CARE AND TRANSITION OF WOUNDED, ILL, AND INJURED WARRIORS

Warrior Care and Transition Program.—The transformation of U.S. Army Warrior Care began in April 2007 with the development of the Army Medical Action Plan (AMAP), which outlined an organizational and cultural shift in how the Army cares for its wounded, ill, and injured Soldiers. Over the past 22 months, the AMAP has evolved into the Army Warrior Care and Transition Program (WCTP), fully integrating Warrior Care into institutional processes across the Army, and is achieving many of the Army's goals for enhancing care and improving the transition of wounded warriors back to duty or into civilian life as productive veterans. At the heart of the Warrior Care and Transition Program is the successful establishment of 36 Warrior Transition Units (WTUs) at major Army installations worldwide, and nine Community Based Warrior Transition Units (CBWTUs) located regionally around the United States. These units replace the Medical Holdover (MHO) system of the past and provide holistic care and leadership to Soldiers who are expected to require 6 months of rehabilitative treatment, and/or need complex medical case management.

Comprehensive Transition Plan.—In our first year of Warrior Care and Transition, we heavily invested in the structure of our units and support systems. Now in our second year, we recognize that our focus needs to be on optimizing the transition for our Soldiers. In March 2008, MEDCOM launched the Comprehensive Tran-

sition Plan initiative for Warriors in Transition. Instead of focusing solely on the injury or illness, the Comprehensive Transition Plan fosters a holistic approach to a Warrior's rehabilitation and transition. This is accomplished through the collaboration of a multidisciplinary team of physicians, case managers, specialty care providers, and occupational therapists. Together with the Soldier, they develop individually tailored goals that emphasize the transition phase to civilian life or return to duty. Goals are set and the transition plan developed within one month of the Soldier's arrival at the WTU.

Physical Disability Evaluation System.—The Medical Evaluation Board (MEB) and Physical Evaluation Board (PEB) processes have been streamlined and paperwork requirements reduced to more efficiently move a Soldier's disability package through the adjudication process. Additionally, collaboration between the DOD and the Department of Veterans Affairs (VA) ensures that Warriors in Transition have priority processing by the Veterans Health Administration (VHA) and Veterans Benefits Administration (VBA) 60 to 180 days prior to separating so that they can receive their VA benefits and health care immediately upon discharge. General Frederick M. Franks, Jr., USA Ret. has been leading an Army task force to research and recommend improvements to the MEB/PEB process. His findings, recently delivered to the Secretary of the Army, recommended that DOD and VA eliminate dual adjudication from the current system and "transition to a comprehensive process focusing on rehabilitation and transition back to either uniformed service or civilian life that promotes resilience, self-reliance, re-education, and employment, while ensuring enduring benefits for the Soldier and Family." This finding reaffirms the importance of the Comprehensive Transition Plan.

Warrior Satisfaction.—Over the past 2 years, the Army has made tremendous progress in transforming how it provides healthcare to its Soldiers, with improvements impacting every aspect of the continuum of care. Over this period, overall Soldier and Family satisfaction with the care and support they have received as a result of the efforts of the Warrior Care and Transition Program has increased significantly. Two years ago, only 60 percent of those in the legacy medical hold units were satisfied with the care they received. Today, that number has increased to 80 percent of Soldiers and Families who now receive the focused and comprehensive care and support provided by WTUs. Considering that over 20,000 Soldiers, along with their Families, have transitioned through the Warrior Care and Transition Program over that time, this represents a significant number of "satisfied" customers. A key element of increased satisfaction has been the availability of a robust ombudsman program staffed primarily with retired NCOs. An ombudsman works at each of our WTUs on behalf of the Warriors in Transition and their Families to fix problems and cut through bureaucratic entanglements. It is a great example of our dedicated senior NCOs continuing to serve Soldiers even after they've taken off the uniform.

IMPROVED HEALTHY AND PROTECTED WARRIORS

Improve the health of service members through full spectrum health services to optimize mission readiness, health and fitness, and resiliency before, during, and after deployment.

Evidence Based Practices.—The theme of evidence based practices runs through everything we do in Army Medicine and is highlighted throughout our Balanced Scorecard. Evidence based practices mean integrating individual clinical expertise with the best available external clinical evidence from systematic research. Typical examples of evidence based practice include implementation of clinical practice guidelines and dissemination of best practices. I encourage my commanders and subordinate leaders to be innovative, but across Army Medicine we must balance that innovation with standardization so that all of our patients are receiving the best care and treatment available.

Comprehensive Soldier Fitness.—The Army Chief of Staff has established a vision of an Army comprised of balanced, healthy, self-confident Soldiers, Families and Army Civilians whose resilience and total fitness enable them to thrive in an era of high operational tempo and persistent conflict. To achieve this ambitious vision, he is instituting the Comprehensive Soldier Fitness Program. General Casey identified several shortcomings in his own Army experience. For example, the Army does not routinely assess all the elements of wellness, fitness, and optimal human performance, other than physical. Resilience, life skills, and mental coping techniques are not fully trained across the Army. The Army does not always link available life skills and performance programs and interventions with Soldiers and Families until the need has been demonstrated by a negative behavior. And the Army does not teach Soldiers about the potential for Post Traumatic Growth (PTG), nor give Soldiers the opportunity to validate their post traumatic growth during Post Deploy-

ment assessments. The intent of the Comprehensive Soldier Fitness Program is to increase the resiliency of Soldiers and Families by developing the five dimensions of strength—physical, emotional, social, spiritual, and family. This program is in early development, but under the leadership of Brigadier General Rhonda Cornum, an AMEDD physician, and with the commitment of passionate non-commissioned officers like her Non-Commissioned Officer in Charge, Master Sergeant Richard Gonzales, I expect this program to have a profound positive effect on the lives of Soldiers, Families, and Army Civilians.

Brain Health.—Commanders and leaders are responsible for the mental and physical well-being and care of Soldiers. They play a critical role in encouraging Soldiers to seek prompt medical care for traumatic brain injuries (TBI). This responsibility begins on the battlefield, as close as possible in time and space to the injury. The AMEDD is developing the best process to evaluate and treat every Service member involved in an event that may result in TBI. Commanders and medics throughout theater are emphasizing early recognition of brain injuries followed by examinations and care rendered in accordance with clinical practice guidelines developed by the AMEDD in conjunction with the CENTCOM Surgeon. The Army is also working closely with the National Guard to implement a personnel tracking instrument that provides identification of individuals who may have been involved in a blast and require screening.

In coordination with the VA and the Defense Center of Excellence for Psychological Health and Traumatic Brain Injury, the Army continues to expand resources dedicated to TBI research and treatment. The Defense Centers of Excellence (DCoE), directed by Army Brigadier General Loree Sutton, lead a collaborative effort toward optimizing psychological health and TBI treatment for all Service members. The DCoE establishes quality standards for: clinical care; education and training; prevention; patient, family and community outreach; and program excellence. The DCoE mission is to maximize opportunities for warriors and families to thrive through a collaborative global network promoting resilience, recovery, and reintegration for psychological health and TBI.

Fort Campbell's Warrior Resiliency and Recovery Center for mild TBI is showing very promising results in the identification and treatment of mild TBI. The post concussive syndrome appears to exist in these Soldiers with a natural clinical history separate from that of Post Traumatic Stress Disorder (PTSD) or other psychiatric conditions. The syndrome is effectively treated with an intensive and comprehensive interdisciplinary approach. Early data indicate significant improvement in all treated cases and complete return to duty recovery in over 77 percent of treated Soldiers.

Battlemind Training.—One validated evidence-based practice that reduces the impact of post traumatic stress is the Battlemind Training System (BTS). The Battlemind Training System (BTS) reflects a strength-based approach, using buddy aid and focusing on the leader's role in maintaining our Warriors' mental health. The BTS targets all phases of the deployment cycle as well as the Warrior life cycle and medical education system. BTS includes training modules designed for Warriors, Leaders, and military spouses. Key teaching points about PTSD and concussion were recently incorporated into the deployment cycle and life cycle Battlemind modules.

RC Dental Readiness.—Maintaining dental readiness in the Reserve Components (RC) has been challenging. During the past year, new program developments have provided an integrated Army solution for RC dental readiness throughout the ARFORGEN cycle. The Army Dental Command (DENCOM) executes First Term Dental Readiness (FTDR) at Initial Entry Training (IET) installations, and focuses on examining and treating dental conditions in recruits that could otherwise render a Soldier non-deployable. Upon graduation from IET, RC Soldiers return to their units where the Army Selected Reserve Dental Readiness System (ASDRS), initiated in September of 2008, maintains RC Soldier dental readiness throughout the three ARFORGEN phases. If the RC Soldier is mobilized, they are validated for their deployment dental readiness by DENCOM-operated facilities and if found to be deficient, are examined and treated to a deployable status by dedicated AC and RC dental personnel such as Sergeant First Class Dexter Leverett, a USAR NCO mobilized since 2004, who has managed RC mobilization and demobilization dental operations at both Fort Hood and Camp Shelby, MS—two sites which have processed over 26,000 RC Soldiers in the past 5 months alone. Upon return from deployment, DENCOM resets RC Soldier dental readiness by conducting a Demobilization Dental Reset (DDR) which provides a dental exam and readiness care that can prudently be completed during the abbreviated demobilization process. Since July 2008 we have dentally reset 88 percent of RC Soldiers demobilizing from overseas. I expect this integrated approach to generate improved RC dental readiness.

Armed Forces Health Surveillance Center.—The new Armed Forces Health Surveillance Center (AFHSC), a DOD Executive Agency supported by CHPPM, performs comprehensive medical surveillance and reporting of rates of diseases and injuries among DOD service members. AFHSC's main functions are to analyze, interpret, and disseminate information regarding the status, trends, and determinants of the health and fitness of U.S. military (and military-associated) populations and to identify and evaluate obstacles to medical readiness. AFHSC is the central epidemiological resource for the U.S. Armed Forces providing regularly scheduled and customer-requested analyses and reports to policy makers, medical planners, and researchers. It identifies and evaluates obstacles to medical readiness by linking various databases that communicate information relevant to service members' experience that has the potential to affect their health.

RESPONSIVE BATTLEFIELD MEDICAL FORCE

Ensure health service assets of all three components are trained, modular, strategically deployable, and can support full spectrum operations and joint force requirements.

Pre-deployment Trauma Training.—Adhering to the policy that no one should be initially exposed to a medical challenge while on deployment or on the battlefield, pre-deployment trauma training is now mandatory for individual providers and medical units to improve survival rates. It is a critical link between standard medical care and the intense battlefield environment Soldiers face in the current conflicts. By recreating the high-stress situations medics will face in Iraq and Afghanistan, this training allows for the refinement of advanced trauma treatment skills and sensitization to hazardous conditions which allow medics to increase their confidence and proficiency in treatment. This training includes a surgical skills laboratory, the principles of International Humanitarian Law, and mild TBI and Combat Stress identification. Returning Soldiers cite this as the best training they have ever received.

Medical Simulation Training Centers.—The Medical Simulation Training Center (MSTC) grew from an Army Chief of Staff directive to create and quickly implement medical simulation training to prepare combat medics for the battlefield. Command Sergeant Major David Litteral and Sergeant First Class William Pilgrim were active in the early development of the MSTC program, and are two of the many NCOs instrumental in the program's success. In fiscal year 2008 the 14 stateside MSTCs provided training to 27,136 Combat Medics and non-medical Soldiers in the Tactical Combat Casualty Care (TC³) and Medic sustainment courses. Also in fiscal year 2008, at four locations within the CENTCOM Area of Responsibility (AOR), 26,132 Medics and Soldiers validated their TC³ skills and received just in time training. This success has carried into fiscal year 2009 as 20,235 Medics and Soldiers have passed through the now 16 stateside MSTCs and four CENTCOM locations for training and or validation of critical battlefield lifesaving skills.

Joint Forces Combat Trauma Medical Course (JFCTMC).—This is a 5-day trauma training course developed by the AMEDD Center and School and designed for providers deploying to Level III (Combat Support Hospital) medical missions. The course is a series of lectures with breakout sessions by specialty, which include laboratory sessions. JFCTMC prepares deploying providers to care for patients with acute war-related wounds and incorporates lessons learned from Operation Iraqi Freedom and Operation Enduring Freedom. Sergeant First Class Theresa Smith, Sergeant First Class Pearell Tyler, Sergeant First Class David Estrada, Sergeant First Class Robert Lopez, and Staff Sergeant Cedric Griggs conduct the much-praised Emergency Surgical Procedures portion of this course and provide Point of Wounding training. That's right—non-commissioned officers training physicians and other health care providers.

Combat Development.—AMEDD NCO Combat Developers, like Master Sergeant (MSG) Christian Reid and Sergeant First Class Raymond Arnold, have been front and center in product improvements of the Mine Resistant Ambush Protected (MRAP) ambulance, Army Combat Helmet, Combat Arms Ear Plugs, Improved Outer Tactical Vest, and Fire Retardant Army Combat Uniform. Additionally, MSG Reid has been pivotal in the development of the Improved First Aid Kit (IFAK) from concept to fielding in 6 months and the Warrior Aid and Litter Kit (WALK) of which more than 25,000 have been procured to support current combat operations. The MRAP-Ambulance provides increased protection to our crews and patients. To make the MRAP-Ambulance the most capable ground ambulance in the Army today, we integrated "spin-out" technology from the Future Combat System (FCS) Medical Vehicles. The combat medic is now able to leave the Forward Operating Bases to conduct medical evacuation missions and can provide world class en-route care to

wounded soldiers. The AMEDD also developed Casualty Evacuation Kits (CASEVAC) for both the MRAP and HMMV ambulances to increase capability. These efforts provided the combat medic with field ambulances built for survivability in the challenging environment of asymmetric warfare.

Fresh Blood Distribution.—Recognizing that fresher blood has been associated with increased survival on massively transfused patients, the Armed Services Blood Program Office (for which Army maintains oversight as Executive Agent) has been working with the Services to decrease the time it takes for blood to arrive in theater with the overall goal of getting 80 percent of the units in theater by day seven. The average age of red blood cells arriving in theater prior to November 2008 was 13.3 days. Sergeant First Class Peter Maas and others in the Blood Program Office identified 13 action items necessary to improve blood collection, manufacture, and distribution to the CENTCOM AOR. Since implementing these action items in November, 2008, the average age of red blood cells arriving in theater has dropped to 9.2 days. The most recent shipment had an average age of 5.6 days. In the last month, we have managed to bypass blood delivery to Bagram and are shipping blood directly to Kandahar from Qatar. This has resulted in blood reaching Kandahar that is 2–3 days fresher than before. In addition to delivering fresher blood to theater, we are actively and aggressively pursuing new blood technologies that should lead to improved warrior care on the battlefield in the near future.

Armed Forces Institute of Regenerative Medicine.—The U.S. Army Medical Research and Materiel Command (USAMRMC) in partnership with the Office of Naval Research, the U.S. Air Force, the National Institutes of Health, and the VA established the Armed Forces Institute of Regenerative Medicine (AFIRM) in March 2008. The AFIRM is a multi-institutional, interdisciplinary network working to develop advanced treatment options for our severely wounded servicemen and women. The AFIRM is made up of two civilian research consortia working with the U.S. Army Institute of Surgical Research (USAISR) in Fort Sam Houston, Texas. One consortium is led by Wake Forest University Baptist Medical Center and the McGowan Institute for Regenerative Medicine in Pittsburgh and one is led by Rutgers, the State University of New Jersey, and the Cleveland Clinic. Each of these civilian consortia is itself a multi-institutional network.

Regenerative medicine, which has achieved success in the regeneration of human tissues and organs for repair or replacement, represents great potential for treating military personnel with debilitating, disfiguring, and disabling injuries. Regenerative medicine uses bioengineering techniques to prompt the body to regenerate cells and tissues, often using the patient's own cells combined with degradable biomaterials. Technologies for engineering tissues are developing rapidly, with the ultimate goal of delivering advanced therapies, such as whole organs and engineered fingers and limbs.

Joint Theater Trauma System and Joint Trauma Analysis and Prevention of Injury in Combat.—The Joint Medical Force continues to show great improvements in battlefield care as a consequence of linking all information from Level 2 and 3 care thru the entire continuum of care via the Joint Theater Trauma System (JTTS). The JTTS, coordinated by the Institute for Surgical Research of the USAMRMC, provides a systematic approach to coordinate trauma care to minimize morbidity and mortality for theater injuries. JTTS integrates processes to record trauma data at all levels of care, which are then analyzed to improve processes, conduct research and development related to trauma care, and to track and analyze data to determine the long term effects of the treatment that we provide. The JTTS also plays an active role as a partner in the Joint Trauma Analysis and Prevention of Injury in Combat (JTAPIC) program, another MPMC asset under the DOD Executive Agency for Blast Injury Research.

The JTAPIC Program links the DOD medical, intelligence, operational, and materiel development communities with a common goal to collect, integrate, and analyze injury and operational data in order to improve our understanding of our vulnerabilities to threats and enable the development of improved tactics, techniques, and procedures (TTPs), and materiel solutions that will prevent or mitigate traumatic injuries. The JTAPIC Program has already made a difference in the way we protect our Warfighters from combat injuries as illustrated in the following key accomplishments:

- Provided actionable information which has led to modifications and upgrades to vehicle equipment and protection systems, such as seat design, blast mitigating armor, and fire suppression systems;
- Established a near-real time process for collecting and analyzing combat incident data that confirmed the presence of threat weapons of interest;
- Analyzed combat incident data to identify vulnerabilities in operational procedures, and rapidly conveyed those vulnerabilities to commanders in theater;

—Established a process for collecting and analyzing damaged personal protective equipment (PPE), such as body armor and combat helmets, to provide PPE developers with the information they need to develop enhanced protection systems.

The JTAPIC Program received the 2008 Department of the Army Research and Development Laboratory of the Year Award for Collaboration Team of the Year in recognition of its accomplishments.

Combat Medic Skills Textbook.—Our combat medics (68W) are the best trained battlefield medics in the world. The historically low “died of wounds” rate is evidence of their enhanced skills. The medics of the 68W generation are trained to perform advanced airway skills, hemorrhage control techniques, shock management, and evacuation. Sergeant First Class Nadine Kahla and Sergeant First Class Jason Reisler are 68W NCOs assigned to the AMEDD Center & School. They are representative of the 17 other 68W NCO authors that contributed to the new 68W Advanced Field Craft Combat Medic Skills Textbook, a state of the art training manual for the combat medic. This delineation of combat medic skills is newly published and will be issued to every graduating combat medic beginning this month. We are currently looking at ways to distribute this textbook to every medic in the force—Active, National Guard, and Army Reserve.

IMPROVED PATIENT AND CUSTOMER SATISFACTION

Improve stakeholder satisfaction by understanding, managing, and exceeding their expectations.

Improved Infrastructure.—On behalf of the Army Medical Department team, I want to thank the Congress for listening to our concerns about military medical infrastructure and taking significant action to help us make needed improvements to our facilities. Funding provided for military hospitals in the fiscal year 2008 supplemental bill and in the American Recovery and Reinvestment Act of 2009 will positively impact the quality of life of thousands of Service Members, Family Members, and Retirees as we build new state of the art facilities in places like Fort Benning, Georgia, Fort Riley, Kansas, and San Antonio, Texas. Additional funding provided by Congress for Sustainment, Restoration, and Modernization of our facilities has been put to great use and allowed us to make some valuable improvements that have been noted by our staff and patients.

The Army requires a medical facility infrastructure that provides consistent, world class healing environments that improve clinical outcomes, patient and staff safety, staff recruitment and retention, and operational efficiencies. The quality of our facilities—whether medical treatment, research and development, or support functions—is a tangible demonstration of our commitment to our most valuable assets—our military family and our MHS staff. The environment in which we work is critical to staff recruitment and retention in support of our All Volunteer Force. Not only are these facilities the bedrock of our direct care mission, they are also the source of our Generating Force that we deploy to perform our operational mission. To support mission success, our current operating environment needs appropriate platforms that support continued delivery of the best healthcare, both preventive and acute care, to our Warfighters, their Families and to all other authorized beneficiaries. I am currently working closely with the Assistant Secretary of Defense for Health Affairs, Dr. S. Ward Casscells, and the leadership of the DOD to determine the level of investment our medical facilities will need. I respectfully request the continued support of DOD medical construction requirements that will deliver treatment and research facilities that are the pride of the Department.

Access to Care.—Army leadership and MEDCOM are decisively engaged in improving access to care for our Soldiers and their Families. These efforts will result in markedly improved access and continuous situational awareness at each medical treatment facility. Access means that patients are seen by the right provider, at the right time, in the right venue; and this applies equally to the Direct Care System & Purchased Care System (TRICARE). Key elements identified for improving access to care include: Aligning treatment facility capacity with the number of beneficiaries; enhancing provider availability; reducing friction at key points of access; managing clinic schedules; and leveraging technology.

We have developed a campaign plan to improve access by giving hospital commanders the tools they need along with the responsibility and accountability to generate results.

Sustainable Cost of Operations.—While focusing on quality outcomes, the MEDCOM is also concerned with ensuring that we maintain a sustainable cost of operation for the AMEDD. Our efforts to improve access are coupled with initiatives to improve efficiency. Our Performance Based Adjustment Model (PBAM) provides

financial incentives for improving efficiency, patient satisfaction, and quality. PBAM and other incentive programs have resulted in the Army being the only Service to achieve planned workload gains every year since 2003. A key author of PBAM is Master Sergeant (now retired) Richard Meyer.

Disseminating Best Practices.—The MEDCOM has embraced the Lean Six Sigma approach to sustaining improved performance. As an example, a Lean Six Sigma project to improve the telephone appointing process was initiated at Carl R. Darnall Army Medical Center (CRDAMC), the largest telephone appointing call center in the MEDCOM. The call center was plagued with high call volume, low patient satisfaction, long process cycle time, and high variation. The project sought to decrease process cycle time and the call abandon rate to improve patient satisfaction. By the conclusion of the project, the overall average hold time was reduced to 33 seconds (a 6-fold improvement); the call abandon rate was reduced to 3 percent (a 10-fold improvement); calls handled increased from 4,700 to 7,300 per week; and call agent turnover was reduced. Today the mean hold time at CRDAMC is 3 seconds. This project's successful action plan and metrics have been disseminated across the command as a best practice.

INSPIRE TRUST IN ARMY MEDICINE

Increase stakeholder support of Army Medicine by inspiring trust, building confidence, and instilling pride.

Improving civilian medical practices.—The implementation of tactical combat casualty care (TC³) principals for point of injury treatment on the battlefield has changed long-standing hemorrhage control protocols in the civilian Emergency Medical Services (EMS) community. The nation's EMS community has altered long-standing treatment protocols that formerly considered tourniquet use a last resort. The use of tourniquets, based on the success of their application by military medics in theater, is now not only seen as safe by our nation's healthcare providers, but as the intervention of choice for control of severe hemorrhage. Hemorrhage control is the leading cause of death in trauma. The change in philosophy regarding tourniquet use will result in more lives saved in both urban and rural areas of our country.

Establishing Successful Interservice Partnerships (San Antonio Military Medical Center).—Wilford Hall Medical Center (WHMC) and Brooke Army Medical Center (BAMC) are quickly evolving towards the San Antonio Military Medical Center (SAMMC) which is an integrated healthcare platform in which patient care is delivered in two facilities operating under one organizational structure. The SAMMC organizational structure has been operational for over 1 year. The organizational structures of BAMC and WHMC were both realigned to form a functional organization for delivery of healthcare, maintenance of our readiness and deployment platforms, sustainment of training of all levels of healthcare providers, and promotion of research. Many physical moves of medical services have already occurred across the SAMMC platform. SAMMC is planning for the migration of the two military level one trauma centers in San Antonio to one military level one trauma center, capable of handling the same patient care volume that is being delivered today in the two centers. Planning and coordination with the City of San Antonio have been an integral part of this process to ensure continued trauma support in the city. SAMMC enjoys strong collaborations with both the University of Texas Health Science Center, local government leaders, and the Audie Murphy Veterans Memorial Hospital in support of the large tri-service beneficiary population in the San Antonio community.

Establishing Successful Interagency Partnerships (Behavioral and Social Health Outcomes).—CHPPM resources are partnered with civilian academia, the VA and HHS (including the Centers for Disease Control and Prevention, and the National Institute of Mental Health) to work in the mitigation of rising rates of suicide, depression, PTSD and other adverse behavioral and social health outcomes in our Families, Retirees, Active Duty, Reserve and National Guard Soldiers. MEDCOM is working with other key organizations to build a robust public health capability in the area of Behavioral and Social Health outcomes (to include suicides and homicides). This effort includes the construction of an Army-level relational database that draws critical information from numerous sources to enable comprehensive analysis of adverse outcomes in Army organizations and communities.

Establishing Successful Interagency Partnerships (National Interagency Biodefense Campus).—Fort Detrick, Maryland hosts and is intimately involved in the development of the National Interagency Biodefense Campus (NIBC) to fill gaps in national biodefense and integrate agencies for a whole of government approach to national security. As a charter member of the National Interagency Confederation for Bio-

logical Research (NICBR), a collaboration of the National Cancer Institute along with the NIBC partners, the Army is breaking ground in building on a model for interagency cooperation at Fort Detrick. During 2008, members of the NICBR/NIBC were involved in developing national policy on biodefense and biotechnology as well as collaborating on research. Research includes work on developing vaccines, diagnostics, forensics, and therapeutics. While focusing on protecting people from disease and bioterrorism, members of the NICBR/NIBC participated in multiple national assessments to prioritize and focus biodefense missions, all while continuing united scientific discovery. During 2009, the NICBR/NIBC will continue to work with Congress and others to define and scope gaps and seams in our Nation's biodefense posture.

In closing, I want to thank this Committee for their terrific support of the Defense Health Program and Army Medicine. I greatly value the insight of this Committee and look forward to working with you closely over the next year. I also want to salute our non-commissioned officers for their professionalism, competence, and leadership—they are truly the backbone of Army Medicine. Thank you for holding this hearing and thank you for your continued support of the Army Medical Department and the Warriors and Families that we are most honored to serve.

Chairman INOUE. May I now call upon Vice Admiral Robinson.

STATEMENT OF VICE ADMIRAL ADAM M. ROBINSON, JR., SURGEON GENERAL OF THE NAVY, UNITED STATES NAVY

Admiral ROBINSON. Thank you very much, Chairman Inouye, also Vice Chairman Cochran, Senator Murray, and Senator Bennett, and other distinguished members of the subcommittee.

Since I last testified, we have seen the emergence of impressive changes and unique challenges to this Nation and the global community. A historic presidential election has made significant national and international political impact, a war effort sustained with military troops deploying into hostile areas, and an increasing military medicine presence playing a key role to support the humanitarian civil assistance mission.

We are seeing uncertainty, change, and fluctuation in our economy that will impact all of us, including military medicine. Navy medicine continues on course because our focus has been and will always be providing the best healthcare to our sailors, marines, and their families, all while supporting our Nation's maritime strategy.

In response to our most critical demand to support the Marine Corps, we are realigning medical capabilities to emerging theaters of operation. As the Marine Corps forces shift their efforts to Afghanistan, Navy medicine will support them and sustain our efforts in medicine, in trauma medicine, and surgery capabilities.

The Navy's maritime strategy calls for proactive humanitarian assistance and disaster response efforts, and these are now preplanned engagements. These missions deploy from sea-based, land-based, or expeditionary platforms and aim to meet a great spectrum of medical needs. Our Nation's humanitarian efforts serve as a unique opportunity for medical diplomacy to positively impact the perception of the United States by other nations.

In addition, these missions have become another avenue for improved recruiting and retention of Navy medicine healthcare providers. Filling vacancies in our medical department corps is critical to meeting our mission of maintaining medical readiness of the warfighter and providing healthcare to all eligible beneficiaries. The Chief of Naval Personnel and I have worked together on this issue, making medical recruiting a continued priority for fiscal year 2009.

In spite of successes in the health professions scholarship program (HPSP), medical and dental corps recruitment, meeting our direct accession mission still remains a challenge. I anticipate increased demand for medical service corps personnel, in particular to better meet our increasing requirements. From individual augmentation requirements to planned humanitarian assistance missions and unexpected disaster relief missions, as well as to meet the growing needs of a Marine Corps that is, in fact, growing, these demands will impact medical service corps specialties linked to mental, behavioral, and rehabilitative health and operational support.

Consistent with increased operational demand signals, as well as to compensate for prior shortfalls in recruiting, the overall recruiting goals for uniformed medical service corps officers have nearly doubled since fiscal year 2007. The Navy has been successful during the past year recruiting and retaining Nurse Corps officers using a combination of accession, retention, and loan repayment incentives. For the first time in over 5 years, Navy Nurse Corps officers gains in 2008 outpaced losses. The Chief of the Navy Nurse Corps, Rear Admiral Chris Bruzek-Kohler, is here and will follow up in her statement and testimony.

Our graduate medical education is a critical part of the foundation for Navy medicine's ongoing success. Despite the demands on faculty and staff for operational support, our Navy GME programs continue to be highly rated by the Accreditation Council for Graduate Medical Education, and our program graduates continue to pass their board certification examinations at rates significantly higher than the national average in almost every specialty.

More importantly, Navy-trained physicians continue to prove themselves to be exceptionally well prepared to provide care in austere settings ranging from the battlefield to humanitarian assistance and disaster relief efforts.

Over the last year Navy medicine expanded services so that wounded warriors would have access to timely, high quality medical care. In 2008, we consolidated all wounded, ill, and injured warrior healthcare support, with the goal of establishing global policy implementation guidance and oversight in order to deliver the highest quality customer-focused, comprehensive and compassionate care to servicemembers and their families.

As of March 2009, 161 medical care case managers were assigned to 45 medical treatment facilities and ambulatory care clinics, caring for approximately 1,500 Operation Iraqi Freedom/Operation Enduring Freedom (OIF-OEF) casualties. The medical care case managers collaborate with Navy Safe Harbor and Marine Corps Wounded Warrior Regiment, both line programs, in working directly with wounded warriors, their families, caregivers, and multidisciplinary medical teams.

We work diligently to coordinate the complex services needed for improved healthcare outcomes and to ensure that servicemembers return closer to home as soon as possible.

Navy and Marine Corps liaisons at medical treatment facilities aggressively ensure that orders and other administrative details, such as extending reservists, are completed. Last year, we established a centralized operational stress control program and coordi-

nator who is working in conjunction with our line leadership to indoctrinate mental health stigma reduction into the broader Navy-Marine Corps culture. Over 11,000 sailors have received operational stress control training to date, and formal curriculum will be introduced in the fall 2009 at key points throughout the careers of sailors—from accession to flag officer.

Also, to anticipate emerging mental health threats, Navy medicine actively conducts real-time in-country surveillance and assessment of the mental health of our troops.

PREPARED STATEMENT

Chairman Inouye, Vice Chairman Cochran, I want to express my gratitude on behalf of all who work for Navy medicine, uniformed, civilian, contractor, and volunteer personnel, who are committed to meeting and exceeding the healthcare needs of our beneficiaries. I would also like to thank you and the members for your continued support of Navy medicine and of the military health system.

Thank you.

Chairman INOUE. Thank you very much, Admiral Robinson.
[The statement follows:]

PREPARED STATEMENT OF VICE ADMIRAL ADAM M. ROBINSON

Chairman Inouye, Senator Cochran, distinguished members of the committee, since I testified last spring we have seen the emergence of impressive changes and unique challenges to this nation and the global community. A historic Presidential election which has made significant national and international political impact, a war effort sustained with military troops deploying into hostile areas; and an increasing military medicine presence playing a key role to support the humanitarian civil assistance mission. We are seeing uncertainty, change and fluctuation in our economy that will impact all of us, including military medicine.

Navy Medicine continues on course, because our focus has been, and will always be providing the best healthcare for our Sailors, Marines, and their family members while supporting the CNO's Maritime Strategy. We are focused on strengthening Navy Medicine today, and are proactively planning to meet future healthcare requirements.

Navy Medicine is built on a solid foundation of proud traditions and a remarkable legacy of Force Health Protection. Our focus has not changed and every day in Navy Medicine we are preparing healthy and fit Sailors and Marines to protect our nation and be ready to deploy.

Navy Medicine is playing a major part in supporting the Maritime Strategy. You will find us at home and around the world providing preventive medical care; health maintenance training and education; direct combat medical support; medical intelligence; and operational planning mission support. Our Navy Medicine teams are flexible enough to perform a Global War on Terror mission, a homeland security mission, a humanitarian assistance mission, and a disaster relief mission; while at the same time provide direct healthcare to our nation's heroes and their family members at home and overseas.

In spite of all of the missions we are currently prepared to participate in, we are continuously making the necessary changes and improvements to meet the requirements of the biggest consumer of our operational support efforts—the Marine Corps. Currently, we are realigning medical capabilities to support operational forces in emerging theaters of operation. We are working on enhancing our strategic ability, operational reach, and tactical flexibility. As Marine Corps forces shift their efforts to Afghanistan, Navy Medicine stands prepared to make the necessary adjustments to provide the highest quality combat medical support. Since the global operations to combat terrorism began, Navy Medicine's combat medical support has proven exceptionally successful at bringing wounded service member's home. We hope, through our ability to remain agile and flexible, to sustain those efforts—like the record-high survivability rates—and improve them wherever possible.

The Navy's Maritime Strategy calls for proactive humanitarian assistance and disaster response efforts. These missions have been taking place since 1847, and have come a long way since then. The Navy's Humanitarian Civil Assistance mis-

sions are now pre-planned engagements deployed from sea-based, land-based or expeditionary platforms to meet a great spectrum of medical needs. From basic medical evaluation and treatment, to optometry, to general surgery, and immunizations, our physicians, nurses, dentists, ancillary healthcare professionals, and hospital corpsmen are ready.

Our efforts have continued to grow and this year, the U.S. Southern Command will sponsor four multi-service Medical Readiness Training Exercises (MEDRETEs). These missions will visit Jamaica, Honduras, the Dominican Republic and Guyana and will include a Navy Medicine Reserve Component. These two-week deployments will provide primary care in remote locations in conjunction with the Ministry of Health of each host nation. The medical services provided will include preventive medicine education, pediatrics, primary medical care, immunizations, pharmacy services, and dental care.

Over 400 Navy Medicine personnel are ready to provide humanitarian civil assistance later this year in two ship-based missions. In April, the USNS COMFORT (TAH 20) will deploy for a 120-day mission to South and Central America as part of Continuing Promise 09. Later in 2009, the USS DUBUQUE (LPD 8) will deploy for a 125-day mission as part of Pacific Partnership 09.

Our nation's humanitarian efforts serve as a unique opportunity to positively impact the perception of the United States by other nations. These often joint missions serve as examples of how increased collaboration between the other services, other government agencies, and non-governmental organizations can maximize available resources in order to improve worldwide response capability. From our experience, we have developed a successful model of healthcare education and training for host country providers. This will lead to local sustainable activities that will provide long-lasting benefits to help overcome healthcare barriers in resource poor countries. Furthermore, these missions have become another avenue for improved recruiting and retention of Navy Medicine healthcare providers.

While our humanitarian civil assistance missions provide us with some amazing opportunities as providers of medical care, Navy Medicine is acutely aware and incredibly proud of our operational commitment to the United States Marine Corps. We continue to fine tune our deployable medical capabilities to support every Marine who deploys to emerging theaters of operation. We never stop improving our strategic ability, operational reach, and tactical flexibility. As the Marine Corps forces shifts their efforts to Afghanistan, Navy Medicine will be there providing the highest quality combat medical support from the corpsmen who stand by their Marines on the battlefield, to fleet hospitals, to the care provided at a military hospital and world-class restorative and rehabilitative care facilities in the continental United States.

We continue to make improvements to meet the needs of Sailors and Marines who may become injured—while serving in theater or training at home. Over the last year, Navy Medicine significantly expanded services so that wounded warriors would have access to timely, high-quality medical care. Our response is two-tiered, first to uncompromisingly increase specialized multidisciplinary teams, and second, to expand sharing with other government agencies and the private sector of clinical resources, research and expertise.

In addition, Navy Medicine's Concept of Care is always patient and family focused. We never lose our perspective in caring for all our beneficiaries—everyone is a unique human being in need of individualized, compassionate, and professionally superior healthcare. At our military treatment facilities (MTFs), we recognize and embrace the military culture and incorporate that into the healing process. Based on the progress in a patient's care and healing, from initial care to rehabilitation and life long medical needs, we determine the best clinical location and treatment plan for that patient. Families are a critical part of the healthcare delivery team, and we integrate the family's needs into the healing process as well.

In 2008, the Bureau of Medicine and Surgery (BUMED), Headquarters for Navy Medicine, consolidated all wounded, ill and injured warrior healthcare support, with the goal of establishing global policy, implementation guidance, and oversight in order to deliver the highest quality customer-focused, comprehensive and compassionate care to service members and their families.

As of March 2009, 161 Medical Care Case Managers were assigned to 45 MTFs and ambulatory care clinics caring for approximately 1,500 OIF/OEF casualties. The Medical Care Case Managers collaborate with Navy Safe Harbor and Marine Corps Wounded Warrior Regiment in working directly with wounded warrior, family, caregivers and the multi-disciplinary medical team to coordinate the complex services needed for improved health outcomes.

The BUMED Wounded Warrior Regiment Medical Review team and the Returning Warrior Workshop support Marines and Navy Reservists, and their families by

focusing on key issues faced by reservists during their transition from deployment to home. Navy and Marine Corps Liaisons at MTFs aggressively ensure that orders and other administrative details, such as extending reservists, are completed.

Traumatic Brain Injury (TBI) is considered the signature wound of OIF/OEF, due to the proliferation of improvised explosive devices (IED). Navy Medicine continues to improve ways to identify and treat TBI. The traumatic stress and brain injury programs at National Naval Medical Center (NNMC) Bethesda, Naval Medical Center San Diego (NMCSD), Naval Hospital Camp Pendleton (NHCP), and Naval Hospital Camp Lejeune (NHCL) are collaborating to identify and treat service members who have suffered blast exposure. Navy Medicine has partnered with the Navy and Marine Corps community to identify specific populations at risk for brain injury such as front line units, SEALs, and Navy Explosive Ordnance disposal units. Navy Medicine also expanded social work assets to provide clinical mental health support in theater, at Navy MTFs and regional treatment centers.

Much attention has been focused on ensuring service members' medical conditions are appropriately addressed on return from deployment. The Pre-Deployment Health Assessment (Pre-DHA) is one mechanism that is used to identify physical and psychological health issues prior to deployment. The Post Deployment Health Assessment (PDHA) and the Post Deployment Health Re-Assessment (PDHRA) identify deployment related healthcare concerns on return to home station and 90–180 days post deployment.

Navy Medicine's innovative Deployment Health Centers—currently 17 in high Fleet and Marine Corps concentration areas—support the deployment health assessment process and serve as easily accessible non-stigmatizing portals for mental healthcare. The centers are staffed with primary care and mental health providers to address deployment-related health issues such as TBI, Post Traumatic Stress Disorder (PTSD), and substance misuse. Approximately 15 percent of Navy and Marine Corps Post Deployment Health Assessments result in a medical referral, while the PDHRA medical referral rate is approximately 22 percent for both Active and Reserve Component service members.

Navy Medicine's partnership with the Department of Veterans Affairs (VA) medical facilities is evolving into a mutually beneficial partnership. This coordinated care for our warriors who transfer to or are receiving care from a VA facility ensures their needs are met and their families concerns are addressed. Full-time VA staff members are located at several Navy MTFs where they focus on the healthcare needs of service members and their families.

Filling vacancies in the Medical, Dental, Nurse and Medical Service Corps of the Active and Reserve Components is critical in meeting our mission of maintaining medical readiness of the warfighter and providing healthcare to all eligible beneficiaries. My goal is to maintain the right workforce to deliver medical capabilities across the full range of military operations through the appropriate mix of accession, retention, education and training incentives. As a result, the Chief of Naval Personnel and I have worked together on this issue making medical recruiting a continued priority for fiscal year 2009.

Navy Medicine not only equips and trains our current healthcare professionals; we also prepare our future reliefs for the challenges ahead. To build the future force for Navy Medicine we must reach out to America's students and young professionals. We must invite them to our hospitals, our classrooms, and our research facilities so they can see what we do and they can ask career-making questions.

Congress has been very generous and attentive to the Special Pay and Bonus authorities. The Services are implementing those new programs—in some cases with limited success. An example of this is that the Critical Wartime Skills Accession Bonus offered to physicians and dentists as an incentive to directly access trained specialists was not effective in fiscal year 2008. Multi-Year Retention pays and Bonuses have historically provided the highest return for obligated service, but we thought it was important to try new authorities provided by Congress.

Navy Medicine offers one of the most generous and comprehensive scholarships in the healthcare field. The Armed Forces Health Professions Scholarship Program (HPSP) provides tuition assistance for up to 4 years of school. In addition all professional school required fees and expenses, books and equipment are paid for by the Navy. The value of this program could be well over \$200,000 during the course of a 4 year professional school program. Graduates join the Navy's active duty healthcare team as commissioned officers. During fiscal year 2008, the Navy Medical and Dental Corps met its HPSP goal for the first time in several years.

In spite of the successes in HPSP Medical and Dental Corps recruitment, meeting our direct accession mission may remain a challenge. The Medical Services Corps is our most diverse Corps with 31 specialties under three general groupings consisting of clinicians, healthcare administrators, and research scientists.

I anticipate increased demand for Medical Service Corps personnel with respect to Individual Augmentation missions supporting the present course in Iraq and the anticipated role the military in Afghanistan, planned Humanitarian Assistance and unexpected disaster relief missions, as well as to meet the needs of Marine Corps manning increases and the many wounded warrior programs they support. These demands will impact Medical Service Corps specialties linked to mental, behavioral and rehabilitative health and operational support; Clinical Psychologists, Social Workers, Occupational Therapists, Physician Assistants and Physical Therapists to name a few.

While it is anticipated that the Assistant Secretary of Defense, Health Affairs guidance for recruiting and retention incentives for Clinical Psychologists, Social Workers, and Physician Assistants will be released this fiscal year, similar incentives may need to be expanded to other specialties where limited incentives currently exist. Consistent with increased operational demand signals, as well as to compensate for prior shortfalls in recruiting, the overall recruiting goals for uniformed Medical Services Corps officers have nearly doubled since fiscal year 2007.

The Navy has been successful during the past year recruiting and retaining Nurse Corps officers using a combination of accession, retention, and loan repayment incentives. Over 4,000 active duty and reserve Navy nurses are serving in operational, humanitarian, and traditional missions at home and overseas. These men and women are essential to Navy Medicine's Force Health Protection mission. Navy nurses, in particular the wartime nursing specialties of mental health, nurse anesthesia, critical care, family nurse practitioners, emergency medicine, preoperative and surgical care, have been exemplary in all theaters of operations and healthcare settings.

For the first time in over 5 years, Navy Nurse Corps officer gains in 2008 outpaced losses. Despite the growing national nursing shortage and the civilian nursing community proving to be recession resistant, the recruitment and retention of nurses continues to improve. Additional requirements will be placed on the recruiting and retention efforts of the Nurse Corps in the near future as nursing billets are restored due to changes in the Military to Civilian Conversion program. Future success in the recruitment and retention of nurses will continue to be dependent on incentive packages that are competitive with the civilian sector.

Like recruiting and retention, our Graduate Medical Education (GME) is a critical part of the foundation for Navy Medicine's ongoing success. Navy Medicine provides world-class graduate medical education at nine sites with 60 programs involving over 1,000 trainees. Despite the demands on faculty and staff for operational support, our Navy GME programs continue to be highly rated by the Accreditation Council for Graduate Medical Education. Navy program graduates continue to pass their board certification examinations at rates significantly higher than the national average in almost every specialty. More importantly, Navy-trained physicians continue to prove themselves to be exceptionally well prepared to provide care in austere settings ranging from the battle field to humanitarian assistance and disaster relief efforts.

Along with our successes, Navy GME is facing challenges. Advances in medicine and technology are resulting in longer and in some case completely new types of training which stress the fixed number of funded positions available. Additionally, we did not meet medical student accession goals 3 and 4 years ago, and this is beginning to impact our current GME programs. The lower number of uniformed graduates will challenge our ability to support our operational healthcare mission while placing an adequate number of graduates into training to meet our need for specialists in the future.

Navy Medicine scientists conduct basic, clinical, and field research directly related to current and future military requirements and operational needs. In today's unsettled world, we face not only the medical threats associated with conventional warfare, but also the potential use of weapons of mass destruction and terrorism against our military forces and our citizens at home and overseas and our allies. Navy Medicine's research efforts focus on finding solutions to traditional battlefield medical problems such as bleeding, Traumatic Brain Injury, combat stress, and naturally occurring infectious diseases; as well as the health problems associated with non-conventional weapons including thermobaric blast, biological agents, and radiation.

The DOD Center for Deployment Health Research at the Naval Health Research Center reported that 8.7 percent of U.S. troops who were deployed and exposed to combat duty in Iraq or Afghanistan reported symptoms of PTSD on a screening survey. We anticipate that this ongoing research will prove helpful in identifying populations at especially increased risk of PTSD from combat, and lead to improved diagnosis and prevention strategies.

The Naval Institute for Dental and Biomedical Research helped to prove the military utility of a new product “Dent Stat,” a temporary dental filling material used in treating dental emergencies in all forward deployed settings. This user-friendly temporary restorative material helps stabilize and reduce pain from fractured teeth and lost or broken fillings so warfighters can quickly return to their units.

The Navy Medical Research Center developed an updated vaccine against Japanese encephalitis (JE) allowing for U.S. Food and Drug Administration licensure. The JE vaccine should prevent this mosquito-borne potentially fatal brain infection, and will save lives of military personnel who deploy to the Asia-Pacific region, and also civilian travelers to JE-endemic regions.

These are just a few examples of how Navy Medicine’s biomedical and dental research, development, testing and evaluation, including clinical investigations, will protect and improve the health of those under our care.

It is important to recognize the unique challenges before Navy Medicine at this particularly critical time for our nation. Growing resource constraints for Navy Medicine are real, as is the increasing pressure to operate more efficiently without compromising healthcare quality and workload goals. The Military Healthcare System (HMS) continues to evolve, and we are taking advantage of opportunities to modernize management processes that will allow us to operate as a stronger innovative partner within the MHS.

Integration of care between the military direct care and our civilian network, and across the services, has implications related to both the quality and cost of care. The National Capital Area and the San Antonio military markets have become pilots for a “joint” healthcare system. While the models are different, the end goal is the same: a single approach to healthcare. With the current economic situation driving the need for cost effectiveness, movement toward a Unified Medical Command construct will likely accelerate. Identifying those functions that can be joint—along with those that need to remain service specific—is a critical component of the success of the project. Bringing the direct care system and the TRICARE Management Activity under a single command structure offers significant advantages and might be the next best step as military healthcare evolves. Navy Medicine supports and is actively engaged in these efforts.

Chairman Inouye, Ranking Member Cochran, I want to express my gratitude on behalf of all who work for Navy Medicine—uniformed, civilian, contractor, volunteer personnel—who are committed to meeting and exceeding the healthcare needs of our beneficiaries. Thank you again for providing me this opportunity to share with you Navy Medicine’s mission, what we are doing today, and our plans for the future. It has been my pleasure to testify before you today and I look forward to answering any of your questions.

Chairman INOUE. May I now call upon Lieutenant General Roudebush.

STATEMENT OF LIEUTENANT GENERAL JAMES G. ROUDEBUSH, AIR FORCE SURGEON GENERAL, UNITED STATES AIR FORCE

General ROUDEBUSH. Mr. Chairman, Mr. Vice Chairman, Senator Murray, Senator Bennett: Thank you for this opportunity to share our issues, our concerns, but also our accomplishments with you this morning.

I believe your comments frame it very appropriately and very correctly in terms of the importance of what we bring both individually and collaboratively to the care of the men and women who have raised their right hand and sworn to support and defend and go into harm’s way for our Nation. It’s important that we do care for them, and it’s important that we work with each one, one by one, as they transition perhaps to care within the Department of Veterans Affairs, to assure that that transition is as smooth, effortless, and user-friendly as it can be.

So I think your comments set this up very, very well. Thank you, sir. And thank you and the subcommittee for your unwavering support in our endeavors in this regard. We simply could not do it without you, and we truly appreciate that.

This morning, sir, I'd like to talk a bit about Air Force medicine, understanding that Air Force medicine is part of a joint capability, and we keep that issue very clearly in mind. Air Force medicine contributes significant capability to the joint warfight in combat casualty care, wartime surgery, and aeromedical evacuation.

AIR FORCE THEATER HOSPITAL

On the ground, at both the Air Force theater hospital at Balad and Craig Joint Theater Hospital in Bagram we are leading numerous combat casualty care initiatives that will positively impact combat and peacetime medicine for years to come. Air Force surgeons laid the foundation for the state-of-the-art intervascular operating room at Balad, the only DOD facility of its kind, and their use of innovative technology and surgical techniques has greatly advanced the care of our joint warfighter and coalition casualties, and their work within the joint theater trauma system, collaborative joint work, their work within this joint system, has literally rewritten the book on the use of blood in trauma resuscitation.

To bring our wounded warriors safely and rapidly home, our critical care aeromedical transport teams, or CCATs, provide unique intensive care unit (ICU) care in the air within DOD's joint en route medical care system. We continue to improve the outcomes of CCAT wounded warrior care by incorporating lessons learned into clinical practice guidelines and modernizing the equipment we use to support this important mission.

MEDICAL LIFESAVING OPERATIONS—HURRICANES KATRINA AND RITA

But it's important to note that this Air Force-unique expertise also pays huge dividends back home. When Hurricanes Katrina and Rita struck in 2005, Air Force active duty, Guard, and Reserve medical personnel were in place conducting lifesaving operations. Similarly, hundreds of members of this total force team were in place September 1, 2008, when Hurricane Gustav struck the Louisiana coast and when Hurricane Ike battered Galveston, Texas, less than 2 weeks later.

During Hurricane Gustav, Air Mobility Command coordinated the movement of more than 8,000 evacuees, including 600 patients. Air crews transported post-surgical and intensive care unit patients from Texas-area hospitals to Dallas principally. I'm extremely proud of this incredible team effort.

The success of our Air Force mission, however, directly correlates with our ability to build and maintain a healthy and fit force at home station and in theater. Always working to improve our care, our family health initiative establishes an Air Force medical home. This medical home optimizes healthcare practice within our family healthcare clinics, positioning a primary care team to better accommodate the enrolled population and streamline the processes for care and disease management. The result is better access, better care, and better health.

PSYCHOLOGICAL HEALTH OF OUR AIRMEN

The psychological health of our airmen is critically important. To mitigate their risk for combat stress symptoms and possible mental

health problems, our program known as Landing Gear takes a proactive approach, with education and symptom recognition both pre- and post-deployment. We educate our airmen that recognizing risk factors in themselves and others, along with a willingness to seek help, is the key to effectively functioning across the deploying cycle and reuniting with their families. Likewise, we screen carefully for traumatic brain injury at home and at our forward deployed medical facilities.

To respond to our airmen's needs, we have over 600 active duty and 200 civilian and contract mental health providers. This mental health workforce has been sufficient to meet the demand signal that we have experienced to date, but, that said, we do have challenges with respect to active duty psychologists and psychiatrists recruiting and retention and we're pursuing special pays and other initiatives to try to bring us closer to 100 percent staffing in these two very important specialties.

For your awareness, over time we are seeing an increasing number of airmen with post-traumatic stress disorder (PTSD). 1,759 airmen have been diagnosed with PTSD within 12 months of returning from deployment from 2002 to 2008. As a result of our efforts at early post-traumatic stress identification and treatment, the majority of these airmen continue to serve with the benefit of treatment and support.

Also, understanding that suicide prevention lies within and is integrated into the broader construct of psychological health and fitness, our suicide prevention program, a community-based program, provides the foundation for our efforts. Rapid recognition, active engagement at all levels, and reducing any stigma associated with help-seeking behaviors are hallmarks of our program. One suicide is too many and we're working hard to prevent the next.

SUSTAINING THE AIR FORCE MEDICAL SERVICE

Sustaining the Air Force medical service requires the very best in education and training for our professionals. In today's military that means providing high-quality programs within our system as well as strategically partnering with academia, private sector medicine, and the Department of Veterans Affairs to ensure that our students, residents, and fellows have the best training opportunities possible.

While the Air Force continues to attract many of the finest health professionals in the world, we still have significant challenges in recruiting and retention. We're working closely with our personnel and recruiting communities using accession and retention bonus plans to ensure full and effective staffing with the right specialty mix to perform our mission. At the center of our strategy is the health professions scholarship program. HPSP is our most successful recruiting tool. But we're also seeing positive trends in retention from our other financial assistance programs and pay plans. Thank you for your unwavering support in this critical endeavor.

In summary, Air Force medicine is making a difference in the lives of airmen, soldiers, sailors, marines, family members, coalition partners, and our Nation's citizens. We are earning their trust every day. As we look forward to the way ahead, I see a great fu-

ture for the Air Force medical service built on a solid foundation of absolutely top-notch people, outstanding training programs, and strong partnerships. It's an exciting, challenging, and rewarding time to be in Air Force and military medicine. I couldn't be more proud of this joint team.

PREPARED STATEMENT

We join our sister services in thanking you for your enduring support, and I look forward to your questions.

Chairman INOUE. I thank you very much, General Roudebush. [The statement follows:]

PREPARED STATEMENT OF LIEUTENANT GENERAL (DR.) JAMES G. ROUDEBUSH

Mr. Chairman and esteemed members of the Committee, it is my honor and privilege to be here today to talk with you about the Air Force Medical Service. Our Air Force medics work directly for the Line. To that end, we too are focused on reinvigorating the Air Force nuclear enterprise; partnering with the joint and coalition team to win today's fight; developing and caring for Airmen and their families; modernizing our Air and Space inventories, organizations, and training, and recapturing acquisition excellence.

In support of our Air Force priorities, our Air Force Medical Service (AFMS) is on the cutting edge of protecting the health and well-being of our Service men and women everywhere. Our experience in battlefield medicine is shaping America's healthcare for the 21st century and beyond. We are actively enhancing readiness; ensuring a fit, healthy force, and building/sustaining the model health system for DOD. In short, it's a great time to be in Air Force medicine!

ADVANCEMENTS IN READINESS

Air Force medics contribute significant capability to the joint warfight in aeromedical evacuation, combat casualty care and wartime surgery. Our advancements in these areas are unparalleled in previous combat experience.

Our Critical Care Air Transport Teams (CCATTs) provide unique "ICU care in the air" within DOD's joint enroute medical care system. We continue to improve the outcomes of CCATT wounded warrior care by incorporating lessons learned into clinical practice guidelines and modernizing equipment to support the mission. For example, we are developing a joint electronic in-flight patient medical record to ensure effective patient care documentation and record availability. We are working to improve CCATT equipment, such as mobile oxygen storage tanks and airborne wireless communication systems, and continuing to evaluate existing equipment to ensure safety for our patients.

On the ground, at both the Air Force Theater Hospital at Balad, Iraq and Craig Joint Theater Hospital at Bagram, Afghanistan, Air Force medics lead numerous combat casualty care initiatives that will positively impact combat and peacetime medicine for years to come. The Air Force surgeons garnered invaluable experience in the field of vascular surgery that laid the foundation for a state-of-the-art endovascular operating room at Balad—the only DOD facility of its kind. The inaugural use of diagnostic angiography and vena caval filters, along with coil embolization and stent grafts in select vascular surgeries in-theater have truly modernized care of our joint warfighter and coalition casualties. Colonel (Dr.) Jay Johannigman, the 332nd Expeditionary Medical Operations Squadron lead trauma surgeon, said, "Our Joint combat hospitals, be they Army, Navy, or Air Force, are all beginning to think alike and do things similarly. These efforts help us improve and speed the care to the patient."

Working with the Armed Services Blood Program Office, Air Force medics have improved the supply of crucial life-saving blood products in-theater, supplementing fresh blood with a new frozen red blood cell product with an extended shelf life. An in-theater apheresis center was established to collect fresh platelets needed to support aggressive treatment of trauma patients requiring massive transfusions.

The ability to collect and analyze data is critical to our success in combat casualty care. The Joint Theater Trauma Registry (JTTR), established in 2004, has made significant strides in these efforts. Their work led to major changes in battlefield care, including management of extremity compartment syndromes, burn care resuscitation, and blood transfusion practices. Their results are setting military-civilian benchmarking standards. The JTTR is truly a joint effort, with full participation of

the Air Force. An Air Force physician is the JTTR system deputy director, and our critical care nurses are key players in the in-theater JTTR team. Through the JTTR we're capturing and implementing best practices for management of the extensive trauma cases seen.

Air Force-unique expertise pays dividends back home, as well as in theater, and is saving lives. Many Americans who have become victims of natural disasters benefited from our humanitarian support. When Hurricanes Katrina and Rita struck in 2005, Air Force Active Duty, Guard, and Reserve medics were in place conducting lifesaving operations. Similarly, hundreds of members of this Total Force team were in place September 1, 2008 when Hurricane Gustav struck the Louisiana coast and when Hurricane Ike battered Galveston, Texas, less than 2 weeks later. During Hurricane Gustav, Air Mobility Command coordinated the movement of more than 8,000 evacuees, including 600 patients. Aircrews transported post-surgery/post-intensive care unit patients from Galveston area hospitals to Dallas medical facilities. I am extremely proud of this incredible team effort.

ENSURING A FIT AND HEALTHY FORCE

The success of our medical readiness mission directly correlates with our ability to build and maintain a fit and healthy force at home station and in-theater. One way we do this is through optimization of health care delivery. Our Family Health Initiative, our Air Force "medical home," optimizes health care practice within our family health clinics, increasing the number of medical technicians on the family health teams to better accommodate the enrolled population and streamlining the processes for care and disease management.

We achieve a fit and healthy force by measuring our health care outcomes. The AFMS has used the Healthcare Effectiveness Data and Information Set measures for more than 8 years to assess the care we deliver. Our outcome measures for childhood immunization delivery, asthma medication management, LDL cholesterol control in diabetics, and screening for Chlamydia all exceed the 90th percentile in comparison to civilian benchmarks. We also compare very highly with civilian hospital care for all 40 of our measures developed by the Agency for Healthcare Research and Quality, which evaluates patient safety, inpatient quality, pediatric care quality, and prevention-related quality for our hospital services. We recently began measuring 30-day mortality rates for myocardial infarction, pneumonia and congestive heart failure, and found that the AFMS is well below the national benchmark in all three measures. In 2009, we will implement measurement of well-child visits and follow-up after mental health hospitalization. While this is all good news, we must remain vigilant in analyzing and evaluating the effectiveness of our healthcare delivery—our patients deserve the very best.

The exposure of our Airmen to battlefield trauma puts psychological health at the forefront of our health and fitness mission. To mitigate their risk for combat stress symptoms and possible mental health problems, our Landing Gear program takes a proactive approach with education and symptom recognition, both pre- and post-deployment. We educate our Airmen that recognizing risk factors in themselves and others, along with a willingness to seek help, is the key to effectively functioning across the deployment cycle and reuniting with their families.

We have over 600 Active Duty and over 200 civilian and contract mental health providers. This includes 97 additional contract Mental Health providers we added in 2007 to manage increased workload. This mental health workforce has been sufficient to meet the demand signal that we have experienced to date. That said, we do have challenges with respect to Active Duty psychologist and psychiatrist recruiting and retention, and we are pursuing special pays and other initiatives to try to bring us closer to 100 percent staffing in those two specialties. We continually assess and reassess the demand based on mission requirements as well as the need for clinical services. We are seeing a gradual increase in the incidence of post-traumatic stress disorder (PTSD) in our Airmen and we are also seeing a persistent demand at the 1:2 dwell rate for mental health providers in the deployed environment. This demand is not likely to decrease, and could well increase over time. We are tracking this demand closely to ensure that we have the resources to meet tomorrow's demand.

With regard to what we are doing about PTSD, we address post-traumatic stress (PTS) in our Airmen by combining resilience training with frequent screening and ready access to mental healthcare. Resilience training is conducted via an Air Force developed program Landing Gear, where Airmen learn what to expect while deployed, and when and how to get help for stress symptoms. Screening occurs before deployment, at the end of deployment, 90–180 days post-deployment and annually via the Physical Health Assessment. Each screening asks about PTS and other psy-

chological symptoms. Healthcare providers fully assess all symptoms noted on the screening, and refer to mental health providers for further care as needed. We also train frontline supervisors and have positioned mental health personnel in our primary care clinics in order to increase access and reduce stigma. Quality healthcare for our Airmen requires our mental health providers to have the best tools available to treat PTS. To that end, we have sent 490 of our mental health providers to 2 and 3-day workshops conducted by civilian subject matter experts on the two widely recognized methods of PTSD treatment. All our providers, mental health and primary care, are trained and follow nationally/Veterans Affairs (VA) approved clinical practice guidelines to assure that all treatment for PTSD is state of the art and meets the highest standards.

For your awareness, 1,758 Airmen have been diagnosed with PTSD within 12 months of return from deployment (fiscal year 2002-fiscal year 2008). The vast majority of these Airmen continued to serve with the benefit of treatment and support. Of these Airmen, 255 have been enrolled in our Wounded Warrior program secondary to PTSD, and are not expected to be returned to duty. Our efforts at early PTS identification and treatment strive to maximize the number of Airmen we are able to return to full duty and health. As noted, however, we are seeing an increase over time in the number of our Airmen with diagnosed PTSD.

Understanding that suicide prevention lies within and is integrated into the broader construct of psychological health and fitness, we continue to aggressively work our eleven suicide prevention initiatives, which include frontline supervisor training and suicide risk assessment training for mental health providers. We have mental health providers in our family health units to provide the full spectrum of care for both our active duty and family members. This allows us to approach issues in a way conducive to quick recognition and resolution, while reducing any perceived stigma associated with visits to mental health clinics. Suicide prevention requires a total Air Force community effort, using all tools available. We are expanding our ability to identify, track and treat Airmen dealing with PTSD, Traumatic Brain Injury (TBI), or other mental health problems to ensure no one is left behind who needs help. We have the resources, the opportunity, and clearly the need to better understand, and care for these injuries.

Current treatment/management for TBI is based on Defense and Veterans Brain Injury Center (DVBIC) TBI Clinical Guidance. The Air Force TBI treatment is done by a multidisciplinary team guided by comprehensive brain injury and mental health assessment tools. All TBI patients receive education on TBI symptoms and management as well as appropriate referrals for occupational therapy, physical therapy, speech and language, pharmacy, audiology and optometry. Cognitive rehabilitation is initiated after medical issues have subsided and the patient's pain is managed. In fiscal year 2009, video teleconferencing equipment will be installed in all mental health clinics to allow direct consult with the DVBIC.

We have also taken the lead in DOD with diabetes research and community outreach. We have a very productive partnership with the University of Pittsburgh Medical Center (UPMC) and the Army. Wilford Hall Medical Center (WHMC), Lackland AFB, Texas, is designated as the initial DOD roll-out site for diabetes initiatives developed at UPMC. Major Mark True, an endocrinologist, is the WHMC project lead and director for the Air Force diabetes program. He established a Diabetes Center of Excellence (DCOE) program and, in August 2007, introduced several inpatient diabetes protocols and initiatives in the hospital, including an intravenous insulin protocol that substantially improved glucose control in critical care units. We are working to open an outpatient regional DCOE that will impact clinical outcomes across a regional population. This will be supported by the Mobile Diabetes Management with Automated Clinical Support Tools project beginning this year, which will demonstrate improved diabetic management through cell phones and web-based technology use.

BUILDING AND SUSTAINING A PRE-EMINENT AFMS

Sustaining the AFMS as a premiere organization requires the very best in education and training for our professionals. In today's military, that means providing high quality programs within our system, as well as strategically partnering with academia, private sector medicine and the VA to assure that our students, residents and fellows have the best training opportunities possible.

With the ongoing demand for well trained surgeons in our trauma care mission, we have focused on Surgical Care Optimization. This initiative identified eleven medical treatment facility (MTF) platforms to provide the capacity necessary to keep critical wartime medics proficient in battlefield trauma care. It also seeks to in-

crease MTF recapture of DOD beneficiary specialty care by optimizing operating room access and efficiency.

Our Graduate Medical Education programs consistently graduate residents fully prepared to provide excellent clinical care in the inpatient, outpatient and deployed settings. The outstanding performance of our residents on board certification exams is just one marker of the success of our numerous training programs, many of which are partnered with leading civilian institutions throughout the country, including Wright State and Cincinnati University in Ohio; Saint Louis University in Missouri, and the Universities of Mississippi, Texas, Nevada and California.

We partner with local civilian medical facilities to support the Sustainment of Trauma and Resuscitation Skills Program, enabling home-station clinical currency rotations in private sector level one trauma centers. Our Centers for Sustainment of Trauma and Resuscitation Skills is an immensely successful partnering endeavor that provides immersion trauma skills training with some of the great trauma centers in the Nation—R. Adams Cowley Shock Trauma Center in Baltimore, Maryland; University Hospital in Cincinnati, Ohio; and St. Louis University Medical Center, Missouri. Nearly 800 physicians, nurses and technicians completed this training in 2008; many of them deployed soon after and reported being very well prepared for their roles in combat medicine.

Working closely with our Department of Veterans Affairs partners, we continuously strive to streamline the system for all our personnel to include our wounded, ill and injured Airmen. A major success in this partnership is our joint ventures. The Air Force has four of the eight existing DOD/VA joint venture sites—Elmendorf AFB, Alaska; Kirtland AFB, New Mexico; Nellis AFB, Nevada; and Travis AFB, California. Three additional sites are under consideration or in development at Keesler AFB, Mississippi; Buckley AFB, Colorado; and Eglin AFB, Florida. These joint ventures offer optimal healthcare delivery capabilities for both our patient populations, while also serving to make the most of taxpayer dollars.

The Disability Evaluation System pilot program is a joint effort that resulted from the Commission on Care for America's Returning Wounded Warriors. The goal is to simplify healthcare and treatment for injured Service members and veterans and to deliver benefits as quickly as possible. Malcolm Grow Medical Center at Andrews AFB, Maryland was one of the initial three military medical treatment facilities in the National Capital Region to participate. The pilot streamlined and increased transparency of both the medical examination board process and the VA disability and compensation processes. In the pilot, both processes now occur concurrently, provide more information for the member during the process, and supply comprehensive information regarding entitlements from both agencies at the time of the separation. Continued evaluation of the study is slated to occur at 19 more military installations, to include Elmendorf AFB, Alaska.

Cutting-edge research and development initiatives are critical to building the future AFMS. The Virtual Medical Trainer is a continuation of existing efforts to develop advanced distributed learning. This project focuses on the development of training for disaster preparedness and medical care contingencies, addressing such areas as equipment, logistics, and war readiness skills training. Extensive work has been done to increase simulation in all of our hospitals and trauma training centers. Shared simulation with our university partners improves care and patient safety for both civilian and military patients. Virtual or simulation capabilities are a very cost-effective way to train and prepare our medics to do a variety of missions.

Keesler AFB, Mississippi is studying advanced technologies to include robotic microscopy and virtual (whole slide) imaging. Eight MTFs have the robotic microscopes, and efforts are underway to obtain connectivity between MTFs and the VA Medical Center at Omaha, Nebraska. Once fully operational, this system allows general clinicians remote access to expert advice, diagnosis, and mentoring, and provides high quality standard of care independent of location.

Similarly, telemedicine is vastly expanding the capabilities of our existing resources. Wright-Patterson AFB, Ohio radiologists and clinicians are successfully providing consultation services across the Air Force, and this year the project is slated to extend to Landstuhl Army Medical Center, Germany, and RAF Lakenheath, England. Automated Identification and Data Collection, a new business process study at Keesler AFB, Mississippi will identify opportunities for radiofrequency identification and barcode technologies in military medicine. We are exploring how to improve clinical and administrative processes in medical equipment management and repair, patient flow analysis and management, bedside services, medication administration, and surgical tray management.

Successfully building and sustaining the AFMS requires continued focus on the physical plants we occupy to perform our mission. We greatly appreciate the tremendous support you have provided to recapitalize Air Force aging medical infra-

structure. We're excited about our plans to improve facility restoration and sustainment and to move forward with sorely needed medical construction (MILCON) projects.

Green design initiatives and energy conservation continue to be high priorities for the Air Force. We are incorporating these into AFMS MILCON and restoration projects for our MTFs. We use the nationally accepted benchmark—Leadership in Energy and Environmental Design—to design and construct buildings with sustainable design elements. I'm pleased to share some recent examples, such as exterior solar shading panels used in Keesler AFB's Base Realignment and Closure (BRAC) Tower and Diagnostic Imaging Center projects. A grey water system incorporated into Tinker AFB, Oklahoma MILCON recycles treated wastewater generated from MTF hand-washing for use in toilets or irrigation systems, decreasing or eliminating the amount of fresh water used for those purposes. Our projected fiscal year 2010 Air Force MILCON projects will incorporate enhanced day lighting concepts allowing more natural light into buildings and office spaces. Our energy optimization efforts are both environmentally and fiscally beneficial and enable us to better serve military members and their families.

Our most critical building block for the future is our people. With these unprecedented advances in training and research, it is understandable that the Air Force continues to attract many of the finest health professionals in the world. In fiscal year 2008, the Air Force Medical and Dental Corps exceeded their Health Professions Scholarship Program (HPSP) recruiting goals. HPSP is our most successful recruiting tool, and we are seeing positive early trends in retention from our other financial assistance programs and pay plans. We are working closely with our personnel and recruiting communities at targeting accession and retention bonus plans to ensure full and effective staffing with the right specialty mix to perform our mission.

BUILDING A JOINT AND EFFECTIVE MILITARY HEALTH SYSTEM

The AFMS is committed to working with our Sister Services to support joint medical capabilities and leverage common operating platforms such as logistics, research and development and information management/information technology. We are well on the way to bringing BRAC plans to fruition. The Joint Task Force National Capital Region Medical, or JTF CapMed, is moving forward with plans to combine the Army, Navy, and Air Force assets into the new Walter Reed National Military Medical Center. Malcolm Grow Medical Center at Andrews AFB, Maryland is our component to JTF CapMed and serves as an important care delivery platform in the NCR as the east coast hub for aeromedical evacuation. Since late 2001, Andrews AFB has welcomed home and cared for more than 33,000 patients arriving from Operations Enduring Freedom and Iraqi Freedom, U.S. Central Command, U.S. European Command and U.S. African Command.

The BRAC plans are also moving forward in San Antonio, Texas, to integrate Army and Air Force MTFs into the new San Antonio Military Medical Center (SAMMC), creating the largest inpatient facility in DOD. SAMMC has integrated nearly all clinical activities and has led the way in bringing the Air Force and Army together in an integrated platform that meets the Air Force, Army, and joint mission requirements all the while maximizing the use of existing resources.

Also in San Antonio is the Medical Education and Training Campus (METC). This is an important step toward what leaders are calling the largest consolidation of training in the history of the Department of Defense. Upon completion in 2011, the joint campus, led by tri-Service leadership, will centralize all Army, Navy and Air Force basic and specialty enlisted medical training at Fort Sam Houston, Texas. At Wright-Patterson AFB, Ohio, the 711th Human Performance Wing has been activated and will serve as a cutting-edge joint center of excellence for human performance and aerospace medicine.

These are but some of the ways and places we are working toward joint solutions that enhance mission support and benefit the quality of medical care for our warfighters and their families.

BRIGHT FUTURE AND GOOD TIME TO BE IN THE AIR FORCE MEDICAL SERVICE

Air Force medics make a difference in the lives of Airmen, Soldiers, Sailors, Marines, family members, coalition partners and civilians. They take pride in every patient encounter and earn our Nation's trust—everyday!

As we look to the way ahead, I see a great future for the AFMS, built on a solid foundation of top-notch people, outstanding training programs and strong partnerships. It is indeed an exciting, challenging and rewarding time to be in Air Force medicine! I couldn't be more proud.

We join our Sister Services in thanking you for your enduring support.

FEDERAL HEALTH CARE CENTER AT GREAT LAKES

Chairman INOUE. I'd like to begin questioning now. Admiral Robinson, on October 1 of this year the Great Lakes Naval Health Center and the North Chicago Veterans Center will be merging. It's not the first DOD-VA activity, but it is without question the largest. I'm certain you have, as we have learned, legislative and other problems, problems with labor unions, problems on the comingling of funds and such.

Can you tell this subcommittee what is being done at this moment?

Admiral ROBINSON. The Department of the Navy, working in conjunction with the Department of Veterans Affairs, are coming together to establish the Federal Health Care Center (FHCC) at Great Lakes. We are working to make sure we have a seamless healthcare operation in north Chicago that will take care of the healthcare needs of the uniformed servicemembers in the Great Lakes area, as well as the beneficiaries of the VA system.

There are a number of significant obstacles that I think will be overcome, but that is not to say they are not there. The first and most notable among them is the IM/IT system. That revolves around using VISTA and using ALTA, which system is the best. They are incompatible in the sense that we can't use both of them together. They do different things for both systems. Yet, we need to have one IT system that we can utilize in the facility.

There have been a number of work-arounds. This is not an insoluble issue, but it is a major issue that we have to get resolution with, and in fact Navy medicine is pledged, along with VA, to make sure that we can come to some understanding of how we can use the best parts from both systems so that we don't destroy either VISTA or ALTA, but at the same time we can have one system at the VA.

There are also issues around recruitment and employee relationships at Great Lakes. There are also issues that from my perspective as Surgeon General are very large issues in terms of credentialing, particularly of our ancillary healthcare providers. The VA and how they credential is different than what we do in DOD because very few VA providers, perhaps none, but very few VA providers are operationally oriented or deploy. But I have to make sure my providers maintain their operational medical skills so that when I tap them to deploy to an operational area they are full up. So I have to make sure that we have the credentialing issues that are taken care of and that we are going to solve problems that I may have in the Navy.

Then there are the funding streams for both DOD and DVA, how those funds matriculate through our services, and the oversight of those funds. All of those issues, and this is just a very small example, have to be dealt with and we have to maintain the equities and missions of both DVA and DOD.

Again, these are a few examples of the issues that are involved. Mr. Chairman, I think that we are going to solve all of these issues, but I will also say, with openness, that these are very difficult issues, and we're working them hard. So there are not easy

solutions, but I do think that we can get to a place where we can have an excellent healthcare facility at FHCC.

Chairman INOUE. So you're telling us that on October 1 all of the issues will not be fully addressed?

Admiral ROBINSON. All the issues are not going to be fully addressed on October 1. But I think that if we take an iterative approach to the issues of how we serve our beneficiary population, how we serve our patients, can the doors open and can we, in fact, be an effective healthcare institution for DVA and DOD patients, I think the answer is yes.

I do not think that all of the issues that I have talked about will be fully resolved, and in fact I think that that is absolutely essential in order to get to the quality care and the quality of service that we in DOD and DVA have to have in order to take care of patients.

Chairman INOUE. There is a problem that is not in your jurisdiction, but as a result of these joint facilities we have a Veterans Committee, we have an Armed Services Committee, and so the matter of who has control is becoming a bit sensitive now. But that's not your problem.

Admiral ROBINSON. Yes, sir.

CENTER FOR EXCELLENCE

Chairman INOUE. Can I ask a question of General Schoemaker. Everywhere you turn there seems to be a center for excellence. We have been creating one for traumatic brain injury. I support that. We have one for amputees, for hearing and vision. Do you believe that by creating centers we give the impression that only these centers are the ones that we are concerned with and other matters are not of interest to us?

General SCHOOMAKER. Well, sir, I think I understand your question and I understand the concern. I think the efforts of those that have chartered those centers, as well as the execution of the centers, the leadership of the centers, are working very hard not to focus so much on brick and mortar solutions, but to act as clearing-houses. I think increasingly, with the generosity of the American public and the innovation that occurs within the academic community, with other Federal research and treatment entities like the National Institutes of Health, we are seeing—and the use, that's already been alluded to by Admiral Robinson, the use of information technology—we have an opportunity for these centers really to be the nexus of knowledge networks and to harvest best ideas, to find potential solutions, while also monitoring where problems are arising, and to move funding, to move energy, to move focus to those physical brick and mortar sites where that can be done.

I think this is—certainly the effort that's underway in the Defense Center of Excellence for Traumatic Brain Injury and Post-Traumatic Stress Disorder and Psychological Health, I don't think anyone—certainly I do not conceive of this new center of excellence as being the sole brick and mortar site and only repository of good research and clinical activity. But certainly it is in a position to reach out to anyone who can offer solutions to the problems that are arising.

SERVICEMEMBER WELLNESS/FAMILY ADVOCACY

Chairman INOUE. Admiral and General Roudebush, as you've indicated, there's been a rise in suicides, substance abuse, spousal abuse, children abuse. Are we making a joint effort of all services, or just each service on its own?

General ROUDEBUSH. Well, sir, in terms of approaching what are very complex problems that cross a variety of areas when you're caring for the active duty soldiers, sailors, marines, and caring for their family members, we do approach that in a service-specific way which attends to the culture that those families both exist within and operate within, whether it's an Army post or a Navy station or an Air Force base.

So we each have an approach that I think is adapted to the operational perspective of how we operate, but also attends to that culture. But we also work across services in terms of sharing both successes and issues, sharing programs, sharing insight into what we're doing, and operate I think effectively across those areas.

Now, I will tell you that as we are able to reduce stigma, as we are able to increase visibility of issues, we are seeing more. Perhaps we're seeing more because there are more, and we need to be very attentive to that. But I think we're also seeing more because we are able to see more, and give us the opportunity to engage, hopefully intervene, to assure that proper care is provided at a time when it can make a difference, and do it either within the service construct or within the joint construct, because we certainly care for Navy and Army families in our Air Force facilities, and likewise our Air Force families are very well cared for in Army and Navy facilities.

So it's incumbent upon us to work jointly, but we also need to work separately to assure that we are getting at the issues within our operational platforms.

Chairman INOUE. Thank you very much.

Senator Cochran.

Senator COCHRAN. Mr. Chairman, thank you.

MEDICAL EVACUATIONS

Admiral Robinson, more marines will be deployed to Afghanistan in coming months, and I've been informed that the standard time required for medical evacuations in Afghanistan are considerably different from those in Iraq. Would you comment on the adequacy of the resources that will be available and the response time for medical evacuations as more marines and corpsmen are involved in that theater of operation?

Admiral ROBINSON. Yes, sir, Mr. Vice Chairman. The Afghanistan area of operation is substantially different than the area of operation in Iraq, both from a terrain and an infrastructure point of view. Afghanistan has desert terrain, which can reach upwards of 140 degrees Fahrenheit, all the way to mountains, which are very, very cold, very sub-zero weather. Additionally, infrastructure in terms of roads are almost completely lacking in Afghanistan, as opposed to other areas, which makes the necessity for how we operate there from a medical point of view a lot different in terms of mobility and in terms of air evacuation.

The golden hour which I as a surgeon and as a former chief of surgery at Portsmouth Naval Hospital, having trained many general surgeons in trauma, is an age-old edict that we've used in surgery since it was first developed at the University of Maryland Shock Trauma. It's based upon the work from the Vietnam war and also the fact that if we can utilize air evacuation of critically injured personnel and get them to immediate definitive medical facilities we can save lives, and in fact that is absolutely true.

One of the things that we in Navy, Army, and Air Force medicine also utilize is the effective resuscitative capability that the Army medic, the Navy corpsman, and the Air Force medic utilize on the ground at the time of injury, such that we can start definitive care. We can start adequate resuscitation of injured personnel, stabilize them, control their airway, until adequate evacuation capability is there.

So the 60 minutes and the air evacuation, which is more difficult in Afghanistan, is not something that is necessarily going to reduce either the capability or the success of trauma surgery or trauma capability that we've had in the past. I only emphasize that from a medical and a surgical point of view because very often the golden hour appears to be truly a 60-minute evolution. It actually includes the ability to stop bleeding, to make sure that we have ABC, airway breathing, and circulation reestablished, to make sure that we have resuscitation reestablished, to make sure that we've done those definitive measures for the injured personnel who are going to in fact survive such that we can get them to definitive care. And in fact, if we get them there 2 or 3 hours after injury, that is usually adequate as long as resuscitation has occurred.

So the long answer to the short answer: We, Navy medicine, Air Force and Army medicine, will be capable of making sure that we give the same care to our trauma victims in Afghanistan.

Senator COCHRAN. That's very impressive and I think deserves commendation for the excellent leadership you're providing in this area.

SUFFICIENT SUPPLIES AND PERSONNEL FOR AFGHANISTAN

General Schoomaker, with the increase in personnel deployed to Afghanistan, do you believe that you will have sufficient medical personnel and medical supplies to support this troop increase?

General SCHOOMAKER. Sir, I think medical supplies is probably the easier of the two to answer. I don't envision any rate-limiting element of medical supplies or equipment there. We have I think evolved the medical logistics capability of the entire CENTCOM area of operation dramatically over the last 6, 7 years, focusing on the so-called theater level medical material centers, one of which is in Europe, one of which is in Qatar, and we have distribution sites within Afghanistan.

So I don't have concerns so much about that. Medical personnel I think is a challenge to us. This is one of those areas, quite frankly, that the coordination among the three services is most important. The Army right now is very heavily engaged both in Afghanistan and in Iraq in providing medical support. As we draw down troop levels in Iraq, we're going to continue to have fairly robust

medical support because, as we all know, you have to support the areas in which troops are operating in.

So we're going to continue to see Army medics and, for that matter, Navy and Air Force as well, maintained in Iraq. So we're cooperating I think with the CENTCOM planners and with the joint medical planners within Afghanistan to provide the resources that we can and the Navy and the Air Force, I think as you heard earlier, the air base at Bagram now, and that level three or role three facility now is largely Air Force, after having been started by the Army and transitioned to the Air Force. The Navy is going to play a more important role in the south.

So yes, we're stretched. But we're working as closely as we can with our joint partners to cover those areas of responsibility.

TROOP INCREASE IN AFGHANISTAN

Senator COCHRAN. Will the increase in deployment affect rotation schedules and deployments of surgeons, as well as medical specialists? What is your expectation?

General SCHOOMAKER. Well, sir, everybody plays a role in this in Army medicine. It's not recognized by many people, but some of our most heavily deployed specialties are not surgeons at all; they're pediatricians, who serve as general field surgeons, physicians assistants. Our psychologists, psychiatrists, our mental health workers, are very heavily engaged.

Do I think it's going to change the rotation length? No, sir, it's not going to change the rotation length. In fact, we're working to come closer to what our colleagues in the Air Force and the Navy have, which are shorter rotations, even if they're more frequent. We know from talking with our families and talking with our specialists that not only can they maintain the broad range of skills that they require in their specialties if they're deployed for a shorter period of time, even if that turns into more frequent deployments, but the families are much more tolerant of shorter rotations, especially 6 month or so rotations.

So we're working very hard to do that and getting support from the line for that.

Senator COCHRAN. Thank you very much.

General Roudebush, what role will the Air Force have in supporting the troop increase in Afghanistan?

General ROUDEBUSH. Sir, the Air Force is in Afghanistan, as General Schoomaker pointed out. We have the Air Force theater hospital at Bagram, which is jointly manned with the Army, but, as General Schoomaker pointed out, primarily Air Force, as well as a number of other smaller facilities that are either Air Force or jointly manned. We will certainly sustain those and over time being increasing Air Force medical laydown to support what you initially pointed out with Admiral Robinson in terms of working the medevac support time, which I believe you know, but I will note, our line leadership has really leaned into supporting that with additional rotor capability. The Air Force is providing additional helicopter assets and other assets to assure that we can be as timely as we need to be, and I think Admiral Robinson laid that out very well.

So we will be certainly supporting the increased troop laydown. However, I think there's two other points that I would note. The Air Force and Navy and Army are also deeply involved in rebuilding the nation. We have embedded training teams working with the Afghan military and police to rebuild their medical infrastructure, to mentor the Afghans, so that they can be ultimately self-sufficient; provincial reconstruction teams doing a great deal of work to bring that nation forward to the point where it can in fact operate on its own recognizance.

The second point I would make is that we have significant support from our North Atlantic Treaty Organization (NATO) allies on the ground in Afghanistan from a medical perspective, which we also integrate and leverage to assure that we have not only a joint approach to this, but we also have a coalition approach. So as we look at the overall military laydown in Afghanistan, there are a variety of perspectives that play into this that I think will assure that our forces are best positioned to do the mission that they are being sent there to do.

Senator COCHRAN. Thank you, Mr. Chairman.

Chairman INOUE. Thank you.

Senator Bennett.

Senator BENNETT. Thank you very much, Mr. Chairman.

Gentlemen, let me thank you for your service and your expertise. I come to this subcommittee new, so I don't have as intelligent or well-informed questions, but the only way I'm going to learn is to ask some stupid ones. So bear with me.

MEDICAL HEALTH SCREENING

General Schoomaker, you talked about general wellness, that is physical, psychological, spiritual, et cetera, et cetera. I think that ties into this whole question of mental health. The discussion about suicides and child abuse and other things has been an interesting one to listen to. In this process of trying to make sure that the individuals who serve in the armed forces are well-rounded and balanced in every area, is there any prescreening of people who might be susceptible, more susceptible to some kind of mental trauma and preparation prior to their going into deployment, so that they might, if something happens to them, have some previous training or preparation or expectation that could help them after the fact deal with the problem more than if it just hit them for the first time?

General SCHOOMAKER. Yes, sir. I think let me talk first about the screening because I think that's fairly—that I can deal with fairly quickly. That is that, aside from the usual accession screening, to include medical and psychological screening that occurs on any inductee, we don't have any specific screens that are used or selections that are used, because, quite frankly, I don't know that we have any determinants right now for success or failure in terms of the whole fitness of an individual. We use physical fitness monitors and assessments of general health, but other than that none.

I think one of the promises of the research that is now being conducted in traumatic brain injury, and especially in psychological health potentially, is finding early markers, if you will, and determinants of psychological injury. There are emerging theories and

I think there's some empiric evidence to support that post-traumatic stress reaction, for example, which occurs in a very large number of people subjected to trauma, whether that's in combat or the trauma of natural disaster or rape or violent crime or family violence, motor vehicle accidents, might be the persistence of a dysfunctional flight or fight reaction, and that there may be markers that we can discover and alert people very early to that emergence.

In the meantime, what we're doing in the Army is, through the use of a set of tools, a suite of training tools called Battlemind training, developed by the Walter Reed Army Institute of Research, we are building resilience in deploying soldiers before they deploy, during the deployment, and then upon redeployment. This suite of tools, Battlemind, which has become sort of our branded name for that, is one of the cornerstones of resiliency training. It's been one of the only instruments that we're aware of that has actually been shown to reduce during deployment the incidence of new post-traumatic stress problems.

The chief of staff's initiative in comprehensive soldier fitness is that attempt writ large. The idea here is that we have spent a lot of our time as a corporation, as an institution, looking only at the negative events—suicides, family violence, driving while intoxicated or drug-associated crimes or misconduct, and emergence of post-traumatic stress reactions and post-traumatic stress disorder if not addressed early enough and reversed. What the Army is trying to do is to find those determinants of resilience and growth and post-traumatic growth, rather than to turn adversity into a trauma and into an irreversible psychological injury, is to build the capacity of individuals through a multidisciplinary approach which works on the positive.

So we're working with some of the leaders in positive psychology and other tools to promote that aspect, rather than only measure in terms of what negative events occur. In so doing we hope to move the whole population of soldiers and families away from the threshold where they become dysfunctional.

Senator BENNETT. Thank you. That's really helpful.

Now, I was interested in the comment that you get significant increases, to use the business language, significant increases in productivity out of the troops if you alter the length of their deployment. I'm guessing here, but are there any studies going toward the question of frequency of patrols, for example, during the deployment, where you send marines into a nasty neighborhood in Fallujah day after day after day, as opposed to every other day or every third day or something of that kind?

Is there any research in this regard or any attempt to find research in this regard that might have the same impact that you have found with respect to the overall length of deployment, 6 months gives you better soldiers even if there are more deployments than if you put them there, say, for 18 months and kind of leave them alone. Is there any further research in the area I've talked about, about their exposure to traumatic situations on deployment?

IMPACT OF DEPLOYMENT LENGTH

General SCHOOMAKER. Well, sir, first of all, you may have inferred something that I did not intend to imply, that is that productivity of a soldier in general is somehow linked to the length of deployment. The chairman I think or the vice chairman earlier asked about the tolerance of recurrent deployments of medical specialists or surgical specialists as a function of the length of the deployment. My comment there is that we observe that the skills of, for example, a general surgeon begin to deteriorate after a certain amount of time in theater because they're not exploring and not using the full spectrum of what a general surgeon would use.

Senator BENNETT. I did misunderstand you, then. I got the impression that there were data that suggested the front line troops would benefit from more frequent, but shorter, deployments. You're saying that that's not the case, and I misunderstood you.

General SCHOOMAKER. Yes, sir. I think we have ample evidence through a series of annual iterative surveys called the mental health advisory teams, MHAT. We're in our sixth iteration of this, the sixth year. That team is right now in Iraq gathering data. We do have ample evidence that the length of deployment is associated with increased problems of the development of post-traumatic stress and other problems of soldiers in theater.

So I think you got that exactly right, sir. As we were in that period of the surge when we had 15 month long deployments, there was no question that the longer that deployment went the more problems soldiers had.

We do find, as I mentioned earlier, that if those soldiers pre-deployment and during deployment are exposed to Battlemind training and sort of re-inoculation with this, it reduces the incidence of that. So as I said before, it has been shown to be effective.

But as far as, so to speak, the productivity of the soldier or the effectiveness of a soldier, I would not ask you to infer from what I've been describing here that a soldier's effectiveness is improved by shortening the length of deployment. In fact, operational commanders would probably take me—take exception with some of that as a grand statement.

Senator BENNETT. Thank you. I appreciate that clarification because as I've studied the Vietnam war one of the things that was said was that you just got your unit cohesion going and then you'd pull them out and put in a bunch of green troops in, and that was one of the problems. So I'm glad to get that resolved.

Thank you, Mr. Chairman.

Chairman INOUE. Senator Murray.

Senator MURRAY. Thank you very much, Mr. Chairman.

Thank you all for your testimony today.

DISABILITY EVALUATIONS

General Schoomaker, let me start with you. How are things going with the DOD and the Department of Veterans Affairs expansion of the pilot programs to expedite the processing of injured troops through the disability evaluation system?

General SCHOOMAKER. Ma'am, I think that's going very well. As you know, or at least I've gone on record to say that the pilot, al-

though a very, very good effort and one that we support very, very vigorously—in fact, once the pilot was established in those few sites like Walter Reed, I've done everything in my power to implement it as widely as we can. Once we learned that we can simplify bureaucratic morass and we can make it more user-friendly for families and soldiers, I think we ought to be doing it as quickly as we can.

But I've also said that I'm concerned that it doesn't get at one of the most important and most disaffecting parts of our system of physical disability and evaluation, which is the dual adjudication of disability, one by the Department of Defense for the unfitting condition, for which the soldier, sailor, airman, marine, coast guardsman is awarded a specific disability rating linked to benefits, not the least of which is benefits for TRICARE for him or herself and their families; and then the Veterans Administration adjudicates a second, comprehensive level of disability based upon the whole person.

Senator MURRAY. I thought we were all going to go to the same system.

General SCHOOMAKER. Ma'am, until we change the law, my understanding is that we cannot get away from the dual adjudication of disability for anyone in uniform. We still have the single unfitting condition for the service member and the whole person concept for the VA. What we need in my understanding is legislative relief to be able to bring those two together.

But every other aspect of this highly bureaucratized system I think we're working very hard with the VA in doing, and we're encouraging that and supporting that in every way we can.

Senator MURRAY. Admiral?

Admiral ROBINSON. I think that General Schoomaker has summed up well what the issues are. I think that the Federal Health Care Center in Chicago actually underscores some of the difficulties of the DVA and DOD system in terms of trying to—your question is specifically with the disability evaluation system. But we have two chains of command that work vastly different, with different sets of rules and regulations, and trying to bring them together has been the real challenge.

Additionally, the same issues that affect the FHCC, the Federal Health Care Center in Chicago, regarding IM/IT—that is, VISTA and ALTA—are the same sorts of things that affect the merger of the disability evaluation system. How does that relate? If we have one system, we're going to have to have one medical IT way of dealing with those beneficiaries and whatever their medical needs may be.

That's a very small example, but those come together. In terms of my eyes-on Surgeon General of the Navy at the Department of Defense for the oversight committees that very often General Roudebush and General Schoomaker attend with me, both DOD and DVA and all of the reps in between and the Marine Corps, and all the other people involved have been working tirelessly to make this work, looking first at our patients and their needs and not at bureaucratic or other issues.

I will say that across the board we have done that. We're looking at patients and what they need, not at the institutional obstacles.

I only bring the institutional obstacles up because at the end of the day they exist and they make a difference.

Senator MURRAY. General Roudebush.

General ROUDEBUSH. Yes, ma'am, I think you raise a very interesting question. I'd like to offer perhaps an observation on your question, but also give it perhaps a little different perspective.

The Department of Defense and the Department of Veterans Affairs have different missions. Where we come together, the interface really most directly is as we transition an individual from Department of Defense—Army, Navy, Marine Corps, Air Force—to the Department of Veterans Affairs. We do need to assure that that transition is seamless.

Now, DOD, in my instance the Air Force, needs to determine fitness for duty in terms, is that individual fit to serve in the mission for which they're trained. The VA takes a rather broader look at how that individual is going to function back in the private sector. So these are two rather different determinations, and I think to the extent that we simplify the transition to assure that these great men and women are cared for, only have to fill out paperwork once, have a smooth move from DOD activities to VA, to include benefits, all benefits, is very important.

Our pilot projects I think are helping in that regard. For us, we're going to be expanding to a variety of locations, very small, Vance in Oklahoma for example, to very large or larger, Elmendorf in Alaska. I think that will continue to be instructive.

The metrics show that we are, in fact, reducing the time, but not to the time that we would consider to be appropriate. But as we bring these two great institutions, DOD and VA, together, we also have other experiences. DOD joint ventures, for example. We've got a great example at Keesler, where we use centers of excellence, what the VA brings very well within their operation, what the Air Force brings in our operation, and we leverage each other's capabilities, maintaining mission focus for the Air Force, for the VA, but really leveraging each other's capabilities.

So I think those kinds of opportunities and experiences are important, and also help instruct such things or inform such processes as how to best transition these men and women from DOD to VA. So I think we're making progress. We are not where you want us to be. We are not where we want to be. But I think we are making progress in really identifying the issues that need to be attended to as we work this.

Senator MURRAY. No one said it was going to be easy.

General SCHOOMAKER. No, ma'am.

Senator MURRAY. But we're working, and we need to get there. Okay.

General SCHOOMAKER. Thank you.

Senator MURRAY. Can you provide me with an update on the implementation of the comprehensive TBI registry that we started, I guess it was 1 year or so ago, including a single point of responsibility to track incidence and recovery, General Schoomaker?

General SCHOOMAKER. I will take that for the record, ma'am.

Senator MURRAY. Could you?

General SCHOOMAKER. Yes, ma'am.

[The information follows:]

TBI REGISTRY

Traumatic brain injury incidence and recovery is tracked through various complementary mechanisms at the VA and the Department of Defense (DOD). The National Defense Authorization Act for Fiscal Year 2008 states that the Secretary of Veterans Affairs shall establish a registry to be known as the “Traumatic Brain Injury (TBI) Veterans Health Registry.” The Act further specified that the Secretary of the VA collaborate with facilities that conduct research on rehabilitation for individuals with TBI, facilities that receive grants for such research from the National Institute on Disability and Rehabilitation Research (NIDRR), and the Defense and Veterans Brain Injury Center (DVBIC) of the DOD and other relevant programs of the Federal Government. The VA, NIDRR, and DOD have collaborated in this initiative with the VA as lead. The summary below is based upon those collaborations. Further details can be provided by the VA.

TBI operational Surveillance: TBI Veterans Health Registry

The VA has developed a mechanism to collect and consolidate all relevant medical data relating to the health status of an individual who served as a member of the Armed Forces in OIF or OEF and who exhibits symptoms associated with TBI, and who applies for care and services furnished by the VA; or files a claim for compensation on the basis of any disability associated with such service. Relevant data will be merged, and de-identified. The VA will then enlist NIDRR to assist with analysis of the data and timely production of reports.

Status: All components of this program have been designed and will be initiated very shortly.

Research Database: TBI Veterans Health Registry with Additional Information

As per the NDAA for fiscal year 2008, additional information the Secretary considered relevant and appropriate with respect to individuals will be included in the Registry if the individual grants permission to include such information, or is deceased at the time the individual is listed in the Registry. The additional information to be collected for patients providing informed consent in any of the VA PolyTrauma Centers includes a structured TBI Registry with additional data elements developed in coordination with the agencies listed in the NDAA for fiscal year 2008. These collaborations permit comparisons of Registry information with data collected on civilian TBI patients and DOD patients and returning service members. The VA TBI Registry has substantial overlapping data elements with the civilian Model Systems’ TBI Registry and the existing DOD TBI Registry, which will facilitate future comparative studies.

Status: This program, involving additional information for patients providing informed consent, has been submitted as a protocol to the Institutional Review Boards at the PolyTrauma Centers.

National Archive Database

In addition to the secure database developed as a collaboration between VA and NIDRR, additional databases may facilitate the sharing of selected elements of the TBI Veterans Health Registry with Additional Information with data collected within the DOD and across other civilian agencies and centers. The pooling of shared, common data elements will facilitate understanding of the course, diagnosis, and correlates of TBI in returning service members. The National Data Archive, a recent collaboration between NIH and DVBIC will provide for secure upload and storage of all original and processed images, associated clinical and genomics data for TBI, Post Traumatic Stress Disorder (PTSD) patients, and other relevant patient populations.

Sharing of phenotypic, imaging, and genomic data from a central secure repository will include the ability for researchers to validate research results, pool standardized information to improve statistical significance, use data collected by others to explore new hypotheses all in effort to improve PH and TBI treatments, use sophisticated analysis tools to gain a better understanding of risk factors and mitigating factors in PH and TBI.

General SCHOOMAKER. That is being—the focus in Army medicine is to direct all of our energies and our talents toward the Defense Center of Excellence for Traumatic Brain Injury and Psychological Health under Brigadier General Loree Sutton.

Senator MURRAY. Could you get back to me on that? It was one of our huge questions 1 year ago; making sure that people were

registered and we were tracking them. So if you could please get back to me on that.

General SCHOOMAKER. Yes, ma'am.

RESERVE HEALTHCARE REQUIREMENTS

Senator MURRAY. Let me ask all of you: The Reserves and particularly the National Guard have some unique concerns when they're deployed. We continue to hear from our folks out in our States about this, and obviously as we transition from Iraq to Afghanistan they're going to continue to be used. So my question for each of you is: Have you budgeted properly to accommodate for the Reserve components as they are going to need DOD healthcare into the future? General Roudebush, we'll start with you.

General ROUDEBUSH. Ma'am, in the Air Force and I believe in the other services, we have separate funding streams. The Guard comes from the States, the Reserve comes from the Reserve dollars, and DOD comes from the defense health programs. Now, to the extent that we merge our interests and our activities we do cross-flow that very, very carefully.

For us, for example, we assure that our Guard members and our Reserve members and our active duty members are tracked for completion of the post deployment health assessment and the post deployment health re-assessment (PDHA-PDHRA), and, in fact, our Guard and Reserve members are kept on active duty status, man-day status, until issues are resolved. So they retain full benefits as we work them through.

But they do come from different streams of money. However, the oversight and the application of that is very coordinated and very integrated for the Air Force.

Senator MURRAY. Admiral.

Admiral ROBINSON. Your question is do we have adequate funds for the Reserve forces, and the answer is yes. Our Reserve forces have adequate funds. We have methods of making sure that our Reserve forces, once they come on active duty, are cared for just as any other active component member would be. As that Reserve component member goes off of active duty, the service member and his or her dependents are covered by TRICARE for approximately a 180-day period.

If there is some limiting mental or physical disease or condition that would make it better for them to stay on active duty, they will remain on active duty. As they transition to the Navy mobilization platforms, NMPS, to the Reserve component, to the NOSCS, which are the local Reserve units back in their home towns or their home cities, they will go back into how we fund them from the Reserve component perspective.

But the key is that we have a number of medical, mental health, and other areas that we track our Reserve forces, that we integrate our Reserve forces, and that we care for our Reserve forces, and we are funded adequately to do that.

Senator MURRAY. General.

General SCHOOMAKER. My comments would echo my colleague's here, that we're well funded. They are separate lines for the Army National Guard, Reserve, and Army Reserve, and the active component. As the Admiral just commented, we're working very hard to

ensure that any mobilized reservists or National Guardsmen while on active duty is kept healthy; if they incur an injury, a combat wound or an illness, that it's fully treated and they're restored to health, including dental health. We made a major effort to restore dental health and hygiene before mobilized reservists and National Guardsmen are put back out into civilian life.

Our warrior transition units are roughly 8,000 in total right now across 36 units and nine States, are made up of both active—of all three elements, all three components, to include National Guard and Reserve. They have full access to those warrior transition units. In fact, about one-third of our warrior transition units warriors in transition are soldiers who are returning from deployments or mobilizations who identified a problem that they have, and they're brought in and they're retained on active duty until we can take care of the problem.

Senator MURRAY. Thank you.

I appreciate a lot of the conversation that's already gone on regarding the increase in suicides and mental health. We have to stay focused on that, and I appreciate all of your earlier comments, so I won't ask you about that.

DEPARTMENT OF DEFENSE FISCAL YEAR 2008 REPORT ON SEXUAL
ASSAULT IN THE MILITARY

But I did want to ask you about another issue, because yesterday DOD made public the fiscal year 2008 report on sexual assault in the military, and it showed an 8 percent increase of reports of sexual assaults. Now, some are arguing that that increase illustrates the fact that victims are now more likely to report those crimes, but I find the trend very disturbing because these crimes are happening at all.

I was part of the Women's Military History Month. A week ago I participated in the Army's panel on sexual harassment, assault prevention and response program, and clearly we all share the goal of eliminating sexual assaults in the military. But until that goal is achieved, I am very interested to hear from all of you about how the medical community is supporting the efforts to care for these victims' physical and psychological wounds in general.

SEXUAL ASSAULT AND RESPONSE PROGRAM

General Schoomaker, I want to start with you.

General SCHOOMAKER. Yes, ma'am. First of all, I would say that the Army leadership and the Army as a whole shares your outrage with sexual assault and any increase in the incidence of these crimes. The Army has taken the approach that this is an assault, not just on the individual woman, but on the ethos of soldiers, of the warrior ethos, that this is not to be tolerated, and is taking a very active proactive role in education and prevention, which is on the shoulders of commanders.

The medical side of this is that we are the response. We provide the examination. We help the woman through the stages of forensic evaluation. We have in all of our facilities, to include, as General Horoho can tell you, in our visit there last week her review of what's taking place in the deployed setting in Iraq.

We have sexual assault response coordinators in each of these facilities, either working with the assets we have in uniform in the uniformed facility, or in a case when I was the installation commander at Fort Dietrich, Maryland, we leveraged expertise of the community of Frederick, Maryland, to assist us through Frederick Memorial Hospital.

So we do the counseling, we do the examination. We help the woman. We go—we help her through the process that she has to go through in order to gather the necessary information about the assault and to investigate the crime. But we also do the follow-on counseling and help coordinate all those services that are necessary for her.

Senator MURRAY. Admiral.

Admiral ROBINSON. Senator Murray, the Navy has the Sexual Assault Victims Intervention Program (SAVI), which was established in 1994. From that program has come an effort to not only educate people as to what is a sexual assault and to bring it to a level of visibility so that we are talking about it in our commands and it becomes a leadership issue on a daily basis, but we've also grown from that to develop a lot of the sexual assault response and prevention programs (SARP) that you've seen and participated in some of the workings with DOD.

From the medical point of view specifically, we help in the training of SAVI. The SAVI Program is also interesting because it takes the victim and puts the victim at the center of the activity. In other words, it makes sure that the victim understands, is affirmed, and actually has the counseling that he or she may need is a critical element in how we run the program.

The second one is to make sure that we then train the forensic experts that need to come along and do the investigations, which is what General Schoemaker was referring to, which is critically important. I would suggest that if those folks are not trained in the military treatment facility that we utilize our civilian forensic police and forensic facilities to make sure that that's done properly.

Then the third point is the education and the prevention, which is something that needs to be done at the beginning of training in the military. This is for men and women, and it goes through some of the very didactic, but very necessary thoughts regarding training, regarding definitions: What is a sexual assault? What does consent mean? What does "yes" mean? What does "no" mean? All of these types of things which men and women have to listen to.

Then the last part is to make sure that after we've done that, that we have a program that's sensitive to the needs of those people who fall victim the sexual assault. That includes psychological and the mental health issues. Additionally, we need to make sure that their families are cared for. Very often men and women are married or they have other family issues, and we have to make sure that that's cared for.

We in the Navy have taken this full-bore and are very sensitive to what you've talked about. We have been working this very hard for a long time.

Senator MURRAY. I appreciate that answer. Thank you.

Admiral ROBINSON. Thank you.

Senator MURRAY. General.

General ROUDEBUSH. Ma'am, I think your approach is the one that I would echo. We know there are increased numbers. Now, whether it's increased reporting or increased incidence, we can certainly discuss. The fact that there is one is too many.

SEXUAL ASSAULT

Senator MURRAY. That's correct.

General ROUDEBUSH. So beginning with that as the going-in position is precisely where the Air Force leadership is attacking this issue. It's a matter of respect. It's a matter of respecting each other. It's a matter of honoring each other's integrity and their person and treating each other as we would want to be treated.

It's an operational issue. It has direct mission impact. It's a cultural issue. It's a family issue, because we strive individually, we execute as a team, but we take care of each other as a family. So this is a family issue.

We come at it in a very structured way. We learned important lessons as we assessed the issues at our Air Force Academy, which we have implemented across the board in terms of a sexual assault program that works to prevent sexual assault, but if it occurs we respond in a very sensitive and coordinated way, to include restricted reporting if the individual prefers, to perhaps help them come forward and get the help that they will need.

We have a sexual assault response coordinator at every installation wired into the wing leadership. Medical is a key part of it. As General Schoomaker pointed out, we have important responsibilities and we are postured and do execute those responsibilities. But really, it's a matter of taking care of each other, respecting each other, and that's precisely where our program is going in terms of training, education, and sensitization, and establishing the fact that it will not be tolerated any way, any shape, any form, anywhere, any time. It's a matter of respect.

Senator MURRAY. Well, I appreciate your comprehensive answers, all three of you, and I hope that's echoed throughout the forces. I think that the worst thing we can do is to not talk about it. This is an issue I'm going to continue to follow. I encourage all of you as well, to make sure that those policies are implemented, so that no one fears coming forward; that we start at the very beginning, so that it's not tolerated; and then if it does occur, that people get services and support and it doesn't become a crime that no one talks about.

So I appreciate all of your answers on that.

Thank you, Mr. Chairman.

Chairman INOUE. Thank you very much.

I have many questions I'd like to submit to you, but one final one if I may. When I was wounded in World War II, from the battlefield to the hospital it took me 9 hours to be evacuated, most of the evacuation carried out by stretcher bearers. Today if I were wounded with the same injury in Baghdad, I suppose I'd be in a hospital within 30 minutes because of helicopters and such.

As a result, a lot of things have happened. For example, in my regiment I don't believe we have one double amputee survivor. Today most double amputees survive. And you have many brain injuries and such, which in World War II very few ever survived.

But equally as important, I spent 22 months in a hospital. Today if I were at Walter Reed I'd be out in 6 months on the street. But when I left Percy Jones in Michigan I knew a little about carpentry, electrical work, plumbing. I knew how to play basketball and swim. I knew how to drive. I knew how to go to a restaurant and order food, dine, dance. I knew how to defend myself. I knew what sex was all about.

COMPREHENSIVE TRANSITION PLANNING

My question is, do you believe that the men and women who are being wounded in this war leave the service as I did, reassured, confident that I can tackle the world?

General SCHOOMAKER. Sir, if I might start the answer from the standpoint of the Army, I think your eloquent description of what you went through and your sharing that with me personally and with my staff in the office visits with you I think really captures the essence of what we're attempting in this comprehensive transition planning. What we observed—and quite frankly, Senator Murray's question about the physical disability evaluation system is really incomplete without addressing one aspect of this system.

We have a system that, its name alone telegraphs what it's about, "physical disability." It's a system that is rooted in the industrial age. It's 50 years old. It's highly bureaucratic and it's contentious and adversarial. We're trying to change the culture of disability and permanent dependency toward one of growth, of rehabilitation, of your experience, without leaving any soldier, family without the necessary safety nets and transition support that they may require in the case of a very severe injury or illness.

So candidly, we've turned away from—the chief of staff of the Army engaged another former wounded soldier, General retired Fred Franks, a veteran of Vietnam, where he lost part of a leg, and went on to retire as a four-star general, as the commander of the 7th Corps in Desert Storm. General Franks has looked at the physical disability evaluation system and has concluded some of the same things that, much of what I've said here today, which is that we need to move the culture away from one that's focused on disability and permanent dependency toward one that is aspirational, that's positive, that builds back a capability and potential in every individual soldier, sailor, airman, marine, coast guardsman, and their family.

We draw upon the experiences of soldiers such as yours. Today I will tell you that with your injury you very likely would remain in our hospitals the same length of time that you were there before, only because it may take that long to fully recover from the wounds that you had and to be fully rehabilitated to do what you needed to do, to include remaining on active duty.

We've turned away from looking at time as a goal or an outcome measure for this system of transition. We look at—we're beginning to look at and assess the goodness of the outcome for the individual soldier and family based upon what their comprehensive transition planning is. So have we reached that point? At this point I would have to say no, sir, we have not. Does every soldier who's wounded grievously or is injured or ill to the degree that you suffered or others have have the confidence and realize the full potential? At this

point I'd have to say no. But we won't be successful in this program of transitioning until we have all of our soldiers aspiring to what you've achieved.

Admiral ROBINSON. Mr. Chairman, I think your question and your comments are very profound, and it makes me think of a movie in 1947 or 1948, "The Best Years of Our Lives," in which a sailor is depicted, Homer, a double amputee coming out of the war, and spending approximately 24 to 30 months in a VA hospital. I think he learned all of the things that you learned. I don't think that they ever stated it as you did here, but he learned so much.

But one of the things that was lacking in that movie and in that whole scenario was the family, because he was scared to death as to how he was going to be received by his mother, his father, his sister, and his girlfriend next door.

The difference now is that we've brought families into the whole rehabilitation issue. The second part is that the length of time—I absolutely agree with General Schoomaker—it's not the time element, although it can be, but the length of time that one takes is not commensurate with the length of time that they stay in hospital. It's the length of time that they have in that rehabilitative process with their families and in that re-engagement in the community and to be a full-up member economically, socially, spiritually in each community everywhere.

The Marine Corps and the Navy take a much different view than the Army, and we think that we need to get them out of that care facility environment and into that rehabilitative environment that's more community-based and that is run by the line element and their leaders, that in fact have those men and women take care of those men and women, and place them back into those original slots that they have come from if possible, or back into their communities, so that they can learn many of the things that you learned at the VA hospital in Michigan.

So I think that what I see as different is that we're no longer hiding people away or putting you in a position where you are, I won't say warehoused, but you are at least put away, and then you reemerge into your communities and into societies wondering if in fact you are going to be fully received back into those areas. We've merged those systems now. When you're wounded, not only are you off the battlefield quicker, not only are you back to a definitive care facility faster because of the great work that we do across Army, Navy, Air Force medicine, but we also make sure that as you get into the definitive care facilities we bring your families and we include them from day one in that care. That also extends as we transition to the VA to make sure that your family and you also have an opportunity to do that.

So it's a completely different model, but I think it is trying to in fact do the same things, and that is to make sure that when you go out you are prepared to re-integrate into your communities and become productive citizens and reestablish yourself for the future.

One last comment. The only thing that you point out and underline dramatically is this: wounds of war which are incurred during battle in a time sphere become the responsibility of the military health system and Department of Veterans Affairs for the lifetime of the member and that member's family. That means that the

wounds of war of 2006, 2007, and 2008 will be the responsibility of all of us sitting here through the out-years in 2040 and 2050. So we have to prepare for that and we have to take care of those individuals.

DOD/VA COORDINATION

Chairman INOUE. Thank you.

General ROUDEBUSH. Sir, you frame both a compelling argument and a compelling challenge. To the extent that we are meeting that today, I offer two quick observations. One, we do not even begin the disability evaluation process until we believe the individual has recuperated and recovered to the full extent, and there is time involved in that and we are willing to invest that time.

As part of that time involved, the wounds that we're seeing are not singular in many cases; they are multiple. An amputee probably has some aspects of traumatic brain injury, some aspects perhaps of post traumatic stress disorder or PTSD. So we have to approach each individual holistically and work those issues through.

Now, as we do that, my two observations: One, we have been I believe wonderfully assisted by our centers of excellence. Walter Reed has done a magnificent job of really centering the care of amputees and the Fisher Foundation in building the Center for the Intrepid in San Antonio really begins to get at a number of those issues you talked about: How do you function within a living environment, an apartment, a house? How do you ambulate? How do you interact?

They have done I think wonderful service to our men and women in assisting with that. And our centers of excellence at Bethesda in terms of head injuries. As we work through this, it really is a joint and collaborative issue.

But I would leave you with one observation. My wife's uncle, a delightful gentleman who now resides in Phoenix, was injured when a German 88 blew up in his bridging squad bridging a river in World War II. He was never the same after that injury in terms of his physical capabilities and had significant issues through life.

But he has been a tremendous force in our family, just as you have been a tremendous force in our Nation, perhaps based on some of those experiences and perhaps based on perspectives coming from a position that is different than others who might be walking down the street.

So I think we need to listen very carefully. We need to honor, we need to respect, and we need to support. I think Admiral Robinson has it just right. This is our challenge, but this is our duty.

Thank you, sir.

Chairman INOUE. Gentlemen, I thank you.

Do you have any questions, Senator?

Senator COCHRAN. Mr. Chairman, I have no questions. This has been an excellent hearing. I thank you.

Chairman INOUE. I thank you very much, gentlemen.

Now the second panel, the important one.

I'd like to welcome back: Rear Admiral Christine Bruzek-Kohler, Director of the Navy Nurse Corps, also Major General Patricia Horoho, Chief of the Army Nurse Corps, and Major General Kimberly Siniscalchi, Chief of the Air Force Nurse Corps.

There are many things I'd like to say at this point, but it's been my pleasure to work with all of you for many years. I'd like to extend my congratulations to Admiral Bruzek-Kohler, who has been selected to serve as the first Nurse Corps officer ever to be in command of Navy Medicine West and Navy Medical Center—San Diego, along with her continued role as Corps Chief of the Navy Nurse Corps. I look forward to listening to your testimony.

So may I call upon the Admiral first.

STATEMENT OF REAR ADMIRAL CHRISTINE M. BRUZEK-KOHLER, DIRECTOR, NAVY NURSE CORPS, UNITED STATES NAVY

Admiral BRUZEK-KOHLER. Good morning, Chairman Inouye, Vice Chairman Cochran, and distinguished members of the subcommittee. As the 21st Director of the Navy Nurse Corps, I am honored to offer my testimony to you and your esteemed colleagues. My written statement has been submitted for the record and today I would like to highlight some of the remarkable work being accomplished by Navy nurses.

The role of Navy nursing is unquestioned in today's Navy. We are at the forefront of all operations, and are accepted as mission essential within Navy medicine in support of the Navy and Marine Corps. Under my leadership, we have developed a model of professional military nursing, the essence of nursing relevance and practice in the Nurse Corps today. Built upon a solid foundation of clinical skills, Navy nursing encompasses clinical specialization via advanced education and certification, operational readiness, and leadership development.

When combined, these yield clinical nursing leaders and future executives for Navy medicine who are business-savvy, operationally experienced, and clinically adept. These nurses can and will impressively lead our people and organization into the future.

As Navy nurses, we are renowned for our steadfast commitment to our patients, and respected for our impressive ability to collaborate with a host of other healthcare disciplines. We are integral in the provision of superb care to America's fighting forces, their families, and the retired community.

While we are a corps of many specialties, I have identified eight which are the critical wartime mission essential specialties: medical/surgical, psychiatric/mental health, critical care, perioperative, emergency/trauma, maternal-child, certified registered nurse anesthetists, and nurse practitioners. Of all of these, medical surgical nursing is the bedrock of our practice. For this reason, it is my expectation that all nurses in the Navy Nurse Corps maintain their clinical relevance in medical surgical nursing, particularly if they function in purely administrative roles.

Our total Navy nursing workforce is composed of over 5,500 active, Reserve, and Federal civilian nurses. Our active component manning is at 96 percent. For the third consecutive year, I am proud to share with you that the Navy Nurse Corps has met its active duty direct accession goal and, as we heard from my Surgeon General, for the first time in over 5 years Navy Nurse Corps gains have outpaced our losses.

In speaking with Nurse Corps officers, I have found that their engagement in local recruiting initiatives from elementary schools

to colleges, opportunities to provide nursing support via disaster relief and humanitarian assistance missions, and pursuit of advanced education via our Duty Under Instruction Program have all contributed to their decision to stay Navy.

While recruiting to the active component remains robust, manning in the Reserves is of concern to me and my Reserve component deputy director, Rear Admiral Cynthia Dullea, who is here with us today. Despite meeting 107 percent of the recruiting goal in 2008, deficits from shortfalls in the 3 previous years have led to challenges in filling junior officer billets. To that end, Reserve component recruiting initiatives will be targeted toward these vacancies.

Last year we saw the release of a new retention initiative, the registered nurse incentive specialty pay (RNISP), uniquely designed to incentivize military nurses to remain at the bedside providing direct patient care. We targeted RNISP eligibility toward our critical wartime undermanned specialties with inventories of less than 90 percent.

This year we were able to expand the RNISP to include psychiatric/mental health nurses and nurse practitioners, women's health nurse practitioners, and certified nurse midwives. In the future I look forward to being able to offer an incentive such as this to all of my nurses practicing within their specialties.

In addition, targeted recruiting efforts for both active and Reserve assets will be focused not only on the acquisition of medical/surgical nurses, but also on fortifying high operational tempo communities of critical care and perioperative nurses and family nurse practitioners.

Recognizing the efforts of those who diligently serve our beneficiaries when Navy nurses deploy, we have recently implemented two innovative programs to expand the professional development of our valued Federal civilian registered nurses. One of these programs offers training in perioperative nursing, augmenting a high-deploying critical nursing specialty and providing service continuity to patients at our military treatment facilities.

The graduate program for Federal civilian registered nurses provides funding for competitively selected candidates to pursue their master of science degree in nursing, adding to our pool of clinical nurse specialists who help mentor and train our junior nurses and hospital corpsmen.

I remain an ardent supporter of the Tri-Service Nursing Research Program (TSNRP), and am duly committed to its sustainment. Navy nurses throughout our military treatment facilities are engaged in research endeavors that promote not only the health and wellness of our servicemembers, but that of their families as well.

Nurses have always been recognized for their expertise in disease prevention, health promotion, and patient education. The melding of Navy nurses' clinical proficiency in the aforementioned areas, and their keen operational focus, ensures success in Navy deployments and encounters in rural isolated villages with impoverished communities.

My nurses are agile, adaptable, capable, and ready to deploy. The Navy's newest nurses graduating from the Officer Development

School in Newport, Rhode Island, eagerly inquire how soon they might deploy after reporting to their very first command. All of my nurses from ensign to captain, because of their clinical relevance, have the potential opportunity to deploy. Today's deployment environments involve locations in harm's way and include practice settings that require the application of clinical expertise in a myriad of areas.

Line-type commanders recognize our nurses' value immediately and champion their assumption of key operational leadership roles previously held by other professional corps and services. Recently returned from deployment as the officer in charge of the combined joint task force cooperative medical assistance team in Afghanistan, a Navy pediatric nurse practitioner offered and I quote "I would be willing to redeploy to an operational setting and endure separation from my family and even sacrifice my safety because of the overwhelming sense of fulfillment that I received in helping empower the women of Afghanistan. Even the smallest changes that we made to increase their education, economic stability, and improve their health will ultimately make a profound difference in their lives and that of their children."

A Navy nurse deployed as an individual augmentee assumed the role of team leader for an embedded training team in Kabul. She served as a mentor to a senior nursing leader of the Afghan National Army and was instrumental in the development of a variety of educational programs for over 80 military nurses and 140 health aides. She shared that she and her team empowered these nurses to become not only teachers, but leaders, and in doing such they became role models to others within their organization.

The maturity, sense of personal fulfillment and confidence of having done something that their peers have not done is readily identifiable among my nurses returning from these unique deployments. From the way they act, talk, and perhaps even the swagger in their walk, one can tell that they have returned with experiences foreign to many, accomplished goals unrealized in the past, and matured in a way years could never have provided. Indeed, they are forever changed.

However, in order to remain resilient we are committed to ensuring they have access to all resources via our Care of the Caregiver Program and can continue to live in a healthy manner as members of our corps.

Last year we celebrated the 100th anniversary of the Navy Nurse Corps. Within the next century we have identified what we must do to continue to prepare our nurses to deploy in any environment to care for America's heroes. We are not the same Nurse Corps of our ancestry. We are moving into assignments and uncharted roles that were never held by Navy nurses before.

For example, within this coming year a Navy nurse will become the first nurse assigned to headquarters, Marine Corps. Are the marines in for a surprise.

We are models of interoperability as we function seamlessly in missions beside our sister services on land, sea, and air. Our skillful integration and translation between services is perhaps best exemplified in this last vignette. At the conclusion of one of my nurses' briefs in Afghanistan during a transfer of authority be-

tween incoming and outgoing personnel, a colleague turned to her and said: "While you might not have learned a lot of Dari while you were here, you can sure speak Army well. Hoo-ah."

PREPARED STATEMENT

I appreciate the opportunity to share some of these accomplishments of my wonderful nurses and I look forward to continuing our work together as I lead Navy nursing. Thank you.

Chairman INOUE. Thank you very much, Admiral.

[The statement follows:]

PREPARED STATEMENT OF REAR ADMIRAL CHRISTINE M. BRUZEK-KOHLER

OPENING REMARKS

Good Morning, Chairman Inouye, Senator Cochran and distinguished members of the subcommittee, I am Rear Admiral Christine Bruzek-Kohler, the 21st Director of the Navy Nurse Corps. Nursing relevance and practice is the Navy Nurse Corps of today. Navy nurses are inculcated into our organization based on the development of a solid clinical skills foundation. It is my expectation that all nurses in the Navy Nurse Corps maintain clinical relevance from the day they are commissioned until the day they retire.

Today I will highlight the accomplishments of a total Navy Nurse Corps force composed of over 5,500 active, reserve and federal civilian nurses who play an invaluable role in Navy Medicine as clinicians, mentors, teachers, and leaders. We are renowned for our steadfast commitment to our patients and respected for our impressive ability to collaborate with other healthcare disciplines in the provision of superb care to America's fighting forces, their families and the retired community.

CLINICAL EXCELLENCE/READINESS AND CLINICAL PROFICIENCY

My goal is to establish a culture of clinical excellence for all nurses in all missions and support a consistent, interoperable standard of nursing practice throughout Navy Medicine, one that easily transitions to interoperability as we work more and more collaboratively with our sister services. We assessed the current state of clinical proficiency in various nursing specialties and developed and delivered standardized nursing core competencies. These competencies transition to all nursing practices throughout Navy Medicine ensuring clinical proficiency. Competencies in the nursing fields of medical/surgical, emergency/trauma, psychiatric/mental health and critical care have been deployed throughout Navy Medicine for almost a year. We are currently developing competencies in the following practice areas: neonatal intensive care, maternal infant, pediatrics, perioperative, multi-service ward, operational nursing, case management, and immunizations.

TRAINING

Today's Navy nurses face unprecedented challenges in caring for America's returning wounded warriors. They are confronted with injury and wound complexities that they have never seen or treated before. From the moment the service members reach our medical facilities until the day they are discharged home with their families, Navy nurses have served as a galvanizing force among a cadre of healthcare professionals in helping the wounded, ill and injured successfully transition to a life post combat.

Navy nursing is spearheading the development and implementation of the Combat Wound Initiative, composed of two programs: Complex Wound and Limb Salvage Clinic (CWLSC); and, Integrated Wound Care Programs at Walter Reed Army Medical Center (WRAMC) and National Naval Medical Center (NNMC). Over the past year, there were approximately 2,000 patient encounters between the two programs. The CWLSC is an advanced, multi-disciplinary wound care center which uses state-of-the-art assessment, testing, and evidence-based treatment for the care of complex wounds in the combat wounded and DOD beneficiary. The CWLSC, a portion of the Combat Wound Initiative, integrates targeted clinical and translational research incorporating advanced technology and treatment, informatics, and tissue banking.

At NNMC, a Navy nurse serves as the Medical Evacuation (MEDEVAC) team leader and expertly orchestrates staffing and equipment decisions which were essential to the safe transportation of over 220 patients on 100 inbound MEDEVAC missions from Andrews Air Force Base to NNMC over the course of the past year.

Our nurse at Fleet Forces Command facilitates a quarterly Tidewater Medical Coordination Council consisting of Type Commander (TYCOM) Medical Leadership and the local Military Treatment Facility's (MTF) executive officer, clinic directors, officers-in-charge, and Operational Forces Medical Liaison Services. The purpose of these meetings is to bring both sides together to ensure fleet Sailors are receiving the care they need in a timely manner and to address any concerns from the MTF perspective.

Navy nursing leaders partnered with the Navy Chaplain Corps to develop and implement the Combat and Operational Stress Control Training for Caregivers course to provide state of the art knowledge to a full range of caregivers in the recognition of deployment related reactions, planning of effective interventions, enhancing caregiver collaboration, and facilitating the use of mental health services for individual service members and military families. Phase one of this training included over 1,500 participants. This year's training is designed specifically to address the deployment experiences of families and is being offered to over 3,000 caregivers at 19 sites worldwide.

JOINT TRAINING AND MUTUAL SUPPORT WITH OTHER UNIFORMED SERVICES AND COUNTRIES

In highlighting perhaps some of the most publicly recognized joint initiatives in which Navy nurses have participated, one must include: the Federal Health-Care Center in North Chicago, the merger of two highly acclaimed Army and Navy medical centers into the Walter Reed National Military Medical Center in the national capital area, and missions aboard the USNS MERCY (T-AH 19) and USS KEARSARGE (LHD 3) and BOXER (LHD 4).

Navy nurses from the Naval Health Clinic Great Lakes diligently work on both local and national level committees with their colleagues from the North Chicago VA Medical Center (NCVAMC) in preparation for the merger of the two facilities to become the first Federal Health-Care Center in 2010.

Collaborating with medical department members from all three armed services and other partners, the Navy nurses at Joint Task Force National Capital Region Medical (JTF CAPMED) are actively developing the master transition plan to close Walter Reed Army Medical Center, develop the first integrated regional military medical command and expand the National Naval Medical Center into the "world-class" Walter Reed National Military Medical Center.

The nurses at NNMCC and WRAMC held two nursing integration kick-off meetings in 2008 to network with their counterparts and strategize plans of actions for the new Walter Reed National Military Medical Center-Bethesda (WRNMMC). These meetings were well attended and the nurses are committed to ensuring the success of this venture.

USNS MERCY (T-AH 19) departed San Diego, California in May 2008 with a 1,000-person joint, multi-national, Military Sealift Command Civilian Mariner, U.S. Public Health Service and non-governmental organization (NGO) team to conduct Pacific Partnership 2008 (PP08). The core nursing team consisted of 40 Navy and five Air Force Nurse Corps Officers. Additional nursing augmentation was provided by 84 colleagues from the Navy Reserves. Supplemental support was available via military nurses from partner nations Australia, Canada, Indonesia, New Zealand, and the Republic of the Philippines, as well as NGO nurses from International Relief Teams, Project HOPE and Operation Smile.

USNS MERCY's Casualty Receiving (CASREC) nursing team processed over 1,900 patients, of which more than 1,500 were admitted. A total of 1,369 shipboard surgeries were performed, with Navy nurses involved in every phase of the operative process. During Pacific Partnership 08 (PP08), the ship's reduced operating status (ROS) perioperative nurse was selected as Medical Advance Team Leader in Chuuk, Federated States of Micronesia (FSM). In this role, he identified prime locations and established logistical support for medical clinics ashore, facilitating the treatment of 12,000 patients in 8 days. In addition, he worked with local and U.S. public health and government officials to contain a deadly outbreak of multi-drug resistant tuberculosis. He coordinated efforts between the FSM President's Office, Chuuk Governor's Office, U.S. Ambassador, and Centers for Disease Control, ensuring that 100 percent of suspected cases were contacted, screened and prescribed appropriate treatment.

Navy nurses also served aboard both USS KEARSARGE (LHD 3) and USS BOXER (LHD 4) as they delivered relief services and provided medical care to over 71,000 patients from eight Latin American and Caribbean nations during Operation Continuing Promise.

COLLABORATION WITH CIVILIAN MEDICAL INSTITUTIONS/COMMUNITIES/OUTREACH

We will soon mark the 1 year anniversary of the merger of the Navy Nurse Corps Anesthesia Program with the Uniformed Services University (USU) Graduate School of Nursing anesthesia program. The inaugural class of this federal nurse anesthesia program will graduate in 2010.

At the Expeditionary Medical Facility, Camp Lemonier, Djibouti City, Djibouti, Africa, our nurses are members of a small surgical team who provide teaching assistance in areas such as laparoscopic surgery, regional anesthesia, and sterilization at Africa Peltier General Hospital, Djibouti via a request the hospital made to the U.S. Embassy and the United States Agency for International Development. While the surgeons focus on teaching laparoscopic techniques, the nurses foster collegial relationships and offer classes on improved sterilization techniques, laparoscopic equipment care and use, epidural catheter placement for surgery and pain control, and caudal anesthesia in pediatrics.

In collaboration with a Chief Naval Operations (CNO) working group, Bureau of Navy Medicine and Surgery (BUMED) and Navy Medicine East (NME), a plan has been approved to redesign a building into a 28 bed long term care facility to house aging Special Category Residents (formerly Cuban Exiles) who receive assisted living or total nursing care on the wards of the Naval Hospital Guantanamo Bay, Cuba. At times, these patients can absorb 50 percent of the naval hospital bed capacity. Navy nurses are working with civilian facilities in the Portsmouth, VA area to obtain requisite training as they move forward with this one of a kind Navy facility. Staffing will consist of a combination of military, civilian and foreign national home health aides.

Senior nursing leaders from Naval Hospital Camp Lejeune join their civilian peers from Onslow County, North Carolina in monthly meetings as partners in the East Carolina Center for Nursing Leadership Robert Wood Johnson Grant for "Partners for Rural Nursing." The grant's objective is to mobilize rural nurse leaders' ability to partner, evaluate, and develop interventions to solve local nursing workforce issues and create healthier communities in eastern North Carolina. The long-term goal of this project is the creation of a permanent county nurse association that will recruit more nurses to the county and increase the overall educational level of the nurses and educators.

DEPLOYMENTS/OPERATIONAL MISSIONS

Coinciding with the advancement of their professional practice is the simultaneous development of our nurses as naval officers who are operationally ready to meet any call to deploy in any mission at a moment's notice. As such, the Navy Nurse Corps continues to be a mission critical asset in supporting Navy Medicine deployments.

From January 2008 to January 2009, 441 Navy nurses have deployed—Active (257) and Reserve (184). They served admirably in operational roles in Kuwait, Iraq, Djibouti, Afghanistan, Bahrain, Qatar, Indonesia, Thailand, Southeast Asia, Pakistan, Guantanamo Bay, Cuba, Germany, and aboard both hospital ships, USNS MERCY and USNS COMFORT, and on grey-hulls such as USS KEARSARGE and USS BOXER. They are part of Provincial Reconstruction Teams (PRTs), Expeditionary Medical Facilities (EMFs) and Flight Surgery Teams. They participate in the Sea Trial of the Expeditionary Resuscitative Surgery System (ERSS) and perform patient movement via Enroute Care at or near combat operations.

Nurses in our Reserve Component (RC) have made significant contributions to operational missions over the past year with Medical Readiness Training Exercises (MEDRETE) in Peru, Suriname, Honduras, and Trinidad and Tobago. Additionally, there are currently 101 RC nurses mobilized to Landstuhl Regional Medical Center, Germany.

In Afghanistan, Navy Nurse Corps officers have assumed the role of Officer in Charge (OIC) of the Combined Joint Task Force-101/82 joint Cooperative Medical Assistance (CMA) team. Previously held by Army Medical Officers, this position was most recently held by a senior Navy Nurse Corps officer who was also a pediatric nurse practitioner. The mission of the Cooperative Medical Assistance (CMA) team is to plan, coordinate and execute medical and veterinarian humanitarian civil-military operations across the combined joint operations area of Afghanistan. Under Navy Nurse Corps leadership, the CMA team has mentored and taught over 250 Afghanistan physicians, midwives, and nurses in the past year. Additionally, the CMA team provided direct medical and veterinarian care in over 200 rural villages in hostile areas along the Pakistan border and in Southern Afghanistan. In an effort to fight the overwhelming infant and childhood mortality rates in Afghanistan, the first Navy Nurse OIC of the CMA team authored a U.S. CENTCOM's Humanitarian

Assistance, Disaster Recovery and Mine Resistance grant to fund three projects in Regional Command—East, Afghanistan. Currently in the execution phase, this \$50,000 grant will provide medical intellectual capacity building to Afghan healthcare providers in some of the most remote, hostile and rural areas of Afghanistan; directly impacting the lives of Afghan infants and children.

We continue to monitor our deploying specialties within the Navy Nurse Corps. While earlier deployments were more aligned with our critical wartime specialties of certified registered nurse anesthetists, advanced practice nurses, psychiatric/mental health, medical/surgical, critical care, perioperative and emergency/trauma nurses; we have noted the communities of pediatrics and women's health are also being engaged for roles on Provincial Reconstruction Team and Humanitarian Assistance missions.

CARE OF THE CAREGIVER

Navy Medicine leaders have recognized that operational and occupational demands impact the quality of patient care and caregiver quality of life. Consequences of untreated cumulative stress can result in medical errors, physical illness, decreased job satisfaction, and emotional difficulties. The Navy Medicine Caregiver Occupational Stress Control (OSC) Program, sometimes called Care for the Caregiver, has three fundamental principles; early recognition, peer intervention, and connection with services as needed. There are many strategies and resources that are being developed to assist Navy Medicine caregivers with the operational, occupational, and compassion demands of the care we provide to Sailors, Marines, and their families. One of the main strategies for addressing the psychological health needs of our caregivers is to develop occupational stress training and intervention teams for our major treatment centers.

THE WARFIGHTER, THEIR FAMILIES AND THE CONTINUUM OF CARE

Navy nursing encompasses the care of warriors and their families in countless interactions in locations at home and abroad.

THE WARFIGHTER

A Nurse Corps officer at Naval Medical Clinic Patuxent River plays an invaluable role in their local ongoing Individual Augmentee (IA) pre-deployment program by ensuring that all medical records are pre-screened as soon as the active duty member receives IA orders. This early screening affords sufficient time to explore potential deployment medical disqualifiers and provides the squadron's time to identify an alternate in the event the augmentee is deemed non-deployable.

The Department head of the Occupational Health Clinic at Naval Hospital Camp Lejeune, a civilian nurse, along with the local military audiologist, identified that a significant number of 17–27 year old active duty members were being fitted bilaterally for hearing aids after returning from war. This led to the inception of a new initiative called "Warriors Silent Wound" hearing conservation program addressing readiness, education and hearing protection for the Camp Lejeune based Marines.

The Medical Rehabilitation Platoon (MRP) Case Manager position at Camp Geiger, Branch Medical Clinic, Naval Hospital Camp Lejeune is held by a Nurse Corps officer who coordinates the care for over 80 Marines, ensuring that every patient in MRP receives accurate and timely healthcare reducing the time spent in MRP and increasing the amount of Marines returning to training and eventually to the Fleet Marine Force.

A Navy Nurse Corps officer currently runs a Warrior Return Unit at Expeditionary Medical Facility Kuwait for injured/ill warfighters. Located on Camp Arifjan and initiated in 2005, its mission is to maximize the quality of life for coalition forces during the period of convalescence, expediting return to duty or transfer to definitive care. The Warrior Return Unit (WRU or "Roo") is a three-building complex, 136 bed capacity, dedicated solely for the purpose of providing a place for service members to live, relax, and heal from their illnesses, injuries, or surgical procedures and, ideally, return to duty. The WRU also provides an entertainment lounge, DSN lines for business or morale calls, gaming stations, and internet access, as well as 24 hour staffing, with a nurse on site and dedicated transportation to and from the hospital. Approximately 80 percent of all wounded warriors do indeed return to duty from the WRU and almost three-quarters of them return directly back to Iraq. Those who cannot return to duty are medically evacuated to Landstuhl Regional Medical Center or back to Military Treatment Facilities in the continental United States (INCONUS).

At NNMCC, the Casualty Affairs Office consists of a Navy nurse and a Hospital Corpsman. They meet with every combat casualty and their family in order to in-

sure all of their needs are met; allowing them to focus solely on the healing process. The Casualty Affairs Office employs the ethos "their feet never hit the ground"; referring to the fact that no request goes unnoticed for the 110 patients and families they have met in the past year.

GROWING MENTAL HEALTH REQUIREMENTS/Psychiatric and Mental Health Nursing

The Navy Nurse Corps has met the Surgeon General's guidance for psychiatric/mental health nurse practitioners (PMHNPs). We have programmed 18 PMHNPs through the Future Years Defense Plan (FYDP) to meet currently projected growth of the Marine Corps, Blue in Support of Green (BISOG) and the development of the Operational Stress Control and Readiness (OSCAR) teams.

Our psychiatric nursing leaders are critical members of the multidisciplinary team writing the maritime doctrine for combat and operational stress control for the U.S. Marine Corps and U.S. Navy. A Nurse Corps officer has been appointed as the first Coordinator for the Line owned and led Navy Operational Stress Control (OSC) program. Secretary of the Navy and the Chief of Naval Operations have directed a Navy stress control program to specifically (1) define doctrine and organization; (2) address mental health stigma; (3) define curricula, develop training and exercise requirements for pre-deployment and post-deployment of all personnel; and (4) build resilient Sailors and families. Operational Stress Control is leader-focused actions and responsibilities to promote resilience and psychological health in Sailors, commands, and families exposed to the stress of routine or wartime military operations in all environments, whether at sea, in the air, or on the ground, and in both operational and supporting roles. The goals of OSC are to create an environment where Sailors, commands, and families can thrive in the midst of stressful operations.

EMF Kuwait mental health nurses are providing outreach training for more than 200 personnel at various units on anger/stress management and improving communication skills. One Navy mental health nurse practitioner from EMF Kuwait forward deployed for a 3 week period into Iraq, backfilling a transitioning Army psychiatrist billet providing mental health services throughout Iraq.

A newly hired civilian mental health nurse practitioner at Naval Medical Clinic Quantico's Deployment Health Center assumes the continuation of care for patients who require more than eight encounters at the center, providing continuity of care and bolstering patient/provider rapport.

The newly opened Post Deployment Health Center in Groton, CT, part of the DOD initiative to respond to mental health needs of returning veterans, provides individual and group counseling services to active-duty members from all branches of the military from throughout the Northeast. Prior to the opening of this clinic, patients would have had to travel as far as Bethesda, MD for this same type of care milieu.

The first active duty PMHNP assigned to the Deployment Health Center at Naval Hospital Twentynine Palms, closely follows 80 of the clinic's 225 active cases.

She provides initial psychological evaluations, medication screenings, and shares valuable information with colleagues, general medical providers, and commands on recommendations about service members' fitness for deployments. She also serves as the clinic spokesperson and is closely involved with the family advocacy program and substance abuse counseling center, ensuring that information is provided to dependents as well as the active duty member. This PMHNP candidly offers that this has been her "most fulfilling job in the Navy".

THE FAMILY

Last year, several Outside Continental United States (OCONUS) and geographically remote Continental United States (CONUS) military treatment facilities (MTFs) received fourteen junior Nurse Corps officers who attended our new 4 week Perinatal Pipeline training program at Naval Medical Center San Diego, Naval Medical Center Portsmouth, and National Naval Medical Center. The program was designed to train medical-surgical nurses who expect to work in labor and delivery or the newborn nursery at OCONUS or geographically isolated facilities. This program has increased the nurses' knowledge, confidence, and subsequently the quality of care and patient safety for these commands. Along this same theme, Naval Hospital Okinawa hosted the Western Pacific Perinatal Orientation Education Program/ Neonatal Orientation Education Program (PEOP/NEOP) training for 40 staff from Okinawa, Yokosuka and Guam; yielding over \$160,000 in training cost savings to the aforementioned facilities.

At Naval Medical Center Portsmouth, a pediatric nurse practitioner with a passion for early detection and prevention of child abuse identified an opportunity to improve communication between her facility and outside protective services. With

the help of the hospital's web designer, and 2 years of diligent dedication, she created an online algorithm and reporting system nicknamed C.A.N.A.R.E.E.S., which stands for Consolidated Abuse, Neglect, Assault, Reporting Electronic Entry System. This program, presently piloted in the facility's Emergency Department, links to the Composite Health Care System and provides consolidation of all demographic data and patient encounter information into required report formats. This new reporting mechanism alleviates illegible handwriting and streamlines reporting agency notifications. It also serves as a data repository that may be used in quality assurance and statistical analysis to target training or educational offerings as indicated by set thresholds.

THE WOUNDED WARRIOR CARE CONTINUUM

Wounded Warrior Case Management is quite different now than it was 2 years ago. Many of the more severely injured are cared for at one of Navy's large medical centers or at one of four VA Polytrauma centers closest to the service members' homes.

The Wounded Warrior Berthing, also known as the "Patriot Inn," at Naval Medical Center Portsmouth continues to provide temporary lodging, monitoring, and close proximity to necessary recovery resources for active duty ambulatory patients in varying stages of their health continuum.

At Naval Hospital Camp Pendleton, active duty Nurse Corps officers work directly with the Wounded Warrior Battalion to manage the wounded warrior cases, providing a comprehensive plan of care throughout the healthcare system. The patients assigned to this battalion are primarily ambulatory patients who are receiving continuing care for orthopedic or mental health issues.

The Naval Medical Center San Diego's (NMCS D) Comprehensive Combat and Complex Casualty Care (C⁵) Program (recipient of the 2008 Military Health System Healing Environment Award) recently expanded its Primary Care division to include two government service nurse practitioners (one former Army veteran), one physician assistant, two civilian health technicians (one former Independent Duty Corpsman) and two Hospital Corpsmen. This group provides continuity in medical management of these service members; ensuring primary health care needs are addressed during their rehabilitation. Recently, the C⁵ lead nurse case manager received the prestigious San Diego Regional Chamber of Commerce Military Honoree Award for 2008.

NMCS D is also home to an Army Warrior Transition Unit (WTU), the only one of its kind in a non-Army treatment facility. This staff is comprised of a provider, nurse case managers, licensed clinical social worker and administrative support staff who oversee the medical and non-medical case management of soldiers transferred here for rehabilitation services.

GRADUATE EDUCATION

Continuation of a Navy nurse's professional development via advanced educational preparation, specialization, and pursuit of national certification is necessary to better serve our beneficiary population, as well as strengthen their respective communities of practice and prepare the officer for promotion. Our training plan this year included the opportunity for 70 officers to seek advanced degrees. We focused on fortifying our critical wartime inventories of certified registered nurse anesthetist, psychiatric/mental health clinical nurse specialist and nurse practitioner, and critical care and medical/surgical nursing.

NURSING RESEARCH

I remain an ardent supporter of the Tri-Service Nursing Research Program (TSNRP) and am duly committed to its sustainment. Navy nurses assigned throughout our MTFs are engaged in research endeavors that promote not only the health and wellness of our warriors, but that of their families too. My senior nurse executives have identified creative ways to pique junior officer's interest in research activities.

At Naval Hospital Oak Harbor, a Navy nurse has a research study entitled, "Breastfeeding Rates among Active Duty Military Women across the First Year Postpartum" with Independence University. A novice researcher, she is being mentored in her first endeavor by the Senior Nurse Executive at her command and a nurse researcher assigned to Naval Medical Center San Diego.

The Senior Nurse Executive at NMCS D has implemented the Senior Nurse Executive Nursing Fellowship Awards. This competitive award recognizes two junior nurses/Clinical Nurse Specialist (CNS)/Nurse Researcher team dyads and provides them the resources and man-hours to conduct a year long research proposal. Both

junior nurse/CNS dyads attend research methods or evidence based nursing courses to assist them in the development and implementation of their studies. The results have been quite impressive.

One dyad completed a pilot study to determine whether an educational intervention could be designed to reduce Compassion Fatigue in the healthcare providers caring for C⁵ (Comprehensive Combat and Complex Casualty Care) patients. The findings demonstrated that the study participants' scores in compassion satisfaction increased and burnout scores decreased after viewing the Compassion Fatigue intervention. The dyad presented a poster at the Karen Rieder Federal Nursing Poster Presentation titled Compassion Fatigue in C⁵ Staff Caring for Wounded Warriors. A study-designed educational intervention was developed from this study and was implemented to 43 staff caring for Wounded Warriors, awarding 172 contact hours.

The second dyad was awarded the Research Award for Best Evidence Based Practice from the Zeta Mu Chapter of the Sigma Theta Tau organization. The proposed project was titled "Implementation of An Open Crib Phototherapy Policy: Adaptation of an Evidence Based Guideline Project". The dyad's work has resulted in the local implementation of the guideline to include standardizing physician order sets and staff education. One member of the dyad has been invited as a presenter to the annual National Association of Neonatal Nurses (NANN) Research Summit.

EDUCATIONAL PARTNERSHIPS

Navy nurses, at our hospitals in the United States and abroad, passionately support the professional development of America's future nursing workforce by serving as preceptors and mentors for a myriad of colleges and universities.

Because of the vast array of clinical specialties available at our medical centers at Bethesda, Portsmouth and San Diego, they have multiple Memoranda of Understandings (MOUs) with surrounding colleges and universities to provide clinical rotations for nurses in various programs from licensed practical/vocational nursing, baccalaureate, and graduate degrees which include nurse practitioner and certified nurse anesthetist tracks.

Not to be outdone, nurses at our smaller facilities such as Naval Hospital Twentynine Palms, Beaufort, Bremerton, Charleston, Cherry Point, and Guam coordinate training opportunities with local hospitals in resuscitative medicine, medical/surgical and obstetrical nursing and serves as clinical rotation sites for local colleges.

During Pacific Partnership 2008, Navy nurses from USNS Mercy (T-AH 19) served as subject matter experts to nurses in five host nation hospitals on topics such as basic and advanced life support, critical care and pediatric nursing, isolation techniques, and blood transfusion therapy. In total, at least 200 hours of classroom instruction were presented to over 1,000 students.

Navy nurses deployed to the Expeditionary Medical Facility, Camp Lemonier, Djibouti City, Djibouti, collaborated with the Djibouti School of Nursing to review nursing fundamentals and discuss nursing issues important to Djibouti nurses as part of an English language skills enhancement class.

NURSING PUBLICATIONS

Navy nurses are accomplished authors whose works encompass all specialty areas of nursing and have appeared in nationally recognized publications as follows: *Advances in Neonatal Care*, *AORN Journal*, *Critical Care Nursing Clinics of North America*, *Journal of Advanced Nursing*, *Journal of Forensic Nursing*, *Journal of Pediatric Healthcare*, *Journal of Psychosocial Nursing*, *Journal of Trauma Nursing*, *Nursing Administration Quarterly*, *Military Medicine* and *Viewpoint*.

PRODUCTIVITY INITIATIVES

At Naval Hospital Lemoore, Nurse Corps officers in the Primary Care Clinics spearhead various clinical functions such as telephone triage, dysuria protocol, and newborn infant well-baby visits saving approximately 80 appointments per month for higher level providers and yielding improved access to care for patients.

A Navy nurse midwife who serves as both the Director of Health Services and the Department Head of Obstetrics and Gynecology at Naval Hospital Charleston was also the second highest provider in patient care encounters compared to peers who practice at the same facility.

A women's health nurse practitioner at Naval Hospital Beaufort is solely responsible for the women's health visits of 4,000 female recruits. Other nurse-run clinics at this facility medically in-processed 22,234 Marine recruits and administered over 154,000 immunizations.

Recruitment

Today's Navy Nurse Corps (AC) is 95.7 percent manned with 2,780 nurses serving around the globe. We expect to make Navy Nursing's recruiting goal for 2009 within the next few months and this will be the third year in a row that we have achieved this important milestone. Our recruiting efforts this year have outpaced those of 1 year ago. Our nurses' diligent work and engagement with local recruiting initiatives have certainly contributed to these positive results.

The top three programs that we should credit to this accomplishment include the increases in Nurse Accession Bonus (NAB) now at \$20,000 for a 3 year commitment and \$30,000 for a 4 year commitment; the Health Professions Loan Repayment Program (HPLRP) amounts up to \$40,000 for a 2 year consecutive obligated service and the Nurse Candidate Program (NCP), offered only at non-Reserve Officer Training Corps (ROTC) Colleges and Universities, which is tailored for students who need financial assistance while in school. NCP students receive a \$10,000 sign on bonus and \$1,000 monthly stipend. Other factors contributing to our recruiting success include the location of our duty stations and the opportunity to participate in humanitarian missions.

Last year we created a Recruiting and Retention cell at the Bureau of Medicine and Surgery (BUMED) with a representative identified from each professional corps. These officers serve as liaisons between Navy Recruiting Command (NRC), Naval Recruiting Districts (NRD), Recruiters and the MTFs and travel to and or provide corps/demographic specific personnel to attend local/national nursing conferences, or collegiate recruiting events. In collaboration with the Office of Diversity, our Nurse Corps recruitment liaison officer coordinates with MTFs to have ethnically diverse Navy personnel attend national conferences and recruiting events targeting ethnic minorities. This has allowed us to broaden our reach and recruit at national nursing conferences that we never before attended.

The Nurse Corps Recruitment liaison officer works with a speaker's bureau comprised of junior and mid-grade Nurse Corps officers throughout the country who reach out to students at colleges, high schools, middle and elementary schools. We recognize that the youth of America are contemplating career choices at a much younger age than ever before. Over the course of the past year, we have tailored more of our recruiting initiatives to engage this younger population. Our nurses realize that each time they speak of the Navy Nurse Corps they serve as an ambassador for our corps and the nursing profession too.

Since returning from Pacific Partnership 08, USNS MERCY (T-AH 19) has collaborated with the Navy Recruiting Region WEST Medical Programs Officer to host two recruiting tours. In total, 40 potential Navy Medicine candidates visited the ship. Both the USNS MERCY and USNS COMFORT are invaluable tools in the Nurse Corps recruiting arsenal. Shipboard tours are frequently requested by faculty and students alike.

Naval Hospital Camp Lejeune, in conjunction with Navy Recruiting District Raleigh, NC, has initiated a joint effort to recruit Nurse Corps officers from the Eastern North Carolina area. In supporting the Nurse Corps recruiting and retention initiatives, Naval Hospital Camp Lejeune has created the Nurse Recruiting and Retention team. The team, co-chaired by two senior Nurse Corps officers works closely with the medical department recruiter to coordinate visits to area universities to speak with students regarding benefits of joining the Navy Nurse Corps. The team members also provide real life testimony to the students and provide insight into the personal experiences of team members. The team also serves as points of contact for interested students and is available to entertain questions or concerns via email or telephone. This mentoring provides yet another example of why the Navy Nurse Corps is so attractive to the students. The team encourages and sponsors visits to the Naval Hospital and gives them the opportunity to see Navy nurses, civilian nurses and hospital corpsmen working together to provide world class care. The team also supports the Recruiting District by coordinating and conducting the personal interviews required as a portion of the Nurse Corps application process. Since its inception in September 2008, this effort has led to 25 potential Navy Nurse Corps officers accessioned into the recruiting pipeline for NRD Raleigh, North Carolina.

A senior Nurse Corps officer at Fleet Forces Command serves as a liaison between the fleet shore-based Sailors and the MTF. She and other officers around the world have become mentors to the Medical Enlisted Commissioning Program (MECP) applicants. The MECP program is a robust enlisted commissioning track that selects and educates 55 Sailors and Marines to become Navy nurses each year.

Last year the Navy Nurse Corps reserve component (RC) met 107 percent of their recruiting goal. Over 56 percent of the goal was comprised of NAVETS (nurses coming to the RC from active duty) and the remainder were direct accessions to the Navy Reserve. Success in recruiting NAVETS is related to the initiation of an affiliation bonus of \$10,000 and the policy that guarantees NAVETS coming into the RC will be granted a 2 year deferral from deployment. Recruiting initiatives targeting direct accessions offer entry grade credit for advanced education and work experience among the critical wartime specialties of psychiatric/mental health, emergency room, and perioperative nursing. The RC recruiting shortfall in fiscal year 2005, 2006, and 2007, coupled with the national nursing shortage and increased competition with both the civilian and federal employment healthcare sectors, had a detrimental impact on filling RC Nurse Corps billets with junior officers.

Today, the Reserve Component is 1,189 nurses strong and manned at 89.1 percent. The last 4 years of missed reserve nurse recruiting goal has impacted critical wartime specialties in nurse anesthesia (59 percent), perioperative (73 percent), and critical care nursing (80 percent) and subsequently contributed to their 145 unfilled billets.

Retention

Recruiting is just one-half of the story for Navy nursing. Retention tells the other important half. Last year was the first time in the past 5 years that the Navy Nurse Corps' losses nearly matched our gains. In talking to Nurse Corps officers around the globe, I have found that we are implementing creative mentoring and leadership programs designed to get the information to the officers before they make a career decision to leave the Navy.

Naval Hospital Bremerton's senior Nurse Corps officers conduct quarterly Career Development Boards for officers at various decision points in their career (first tour, promotion eligible, considering Duty under Instruction, considering release from active duty). Nurse Corps officers also participate with medical programs recruiters in Seattle and Denver to provide tours, interview candidates, answer questions, join them for local college career days and attend conferences.

Naval Medical Center San Diego established a Nursing Retention and Recruitment Committee. There was an exceptional response to the request for volunteers. Members of the committee include a wide cross-section of nurses throughout the command, to include active duty (all ranks), government service, contract, reservists and recruiters. The committee meets monthly and reports to the Senior Nurse Executive.

The Registered Nurse Incentive Special Pay (RNISP) program was a new retention initiative begun in February 2008 and included critical care and perioperative nursing, pediatric nurse practitioners, and family nurse practitioners. We have noted improvements in overall manning percentages for the aforementioned nursing communities. The RNISP program is designed to encourage military nurses to continue their education, acquire national specialty certification and remain at the bedside providing direct care to wounded Sailors, Marines, Soldiers, Airmen and Coastguardsmen. This year the RNISP program was expanded to include four additional communities: psychiatric/mental health nurses, psychiatric/mental health nurse practitioners, women's health nurse practitioners, and certified nurse midwives. Certified Registered Nurse Anesthetists (CRNAs) have been long standing recipients of the ISP, and they are currently manned at 99 percent.

Continuing deployment cycles and Individual Augmentee roles continue to pose a challenge to retaining nurses in our service, yet our fiscal year 2008 Nurse Corps continuation rate after 5 years is 68 percent, up slightly from last year. We continue to work issues to retain mid-grade officers at the 4 to 9 year point of commissioned service.

The Operational Stress Control program has an indirect impact on the shape of the force, military retention, and Navy nurses. By developing and providing education and training opportunities throughout the career of the nurse, "from Accessions through Flag Officer", OSC will build resilience and increase effective responses to stress and stress-related injuries and illnesses. The art of nursing service members and their families through illness to wellness is frequently stressful. Strengthening the resilience of Navy nurses will assure they are better equipped to meet the day-to-day challenges of both naval service and their profession.

Our total Navy nursing workforce, active and reserve components plus federal civilian registered nurses, is over 5,500 strong. Recognizing the invaluable contribution that our civilian nursing workforce provides in regards to continuity of care and access to services for our patients, especially during our deployments, we have established two new education programs exclusively for them.

The Perioperative Nurse Training Program is a competitive program in which federal civilian registered nurses may apply to attend the fully funded 12 week Navy perioperative nurse training program. Upon completion of the training, the federal civilian nurse incurs a 1 year continued service agreement and works in the perioperative setting.

The Graduate Program for Federal Civilian Registered Nurses provides funding for competitively selected federal civilian registered nurses to pursue their Master of Science in Nursing. Selected candidates agree to work a compressed work schedule during the time they are in graduate school and incur a 2 year continued service agreement. Our hope is that these new programs will not only serve to retain our current civilian nurses but also entice new nurses to consider entry into federal service with Navy Medicine.

COMMUNICATION

The overarching goal for communications is to optimize the dissemination of official information that is easily accessible, current, and understood. This has been accomplished via monthly "Nurse Corps Live" video tele-conferences on a variety of topics relevant to our nursing communities, electronic publication of "Nurse Corps News" newsletter and the Nurse Corps webpage.

MENTORSHIP

The development of our career planning guide will serve as a mentoring tool for all nurses. Core nursing mentors will be identified at each command to facilitate mentorship to officers, enlisted members, civilians and students alike.

Naval Hospital Bremerton received the University of Washington School of Nursing's Preceptor of the Year Award for 2008 in recognition of the 14 years that the hospital's clinicians, administration and staff have provided exceptional learning opportunities for all nurse practitioner and certified nurse midwife students.

The Director for Nursing Services at Naval Hospital Oak Harbor is working with local Career Counselors to schedule "board interviews" for Naval Air Station Whidbey Island sailors interested in pursuing careers in Navy nursing via one of our commissioning pipeline programs.

The "Nurse Corps Roundtable" is a forum used by nurses from Naval Health Clinic, Great Lakes with local Navy Reserve Officer Training Corps nursing students, to facilitate their understanding of "life as a Navy nurse." Topics include deployment opportunities, duty stations and assignments, and the unique camaraderie that military nurses enjoy.

The division officer of the inpatient mental health unit at Naval Hospital Camp Lejeune has sparked the interest in mental health nursing in five junior nurses. He established a new mental health nurse teaching program, developed 15 individual lectures and provided individual mentoring over a 9 month period to five new military nurses who will be given an opportunity to gain the mental health subspecialty code. He is helping to change the stigma of mental health nursing to positively reflect a fulfilling and respected form of nursing practice to our young staff.

LEADERSHIP

It is the amalgamation of our officers' clinical skills foundation, education, specialization and operational experiences that develop the highest caliber leaders for Navy Medicine today and in the future.

CDR Michele Kane's work on "Genotoxic and Cytotoxic Carcinogenesis Effects of Embedded Weapons Grade Fragments of Tungsten Alloy Shrapnel" was recognized with awards for best in research by the Association of Military Surgeons of the United States, the Uniformed Services University for Health Sciences top award for Research Excellence from the Graduate School of Nursing, and the prestigious Uniformed Service University Board of Regents Scholastic Award for Research (an award normally reserved for medical students).

The Bureau of Medicine and Surgery (BUMED) has partnered with the Chief of Naval Personnel (CNP, N1) to temporarily assign a Nurse Corps officer to establish the position of Navy Operational Stress Control Coordinator (OSC). CAPT Lori Laraway is responsible for OSC program development and execution across the entire Navy Enterprise and chair's the OSC Governance Board. Networking, reducing duplication of effort and formulating effective lines of communication have resulted in a Navy-wide program that addresses the needs of line leaders, Sailors and families.

Previous team leaders for all Embedded Training Teams (ETT) have been Medical Service Corps Captains, until CDR Judith Bellas was selected as team Lead for Kabul ETT. CDR Bellas was recently recognized for her contributions during this

year long deployment with the Bronze Star Medal. LCDR Keith B. Hoekman, a nurse practitioner, was awarded the Bronze Star Medal while deployed as the Medical Officer for the Provincial Reconstruction Team (PRT) in Ghazni Province, Afghanistan. Additionally, he received a Certificate of Recognition from the Ministry of Health, Kabul, Afghanistan for his community outreach initiatives on Women's Health that ultimately reached 30,000 villagers.

LT Tony Wade from Naval Hospital Camp Pendleton recently received a Navy Commendation Medal with "Combat V" as he was directly responsible for saving Marine lives under austere and dangerous conditions in Afghan in support of the 2/7 Marines. When his trauma bay was hit by a mortar round and the surgeon was incapacitated, LT Wade and two corpsmen continued the trauma treatment for a Marine who had sustained life threatening injuries, their efforts directly resulted in saving his life.

CLOSING REMARKS

Chairman Inouye, Senator Cochran, distinguished members of the committee, thank you again for providing me this opportunity to share with you the remarkable accomplishments of Navy nurses as we partner with our colleagues in meeting Navy Medicine's mission. I look forward to continuing our work together over the course of the next year.

Chairman INOUE. General Horoho.

STATEMENT OF MAJOR GENERAL PATRICIA D. HOROHO, CHIEF, ARMY NURSE CORPS, UNITED STATES ARMY

General HOROHO. Chairman Inouye, Vice Chairman Cochran, and distinguished members of the subcommittee: It's an honor and truly a privilege to be able to speak before you today on behalf of over 40,000 officers, enlisted and civilians of the Army Nurse Corps. It has been your continued unwavering support that has enabled Army nurses as part of the larger Army medical department team to provide the highest quality of care to all those that are entrusted to our care.

Army nurses are a corps of seasoned combat veterans that are highly trained, highly skilled and highly committed. We deploy an average of 400 to 500 Army nurses a year, so we've moved well beyond lessons learned to lessons applied.

For example, Army nurses in Iraq, in the Iraq theater, who fly medevac with critically wounded patients have developed a set of tactics, techniques, and protocols over the last 7 years that we've codified into an intra-theater flight nursing program, a program we'll sustain for the future. Our flight nurses have decreased the incidence of hypothermia for the patients that fly in the back of these medevacs from 20 percent to less than 5 percent.

On my recent trip to Iraq I was absolutely humbled to see the level of care that is provided to not only our servicemembers, but to coalition forces, contractors, and the detainee populations that we serve. I was told how at the Ibn Sina Hospital that's in Baghdad Army nurses moved patients into the hallways away from the glass windows when the hospital was under mortar fire and covered them with their own bodies so that they were protected. These patients were wounded Iraqis.

Army nurses are partnering with Iraqi nurse leaders to help them begin to rebuild their profession of nursing. The nurses of the 345th Reserve Component Combat Support Hospital established training programs on the fundamentals of emergency nursing and subsequently are providing medical diplomacy at the most crucial interface, between two nursing cultures.

During this year of the noncommissioned officer, I want to share a story with you about a particular NCO that established an automatic external defibrillator (AED) program for the entire Iraq theater. This NCO recognized the need to have emergency cardiac care equipment in theater that provides our soldiers with the same standard that we offer in the United States. He created the theater-wide policy that mandated easy accessibility to AEDs. This NCO had an opportunity to put into action his own policy when he encountered a sergeant major that was in cardiac arrest. He quickly responded with the AED and saved the sergeant major's life.

I'd like to introduce to you Sergeant Major Brewer, who's in the audience today. He is my sergeant major—could you please stand. He is my Corps sergeant major and is returning from his second deployment in Iraq. We could not be more proud to have him as part of our team.

Furthermore, I would like to highlight the nurse case management program at Camp Cropper and Camp Bucca detainee camps in Iraq, built and managed by our NCO licensed practical nurse Army nursing team members. To date the program has provided specialized medicine care for over 1,000 Iraq detainees requiring case management care for diabetes, hypertension, and medical management. I am proud of the Army nursing team as they shape the face of deployed nursing.

We are sustaining best practice strategies to provide standardized nursing care from the combat zone to an Army medical treatment facility, through the warrior transition unit, all the way into our VA hospitals.

The Army Nurse Corps is undergoing the most massive transformation that I've seen in my 25 years on active duty. We're using the first-ever Army Nurse Corps campaign plan to operationalize a Nurse Corps that consistently achieves performance excellence, fosters innovation, builds knowledge and capabilities, and ensures organizational credibility and sustainability. We are piloting an inpatient and an ambulatory nursing care delivery system that uses best practices and evidence-based data to optimize patient outcomes.

These pilots are already showing improvements in staff satisfaction and interdisciplinary communication. We're also incorporating data from the military nursing outcomes database study, as well as evidence-based research from the Tri-Service Nursing Research Program, funded studies of which we are extremely grateful for your support into our practice, to reduce the incidence of care indicators like patient falls and medication errors.

We are standardizing nursing care delivery systems to decrease patient variance and improve patient outcomes. For example, nurses at Walter Reed Army Medical Center collaborated with our VA nurse colleagues to develop the first-ever evidence-based nursing transfer note that is electronically exported to a web-based portal, allowing staff to bidirectionally exchange critical patient information in real time. This effort significantly optimized Army and VA nurses' ability to tell the patient's story via the electronic medical record.

We are harnessing the power, the pride and the passion of Army nurses to transform into a corps that by 2012 is leading a culture

of performance innovation and improvement across the entire continuum of care. This is unequalled in the delivery of nursing excellence. We will use the vision to embrace the past, engage the present, and envision the future.

PREPARED STATEMENT

On behalf of the entire Army Nurse Corps team serving worldwide, I'd like to thank each of you for your unwavering support, and I look forward to continuing to work with you. Thank you.

Chairman INOUE. Thank you very much, General.
[The statement follows:]

PREPARED STATEMENT OF MAJOR GENERAL PATRICIA D. HOROHO

Mr. Chairman and distinguished members of the committee, it is an honor and great privilege to speak before you today on behalf of the nearly 10,000 officers, enlisted, and civilians of the Army Nurse Corps. It has been your continued unwavering support that has enabled Army Nurses, as part of the larger Army Medical Department (AMEDD) team, to provide the highest quality care for our service members, families and all those entrusted to our care.

As I assumed the responsibility of this great Corps, I realized that 4 years as Corps Chief is not much time. Although we cannot eliminate or predict the uncertainty of the future, we are developing a framework to harness every opportunity and manage ambiguity. To this end we have embarked on a campaign plan that will transform the Army Nurse Corps over the next 4 years and prioritize a 15 year blueprint for a vibrant, relevant, and flexible Army Nurse Corps.

The Army Nurse Corps Campaign Plan, which was developed at the first ever Army Nurse Corps Strategic Planning Conference in October, is built around four strategic objectives: Leader Development and Sustainment, Warrior Nursing Care Delivery, Evidence-Based Management and Clinical Practice, and Optimization of Human Capital. It reflects our mission and is aligned with the Department of Defense's, Army's and Army Medical Department's goals and objectives. At the heart of the Campaign Plan is what I call, "the triad of nursing." This triad consists of the active and reserve component officers, Non-commissioned Officers (NCOs), and civilians that make up our great Corps and are vital for ensuring that those who wear and have worn the cloth of our Nation and the families that support them, receive timely, compassionate and high quality care.

Execution of the Campaign Plan will be driven by courage to do the right thing, ingenuity to meet the rapidly evolving battle and medical demands of the 21st century, and constant compassion for those we serve and those with whom we serve.

LEADER DEVELOPMENT AND SUSTAINMENT

The success and sustainability of our campaign plan rests squarely on the shoulders of Army nurse leaders. Accordingly, my first priority is to develop full-spectrum Army nurse leaders through a leader succession plan.

We are creating the next generation of inspiring leaders who are agile in responding to the Army's evolving needs and who have the capabilities and capacities that are required for current and future missions. These leaders will be adaptive to any conditions-based mission, able to provide a persuasive voice at key echelons of influence in the AMEDD, and provide innovative doctrine to blueprint the future of the Army Nurse Corps.

Over half of our Corps has deployed in support of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF). We are leveraging the experience of these returning Army nurse combat veterans to incorporate and codify their lessons learned into our leader training programs and nurse care delivery systems.

Army nurse leaders adapted readily to the intra-theater flight nursing mission in Iraq. Their lessons learned on over 300 missions transporting approximately 500 critically injured patients have been codified into a flight nursing program that includes standardized clinical practice guidelines and patient outcome metrics. On-board flight nurses decreased the incidence of patient hypothermia during transports from 20 percent to less than 5 percent. One of our Army nurses transported a Soldier who sustained severe burns over 70 percent of his body from a forward surgical team to the 86th Combat Support Hospital (CSH). Last month we heard from the Soldier's wife and three children that he is undergoing full rehabilitation and has made a remarkable recovery. Thanks to our adaptive Army nurse leaders,

we are working to develop the role of the intra-theater flight nurse and codify it with the additional skill identifier of N5.

Army Nurse Leaders are currently commanding two Combat Stress Control (CSC) units in Baghdad and Mosul. In Mosul, the 528th Medical Detachment (Combat Stress Control) is commanded by MAJ Chris Weidlich, a psychiatric nurse practitioner, leading a 46-member team with an area support mission to mentally sustain coalition forces at nine Forward Operating Bases (FOBs) and surrounding areas within the Multi-National Division North (MND-N). Since their deployment from Fort Bragg, North Carolina in March 2008, MAJ Weidlich and his team have led the way in improving far forward mental health assessment and treatment, evaluating approximately 10,000 Soldiers to date. Additionally, they are bringing far forward the latest on mental health resiliency training and assessment of mild Traumatic Brain Injury to over 50 Joint Security Stations (JSS), Military Transition Teams (MiTTs) and Combat Outposts (COP); all while maintaining a 99.4 percent return to duty rate.

Army Nurse Corps leaders are also furthering medical diplomacy aims by continuing to expand Iraqi nurse training partnerships. Nurses with the 345th CSH are helping to re-build Iraq's medical infrastructure by instituting a train-the-trainer emergency nursing program. The first iteration of the "Emergency Nursing Train-the-Trainer Program" concluded its first "Partnership in Patient Care," program with thirteen Iraqi nursing students—four females and nine males. This 6-week course is building sustainability into the Iraqi nurse education program. In the future, these nurses will teach other Iraqi nurses of Salah ad Din Province thereby expanding the expertise of the Iraqi nursing professionals.

345th CSH nurses worked with the local Provisional Reconstruction Team (PRT) to develop, build, and furnish the Iraqi Nursing Skills Learning Lab in the International Business Iraqi Zone (IBIZ). This skills learning lab is known as the "Salah Ad Din Victory Health Care Training Center" and provides classroom space and a separate skills training lab for the Iraqi nursing program and other Iraqi healthcare programs. The training center also facilitates a safe training and collaboration site for both Iraqi medical and nursing professionals and allows our combat support hospital nurses to share knowledge as consultants. This sharing provides the Iraqis with the most up to date nursing education processes that are positively impacting the state of healthcare in Iraq.

While the experiences of deployment produce exceptional nurse leaders, I am concerned about the resiliency and ability of our returning nurses to reintegrate with their families and return to hospital positions where they continue to provide care to wounded warriors—in some cases, the same warriors they helped to resuscitate in theater. Their compassion fatigue is evident when I talk with them, many of whom are on their third and fourth deployments. We are developing retention strategies that allow these caregivers to "take a knee" so they can re-charge their mental, physical, and emotional energies in order to re-engage as Army Nurses.

With respect to leadership training, we currently have 255 new Army Nurse Officers at nine of our Regional Medical Centers receiving individual training and mentoring that emphasizes development and acquisition of clinical deployment skill sets and competencies to bridge the gap between academic preparation and the clinical practice environment. We are leveraging courses such as the Emergency Pediatric Nurse Course and the Trauma Nurse Competency Course (TNCC) to ensure every one of our nurse officers has the right capabilities to deploy in support of any condition-based mission.

Trauma nursing is our core competency. Subsequently we are focusing on emergency and critical care skills required in a disaster or deployed setting to increase the quality of care we provide. To accomplish this, I have directed a top-to-bottom review of all Army Nurse Leader development training programs. This strategic objective emphasizes development of clinical, leader, and deployment skill sets and competencies for Army Nurse Corps personnel as they progress in rank and clinical experience.

Last, we are looking at redesigning the entire leadership lifecycle, from staff nurse through Deputy Commander for Nursing. Our goal is to create a robust program that ensures nurses have the required skill sets and experiences at each step in their careers. This means ensuring that there are appropriate training opportunities phased throughout the lifecycle and a clearly defined job description and associated competencies for each role. In addition, we are looking at a set of potential structural changes to the lifecycle aimed at increasing flexibility and creating new career pathways for our diverse set of nurses.

Warrior Nursing Care Delivery

My second strategic objective is to get back to the basics of delivering high-touch, supported by high tech, nursing care. We are designing nursing care delivery systems that wrap nursing capability around The Surgeon General's goals and mission. I'd like to talk about five special initiatives we are pursuing in support of providing model nursing care.

In our first initiative, we completed a comprehensive evaluation of best practice civilian and federal nurse care delivery systems in order to distill elements into standardized Army Nurse in-patient and ambulatory care delivery systems. For example, nurses at Walter Reed Army Medical Center (WRAMC) are using several patient discharge management tools that are decreasing length of stay, re-admission rates, and improving patient satisfaction. Nurses at Tripler Army Medical Center (TAMC) implemented Relationship Based Care (RBC), a nursing care delivery model, in 2007. This model emphasizes patient and family centered care, a primary-within-team nursing model, as well as well-defined scopes of practice for all nurses. Since implementation of RBC, nursing at TAMC has experienced an increase in both nursing and patient satisfaction, as well as a decrease in civilian nursing staff turnover.

We incorporated several of these perspectives into the professional nursing pilot at Blanchfield Army Community Hospital at Fort Campbell, Kentucky. This pilot combines and capitalizes on care delivery advancements made at individual military treatment facilities (MTFs) and has three aims: develop nursing practice standards across all MTFs, improve patient satisfaction and outcomes, and increase staff satisfaction and retention. These aims will be reached through combining increased nurse autonomy and skill building with structured interdisciplinary communication and patient-centered and evidence-based care. The pilot is still underway, but after only a few weeks there has been a marked improvement in how the nursing staff communicates with their patients and physicians, as well as how they feel their input is valued by hospital leadership. We are implementing results of the pilot across all of Blanchfield's wards, and ultimately to all MTFs, to decrease practice variance and improve inpatient nursing care delivery.

Our second initiative focused on ambulatory nurse role redefinition and developing appropriate, functional nurse staffing models. The Army Nurse Corps ambulatory workgroup developed a primary care staffing model that changes the role of the Registered Nurse (RN) from a reactive, episodic-focused role to a proactive, population-focused role. In September 2008 we initiated a year-long pilot study at Moncrief Army Hospital focusing on nurse role redefinition, staffing mix, and professional nursing care. We were able to develop a model by which patients with unmet medical requirements were targeted by a specific nurse assigned to their case ("My Nurse"), who would then work with the provider to review the patient appointment list prior to appointments and identify tests, labs, x-rays, etc. that a patient may need ahead of time. This not only provides a new role for the clinic nurses, but also expedites the ambulatory care process for both the patient and medical team. Outcome measures for the pilot include improving patient and staff satisfaction, decreased urgent care and emergency rooms visits, improved compliance with Health Effectiveness Data and Information Set (HEDISR), Clinical Practice Guidelines (CPGs) and other health metrics, increased percentage of time seeing their assigned provider and increasing access to care. Initial feedback from patients is that they love the personal attention they receive from "My Nurse" and appreciate having someone they can call with questions or having someone call them to remind them of appointments or follow-up with them with educational materials, etc. The role of "My Nurse" is a paradigm shift in outpatient nursing and will require education and training of all outpatient nurses if identified as a best practice.

Our next initiative is focused on the case management role, both in theatre and stateside. Nurse Case Managers (NCM) remain an integral member of the triad of care in Warrior Transition Units since their inception in April 2007. In addition to ensuring high patient satisfaction with care, NCMs have continued to facilitate other patient care improvements. In October 2008 the Warrior Care Transition Office, in coordination with the AMEDD Center and School conducted the first resident Warrior Transition Unit Cadre Orientation Course. The course is 2 weeks in duration with a 3 day track focused specifically on case management standards and skills. To date, the course has been conducted three times, with over 100 NCMs completing the training. NCMs continue to assist in decreasing the average length of stay for Warriors in Transition.

In the Iraqi Theater of Operations, we established a NCM role aimed at caring for patients who have chronic, complex care requirements. The theater NCM's role includes monitoring average length of stay according to diagnosis, as well as by classification of personnel, such as United States, detainee, contractor, Iraqi Army, Iraqi

Police, and civilian. In addition, the NCM helps facilitate the discharge plan with the physician and the inter-disciplinary team. COL Ron Keene was instrumental in establishing the first Nurse Case Management Program for detainees in a wartime theater with huge patient successes in the management of hypertension, wound care, and even chronic diabetic care management. The dedication of the Army Nurses and physicians focusing on the total care of our chronically ill detainees can be demonstrated by the decrease in admissions for the management of chronic illness by 38 percent. This success has actually enabled reductions in bed requirements at the 115th CSH. Close management of chronically ill detainees follows strict adherence to the DOD/VA Clinical Practice Guidelines (CPG's) which are incorporated in daily detainee healthcare practices. With education and routine contacts, a growing percentage of the detainees have come into greater compliance and medication levels are either reduced or ultimately removed. Detainees are offered customer satisfaction surveys in Arabic and have reflected above average satisfaction with their care—results that rival the best customer satisfaction scores in our premiere Army hospitals. Additionally, Army NCMs insure that Iraqi Imams visit our patients weekly to provide religious support and guidance as a part of their health recovery.

Another Warrior Care initiative focuses on developing a practice model that incorporates the use of our outstanding enlisted corps. At the Bucca detainee hospital, one of the senior NCO Licensed Practical Nurses (LPN's) oversees the 68W (medic) primary care screening of over 14,000 detainees. The LPN ensures that each 68W has completed the Algorithm Directed Troop Medical Care (ADTMC) screening classes and demonstrates a sound understanding of the screening process, documentation and medication administration within the guidelines of the ADTMC scope of practice.

The NCO LPN's are also integral to the new Iraqi nurse partnership. For the first time, an Operating Room and Intensive Care Unit team (includes one NCO/LPN) from one of our small hospitals at Al Kut will be going to one of the local hospitals to help train the Iraqi staff in operating room and post operative care procedures. The RN and LPN team provided hands on demonstrations to the Iraqi nurses helping them improve their clinical practice skills. At the Jamenson Combat Medical Training Center (JCMTTC) in Iraqi, 1SG Eric Woodrum volunteered to work in the Air Force hospital Emergency Room to observe Point of Injury care. Those lessons learned were taken back and used at the Jamenson schoolhouse to improve Combat Lifesaver training and patient outcomes.

Last, we are working with other Federal Nursing Service Chiefs to align initiatives and develop compatible practice models. For example, through strong Congressional support, the Army Nurse Corps, along with the Federal Nursing Services Chiefs, started the Psychiatric Nurse Practitioner program at the Uniformed Services University (USU). This program, while providing traditional curriculum, adds clinical training addressing some of the military unique behavioral health challenges and leadership building. The program will pay dividends in the future as we address the behavioral health challenges faced by our Service Members in theaters of operation and after they return home.

We are also furthering cooperation through the Tri-Service Nursing Research Program (TSNRP) to improve trauma and deployment competencies for nurses in all military services. One example of that cooperation is the publication of the evidence-based "Battlefield and Disaster Nursing Pocket Guide". This guide provides a portable, up-to-date, evidence-based source of information for nurses on the battlefield and those responding to disaster or humanitarian situations. TSNRP has provided 7,500 copies of this handbook to both deployed and non-deployed nurses throughout the services. We are also leveraging TSNRP funded research to improve Warrior care delivery. For example: Pain and Sleep Disturbance in Soldiers with Extremity Trauma; Impact of Body Armor on Physical Work Performance; A Comparison of PTSD and Mild TBI in Burned Military Service Members, and Sleep Disturbances in U.S. Army Soldiers after Deployment to Afghanistan and Iraq.

Evidence-based Management and Clinical Practice

Evidence-based management aims to merge best practices in both clinical care and business practice to produce outstanding outcomes. These goals are supported by blending data measurement and analysis and system redesign into the daily performances of all our nurses.

In support of our aims, we are working to train the next generation of nurse researchers by leveraging TSNRP and Army Nurse Corps researchers both stateside and in deployed environments. Developing the expertise of military nursing researchers is paramount to TSNRP's mission, as evidenced through its courses in grant writing, publishing, and advanced research methods. In addition, it is one of

the only research programs to require its investigators to attend a post-award workshop where they are given information pertaining to the regulations of managing a grant. TSNRP provides a very high level of oversight of its awardees, ensuring the research is conducted with the highest rigor. We in the Army Nurse Corps appreciate their dedication to developing nurse researchers of the highest caliber.

Besides training top-notch researchers, we are working to focus our research on improved systems and clinical outcomes, preferably with real-world recommendations that can be easily applied at the patient's bedside. One such research project was the Military Nursing Outcomes Database (MilNOD). Facilitated and implemented as an Army Nurse Corps initiative, MilNOD is the most comprehensive and historical effort of its kind in the United States. Analysis of data from 115,000 nurse shifts established significant associations between nurse staffing and patient outcomes, such as the occurrence of falls and medication administration errors as well as nurse needle stick injuries. Participating MilNOD MTFs decreased patient fall rates by 69 percent, medication administration errors rates by 50 percent and hospital acquired pressure ulcer prevalence by 62 percent, all of which were statistically significant reductions. Participating MTFs also experienced considerable cost avoidance (falls—\$900,000/year; medication errors—\$230,000/year; pressure ulcers—\$450,000/year). As one of the most seminal studies linking nurse care practices with patient outcomes, the study results will be published in an upcoming edition of *The New England Journal of Medicine*.

Army nursing has made a special effort to support research at all levels, as young researchers of today will become leaders in their fields in years to come. To that end, the nurses of Tripler Army Medical Center (TAMC) started a funded Evidence Based Practice (EBP) research project in 2007 that is now a part of their nursing practice culture. This fiscal year, nurses throughout the facility initiated seven new Evidence Based Practice Projects (EBPP). These studies ranged from improving infection control in ICU settings, to patient satisfaction for pregnant patients on bedrest, to improving communication between nurses on different hospital units. The range of topics studied demonstrates an impressive effort to improve systems while bringing research back to the bedside. I thank our officers, ranging from Lieutenants to Lieutenant Colonels, for their dedication to improving nursing care at every level.

As we move forward with this strategic objective, we are making a special effort to use the power of technology to develop and disseminate best practices throughout the Corps. Integrating technology into best practices has started with ensuring patient safety through proper patient handoffs. Research has demonstrated that smooth, seamless patient handoffs are vital to safe patient care. Nurses at WRAMC in collaboration with the Department of Veterans Affairs (VA) Poly-Trauma Centers have developed a researched based nurse's note that is sent directly to the VA electronic medical record. This nurse-driven project resulted in increased nursing knowledge of patient conditions which enabled the receiving facility to put in place safety mechanisms to improve patient care and diminish risk of patient injury or poor outcomes. This project is one of the first times we have been able to transmit patient data directly from one electronic medical record into another agency's electronic record.

Without dissemination of our collective knowledge, our advances would mean little to the Corps at large. Thus, we have developed a new ANC interactive website that allows for real time exchange of ideas and best practices, and improves communication across the Corps. We are also making a special effort to link research cells at different MTFs to promote Corps-wide collaboration.

Optimization of Human Capital

My final objective, Optimization of Human Capital, is the strategic and coherent approach to the management of our organization's most-valued assets, our people, who individually and collectively contribute to the achievement of the ANC objectives. Investing in human capital requires special attention to the recruitment and retention of our civilian and active duty nurses, while trying to influence the profession of nursing through academic partnerships.

Recognizing that the majority of our organization is our civilian workforce, we are continuing to break down the barriers in recruiting and retaining stellar civilian healthcare professionals. We are committed to streamlining and reducing the gates in the personnel hiring process by setting accountability timelines compared to local averages. To maintain an influence on civilian nursing recruitment and retention, we have placed an ANC Officer in the Civilian Personnel Office in order to partner and facilitate progress on these issues.

We have also started focusing on retention efforts for our civilian workforce. We have been very successful with our civilian nurse loan repayment program which

was initially implemented 2 years ago. For fiscal year 2009, 169 of 186 applicants participated in the nurse loan repayment program. As a result of this program, we will be required to expend fewer resources to recruit and train new nurses. In addition, we have consulted with VA nursing to leverage their concept of clinical ladders for our civilian workforce. We are evaluating how best to use this program to promote clinical leadership opportunities for civilians and establish glide paths for their success in order to retain them on our team.

Turning our focus toward active duty and reserve officers, the Army Nurse Corps has been very successful in recruiting this past year. For the first time in 7 years, United States Army Recruiting Command exceeded mission for both the active and reserve components. Regular Army Nurse Recruiters produced 297 nurse recruits against a mission of 205 and the Army Reserve Recruiters produced 528 nurse recruits against a mission of 362. In addition, the Reserve Officer Training Corps (ROTC) experienced great success this past year and expects the same for the next 2 years. In fiscal year 2008 ROTC was responsible for producing 173 Army Nurses against a mission of 225. This was the highest number of accessions in 10 years. In fiscal year 2009, ROTC predicts a production of 221 Army Nurses against a mission of 225. And in fiscal year 2010, ROTC is projected to exceed their mission of 225 by over 20 nurses (for a total number of 249).

One of our most crucial retention tools is developing a track that will take our ANC officers through a lifecycle that focuses on clinical competencies even at the senior level. We are also evaluating our current force structure to ensure we have the right mix of skills and rank, and that we are assigning based upon capabilities. In addition, one of our most successful programs for retention has been the implementation of Incentive Specialty Pay (ISP) and Critical Skills Retention Bonus (CSRB). To date, 962 (44 percent) Army Nurse Corps officers have taken either the ISP or CSRB.

Looking forward to the recruitment and retention of all our nurses—civilian, active, and reserve—we decided to optimize one of our most important retention strategies: responsive listening to our nurses. Accordingly, I directed dissemination of a Corps-wide organizational survey that asked our nurses what's on their minds. As a result, more than 2,000 Army Nurses identified areas for improvement in Corps performance. A key opportunity area identified is to increase junior officer involvement in setting the Nurse Corps' strategic agenda. In response, we incorporated the voices of Army Nursing's future leaders at our annual "CJ Reddy Junior Leadership Conference", held this past October in Washington, DC. This Conference brings together the most promising junior officers in the Corps for an intensive session built around learning, skill building, and networking. When asked what motivates them each day as a member of the Nurse Corps, these officers answered with five consistent themes: (1) the mission of serving their country and caring for Soldiers; (2) the diversity of opportunities the Corps provides; (3) the Corps' camaraderie and sense of family; (4) the available leadership training; and (5) the abundant rewards and benefits. We believe these five attributes create an unparalleled environment to practice nursing and, under my Human Capital imperative, plan to reinforce each of them to become an even stronger recruiting power.

Last, we feel that to truly optimize our human capital strategy, we must pursue academic partnerships. The professional staff at several MTF's have worked diligently to support the clinical experiences of advanced practice nursing students. In addition, in cooperation with all the Federal Corps Chiefs, we are supporting Uniformed Services University in their active engagement of academic partnerships with nursing leadership organizations and schools of nursing to maintain an active and influential role in the future of nursing in America. Additionally, we are leveraging our retired AN officers, who are professors at a variety of civilian institutions, to serve as nursing role models, mentors, subject matter experts and ambassadors for the ANC.

CONCLUSION

Since becoming Corps Chief last July, I see clearly how to harness the power, passion, and pride of the Army nurses to develop the Army Nurse Corps priorities in support of the national health agenda and our Nation at war. Over the next 2 years we will execute the Army Nurse Corps campaign plan and use it to codify best practices for sustainability. The third year we will begin campaign planning again to ensure we remain relevant and well-postured as a force multiplier for military medicine.

I envision an Army Nurse Corps in 2012 that serves as a model for the Nation, leading a culture of performance improvement across the entire continuum of care that is without peer in the delivery of nursing care excellence—where we measure

our successes in the improvement of healthcare outcomes for patients and families, retention and satisfaction of our staff, and improved stewardship of our precious resources.

I am establishing a culture that evaluates every aspect of traditional practice to ensure that we achieve the desired improvements in our patient's emotional, physical and spiritual well-being. The Army Nurse Corps will be known for the ingenuity and innovation applied to the most challenging opportunities, so characteristic of Army Nurses for the past 233 years. Constant compassion will continue to fuel us, driven by the courage to always do the right thing.

I would like to leave you with a story about one of our nurse heroes. In 2007 we tragically lost a Command Sergeant Major to an apparent heart attack at Camp Victory, Iraq. This incident sparked an NCO to develop and implement a theater-wide Automated External Defibrillator (AED) program. The magnitude of this program was so important that GEN Petraus endorsed the NCO's plan. Just several weeks after the NCO initiated this program, he was confronted with a Soldier who was in cardiac arrest. He used an AED to resuscitate the Soldier, who was treated and sent home to his family. The NCO I've been discussing is SGM Richard Brewer, the LPN I brought into my Corps Chief office to enable my concept of the Army Nurse Triad that includes our LPN colleagues.

I am so proud of our Corps and look forward to speaking with you next year about the progress we've made on our campaign plan. I'll close with our new motto that is the way ahead for the Army Nurse Corps: "Embrace the Past"—leverage our lessons learned; "Engage the Present"—achieve performance excellence; and "Envision the Future"—ensure organizational credibility and sustainability. Thank you.

Chairman INOUE. Now General Siniscalchi.

STATEMENT OF MAJOR GENERAL KIMBERLY A. SINISCALCHI, ASSISTANT AIR FORCE SURGEON GENERAL FOR NURSING SERVICES, UNITED STATES AIR FORCE

General SINISCALCHI. Mr. Chairman, Mr. Vice Chairman, and distinguished members of the subcommittee: It is an honor to come before you today to represent the United States Air Force Nurse Corps. I am proud to serve alongside Brigadier General Catherine Lutz, Air National Guard; Colonel Ann Manley, Air Force Reserves, and Chief Master Sergeant Joseph Potts, Aerospace Medical Service Career Field Manager. Together we represent a robust total nursing force supporting our Air Force chief of staff's top priorities.

I would like to thank you for your continued support of our Air Force Nurse Corps. Thank you for providing the funding for our accession bonuses, health professions loan repayment and scholarship programs, and our first-ever incentive special pay program. We anticipate the incentive special pay program will positively impact our retention.

Last year 55 percent of our nurses who separated had less than 20 years of military service and 61 percent of those were our young lieutenants and captains. We are diligently working with our Air Force personnelist and our Surgeon General to address and correct this issue. Although the incentive special pay will help retain our nurses, retention may further extend timing and reduce promotion opportunity until we correct our grade structure.

Our enlisted medical technicians, in partnering with A1, secured funds for their critically manned specialties. Our independent duty medical technicians are heavily tasked with deployments and manned at only 72 percent. I along with Chief Potts am eager to see this initiative's impact.

Through your sustained support of our Tri-Service Nursing Research Program, we recently published the "Battlefield and Disaster Nursing Pocket Guide". This guide is utilized throughout our deployed locations.

We continue to conduct state-of-the-art research and validate evidence-based practice. Colonel Margaret McNeil, a Ph.D. Air Force nurse, is in Iraq as a member of the newly deployed combat casualty care research team, exploring advancements in medical therapies for our wounded warriors.

The key to successful peacetime and wartime nursing operations is a robust nursing force, a force with the right numbers, right experience, and the right skills. Recruiting experienced nurses continues to be a significant challenge. Although we reached 93 percent of our accession goal, 56 percent were novice nurses, validating the importance of our nurse transition program. I am pleased to inform you that our first civilian program at the University Hospital in Cincinnati graduated their first class on December 12.

Our enlisted nurse commissioning program grows Air Force nurses from our highly skilled enlisted force. We had our first two graduates this year and we'll have 19 next year.

Air Force nursing is an essential operational capability. In 2008 our total nursing force represented 34 percent of all deployments within our medical service. Our medics deployed to 44 locations in 16 countries. Our total nursing force is well-trained, highly skilled and committed to saving lives. We are called to a mission of caring for America's sons and daughters, and here are a few examples.

Captain James Stewart, a nurse anesthetist, deployed to Joint Base Bilad, received a message from his friend and co-worker Captain Dave Johnson informing him that his son, Army Staff Sergeant Curtis Johnson, had been wounded and was en route to Bilad. Captain Stewart met Curtis on arrival and recalls: "He arrived stable, so we placed a call to his dad so they could talk before we started surgery. Curtis's spirits were high and I was amazed at how well he was taking the loss of both his lower legs." Following surgery, Curtis was aeromedically evacuated to Brooke Army Medical Center and is now undergoing rehabilitation at the Center for the Intrepid.

The commemorative Air Force recognized Captain Bryce Vandersway with the Dolly Vincent Flight Nurse Award for aeromedical evacuation support to 651 sick and injured warriors, including two K9 military working dogs injured by improvised explosive devices (IEDs).

As the trauma nurse coordinator at Joint Base Bilad, Captain Darcy Mortimer recalls her most precious memory: "We simultaneously received five casualties from an IED blast. When the emergency department settled down, the hospital held a ceremony for the soldier we could not save. Two of his wounded comrades requested that their litters be placed so they could salute their fallen comrade and friend."

In the midst of death and heartache, there are stories of hope and joy. This past October, our staff delivered the first Afghan baby born at Craig Joint Theater Hospital, Bagram. The mother sustained massive injuries as a result of an explosion, but with the help of the Air Force medical team she delivered a healthy baby girl. According to Technical Sergeant Jeremiah Diaz: "We had 15 minutes to come up with something. We used a warming blanket

and made a little tent with coat hangers and an egg crate mattress. The newborn's presence was a ray of light."

Mr. Chairman and distinguished members of the subcommittee, thank you for allowing me to share today just a few of the many achievements of Air Force nursing. As our Air Force Medical Service celebrates its 60th anniversary, we recognize and we stand on the shoulders of giants. I commit to you we will continue to meet every challenge with professionalism, pride, and patriotism that have served as the foundation for our success. Our warriors and their families deserve the best possible care we can provide.

It is the nurse's touch, compassion, and care that often wills a patient to recovery or softens the transition from life to death. There has never been a better time to be a member of this great Air Force nursing team.

PREPARED STATEMENT

So on behalf of the men and women of nursing services, thank you for your tremendous advocacy and continued support.

[The statement follows:]

PREPARED STATEMENT OF MAJOR GENERAL KIMBERLY A. SINISCALCHI

Mister Chairman and distinguished members of the Committee, it is an honor and pleasure to come before you to represent Air Force Nursing Services and our Total Nursing Force (TNF). The TNF encompasses officer and enlisted nursing personnel of the Active Duty, Air National Guard (ANG), and Air Force Reserve Command (AFRC) components. The past year has brought many leadership changes to our TNF, and I look forward to serving alongside my senior advisors, Brigadier General Catherine Lutz of the ANG and Colonel Anne Manly of the AFRC. We are glad to have Colonel Manly back after her recent deployment to Joint Base Balad, Iraq where she served as Chief Nurse of the 332nd Expeditionary Medical Group, and saw first-hand the incredible work our nurses and technicians perform daily. Together we will continue to strengthen our TNF by supporting our nursing service personnel as they continue to meet ever-increasing commitments, deployments, and challenges with professionalism and distinction; and supporting the Chief of Staff of the Air Force's (CSAF) top priorities to (1) Reinvigorate the Air Force Nuclear Enterprise, (2) Partner with the Joint and Coalition Team to Win Today's Fight, (3) Develop and Care for Airmen and their Families, (4) Modernize our Aging Air and Space Inventories, Organizations and Training, and (5) Acquisition Excellence.

ORGANIZATIONAL STRUCTURE

On September 29, 2008, the Air Force Medical Service (AFMS) achieved the CSAF's directive to transform and consolidate headquarters management functions by establishing the Air Force Medical Operations Agency (AFMOA) in San Antonio, Texas. This single support agency was established through an Air Force Smart Operations 21 initiative, and is led by a cadre of experts from across the Air Force Medical Service. They provide premier support and guidance to nine Major Commands (MAJCOM), 75 Military Treatment Facilities (MTF), and 39,000 medics to reduce levels of oversight at the MAJCOM levels. Brigadier General Mark A. Ediger assumed command of AFMOA on September 29, 2008.

This past summer, the AFMOA Surgeon General Nursing (SGN) directorate, led by Colonel Leslie Claravall, in conjunction with the MAJCOM SGNs, successfully transitioned the clinical oversight as well as education and training functions from United States Air Force Europe Command and Air Mobility Command. In May, June, and July of this year, the AFMOA SGN will take on the clinical oversight of Air Education and Training Command, Air Force Material Command and Air Force Special Operations Command respectively. In 2010, the remaining MAJCOM SGN functions will transition to AFMOA. As a result, areas such as education and training, provision of nursing care, inpatient and outpatient, and nursing service resourcing will be centrally located. In short, AFMOA is progressing to a centralized reach-back Field Operating Agency.

BUILDING ENDURING COMPETENCIES

The Air Force Nursing Service Education and Training programs are inherent to, and the foundation of the successful development of our core competencies. The Nurse Transition Program (NTP) is experience by providing hands-on patient care while working side-by-side with nurse preceptors. The program focuses on maximizing skills utilizing real-world patients and minimizing the use of simulation labs. In 2008 we had 10 NTP sites with 212 seats available to novice nurses entering the Nurse Corps with less than 6 months nursing experience. Last year Major General Rank reported the possibility of partnering with University Hospital in Cincinnati, Ohio for our NTP. I am pleased to inform you that our inaugural class of ten students graduated from our first civilian NTP Center of Excellence (CoE) at University Hospital on December 12, 2008. I had the privilege to attend and participate in the ribbon-cutting this past October and I am proud of the phenomenal work course supervisors, Major Chris Berberick and Captain Josh Lindquist, have accomplished. Due to the medical center's trauma census, students were able to acquire 95 percent of the required clinical skills from real-world patients after only 5 weeks into the 11 week course. As a result, we will decrease our Cincinnati course to 9 weeks to accommodate more classes. We have already expanded our total seats available to 241, and will soon add another civilian partner CoE as we open our eleventh site this July with the Scottsdale Healthcare System, in Scottsdale, Arizona. This facility has earned Magnet Status recognition from the American Nurses' Credentialing Center. Magnet status facilities are measured by excellent patient outcomes, high levels of job satisfaction, and low staff turnover. Additionally, they have a proven record of involving nurses in data collection and research-based nursing practice. We look forward to a long and productive partnership with the Scottsdale Healthcare System.

Our enlisted medical technicians, led by Chief Master Sergeant Joseph Potts, are critical to the overall success of our TNF. Our need for highly skilled clinicians continues to rise and we are committed to training and developing enlisted clinical leaders. We continue to enhance our enlisted clinicians through our Critical Care Technician (CCT) Course, based out of Eastern New Mexico University. This program targets medical technicians working in intensive care units (ICU) that have low patient acuity levels, or medical technicians who have previously earned the Critical Care Technician identifier, but no longer work in that clinical setting. We offer twelve classes per year and have doubled the number of rotating training sites from two to four of our larger MTF/Medical Centers. Through this course, we have enabled 115 Airmen to refresh and sharpen their critical care competencies, thus improving quality of care both at home station and abroad.

July 10, 2008 marked another step toward what's being called the largest consolidation of training in the history of the Department of Defense, when the ceremonial groundbreaking service paved the way for the construction of the Medical Education and Training Campus (METC). Currently projected for completion in 2011, METC will serve as a joint campus, co-locating the Army, Navy, and Air Force's five major learning institutions currently spread across four states, into one consolidated medical training facility at Fort Sam Houston, Texas. The development of this tri-service training center will result in standardized training for medical enlisted specialties enhancing interoperability and joint training by educating Soldiers, Sailors, Marines, and Airmen on service-specific capabilities. Chief Master Sergeant Manuel Sarmina, chairman of the METC Tri-Service Enlisted Advisory Committee noted, "America's best and brightest will begin arriving here to work and to train in an environment that will be known and recognized as the premier learning center for our enlisted medical force."

On another front, over the past year David Grant Medical Center at Travis Air Force Base, California has implemented an Optimized Upgrade Training program for nurses. Captain Linda Peavey, who spearheaded the development of this program explains, "Our goal was to increase the knowledge of nurses on medical-surgical units and progress them from the 'competent' to 'proficient' stage of nursing practice." Students participate in both didactic and clinical training in the intensive care unit. The result has yielded many additional benefits including improved wartime readiness skills, increased clinical capability and care of higher acuity patients, improved communication among staff, and recaptured revenue by decreasing the need to transfer patients. To date, David Grant Medical Center has produced 33 graduates, many of whom have recently returned from deployment and commented on how much more prepared and confident they felt stepping into the wartime environment as a direct result of this program. In January, Captain Peavey's hard work paid even more dividends when the Air Force Personnel Center, Nursing Education

Branch, recognized this training platform as an official Air Force course, granting 92 hours of education credits to each graduating student.

The Uniformed Services University of the Health Sciences (USUHS) Graduate School of Nursing (GSN) is yet another source preparing advanced practice nurses and nurse researchers. In 2008, Lieutenant Colonel Julie Bosch and Colonel Lela Holden successfully defended their dissertations, completing their Doctorate in Nursing degree. Major Brenda Morgan and Lieutenant Colonel Karen O'Connell are students currently in the USUHS doctoral program. Major Morgan is focusing her research on "Positive Emotion and Resiliency", while Lieutenant Colonel O'Connell is pursuing a study on "Mild Traumatic Brain Injury."

EXPEDITIONARY NURSING

The cornerstone of our profession is that Air Force Nursing is an essential operational capability. Combined with our enlisted medical forces, we are a critical component of the total AFMS network supporting our warfighters. In 2008, 18 percent (2,802) of our TNF deployed to 44 locations in 16 countries. Our medical forces deployed in support of Operations ENDURING FREEDOM and IRAQI FREEDOM, as well as a myriad of humanitarian missions spanning the globe. I am proud to report that our TNF represents 34 percent of all Total Force deployments within the AFMS. TNF nurses and medical technicians are providing remarkable operational support. We are well-trained, highly-skilled and are committed to saving lives, educating others, and improving quality of life through research. We serve in this capacity not out of obligation, for we are an all-volunteer force. We are called to a mission of putting others first—of caring for America's sons, daughters, brothers, sisters, fathers, and mothers. We are called to a mission of forging international partnerships for a common good, and to aid war-torn countries in developing medical infrastructures, while sharing the message of hope and goodwill. In this regard, I offer you a sampling of our nurses' and medical technicians' experiences.

In September, Lieutenant Colonel Kathryn Weiss, a Certified Registered Nurse Anesthetist (CRNA) assigned to a Critical Care Air Transport Team (CCATT) deployed to Camp Cunningham in Bagram, Afghanistan. CCATTs are a three-person team made up of a physician, nurse, and respiratory therapist, specially trained in critical care transport. Lieutenant Colonel Weiss recalls flying on an Aeromedical Evacuation (AE) mission aboard a C-130 airframe to a Forward Operating Base (FOB) that had an unexpected surprise. She stated, "We'd been told we'd be picking up one CCATT patient, but discovered we had two. Our unexpected patient was a very young boy who had been shot in the head and brought to this desolate outlying FOB by his father." The surgeon had stabilized him, but he was in dire need of more definitive care. Lieutenant Colonel Weiss and crew packaged their patients for transport and returned to Bagram. Most recently she reported "this past month has been especially difficult as we responded to two mass casualties from improvised explosive device (IED) blasts, flying five times in 6 days as patients were stabilized for transport. Two young Servicemen suffered burns on up to 75 percent of their body. The emotional aspect of caring for these young 20-year olds is unimaginable . . . praying for them and their families. We have incredible support from our front-end crews . . . they bend over backwards to assure we have what we need to care for these young men. The bonds and friendship we form here will continue long past this deployment."

Major Terry Vida deployed as a Discharge Planner to Task Force Med in Afghanistan from Travis Air Force Base, California. Shortly after arriving she was instructed to establish relationships with the Afghan hospitals to coordinate supportive care of local nationals once discharged from U.S. facilities. Due to local security threats, she was accompanied by Special Forces. She successfully solidified working relationships with four of the local hospitals and in the process, noted their most compromised areas included patient safety, infection control, and lack of training. As Major Vida stated, "It is evident through observation they need our mentorship. They know about isolation in theory, but have no means or resources to apply what they have learned." She was fortunate enough to make contact with an English-speaking worker at the local rehabilitation center and ultimately coordinated their first patient transfer for supportive orthopedic care. However, her most notable memory of the trip to Kabul was finding out she and her envoy had narrowly missed a suicide bomber's explosion by 10 minutes.

These are but a few examples of the tremendous work our TNF is providing, saving lives, making a difference, and always rising to the challenge, whatever it may be.

READINESS

In order to provide our TNF personnel the critical care, trauma, and deployment skills necessary, we utilize numerous training platforms. The AFMS and Nurse Corps continue to produce hundreds of deployment-ready medics through the Centers for Sustainment of Trauma and Readiness Skills (C-STARS) located at University Hospital in Cincinnati, Ohio, R. Adams Crowley Shock Trauma Center in Baltimore, Maryland, and Saint Louis University Hospital in Saint Louis, Missouri. Each C-STARS site is known for high-quality/high-volume trauma care, cutting-edge research and excellence in education. The C-STARS Baltimore focuses on surgical and emergency care, while the Cincinnati site is designed specifically for clinical sustainment of CCATTs. The C-STARS Saint Louis is a dual Active Duty and ANG platform, with half of the faculty and students represented by the ANG. In 2008, 781 physicians, nurses, and technicians completed this vital operational training. When enrolled in this course, almost half of the students are hard-tasked to deploy, while the remaining students will deploy some time in the next scheduled deployment cycle.

Another building block in our arsenal of educational programs is the Critical Care and Trauma Nursing Fellowships. This fellowship program has consistently produced skilled critical care and trauma nurses, and has helped us in meeting our requirements in these critical specialties. Recruiting fully qualified critical care and trauma nurses continues to be a challenge. Nurse Corps officers are competitively selected to enter an intense 12-month training program at one of the following locations; Wilford Hall Medical Center in San Antonio, Texas, St. Louis University Hospital in St. Louis, Missouri, or the National Naval Medical Center in Bethesda, Maryland. By the time students reach their seventh month in the program, they are clinically and didactically prepared to deploy in their specialty. Last year this fellowship program produced 23 nurses combined, and currently enrolled this academic year are 18 critical care and 5 trauma nurse fellows. Additionally, as part of the preparation for this course, the student must complete either the Essentials of Critical Care Orientation (ECCO) course or the Emergency Nurses Orientation (ENO) course, respective to their specific fellowship. Both courses are online, self-paced, and focus on the skills and theory required to successfully care for critically ill adults. These online courses are available to all Air Force critical care and emergency nurses, so they may continue to hone their skills while earning up to 68 hours of continuing education credits. Over the past year, 117 nurses have enrolled in the ECCO course and 63 nurses have enrolled in the ENO course.

Two additional avenues employed to assist our TNF in remaining deployment-ready are clinical rotations established through Training Affiliation Agreements (TAA) and the Sustaining Trauma and Resuscitation Skills—Program (STARS-P). In 2006 we identified a need to ensure nurses who were assigned to outpatient or non-clinical settings, were maintaining their operational clinical currency, and therefore recommended nurses attain 168-hours of bedside nursing care. Over the past 3 years, this initiative opened the door for 57 TAAs, further strengthening our partnership with civilian and sister-service facilities. Where available, our medical technicians have also capitalized on these joint ventures. These relationships and training opportunities are critical in producing nurses and technicians prepared for diverse patient populations in the deployed environment. For example, in August 2008, nursing personnel from the 3rd Medical Group (MDG) DOD/Veteran's Administration (VA) Joint Venture Hospital and the Alaska Native Medical Center expanded their TAA partnership to include rotations in the pediatric intensive care unit. Unfortunately, up to 40 percent of the patients in military hospitals in both Iraq and Afghanistan are local children. As Major Dais Huisentrui, who deployed to Balad as the Intensive Care Unit Flight Commander explains, "we had nurses from different ICU backgrounds, but most worked with adults. It was amazing to see them work together taking care of these children. At one point we had a total of 6 burned kids in the unit at one time, ranging in age from 2 to 7 years-old. On another occasion, we even had a group of three brothers . . . two of them in the ICU. They all survived." The skills our TNF has garnered through these TAA is saving lives and paying immeasurable dividends.

The STARS-P is a program whose focus will not be on pre-deployment immersion, but ongoing clinical rotations at local civilian treatment facilities with Level I, and in some cases Level II trauma programs. The AFMS currently has five TAAs for STARS-P training sites in cooperation with local MTFs (San Antonio Military Medical Center, Texas, Luke AFB, Arizona, Nellis AFB, Nevada, Wright-Patterson AFB, Ohio, and Travis AFB California), and is looking to add a sixth site connected to Scott AFB, Illinois later this year. Currently projected for full implementation in fis-

cal year 2010, clinical rotations will be scheduled for 1 to 2 weeks and may also include technically-advanced simulation centers.

QUALITY CARE

After 9/11, medical leaders across the military health services enacted a plan to develop and implement a trauma system modeled after the successes of civilian systems, but modified to account for the realities of combat—this plan matured into what is now known as the Joint Theater Trauma System (JTTS). Nursing's role within the JTTS's trauma performance improvement program spans the trauma continuum. Nurses serve as Trauma Nurse Coordinators (TNC) in combat zone MTFs, flight nurses within the Air Force AE system, members of multidisciplinary trauma teams at overseas, stateside, and VA hospitals. Many of the trauma performance improvement initiatives that have occurred since the development of JTTS have been led by nurses serving within this system. One vitally important role is that of the TNC. The TNC is the critical link in the complex continuum of trauma care from point-of-injury to treatment facilities in the Continental United States (CONUS). The TNC provides data to affect local and system-wide changes, in addition to trauma care expertise. Their role is fast-paced and multi-faceted. At the local level, the TNC impacts people and processes in several spheres of influence including primary trauma care, education, process improvement, and collaboration with literally every hospital department and specialty. They review all trauma patients' charts, compile and analyze complex data, and channel the information into the trauma system to improve combat casualty care.

Another program that has positively impacted patient outcomes and safety is the Rapid Response Team (RRT). This nurse-led program, initiated at David Grant Medical Center, was established to provide the nursing staff an avenue for early intervention at the first signs of negative changes in a patient's condition. When the RRT is called upon, an experienced critical care nurse and respiratory technician come to the bedside within 5 minutes to assess the patient and provide pre-emptive care, preventing further deterioration. This pro-active approach has resulted in earlier medical interventions, a lessening of the severity in patient conditions, improved communication, and expected seamless, well-coordinated transfers between units when necessary. RRT is an example of an ICU without walls where critical care teamwork makes a difference for both our patients and staff.

Our enlisted forces have also made great achievements this past year. In August, Special Experience Indicator (SEI) 456 was approved for our enlisted medical technicians who maintain national currency as a Paramedic. Our Career Field Manager, Chief Master Sergeant Joseph Potts is leading a team of experts in building standardized Air Force Paramedic protocols. By establishing this SEI we ensure our medical technicians have a nationally defined advanced care capability to meet operational needs.

One more example of our multi-faceted approach to quality care is the Center of Excellence for Medical Multimedia (CEMM), organizationally aligned at AFMOA. The CEMM's mission is to provide patient education material that improves knowledge, patient compliance, and patient satisfaction. Diseases or conditions must meet certain criteria to be targeted for CEMM program development. Some program examples include Women's Health, Traumatic Brain Injury, and Diabetes Prevention. As CEMM's Director of Education Services, Captain Laurie Migliore's role is diverse as she assists in program design, development, and product deployment. The CEMM has distributed 85,000 programs per year and won over 75 national awards.

Our profession is not one just of caring, but educating others as well. Members of our TNF are filling critical roles in medical Embedded Training Teams (ETT) in areas across Afghanistan. The mission of these ETTs is to strengthen and improve the Afghan National Army (ANA) healthcare system through education and training of Afghan medical personnel.

Lieutenant Colonel Susan Bassett, deployed as a 205th Afghan Regional Security Integration Command Mentor, adds, "We have taught 15 classes so far, with an average of 25–30 attendees including nurses, medics, laboratory technicians, x-ray technicians, and pharmacists. I try to use very animated examples and write key words on the dry-erase board. They are extremely studious and eager to participate. They ask for handouts and complain if they are solely in Dari . . . they want them in English and Dari as they are trying to learn to read English. After giving them power point slides, several of the more experienced Afghan nurses volunteered to teach some of the modules themselves. They were proud as peacocks!" She goes on to share, "The other day one of the nurses told a visiting reporter, in very halted English, 'We . . . love . . . Mama Bassett!'" Lieutenant Colonel Bassett has cer-

tainly made a lifelong difference in the quality of care these Afghan nurses—provide just one more step in winning their hearts and minds.

RESEARCH

The research initiative known as the Deployed Combat Casualty Care Research Team (DCCCRT) consists of six Army and three Air Force members with the purpose of facilitating mission-relevant research in the Multi-National Corps—Iraq Theater. In September 2008, a Balad research team was established which included Colonel Margaret McNeill, an Air Force Ph.D.-prepared nurse, a flight surgeon, and a podiatrist. Colonel McNeill is the first Air Force nurse researcher to join the DCCCRT. The role of the team is to provide guidance and initial review for all research conducted in Iraq. The Ph.D.-prepared nurses provide leadership on human subject protections and the ethical conduct of research. Each team member is involved in collecting data for a variety of research protocols focusing on the care of combat casualties. Over 100 research studies have been conducted or are in planning stages as a result of the team's efforts. More than 12,000 subjects have been enrolled in studies. Areas of research conducted by the military in Iraq that have led to advancement in medical therapies include tourniquet application, resuscitation, blood product administration, burns, wound care, ventilation management, patient transport, Post Traumatic Stress Disorder (PTSD), Traumatic Brain Injury, and infectious diseases. Nurse-led studies have investigated pain management, carbon monoxide exposure, women's healthcare, sleep disturbances in soldiers, and PTSD/burnout and compassion fatigue in nursing personnel.

RECRUITING AND RETENTION

According to the latest projections from the U.S. Bureau of Labor Statistics, more than 1 million new nurses will be needed by 2016. Of those, 587,000 are projected to be new nursing positions, making nursing the nation's top profession in terms of projected job growth (www.bls.gov/opub/mlr/2007/11/art5full.pdf). A separate report, titled "The Future of the Nursing Workforce in the United States: Data, Trends, and Implications", found that the shortage of RNs could reach as high as 500,000 by 2025 (www.jbpub.com/catalog/9780763756840). It is evident Air Force Nursing will need to take advantage of every opportunity to recruit and retain nurses.

In fiscal year 2008, we accessed 302 nurses against our total accession goal of 325 (93 percent). The Air Force Recruiting Service ultimately delivered 226 nurse accessions, filling 69.5 percent of our total accession goal. Our challenge remains with recruiting fully qualified and specialty nurses in the areas of mental health, anesthesia, medical-surgical, emergency and critical care. While 93 percent appears positive, only 44 percent of those were considered "fully qualified," meaning they had a minimum of 6 months previous nursing experience. Fifty-six percent of all nurse accessions were "novice nurses," having less than 6 months nursing experience. The shortage of experienced nurses is a direct reflection of our national nursing shortage. Additionally, it is difficult to compete with our civilian counterparts in recruiting experienced nurses, as they offer many lucrative incentives.

We take advantage of numerous venues to access nurses. In addition to our recruiting services, we bring nurses into the Air Force through a variety of programs. Utilizing the Air Force Reserve Officers' Training Corps, Airmen Education and Commissioning Program, the Enlisted Commissioning Program, and the Health Professions Scholarship Program, we accessed 70 nurses in 2008.

In 2007 we launched our Nurse Enlisted Commissioning Program (NECP). The goal is to grow Air Force nurses from our highly successful enlisted medics. The NECP is an accelerated program for enlisted Airmen to complete a full-time Bachelor of Science in Nursing (BSN) at an accredited university while on active duty. This program produces students completing their BSN and obtaining their nursing license in 24 months or less through either a 2 or 1 year program, depending on their entry level. Airmen who complete this program are then commissioned as second lieutenants. Since its inception we have selected 73 students from 83 applicants and project a steady state NECP quota of 50 per year for the 2 year program beginning fiscal year 2011.

We strive to sustain and exceed our recruitment goals, but Nurse Corps retention remains problematic. In 2008, 55 percent of the nurses who separated had less than 20 years of military service. In 2008 alone, 61 percent of those separating were our young lieutenants and captains. The number of lieutenants separating has nearly tripled over the past 3 years. We are hopeful the implementation of the Nurse Corps Incentive Special Pay (ISP) program will make a positive impact on retention; however, we are concerned about the unintended consequences. A resulting increase in

retention of company grade officers may further extend timing and reduce promotion opportunity due to our small number of field grade requirements.

While we currently offer incentive special pay to CRNAs at variable rates, we have never had the resources to recognize clinical nurses for seeking and earning professional national certification and advanced academic degrees in various nursing specialties. With ISP we offer an even more appealing pay incentive if a nurse with an identified certification, additionally desires and commits to work in an approved clinical area and for a specific amount of time. We are pleased to be able to acknowledge our highly-skilled professional nurses in the clinical arena.

Our active duty enlisted forces also scored a win this past year with their own Selective Re-enlistment Bonus (SRB). Even though their overall manning appears to be strong at 94 percent, our Independent Duty Medical Technicians (IDMT) are heavily tasked with deployments and manned at only 72 percent. This SRB is a first-ever for our IDMTs, and I, along with Chief Master Sergeant Potts, am eager to see the impact of this initiative.

LEADERSHIP

As a Corps, we place heavy emphasis on purposefully developing leaders, clinically and professionally for the AFMS. Our Nurse Corps Development Team (DT) convenes three times a year to ensure Nurse Corps officers are provided deliberate career progression opportunities. The DT competitively selects our squadron commander and chief nurse candidates, both of which represent pivotal career leadership milestones. Furthermore, the DT identifies through a scored-board process, those leaders who would most benefit from developmental education in-residence. In 2008, the Nurse Corps garnered 90 annual quotas to send our best and brightest captains to Squadron Officer School.

Another recent development on the topic of clinical leadership is the creation of master clinician authorizations. This affords an opportunity for our most clinically experienced senior nurses with advanced academic preparations to remain in patient care settings without sacrificing promotion or advancement opportunities. We currently have identified 20 master clinician positions scattered among our larger MTFs as well as the Uniformed Services University of Health Sciences representing the areas of CRNAs, Perioperative Nursing, Education and Training, ICU, Family Nurse Practitioner, and Nursing Research.

Nurse leaders are critical in every environment, especially in deployed locations. Last year we successfully acquired a deployed Colonel Chief Nurse position at Joint Base Balad, Iraq, and we anticipate permanently adding another at Bagram's Craig Theater Hospital. The corporate experience of seasoned chief nurses in the grade of Colonel lends itself to mentoring not only nursing services personnel, but officers from across the AFMS.

Not only do we deploy as chief nurses, but in the role of Commanders as well. Colonel Diana Atwell served as the 332nd Expeditionary Medical Operations Squadron Commander at Joint Base Balad. As commander, she led a squadron of approximately 200 combat medics ranging from trauma surgeons to medical technicians, whose efforts contributed to an overall survival rate of 98 percent at the DOD's largest and busiest level three theater hospital.

ANG AND AFRC

The ANG and AFRC are vitally important contributors to our TNF and the backbone of our highly-successful global AE mission. Since 2007, all AFRC mobilization requirements have been met solely by volunteers. In 2008, 503 AFRC nurses and medics stepped up to meet deployment needs at home and abroad, with 133 of those personnel sourced for missions related to Hurricanes Gustav and Ike. The ANG also played a key role as they deployed 268 medics and AE personnel. They processed and moved 600 patients prior to and after the hurricanes. In addition to activating AE crews, the ANG mobilized AE Liaison teams (AELT), Command and Control (C²) elements, and Mobile Aeromedical Staging Facilities (MASF). The MASF changed location three times "chasing the storm" and providing evacuation assets to the area in most need. Rounding out TNF representation, the 43d Aeromedical Evacuation Squadron (AES) from Pope AFB, North Carolina, also played a role in responding to Hurricanes Gustav, Hanna, and Ike by deploying MASFs, AELTs, AE crews, and C² elements to areas in Louisiana and Texas.

Our AE system provides the vital link in uninterrupted world class medical care from the battlefield to definitive treatment facilities at home. We boast a 98 percent survival rate for those that reach a theater hospital; the highest survival rate in history. It is a total force human weapons system comprised of 32nd AE Squadrons representing 12 percent Regular Air Force, 60 percent AFRC, and 28 percent ANG.

The AE deployment requirements in support of Operations Iraqi and Enduring Freedom have moved nearly 71,000 patients since October 2001. The mission of AE is one close to all our hearts—a mission of carrying the most precious cargo of all, our wounded warriors.

HUMANITARIAN MISSIONS

The TNF nurses and aerospace medical technicians represented a United States presence in locations crossing the globe including Iraq, Afghanistan, Qatar, Kuwait, Europe, Korea, Honduras, Trinidad, El Salvador, Guatemala, Morocco, Cambodia, Peru, and Suriname, to name only a few.

Master Sergeant Jeffrey Stubblefield, an IDMT assigned to the 3rd MDG in Alaska, had the unique opportunity to deploy to Laos on a mission to recover remains of two Raven Intelligence Officers whose plane crashed after taking enemy fire during the Vietnam Conflict. As a medic assigned to Recovery Team One, he provided medical support to 51 team members traversing treacherous terrain to reach our fallen comrades and enable the repatriation of their remains.

Major Susan Perry, a CRNA assigned to Wright-Patterson AFB, Ohio, was part of JTF-Bravo, a medical element surgical team partnering with civilian surgeons in Comayagua, Honduras. Her team was pivotal in responding to and saving the lives of 30 civilians injured in a motor vehicle collision.

Captain Troy Mefferd and First Lieutenant Ranjodh Gill deployed aboard the U.S. Naval Ship Mercy in support of joint humanitarian mission, Pacific Partnership 2008. Through this endeavor, medical care was provided to nearly 8,000 patients as well as 1,200 receiving dental care through Operation Smile.

Lieutenant Colonel Tandra Yates, Flight Commander of Women's Health Services at Elmendorf AFB, was the first women's health provider to accompany a Family Practice Team to three remote Alaskan villages as part of Alaska Taakti Top Cover. She treated 32 patients, diagnosing three with cancer which required immediate surgery. As a result of her many contributions, future Taakti missions will include a Women's Health Service Provider as part of the team.

Seven members of the 43rd AES participated in a historic mission which brought home three American contractors who'd been held captive for over 5 years by leftist Revolutionary Armed Forces of Colombia after their plane crashed in February 2003. The 43rd AES crew, along with 17 Airmen from Charleston AFB, South Carolina cared for and delivered them safely back to the United States on July 2, 2008. The close proximity to July fourth gave an all new meaning to "Independence Day" for these former captives.

RECOGNITION

It was a banner year as Air Force nurses and medical technicians were recognized for outstanding performance by a variety of professional organizations. Technical Sergeant David M. Denton captured the Airlift/Tanker Association's "General P.K. Carlton Award for Valor." This annual award is presented to an individual who demonstrates courage, strength, determination, fearlessness, and bravery during a combat, contingency, or humanitarian mission. Technical Sergeant Denton was also named as the AFMS "Outstanding Non-Commissioned Officer AE Technician of the Year."

Every year the Commemorative Air Force (CAF) recognizes one exceptional flight nurse who engaged in live aeromedical evacuation missions and contributed significantly to in-flight patient care, by awarding them the "Dolly Vinsant Flight Nurse Award." This award pays tribute to Lieutenant Wilma "Dolly" Vinsant who was killed in action over Germany during an AE mission on August 14, 1946. This year the CAF recognized Captain Bryce Vanderzwaag of the 86th AES at Ramstein AB, Germany. Captain Vanderzwaag provided direct AE support to 651 sick and injured patients, including two K-9 military working dogs injured by IEDs, during his deployment.

Lieutenant Colonel Mona P. Ternus, an AFRC nurse, was recognized by the Tri-Service Nursing Research Program, Federal Nursing Section, as she was awarded the "Federal Nursing Service Essay Award" for her research and essay entitled, "Military Women's Perceptions of the Effect of Deployment on their Role as Mothers and on Adolescents' Health." These are but a few examples of the stellar work our nurses and medical technicians perform every day.

OUR WAY AHEAD

Nursing is a profession vital to the success of our healthcare system. Our top priorities include, first and foremost, delivering the highest quality of nursing care while concurrently staging for joint operations today and tomorrow. Second, we are

striving to develop nursing personnel for joint clinical operations and leadership during deployment and at home station, while structuring and positioning the Total Nursing Force with the right specialty mix to meet requirements. Last, but not least, we aim to place priority emphasis on collaborative and professional bedside nursing care.

Mister Chairman and distinguished members of the Committee, it is an honor to be here with you today and represent a dedicated, strong Total Nursing Force of nearly 18,000 men and women from our Active Duty, Air National Guard, Air Force Reserve, civilian, and contract forces. Our warriors and their families deserve nothing less than skilled and educated nurses and technicians who have mastered the art of caring. It is the medic's touch, compassion, and commitment that often wills the patients to recovery and diminishes the pain. As our Air Force Nurse Corps celebrates its 60th Anniversary, I look forward to working with our Sister Services and our Federal Nursing Team, as we partner to shape the future of our profession.

Chairman INOUE. On behalf of the subcommittee, I thank all of you, but I have a few questions.

There's no secret that there's a national nursing shortage. But somehow you gals have done a good job. The Air Force has met 93 percent of its goal. Army and Navy have exceeded their goals. What's the secret?

NURSE RECRUITMENT AND RETENTION

General HOROHO. Mr. Chairman, I think the secret is a couple things: the support that we've received from Congress with the different incentive specialty pay bonuses, that has had an overarching success with our nurses choosing to remain on active duty. The other is working very collaboratively with the Army Medical Recruiting Brigade. We stood up that brigade in 2007 that focused on recruiting nurses and the entire Army medical team, and so the first time last year since 2001 they actually exceeded the mission by 147 percent for recruitment of nurses on active duty.

So having that specialized—there were also bonuses that were given to the recruiters to be able to target special critical categories. We've also been very, very proactive with telling the Army Nurse Corps story and having our nurses engaged in helping with the recruiting effort.

Admiral BRUZEK-KOHLER. Mr. Chairman, there's no doubt that the support we received from you for our accession bonus increases and in particular our loan repayment program has made a tremendous difference in the numbers of direct accessions, particularly in light of the economic situation. For many of our new students, they come with extremely high student loans, more than I would have anticipated.

In fact, I remember meeting a lieutenant in Bahrain who had not yet heard about the program, a new graduate with over \$60,000 worth of school loans. So that has made a major, major difference in their lives.

We've expanded our opportunities with our recruiters to use our own nurses in geographic areas, particularly nurses who are going to many of our professional organizations, both in terms of clinical skills, but also in terms of some of our diversity issues, and selling our story, telling our story as well. That has really made a difference in bringing in some of the diversity that we've not been able to get in the past.

So we will continue to use all of those opportunities to bring in our direct accessions. We also have a huge pipeline, as we've heard

from our sister service in the Air Force, with our medical enlisted programs, and using our corpsmen and other enlisted rating applicants to come into the Nurse Corps has really been our life's blood really for keeping our Corps at a level of being able to provide the kinds of care we provide. We will continue to support those programs, as well as our ROTC programs and our candidate programs.

So again, we thank you for that support for all of those.

General SINISCALCHI. Senator Inouye, thank you, and I would like to reiterate my nursing colleagues' for our Air Force accessions. I can attribute our success has been with recruiting novice nurses, the nurses who are completing their baccalaureate degrees and are coming into the Air Force as novice with less than 6 months experience.

Our loan repayment program, the increase that we received has been very successful. We were able to increase our quotas from 76 to 102. The increase in our health professions loan repayment quotas had a significant impact on our ability to recruit more novice nurses. The accession bonus has also been a very successful recruiting tool, and we appreciate the increased funds that we received in accession bonuses this year.

We are finding that with the \$30,000 in accession bonus and up to \$40,000 in the loan repayment combination it's very helpful to those students who have large loan repayments. So I would like to thank you again for your support with those programs.

We've taken several initiatives to continue success with recruiting. Dr. Cassells and Dr. Hinshaw from USU had organized a conference for academic partnerships addressing military nursing shortages, and that occurred this past weekend. We had the opportunity to meet with nursing deans and faculty across the country, and our objective was building collaborative relationships among military nursing services with the schools of nursing to foster additional educational opportunities and begin a campaign to educate the faculty from these schools, so as they are mentoring and advising their students they can help direct them toward military nursing as a potential career option.

Chairman INOUE. Do you believe that we have enough nurse anesthetists, critical care nurses, operating room nurses, these specialties?

Admiral BRUZEK-KOHLER. Those are our critical areas right now that we are looking at in terms of retention as well as accessing. We do not have enough. Critical care nurses are undermanned at about anywhere from 60 to 70 percent. We think anything below 90 percent is critical and we have to pay attention to them.

I will say, our nurse anesthetists actually are very healthy. They aren't really one of the groups that we are focused on this year. Our perioperative nurses, our operating room nurses, our critical care nurses, and our nurse practitioners are below that critical 90 percent at this point in time.

So we're doing a couple of things. When we're recruiting, we are looking to recruit those specialties, which means we will bring in a more seasoned, more experienced clinical nurse at a more senior rank. We don't anticipate, nor do we know at this point, whether these nurses would want to continue on a full naval career or at

least be with us during a very critical time in our history while this war is still going on.

For retention, again the loan repayment program has been helpful. The RNISP has been absolutely the most positive action we could have taken to entice our more senior nurses, particularly those who are at the point of either the 10-year mark where they either make the decision to leave now or they continue on for 20 years, or for some who have come in from the enlisted ranks, who at the 10-year officer mark now have 20 years and can, in fact, retire. Those incentives have actually been positive in making the decision for them to stay in the Navy.

Also, the opportunities to deploy have been remarkable incentives for our people to stay in the Navy.

Chairman INOUE. General Horoho.

General HOROHO. Mr. Chairman, both the emergency nurse specialty as well as the ICU specialties are two of our highest deployers as we support two theaters of operations. So we have been working very aggressively to expand our critical skill sets by helping them with deployment skills and training. We have increased the number of seats to be able to train more.

We have also started to target the population at the rank of major because I'm at 50 percent strength at that middle grade leadership, and we're trying to force more clinical expertise back at the bedside. So there's a pilot project that's ongoing that gives us the authority to be able to recruit individuals to come on active duty for a 2-year obligation. So what we are doing is working very closely with Recruiting Command and Accessions Command to be able to target that clinical expertise and bring them on active duty for a 2-year obligation to help us bridge that critical shortfall that we have.

NURSE RECRUITING

Chairman INOUE. General Siniscalchi.

General SINISCALCHI. Sir, direct recruitment of our nurse specialties continues to be a challenge. We've come up with programs, very successful programs, to help us with retention and to help us develop those skill sets that we need ourselves.

The biggest impact on retention has been the incentive specialty pay program. We just started this program in January and so far over 76 percent who decided to participate in the program accepted the 4-year active duty service commitment. So that will have a significant impact on our ability to retain those critical areas.

We've developed fellowships that are year-long in critical care, emergency training, and trauma training. That helps us to grow nurses in those critical areas.

We continue to select nurses annually to attend USU for advanced academic training in critical areas. We've increased our family nurse practitioner quotas from 5 to 20 this year. We have an operating room cross-training course at Wilford Hall and a neonatal intensive care course at Wilford Hall, which is helping us to meet those critical specialties.

Our future plan for this year is to build a mental health nursing course at Travis Air Force Base. We've had difficulty recruiting mental health nurses and, as you know, they are very critical in

the care of our wounded warriors. So we are hoping to see this program come to fruition this year.

We're building master clinician opportunities at the colonel ranks so that we can have senior leaders in anesthesia, in the operating room, in emergency rooms, and in critical care areas that can help grow and mentor those nurses in those critical specialties.

Chairman INOUE. Thank you very much.

Mr. Vice Chairman.

Senator COCHRAN. Mr. Chairman, thank you.

I'm concerned that the challenges in view of the war and the constant separation from families and friends may have a very serious consequence in terms of the success of recruiting. I was sitting here thinking about what could we do as a subcommittee to be helpful to you in increasing the likelihood that your goals were met and that retention rates are high in what you need.

Would additional funding of specific programs targeted to recruiting and retention be in order, or do you have enough money to do what you need to do?

Admiral BRUZEK-KOHLER. Well, I'll begin by saying that the support that you have given us to this date in time has shown dramatic improvements in the numbers of accessions, direct accessions, and the retention numbers. They have shown that they are successful in enticing people to join the Navy, as well as retaining them for a full commitment to a full career in the Navy.

So I thank you for those and certainly we would appreciate to be able to continue to offer those incentives both as accession bonuses as well as our loan repayment program. As I mentioned, they have been an amazing support to our new students and our new graduates. While there is competition from the civilian sector our retention bonuses give them the opportunity to want to continue to serve their country.

We do exit interviews of all of the nurses that leave the service, and I will tell you that deployments are generally not the reason why they leave the Navy. Usually it's family issues, dual career families and they want to get stable in a community. We also find as we are doing recruiting, particularly at schools of nursing throughout the country, that deployments are not a reason not to join the Navy. In particular, with our ability to provide humanitarian assistance and that type of service to other countries, that again is very enticing to a nurse who really wants to feel like they are fulfilling what the purpose of being a nurse is in the first place.

So at this point I would just say thank you for what you've done for us up to this juncture and we would certainly be thankful for that continued support.

Senator COCHRAN. General Horoho.

NURSE RETENTION

General HOROHO. Yes, sir. I would echo and say continued support of the programs that we do have in place, because when we have looked at our nurses 97 percent of those that are eligible to take those loan repayment programs or the bonuses have accepted them. So I think it does show that they are positive incentives to helping individuals remain on active duty.

The other incentive is that there is tremendous pride with our nurses that deploy, and most of them that come back have echoed that they found great self-worth to be able to know that they were helping to enhance the healthcare of those servicemembers that are supporting our freedoms, as well as helping with the nation building.

One of the things that has truly impacted I think retention is that we have changed our policy for deploying nurses from 12 months down to a 6-month rotation. That in itself has helped to help with the time, to decrease the time away from their family members. So when we look at that, it's the financial incentive programs as well as those support programs that we have in place.

We did a survey across the entire Army Nurse Corps so that I could have a baseline understanding of kind of the health of the Corps. Out of that survey we found two areas that we're going to focus on. One of them is looking at the redefinition of our head nurse role, of wanting to make sure that that role is having the ability to impact patient care and is really focused on outcome-based as well as leader development.

So we have got a team that has stood up to look at best practices across our entire Army medical department, as well as looking at what is being done within our civilian health sector. Then we're going to redesign that leader development role, and we're also looking at the entire leader development training programs that we have in place, because when you look at young nurses during the exit survey—and we do exit surveys on everybody who's leaving—a majority of it is because of family reasons, either starting families or an elderly parent and needing to be home.

So two things that we're doing. We're looking at and partnering with the Army to see how is it that we can have a program in place to help nurses take a leave and be able to still meet their family needs as well as their military obligation. Then we're also looking at how do we ensure that we've got our nurses best prepared for the deployment. So we're redoing—this past year we had 186 lieutenants that were assigned to each one of our medical centers for a year-long clinical immersed program to help them get their clinical skills solidified as well as their critical thinking skills prior to deployment.

So I think those were the major things that came out of the organizational survey.

Senator COCHRAN. Thank you.

General HOROHO. Thank you.

Senator COCHRAN. General Siniscalchi.

NURSE ACCESSION BONUSES

General SINISCALCHI. Sir, I would add, in addition to your support for our nurse accession bonuses and the health professions loan repayment program, it's more than just the financial incentives that incentivize our nurses. The opportunities for advanced education, the opportunities for increased leadership roles and leadership training, has a significant impact on retention.

The support of the health professions scholarship program has been critical. That program, the funding for that program, has allowed us to take nurses who already have baccalaureate degrees

and put them in programs, civilian nurses, sponsor their education, put them in programs for anesthesia training, to become family nurse practitioners, women's health practitioners. And that allows them the opportunity to have advanced education paid for by us and then come on active duty and serve in those critical areas.

So I would submit that continued support of the health professions scholarship program is a big incentive. We do continue to look at opportunities to partner with civilian programs so our nurses can have increased opportunities for advanced education and leadership training.

Senator COCHRAN. Thank you very much.

Chairman INOUE. Senator Murray.

Senator MURRAY. Thank you very much, Mr. Chairman.

I apologize for having to step out and miss your testimony. But I wanted to personally thank all of you and everyone you oversee for the tremendous work that they do. General Horoho, it's good to see you here. I appreciate everything you've done out at Madigan Army Medical Center and appreciate your leadership.

Time is getting late, so let me just ask one question. I'll submit the other ones for your answers later. General Horoho, as you know, the Army's deployment schedule and adequate care of both soldiers and their families is very important to me. We've had the chance to talk about that. I wanted just to ask you how you are planning to continue to take care of children and families of servicemembers?

MADIGAN ARMY MEDICAL CENTER

General HOROHO. Yes, ma'am. First I'd like to thank you for your support, because we get tremendous support from you and your entire team in Madigan Army Medical Center being able to meet its mission.

Madigan Army Medical Center—the troop strength on Fort Lewis has grown over the years, and so our enrolled population at Madigan has increased from 84,000 to currently we have 106,000 enrolled beneficiaries. When you add on the healthcare benefits of that reliant population, which are those reserve soldiers and National Guard that are able to get extended healthcare, that increases it about 33,000. So we have the third largest enrolled beneficiary population in the Army, so about 133,000.

Of that, 20,000 of those are women, so it's a growing population. The increased strength is 20,000 for women and for children.

So what we've done is we have looked at—we have submitted a proposal for funding for a women's health center that will allow us to consolidate all of those services together to better meet the needs of our women and our children, so it's more of a continuum from infants through the adult parent.

With that, if it's awarded, in 2010 we would look at design and construction beginning and having it completed about 2014. What that would allow us to do is to be able to maximize the efforts. We have a DOD fellowship, the only one in the Army, for developmental pedes as well as maternal-fetal medicine. So we'd have that capability of having the right case mix to be able to help our residents grow and our physicians grow in that specialty.

We also are looking at, if that building is built, then we would take that space that is relieved to further expand our primary care to be able to meet the increased demand that we have from that troop population growth.

Senator MURRAY. Well, I really appreciate your strong push on that and I want to be supportive in any way I can. It's a great way to move forward, I think. Obviously, whatever I can do from my end to support that, I will do.

General HOROHO. Thank you.

Senator MURRAY. I just want all of you to know I'm worried about compassion fatigue with our nurses, and I know that's a recruiting issue, and a retention issue. We have to look at what we can do, Mr. Chairman, to support them. General, you mentioned several good ways to do that, and I want to encourage all of us to continue to do that.

I do have several other questions. I know you've been sitting here a long time, so I will submit them for the record. But I do really appreciate the work that all of you do. So thank you so much.

General HOROHO. Thank you, ma'am.

Chairman INOUE. The nurses are fortunate to have Senator Murray here.

Senator MURRAY. We all stick together.

Chairman INOUE. One of the priority projects I had when I first got on this subcommittee was to make certain that nurses got full recognition for their service. The one way to do that in the service was by rank. At that time, I believe I met one nurse who was a colonel. Most of the nurses I knew were captains or lieutenants. I'm happy to see two stars all over the place.

But I note that in the Navy you have a rear admiral one star, rear admiral upper half two stars. But in the Army and Air Force there's no billet for one stars. Why is that?

General HOROHO. I'll go first if you don't mind. Sir, one of the things is that we have the Surgeon General's full support of leader-developing all of our Army Medical Department leaders. Our general officer slots are branch and material. What we do is we work very, very hard as a collective force to be able to ensure that we have the right leadership skill sets, not only the education programs, but the command opportunities, as well as the clinical opportunities to lead at that level.

So we are working very closely to ensure that we have a pool of personnel that will be competitive for general officer at the one-star rank.

COMPETITIVE GRADES

General SINISCALCHI. Sir, having gone from colonel directly to two stars, the current construct has worked very well, and I've had tremendous support from my senior leaders. Within the Air Force, we have a limited number of general officer authorizations and we have elected to allow each of our corps the opportunity to have a star as their pinnacle rank.

So if we add a Nurse Corps one star, we will have to offset it elsewhere. So our current plan is to continue with the current construct and continue to develop our colonel nurses and select those nurses who have more time in grade and more time in service, so

that we're selecting our senior colonels as we promote them to the rank of two stars.

Chairman INOUE. So it would help if we authorize one star billets with the money that we can provide here. You won't be against that, would you?

ADDITIONAL COMMITTEE QUESTIONS

General SINISCALCHI. Sir, I would never turn down stars.

Chairman INOUE. Well, I thank you ladies very much. I want to thank General Schoomaker, Admiral Robinson, General Roudebush, General Horoho, Admiral Bruzek-Kohler, and General Siniscalchi for your testimony and for your service to our Nation.

[The following questions were not asked at the hearing, but were submitted to the Department for response subsequent to the hearing:]

QUESTIONS SUBMITTED TO LIEUTENANT GENERAL ERIC B. SCHOOMAKER

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

JOINT DOD/VA CLINICS

Question. General Schoomaker, since there are other joint DOD/VA clinics and presumably more to come, are all the Services involved in raising, discussing, and resolving the myriad of issues presented by these joint facilities or is it done on a facility unique basis?

Answer. The Health Executive Council and Joint Executive Council provide the basis for managing efforts related to joint DOD/VA clinics. The recent revival of the VA/DOD Construction Planning Committee will facilitate future joint planning efforts. Army facility pre-planning efforts take into account existing/proposed Community Based Outpatient Clinics (CBOCs) and also consider the possibility of current and future Joint Ventures. For example, the U.S. Army Medical Command (MEDCOM) is currently working with the local VA medical center and the Veterans Integrated Service Network to define the scope for a William Beaumont Army Medical Center (WBAMC) hospital replacement at Fort Bliss, Texas. WBAMC currently shares services through a Joint Venture agreement with the co-located VA medical center. There is potential for additional sharing and this is the heart of the ongoing pre-planning effort. MEDCOM has also incorporated CBOCs within hospital replacement projects such as Bassett Army Community Hospital at Fort Wainwright, Alaska, and DeWitt Army Community Hospital at Fort Belvoir, Virginia. The VA and Army are also working to locate CBOCs on Army installations such as Fort Detrick, Maryland and Fort Meade, Maryland. The VA recently renovated space at the former Lyster Army Community Hospital at Fort Rucker, Alabama, as it was downsized to an Army Health Clinic. The VA was able to vacate a lease for its CBOC in downtown Dothan, Alabama, and move closer to its beneficiary population at Fort Rucker.

CENTERS FOR EXCELLENCE

Question. General Schoomaker, there seems to be an insatiable appetite for creating Centers of Excellence for everything from sensor systems to urban training and now we are creating them for medical research. While I fully support the establishment of the Defense Center of Excellence for Traumatic Brain Injury and Psychological Health, we also created them for amputees, vision, and hearing. All of these areas are critical to the health of our service members but we can't create centers for every issue facing our service members. Therefore, how do we ensure the appropriate level of attention and allocation of resources are devoted to the issues we are faced with today and also those we might encounter in the future?

Answer. A Center of Excellence designation serves to establish priority; whether directed by Congress or within the Department. It results in a specific activity gaining visibility and attention above other areas. COE designation to date has come with costs as we grow organizational structure to oversee a specific area of interest. There is a critical balance that must be kept in check. The Services are operating comprehensive healthcare systems. We are caring for Soldiers and Families with a very broad spectrum of healthcare needs—nearly the entire spectrum of medical

practice. We must be careful not to focus too much effort in too few areas and cause us to fail to meet the true needs of our beneficiaries; the majority of which fall outside the sphere of established COEs. Moreover, every one of my Army hospitals is a Center of Excellence. We provide exceptionally high quality healthcare outcomes. I must be able to appropriately resource every hospital and every patient encounter because every patient is important. A robust and capable direct care system is essential to the Army. I ask for continued support in resourcing our direct care system, as a system with global responsibility, and not fragmenting our system into a series of new Centers of Excellence.

CENTERS FOR VISION AND HEARING

Question. General Schoomaker, Congress is awaiting the Department's detailed plans for establishing the Centers for Vision and Hearing. Can you tell me if you and your colleagues are approaching the staffing and resourcing of all of these Centers strategically or as independent centers?

Answer. The Service Surgeons General do not have an active role in the development of the Department of Defense Centers of Excellence for Hearing and Vision. The approach to funding and staffing these Centers is being managed by the Office of the Assistant Secretary of Defense for Health Affairs.

TRAUMATIC BRAIN INJURY/MALARIA RESEARCH

Question. General Schoomaker, what are the specific mechanisms in place to ensure coordination at the planning, budgeting, and technical levels between the various Federal agencies (including NIH) on areas like Traumatic Brain Injury or Malaria research? Are there examples of DOD, VA, or NIH dollars being moved or redundant activities being terminated as a result of these coordination efforts?

Answer. The U.S. Army medical research and development community coordinates closely with other services and agencies for both the President's Budget and the large Congressional Special Interest (CSI) funded programs to avoid redundancy. We include representation in our planning processes to identify various service or agency research portfolio lead, and gap areas across the spectrum of federally funded research. Through coordination with the other services and agencies we have not needed to terminate programs, but have instead been able to maximize our ability to direct research funds toward the gap areas. Traumatic Brain Injury (TBI) and Malaria are two of several extensively coordinated research areas.

Planning and programming coordination is taking place through involvement of NIH and VA representatives on the expanded Joint Technical Coordinating Groups of the Armed Services Biomedical Research & Management (ASBREM) Committee, which are planning the investment for the future years Defense Health Program Research Development Test and Evaluation investment. At the technical levels, DOD, VA, and NIH scientists and research program managers actively participated in joint planning activities for major TBI and Psychological Health (PH) research programs, including the fiscal year 2007 Congressionally Directed Medical Research Program TBI/PH program and the fiscal year 2008 Deployment Related Medical Research Program. These planning activities included joint program integration and review panels that were responsible for identifying research gaps, developing language for program announcements, and reviewing and recommending research proposals for funding. In fiscal year 2009, an integration panel with DOD, VA, and NIH members identified remaining TBI/PH knowledge gaps and developed a program announcement for research that addresses TBI/PH topics in response to a fiscal year 2009 CSI for TBI/PH research.

The DOD is creating a collaborative network in the area of TBI/PH research. The DOD has partnered with Federal and non-Federal agencies to cosponsor several scientific conferences. The DOD recently partnered with NIH, VA, and the National Institute on Disability and Rehabilitation Research to sponsor a common data elements workshop, which will lead to the ability to compare results and variables across studies. The DOD is sponsoring a state-of-the-science meeting in May 2009 to evaluate non-impact blast-induced mild TBI and identify for future research gaps in our current knowledge. Attendees have been invited from several Federal agencies (NIH, VA, and Environmental Protection Agency) as well as academia and industry. The DOD is planning a conference for November 2009 and will partner with several agencies to sponsor a TBI/PH research portfolio review to help identify gaps and assist with setting funding priorities among the various agencies. While new projects that address residual gaps in the science may overlap with ongoing research objectives, continuous interdepartmental and interagency portfolio analyses ensure that resources obligated through DOD funding mechanisms target residual and emerging gaps in TBI/PH research.

The Defense Centers of Excellence (DCoE) for TBI and PH is establishing a strategic level TBI/PH research working group to further collaboration within the scientific community. This working group will help to prevent unnecessary redundancies and increase communications. The DCoE is collaborating with NIH on developing a research database, which may decrease the need to maintain several different databases.

The U.S. Military Infectious Disease Research Program (MIDRP) is a joint Army/Navy program funded through the Army. To insure that research planning is coordinated between the major funders of malaria vaccine research, the U.S. Military Malaria Vaccine Program conducts an annual strategic review of its program by a Scientific Advisory Board. The membership of this board includes a broad range of internationally recognized experts including members from Vaccine Research Center at NIH; the Division of Intramural Research, National Institute of Allergy and Infectious Disease (NIAID), NIH; industry and academia, and the Bill and Melinda Gates supported Malaria Vaccine Initiative (MVI). Furthermore, a permanent member of the NIAID staff sits on the U.S. Army Medical Research and Materiel Command's Executive Advisory Panel. A broad strategic review was conducted recently by the Institute of Medicine (Battling Malaria Strengthening the U.S. Military Malaria Vaccine Program) and included a distinguished panel of both international experts and members from NIH, industry, and academia. The close review and coordination insures that there is no duplication of effort. The U.S. Army receives funding from the MVI. The U.S. Army malaria drug development program was also reviewed by the Institute of Medicine (Saving Lives, Buying Time, Economics of Malaria Drugs in an Age of Resistance). This program is coordinated and relies heavily on industry to bring anti-malarial drugs to the market. Essentially every U.S. Food and Drug Administration approved anti-malarial drug has been advanced, if not discovered by contribution from the U.S. Military Malaria Drug Program.

CAREGIVERS

Question. General Schoomaker, while attention must be focused on the resilience training of our servicemembers and their families, I also suspect that caring for our wounded takes a considerable toll on our caregivers. What efforts are underway to address the well-being of our caregivers in order to retain these critical personnel?

Answer. In 2006, the Army recognized that there was a need for educating and training its healthcare providers on the signs and symptoms of Compassion Fatigue and Burnout. It began deploying mobile training teams through the Soldier and Family Support Branch, U.S. Army Medical Department Center and School, to various Medical Treatment Facilities (MTFs) to train healthcare providers on the prevention and treatment of Compassion Fatigue and Burnout.

In June 2008, the Army implemented a mandatory Provider Resiliency Training (PRT) program to educate and train all MTF personnel, to include support staff, on the signs and symptoms of Compassion Fatigue and Burnout. Below is a brief description of the phased implementation the PRT program:

- Phase I of the program focuses on organizational and personal assessment of Compassion Fatigue and Burnout using the Professional Quality of Life Scale (ProQol) which measures Compassion Fatigue, Burnout, and Compassion Satisfaction. Over 55,000 medical personnel completed the survey and were provided a 30-minute introductory training session on provider resiliency.
- Phase II involves developing a resiliency-based self-care plan through 2-hour classroom training with PRT trainers based at each major MTF.
- Phase III is an annual reassessment of an individual's stress levels and adjustment to his/her self-care plan based on the reassessment.

The Institute of Surgical Research at the Brooke Army Medical Center also offers a pilot provider resiliency program that supplements the above PRT program. This program provides a Respite Center for its healthcare providers. Providers have the opportunity to receive educational classes on meditation, Alpha-Stim therapy (micro-current electrical therapy for acute or chronic pain) and relaxation.

COMPETING INITIATIVES

Question. General Schoomaker, do you have any competing initiatives to the new health system architecture development efforts, such as a different Unified User Interface, or a separate electronic health record?

Answer. No. I am not aware of any competing initiatives. Army leadership understands the importance of a coherent, central enterprise architecture.

NEW ENTERPRISE ARCHITECTURE

Question. General Schoemaker, how do you ensure Service specific needs are incorporated in the new enterprise architecture and how do you make sure they don't drive up costs throughout the system?

Answer. There is an established governance process by which the Services provide feedback on health information technology matters. This process is being improved to better meet the needs of the enterprise. However, a governance process for the new enterprise architecture has not yet been established. Once the process is established, the Army looks forward to full and active participation.

QUESTIONS SUBMITTED BY SENATOR PATTY MURRAY

ENTERPRISE ARCHITECTURE

Question. In your opinion, what additional steps need to be taken to ensure that electronic medical information is available to VA?

Answer. We currently exchange an enormous amount of information with the VA, some of which are computable through the bidirectional health information exchange (BHIE). Clearly more can be done, and one recommendation we have is to accelerate the overhaul of our BHIE framework to a National Health Information Network (NHIN) compliant exchange. Not only would this conversion improve the data exchange between VA and DOD, but it would also allow us to exchange information with other Federal and civilian healthcare organizations. Given that over 60 percent of our 9.2 million DOD beneficiaries receive care from the civilian healthcare sector, we have a growing need to be able to exchange information. Furthermore, this is a great opportunity for DOD and VA to help execute President Obama's vision for electronic health records in the United States and to establish a national model for Health Information Exchange. Given the establishment of joint VA-DOD Federal healthcare facilities, we will need to migrate to an interoperable information system that is more closely coupled to meet healthcare, business, and benefits requirements.

Question. How are each of your services obtaining medical records for servicemembers who receive contract care and how big of a problem is this for creating a complete record of care?

Answer. Many facilities currently receive a fax or e-fax from the managed care contractor or from the facility that provided the care. Some facilities manually attach the records into our electronic health record, but others do not. This process varies from treatment facility to treatment facility. There is also no enterprise referral and authorization system that interfaces with our electronic health record, which is a problem. Our adoption of a National Health Information Network will help to address this problem. Further, as part of the managed care support contracts we should require TRICARE contractors to collect and send medical records electronically back to DOD. Furthermore, our central document management system (HAIMS) under development by TMA for military treatment facilities should allow TRICARE contractors to submit consult results to AHLTA. This capability would provide an automated method for tracking and incorporating consult results into AHLTA as the comprehensive electronic health record repository.

JAG PROSECUTIONS

Question. JCS Chairman Mullen has said publically he's trying to break the stigma of psychological health in the active force, yet the JAGs are still prosecuting as a "crime" depressed people who attempt suicide. While the Surgeons General aren't responsible for the UCMJ, it seems to me that they might be concerned about JAG prosecutions of people who have severe mental distress while serving or after serving in combat.

Generals, do you think that the continued criminal prosecution of troops who commit suicide is a problem for the military's efforts to break the stigma of psychological health?

Answer. From a healthcare perspective as The Surgeon General of the Army, I acknowledge that charges of this sort are not helpful to a patient's mental state and probably increase the stress the Soldier is under. The Army and the DOD are working to deal honestly and directly with the behavioral health needs of our Soldiers and Families. This requires that our Soldiers are forthcoming about their own personal histories of behavioral health challenges and actively seek the care of available professional mental health providers both in garrison and on deployments when/if they encounter problems. We cannot help to remove the stigma associated

with behavioral health and its treatment without this proactive approach. Such charges could be counterproductive to the creation of such an environment of trust and healing.

As a Commander, I understand the necessity of good order and discipline. Commanders decide whether to refer cases for prosecution in the military justice system. In every case involving misconduct, the background and needs of the individual must be weighed along with the needs of the Army and the Nation it protects. Commanders and senior leaders weigh these competing needs in the context of often complex cases involving allegations of serious misconduct and equally serious potential psychiatric explanations for this behavior, which may or may not amount to a lack of competence or capacity or negate individual responsibility. All leaders work together in due process under the Uniform Code of Military Justice (UCMJ) where the advice and findings of medical professionals is certainly heard so we do the right thing for the Soldier and the Army. Finally, I assure you that each case is judged on its own merits by individual commanders after a thorough review of the facts, and after advice and counsel by a judge advocate.

I must note that there is no offense under the UCMJ for attempted suicide. There is an offense for malingering, which can include self-injury with intent to avoid duty or service, and another for self-injury without intent to avoid service. I note that while these are technically options under the UCMJ, I am unaware of Soldiers being charged for attempted suicide and, as a result, do not believe it to be a problem as the question suggests.

VISION CENTER OF EXCELLENCE AND EYE TRAUMA REGISTRY

Question. The NDAA fiscal year 2008 Section 1623, required the establishment of joint DOD and VA Vision Center of Excellence and Eye Trauma Registry. Since then, I am not aware of any update on the budget, current and future staffing for fiscal year 2009, the costs of implementation of the information technology development of the registry, or any associated construction costs for placing the headquarters for the Vision Center of Excellence at the future site of the Walter Reed National Medical Center in Bethesda.

What is the status on this effort?

Answer. As the Army Surgeon General and Commanding General of the U.S. Army Medical Command, I do not have an active role in the establishment of the joint DOD and VA Vision Center of Excellence and Eye Trauma Registry. Responsibility for this organization and the registry belongs to the Office of the Assistant Secretary of Defense for Health Affairs.

QUESTION SUBMITTED BY SENATOR THAD COCHRAN

DEPLOYMENT

Question. Over the past few years, new programs have been implemented to assess the health of soldiers after deployment. With the large group of Guardsmen alerted for deployment and who have been deployed, including many from my home state of Mississippi, I am concerned about the continuum of care upon their return into their communities. Are you confident that their medical needs are being met after returning from deployment?

Answer. During the current conflict, the Department of Defense (DOD) developed new strategies to support Soldiers upon redeployment. As a result of these initiatives, I am extremely confident our Reserve Component (RC) Soldiers' medical and dental needs are being met.

Prior to demobilization, each Soldier completes a Post Deployment Health Assessment (PDHA) using DD Form 2795 which includes a questionnaire completed by the Soldier and a face-to-face interview with a privileged healthcare provider. This is the best opportunity for the Soldier to document any health concerns related to their deployment. If significant concerns exist, the Soldier may remain on Active Duty for treatment. It may however be advantageous for some RC wounded warriors, at their discretion, to be released from active duty before the optimal medical benefit has been attained. This option does not release DOD from its moral obligation to render care for conditions sustained in the line of duty. Care for lesser concerns occurs when the Soldier returns home using the 180-day Transitional Assistance Management Program (TAMP) as a TRICARE benefit.

Also at the demobilization station, each Soldier receives a dental exam as part of the Dental Demobilization Reset (DDR) program. Treatment is also now available to Soldiers at the demobilization station. However, treatment that would cause a

delay in returning a Soldier home is deferred and provided at their home station using the Army Selected Reserve Dental Readiness System (ASDRS).

Each Soldier must complete a Post Deployment Health Re-Assessment (PDHRA) using DD Form 2900 between 90–180 days after demobilization and complete another interview. This is a key opportunity for Soldiers to highlight issues they did not document at demobilization or surface after returning home. This documentation is critical to establish a line of duty connection, enabling continuing medical benefits through TRICARE and VA eligibility. Reserve Component Soldiers may also be voluntarily returned to active duty for medical treatment if we identify that treatment is warranted for a medical issue incurred while on active duty.

All Soldiers undergo annual Periodic Health Assessments (PHA), where the Soldier completes an on-line questionnaire and is assessed by a provider using the latest recommendations of the U.S. Preventive Services Task Force.

The PDHA, PDHRA, and PHA create a system of continuous visibility of the medical concerns of our Soldiers and provide regular opportunities for Soldiers to raise deployment-related concerns.

QUESTIONS SUBMITTED BY SENATOR CHRISTOPHER S. BOND

SERVICEMEMBERS TREATMENT

Question. Thank you for your service and for taking the time to present to us your insights into our medical service programs. I know the U.S. Army takes the health of our warfighters personally, and it is clear that our active and reserve medical practitioners are the best in the world.

Johns Hopkins Medical Center defines osteoarthritis as a type of arthritis characterized by pain and stiffness in the joints, such as those in the hands, hips, knees, spine or feet, due to breakdown of cartilage; the gradual breakdown of cartilage that occurs with age and is due to stress on a joint.

Many of our active, reserve, and former servicemembers are currently struggling with cases of severe ligament and joint damage that will later manifest themselves into long term cases of osteoarthritis.

Our service men and women bear the largest physical burden during combat. I am concerned with the large amount of weight our warfighters are forced to carry across considerable distances and unforgiving terrain. Particularly, I am concerned with the physical toll that war exacts from our men and women, most notably in the forms of osteoarthritis that arise when injuries go untreated during combat.

Is the U.S. Army doing everything it can to properly treat our servicemembers' injured limbs and joints while they are simultaneously fighting in austere environments in order to lessen the chance that these particular injuries will manifest themselves into debilitating cases of osteoarthritis later in life?

Answer. This challenge of equipping Soldiers on the battlefield with the right technology and level of protection—without overloading them, is a difficult one. The U.S. Army Research Institute of Environmental Medicine (USARIEM) has an extensive research program aimed at documenting the physiological demands of war fighting, identifying biomedical solutions that facilitate meeting those demands, and optimizing the health and performance of Warriors during operational missions and garrison training.

Arthritis is a degeneration of bone and cartilage that results in progressive wearing down of joint surfaces. Arthritis in a non-rheumatoid patient under 50 is almost uniformly due to post-traumatic conditions. Treatment of injuries leading to arthritis in young people has to do with prevention as well as acute and chronic treatment to mitigate progression. In 2008, U.S. Army orthopedic surgeons performed over 5,000 knee arthroscopies on Soldiers. These joint procedures do not necessarily delay the progression of arthritis. In addition, joint preserving techniques such as cartilage implants and alignment procedures like osteotomies or knee replacement procedures can substantially prolong the useful and functional years of a Soldier's joints. Optimal outcomes from these procedures require coordination between orthopedic surgeons and physical therapists. The bottom line is we do not know how treatment interventions impact long term outcomes.

Currently, a team from the University of Pittsburgh is conducting research on the injury prevention and performance enhancement practices used by 101st Airborne (Air Assault) Soldiers at Fort Campbell, Kentucky. The comprehensive assessment initially evaluated Soldiers' nutrition, anaerobic/aerobic capacity, strength, body composition, balance/agility, etc. Based upon those findings, new training programs were developed. Soldiers participated in an 8-week physical training course, and

then a reassessment was conducted. Initial reports are positive and show a decrease in injury rates and an improvement in overall unit performance.

We know that prevention is a key component to mitigate the progression of arthritis and Soldiers who train and condition properly are much less likely to sustain an injury during or after deployment. To that end, the Army is doing several things to improve the medical readiness of the force. First, the Army is in the process of changing the physical fitness doctrine and training programs to better prepare Soldiers for the demands of military operations. "Physical Readiness Training" (PRT) is the emerging U.S. Army physical training doctrine designed by the U.S. Army Physical Fitness School to improve Soldiers' physical capability for military operations. PRT follows the exercise principles of progressive overload, regularity, specificity, precision, variety, and balance. The Army plans to begin implementing the new PRT doctrine across the Force over the next year.

In the meantime, units across the Army have physical therapists assigned to special operations units, Initial Entry Training, and Brigade Combat Teams that use a sports medicine approach to identify, treat, and rehabilitate musculoskeletal injuries expeditiously—which is critical in a wartime environment as Soldiers are able to stay healthy and "in the fight." Treatments for Soldiers with musculoskeletal injuries include joint manipulation, specific therapeutic exercises, soft tissue mobilization as well as a variety of modalities to mitigate pain, promote healing, and prevent reoccurrence.

Programs focusing on injury prevention and performance enhancement emphasize core strengthening, aerobic endurance, muscular strength and power, muscular endurance (anaerobic endurance), and movement proficiency (incorporates balance, flexibility, coordination, speed and agility) to better prepare Soldiers to physically withstand the rigors of combat.

The U.S. Military Health System is doing a tremendous amount to preserve the active function of Soldiers with limb injuries but more research efforts on clinical outcomes is necessary to determine if what we are doing makes a difference. By making sure Soldiers receive early identification and treatment of their musculoskeletal injuries and improving Soldiers' physical strength and conditioning, we also improve the overall medical readiness of our Force.

QUESTIONS SUBMITTED BY SENATOR MITCH MCCONNELL

SOLDIER SUICIDES

Question. LTG Schoemaker, Congress has established a national suicide hotline for returning troops, as well as increased funding for mental health for active military personnel. However, there remains a high number of soldier suicides. What preventative measures is DOD taking to address this problem? What, if any, legislative action would DOD need Congress to take to expand suicide awareness and education on posts?

Answer. The Army has been vigorously pursuing suicide prevention and intervention efforts. Nevertheless the number of suicides continues to rise, which is an issue of great concern to us.

In March 2009, the Vice Chief of Staff of the Army established a new Suicide Prevention Task Force to integrate all of the efforts across the Army. A Suicide Prevention General Officer Steering Committee (GOSC) was previously established in March 2008. The GOSC's efforts are ongoing, with a focus on targeting the root causes of suicide, while engaging all levels of the chain-of-command.

From February 15, 2009 to March 15, 2009, the Army conducted a total Army "stand-down" to ensure that all Soldiers learned not only the risk factors of suicidal Soldiers, but how to intervene if they are concerned about their buddies. The "Beyond the Front" interactive video is the core training for this effort. It was followed by chain teaching which focuses on a video "Shoulder to Shoulder; No Soldier Stands Alone" and vignettes drawn from real cases. The Army continues to use the ACE "Ask, Care, Escort" tip cards and strategy.

The Army established the Suicide Analysis Cell at the Center for Health Promotion and Preventive Medicine (CHPPM) in July 2008. This is a suicide prevention analysis and reporting cell that has epidemiological consultation capabilities. The Cell gathers suicidal behavior data from numerous sources, including the Army Suicide Event Report (ASER), The U.S. Army Criminal Investigation Division Reports, AR 15-6 investigations, and medical and personnel records.

The Army Suicide Prevention Plan's overarching strategies include: (1) raising Soldier and Leader awareness of the signs and symptoms of suicide and improving intervention skills, (2) providing actionable intelligence to Leaders regarding sui-

cides and attempted suicides; (3) improving Soldiers' access to comprehensive care; (4) reducing the stigma associated with seeking mental healthcare; and (5) improving Soldiers' and their Families' life skills. In the fall of 2008, the Army Science Board studied the issue of suicides in the Army. While their report has not been officially released, it reiterated the Army's strategies and the need for a comprehensive multi-disciplinary approach. It did not find easy, simple solutions to the problem.

The Army has also developed a Memorandum of Agreement (MOA) with the National Institutes of Mental Health (NIMH), which was signed in the fall of 2008. This is an ongoing, 5-year research effort to better understand the root causes of suicide and develop better prevention efforts. This NIMH effort is being coordinated with the CHPPM Suicide Analysis Cell, as well as with suicide prevention efforts from the Walter Reed Army Institute of Research (WRAIR).

These extensive new efforts build upon: (1) development and deployment of numerous updated training and education efforts, including Battlemind and the Chain Teach Program on mTBI/PTSD; (2) widespread training of Soldiers by Chaplains and behavioral health providers; (3) robust combat stress control efforts and Chaplain presence in theater; (4) hiring and recruiting additional behavioral health providers; (5) "Strong Bonds", a relationship-building program developed by the Chaplains; (6) surveillance of all completed suicides and serious suicide attempts via the Army Suicide Event Report; and (7) suicide risk assessment screening of all Soldiers who enter the Warrior Transition Units (WTUs).

We are also partnering with the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury to work on identifying best practices for the identification and intervention of mental health issues that include suicide, PTSD, TBI, and depression. Both the Army and the DOD are studying the addition of tools which will further query Soldiers for symptoms of suicide and depression. All suicide screening tools must be evaluated carefully for sensitivity, specificity, and positive and negative predictive values.

An enhanced and integrated public health approach is needed. We must continue to emphasize Leadership involvement, reducing stigma, training and education, access to mental health care, and a multidisciplinary community approach to suicide prevention.

We must continue to: (1) expand the capacity for behavioral health treatment throughout the system; (2) improve continuity of care between different helping agencies and providers; (3) improve training of all medical personnel and Chaplains in identification and mitigation of risky behaviors; and (4) continue a multi-pronged approach to decrease stigma and encourage help-seeking behavior.

Awareness and education are needed across the nation, as well as on military installations. I am currently unaware of any legislative action required to expand suicide awareness and education on military posts.

IRELAND ARMY HOSPITAL/BLANCHFIELD ARMY HOSPITAL

Question. LTG Schoemaker, what are the authorized manning levels for nurses and medical personnel at the Ireland Army Hospital at Fort Knox and Blanchfield Army Hospital at Fort Campbell? Is there a minimum threshold that must be met under Army rules, regulations or custom? Is that threshold being met at Ireland and Blanchfield Hospitals and is it sufficient?

Answer. The Army Medical Command is meeting minimum staffing requirements at both Blanchfield and Ireland Army Hospitals. Across the command we face staffing challenges due to medical personnel deploying in support of contingency operations, lack of some specialty provider backfills from the Reserve Component, and difficulty with recruiting civilian and/or contract providers in and around some military communities. Despite these obstacles, we are able to staff our treatment facilities and deliver high-quality, evidence-based care to our deserving beneficiaries.

The authorized manning levels for nurses and medical personnel at the Ireland Army Hospital at Fort Knox and Blanchfield Army Hospital at Fort Campbell are as follows:

Ireland Army Hospital

Nurse Authorizations: 57 Military, 87 Civilian equals 144 total
 Medical Authorizations: 37 Military, 16 Civilian equals 53 total
 Other Medical ancillary personnel that clinically support patients equals 406
 Grand total of authorized clinical nurses, physicians and other ancillary personnel equals 603

Blanchfield Army Hospital

Nurse Authorizations: 83 Military, 195 Civilian equals 278 total

Medical Authorizations: 84 Military, 20 Civilian equals 104 total
 Other Medical ancillary personnel that clinically support patients equals 635
 Grand total of authorized clinical nurses, physicians and other ancillary personnel equals 927.

Authorization numbers above do not include counts of non-clinically focused personnel, in such purely administrative mission areas such as Logistics, Medical Library, Quality Mgt, File Clerks/Transcription, Environmental Services (House-keeping/Linen Mgt/Facilities), Patient Admin Medical Records, Patient Affairs, Uniform Business Office, Third Party Collections, and Troop Command.

Finally, clinical staffing levels for a hospital are a function of the reliant population to be supported and/or workload demand. Where work centers are open 24/7, there are always minimum staffing requirements independent of workload. All direct patient care units requiring 24/7 staffing at Fort Knox and Fort Campbell have sufficient workload and staffing levels that exceed required manning thresholds and minimums.

PTSD/TBI

Question. LTG Schoemaker, what are the typical steps taken for soldiers who may have post-traumatic stress disorder (PTSD) and traumatic brain injuries (TBI) to ensure they get the proper care? Are there any further legislative steps that Congress could take to improve screening and the delivery of care to soldiers with PTSD and TBI?

Answer. Army Leadership is taking aggressive, far-reaching steps to ensure an array of behavioral health services are available to Soldiers and their Families to help those dealing with PTSD and other psychological effects of war.

The following list of continually evolving programs and initiatives are examples of the integrated and synchronized web of behavioral health services in place to help Soldiers and their Families heal from the effects of multiple deployments and high operational stress:

- The Post Deployment Health Assessment (PDHA), originally developed in 1998, was revised and updated in 2003. All Soldiers receive the PDHA upon re-deployment, usually in the Theater of Operations shortly prior to departure.
- In the fall of 2003, the first Mental Health Assessment Team (MHAT) deployed into Theater. Never before had the mental health of combatants been studied in a systematic manner during conflict. Four subsequent MHATs in 2004, 2005, 2006, and 2007 continue to build upon the success of the original and further influence our policies and procedures not only in theater, but before and after deployment as well. Based on MHAT recommendations, the Army has improved the distribution of behavioral health providers and expertise throughout the theater. Access to care and quality of care have improved as a result. An MHAT is currently in Iraq, and will be deploying to Afghanistan within the next 3 months.
- In 2004, researchers at the Walter Reed Army Institute of Research (WRAIR) published initial results of the groundbreaking “Land Combat Study” which has provided insights related to care and treatment of Soldiers upon return from combat and led to development of the Post Deployment Health Reassessment (PDHRA).
- In 2005, the Army rolled out the PDHRA. The PDHRA provides Soldiers the opportunity to identify any new physical or behavioral health concerns they may be experiencing that may not have been present immediately after their redeployment. This assessment includes an interview with a healthcare provider and has been a very effective new program for identifying Soldiers who are experiencing some of the symptoms of stress-related disorders and getting them the care they need before their symptoms manifest as more serious problems. We continue to review the effectiveness of the PDHRA and have added and edited questions as needed.
- In 2006 the Army Medical Command (MEDCOM) piloted a program at Fort Bragg intended to reduce the stigma associated with seeking mental healthcare. The Respect-Mil pilot program integrates behavioral healthcare into the primary care setting, providing education, screening tools, and treatment guidelines to primary care providers. It has been so successful that medical personnel have implemented this program at 15 sites across the Army. Another 17 sites should implement it in 2009.
- Also in 2006, the Army incorporated into the Deployment Cycle Support program a new training program developed at WRAIR called “BATTLEMIND” Training. Prior to this war, there were no empirically validated training strategies to mitigate combat-related mental health problems. This post-deployment

training is being evaluated by MEDCOM personnel using scientifically rigorous methods, with good initial results. It is a strengths-based approach highlighting the skills that helped Soldiers survive in combat instead of focusing on the negative effects of combat (www.battlemind.org).

- Two DVD/CDs that deal with Family deployment issues are now available: an animated video program for 6 to 11 year olds, called “Mr. Poe and Friends,” and a teen interview for 12 to 19 year olds, “Military Youth Coping with Separation: When Family Members Deploy.” Viewing the interactive video programs with children can help decrease some of the negative outcomes of family separation. Parents, guardians and community support providers will learn right along with the children by viewing the video and discussing the questions and issues provided in the facilitator’s guides with the children during and/or after the program. This reintegration family tool kit provides a simple, direct way to help communities reduce tension and anxiety, use mental health resources more appropriately, and promote healthy coping mechanisms for the entire deployment cycle that will help Families readjust more quickly on redeployment.
- In mid-July 2007 the Army launched a PTSD and mTBI Chain Teaching Program that reached more than one million Soldiers, a measure that will help ensure early intervention. The objective of the chain teaching package was to educate all Soldiers and Leaders on PTSD and TBI so they can help recognize, prevent and treat these debilitating health issues.
- In 2008 the Department of Defense revised Question #21, the questionnaire for national security positions regarding mental and emotional health. The revised question now excludes non-court ordered counseling related to marital, family, or grief issues, unless related to violence by members; and counseling for adjustments from service in a military combat environment. Seeking professional care for these mental health issues should not be perceived to jeopardize an individual’s professional career or security clearance. On the contrary, failure to seek care actually increases the likelihood that psychological distress could escalate to a more serious mental condition, which could preclude an individual from performing sensitive duties.
- In 2008, the Army began piloting Warrior Adventure Quest (WAQ). WAQ combines existing high adventure, extreme sports and outdoor recreation activities (i.e., rock climbing, mountain biking, paintball, scuba, ropes courses, skiing, and others) with a Leader-led after action debriefing (L-LAAD). The L-LAAD is a Leader decompression tool that addresses the potential impact of executing military operations and enhances cohesion and bonding among and within small units. L-LAAD integrates WAQ and bridges operational occurrences to assist Soldiers transition their operational experiences into a “new normal”, enhancing military readiness, reintegration, and adjustment to garrison or “home” life.
- Beginning February 15, 2009, the Army started a 30 day “stand-down” to ensure that all Soldiers learned not only the risk factors of suicidal Soldiers, but how to intervene if they are concerned about their buddies. The “Beyond the Front” interactive video is the core training for this effort. It will be followed by a chain teach which focuses on a video “Shoulder to Shoulder; No Soldier Stands Alone” and vignettes drawn from real cases.

Presently, we are partnering with the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury and working to identify best practices for the identification and intervention for mental health issues that include suicide, PTSD, TBI, and depression. We are also directing special attention to the processes and procedures by which we transfer care for affected Soldiers as they redeploy or move from one installation to another or one treatment facility to another.

I am not aware of any legal or regulatory obstacles that impede our efforts to improve screening and the delivery of care to Soldiers with PTSD or TBI.

IRELAND ARMY HOSPITAL/BLANCHFIELD ARMY HOSPITAL

Question. LTG Schoemaker, do the Ireland and Blanchfield hospitals refer soldiers to regional hospitals that specialize in brain and spinal cord injury rehabilitation? What formal partnerships are established between post hospitals and regional hospitals in Kentucky to ensure soldiers with these conditions are given the best care? If there are no formal partnerships, what is the process for establishing such an affiliation?

Answer. Yes, both Blanchfield Army Community Hospital and Ireland Army Community Hospital refer Soldiers to specialized hospitals for brain and spinal cord injury rehabilitation. Both hospitals use the Department of Veterans Affairs Polytrauma Centers and other Veterans Affairs medical centers within the region, such as the DVA Medical Center in Memphis, Tennessee.

At Blanchfield Army Community Hospital, we use two facilities in Nashville, Skyline and Vanderbilt University Medical Center, for beneficiaries with brain and spinal cord injuries. These facilities are in the TRICARE Managed Care Support Contracts network.

At Ireland Army Community Hospital, Soldiers with brain and spinal cord injuries are regularly referred to regional resources such as Frazier Rehabilitative Services, located in Louisville, Kentucky for comprehensive TBI services as well as to the program at the University of Kentucky at Lexington.

The criteria for selection of the appropriate facility includes the Soldier's unique needs, the ability of the brain and spinal cord injury program to accommodate those needs and related considerations such as the Soldier's hometown and location of family.

The primary mechanism for establishing relationships with regional hospitals is through the Managed Care Network established by our TRICARE Region business partner. The TRICARE Managed Care Support Contractor contacts area facilities to establish the relationship. When Ireland or Blanchfield hospital identifies a facility that is not part of the network, we notify TRICARE with a request that the facility be contacted and considered for credentialing to network status.

DOD/VA FACILITIES

Question. LTG Schoemaker, per the Wounded Warrior legislation enacted in 2007 and the Dole-Shalala Commission's recommendations that were reported in 2007, improvements were to be made to the coordination between DOD and VA facilities to better care for our injured troops who are transitioning between the two healthcare systems. What steps have already taken place to improve coordination between the two Departments? What steps remain? Are these provisions sufficient to provide a seamless transition for wounded warriors from the DOD to the VA system? Does DOD need further legislation to improve matters? If so, what?

Answer. On October 12, 2007, the Vice Chief of Staff of the Army (VCSA), General Cody requested assistance from the Acting Secretary, Department of Veterans Affairs (VA) to reduce transition obstacles between the DOD managed care system and the VA system of care. The VCSA specifically asked the VA Secretary to support three initiatives to ease servicemember transition. The three initiatives include: collocated one Veterans Benefits Administration (VBA) Counselor with the Army Nurse Case Managers at each Warrior Transition Unit (WTU), provide Social Workers (MSW) at seven Army Installations which include, Forts Drum, Stewart, Campbell, Benning, Knox, Riley, and Fort Bliss, and provide VBA Counselors at all Soldier Family Assistance Centers (SFACs).

As of February 2009, there are 57 VA Regional Offices and 10 Satellite VA Offices established at Military Treatment Facilities to provide VA expert counsel on Veterans Benefit Administration (VBA) compensation and entitlement benefits programs as well as clinical care offered to Warriors in Transition (WTs) and their Families by the Veterans Health Administration (VHA). The VBA has representatives at all 35 WTUs. For those WTs that are assigned to Community Based WTU's (CBWTUs), the VA has contracted service providers to care for their administrative and clinical needs. The DVA does not intend to place VA Liaisons in overseas assignments. However, the VA has numerous outreach programs such as www.va.gov, direct mail pieces, booklets, pamphlets, videos, and broadcast shows on AFN (Armed Forces Network) to assist Service and Family Members at remote locations. Soldiers and family members may also contact the VA via telephone worldwide at 800-827-1000.

The Army has also assigned liaison officers to the four VA poly-trauma centers (Richmond, Virginia; Tampa, Florida; Palo Alto, California; and Minneapolis, Minnesota). Furthermore, we have assigned 60 advocates from the Army Wounded Warrior Program to 51 VA medical centers to assist Soldiers and Veterans receiving care.

QUESTIONS SUBMITTED TO VICE ADMIRAL ADAM M. ROBINSON

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

Question. Admiral Robinson, North Chicago Veterans Center is scheduled to merge with the Naval Health Clinic Great Lakes on October 1, 2010. Aside from technology requirements, there are several regulatory and legislative challenges that remain unresolved. Could you please describe each of the outstanding issues, the difference between the VA and the Department's positions and a timeline for their resolution?

Answer. Legislation addressing the four issues was introduced as an amendment to the National Defense Authorization Act (NDAA) 2009 but was not included. H.R. 1267 was introduced by Congresswoman Bean (D-IL) and Congressman Kirk (R-IL) to the House of Representatives on March 3, 2009. H.R. 1267 was based on an old legislative version and does not contain the Department of Navy and Veteran's Affairs agreed upon language. Senators Durbin (D-IL) and Akaka (D-HI) are currently working on introducing the legislation on the Senate side and this version contains the agreed upon language. Strategies to reconcile language differences between the two versions are underway. There is anticipation that the legislative package could be passed within 30–40 days as part of a Defense supplemental bill.

The legislation will address four challenges to Great Lakes/North Chicago integration:

—*Designation of the Federal Health Care Center (FHCC) as a Uniformed Treatment Facility.*—Legislative relief is required for the designation of the FHCC as a Uniformed Treatment Facility (UTF). This will determine the cost of available care to DOD beneficiaries. If UTF designation is not achieved, the FHCC will require cost shares for retired TRICARE beneficiaries using the VA portion of the FHCC. Beneficiaries over age 65 enrolled in TRICARE for Life will not be eligible to use the VA portion of the FHCC without significant cost shares. VA and DOD concur on the need for UTF designation.

—*Permission to transfer all DOD civilian employees into the VA personnel system.*—Legislative relief is required to establish a single integrated personnel system that transfers DOD civilian employees into the VA personnel system. This will streamline management functions and reduces the disparity in pay and benefits for individuals working side by side. NHCGL civilian personnel are appointed under Title 5 authority while VA employees are appointed under Title 38. Approximately 450 civilian NHCGL employees will be impacted by this transfer. This includes those working in the Recruit and Student Medical and Dental Clinics on DOD property. The proposed Senate legislation contains language designed to protect DOD civilians transitioning into the VA personnel system by eliminating probationary periods for those that have already completed this as a DOD employee. Additionally, staff will retain at least the same pay and seniority (tenure) as they have in the DOD system.

Long-term success depends on identifying and retaining adequate numbers of leadership positions for uniformed staff at the FHCC. An organizational leadership structure addressing this requirement is in draft form.

Both DOD and VA support the Transfer of Personnel with the agreed upon language as contained in the bill sponsored by Senator Durbin. The National AFGE does not concur, as they do not support the Title 38 appeal process with the loss of Merit Systems Protection Board appeal rights currently afforded for the Hybrid Title 38 and Title 5 employees.

—*Create a funding mechanism to provide a single unified funding stream to the FHCC.*—The VA and DOD have separate appropriations for meeting the healthcare missions of each agency. Each have multiple funding streams that support the various cost components, that when combined, currently comprise the totality of funding required to meet the healthcare mission assigned to each facility. The intent at the FHCC is to have a single budget at the FHCC for the management of all medical and dental care for all beneficiaries. To create a single budget, the proposed solution is to extend Joint Incentive Fund (JIF) authority with the intent to use this authority for dual agency funding of the FHCC. The VA fully supports this but DOD has expressed concern about using this mechanism to fund the FHCC. A JIF-like alternative is being considered by DOD and VA.

—*Create a legislative mechanism to allow DOD to transfer the Navy Ambulatory Care Clinic, parking structure, support facilities, and related personal property and medical equipment to the VA if desired at a later date.*—Both VA and DOD agree with the need to establish a transfer mechanism. DOD plans to retain ownership of the new Ambulatory Care Clinic initially. The transfer of personal property is dependent on the ability of VA systems to effectively track the property and provide accountable data back to DOD. Logistics staff on Navy and VA sides are analyzing this.

NDAA 2009 Section 706 requires nine specific areas be addressed in a written agreement for a Combined Federal Medical Facility. An Executive Sharing Agreement (ESA) is currently being written to address all nine areas. Target date for SECDEF/SECVA signature on this document is November 2009. The framework of this document is dependent on the legislative issues as indicated above.

Question. Admiral Robinson, what are the specific mechanisms in place to ensure coordination at the planning, budgeting, and technical levels between the various

federal agencies (including NIH) on areas like Traumatic Brain Injury or Malaria research? Are there examples of DOD, VA, or NIH dollars being moved or redundant activities being terminated as a result of these coordination efforts?

Answer. In regards to malaria research, the Navy has a long history of recognizing the importance of coordination in those areas mentioned by the Senator. For the past 2 years, the Navy and the Army have run a joint program, the U.S. Military Malaria Vaccine Program. Leaders of this program are members of the Federal Malaria Vaccine Coordination Committee (FMVCC) chaired by USAID which provides a forum for interagency collaboration and coordination in this important area of research so that resources are optimized and overlap minimized.

The Navy collaborates with USAID, NIAID, CDC, and indirectly with NIST on several vaccine projects including recombinant protein-based vaccines, adenovirus-vectored vaccines, an attenuated whole sporozoite vaccine and the development of field testing sites in Africa and elsewhere.

The military uniquely targets its funding for developing vaccines for deployed military populations and civilian travelers where the required level and duration of protection required is much higher, and is currently significantly underfunded for the mission. Currently, the vaccine products in development by all federal agencies except DOD are aimed at the vulnerable populations of children and pregnant women in malaria endemic countries. The primary non-government funding source, the Bill and Melinda Gates Foundation, likewise supports this humanitarian mission.

For TBI, Navy medicine works closely with the Defense Center of Excellence (DCoE) for Psychological Health and Traumatic Brain Injury to coordinate TBI programs. BUMED also collaborates with NIH, CDC, the Uniformed Services University, the Army and Air Force, and the VA for TBI initiatives. The DCoE is planning to fund a central database at NIH which will also include Navy TBI information, for example. In addition, Navy medicine is responsible for tracking/surveillance for TBI and is developing and testing an automated neurocognitive test instrument, called Braincheckers. The Naval Health Research Center is conducting TBI research projects related to surveillance and force protection. The Naval Medical Research Center recently completed a study on the effect of acute blast exposure on cognition in Marine Corps Breachers, an effort funded jointly by the Defense Advanced Research Projects Agency and the Office of Naval Research. The BUMED consultant for TBI programs meets regularly with counterparts in the other services, the DCoE, NIH, CDC, and VA to discuss new collaborative efforts.

Question. Admiral Robinson, while attention must be focused on the resilience training of our service members and their families, I also suspect that caring for our wounded takes a considerable toll on our care givers. What efforts are underway to address the well-being of our caregivers in order to retain these critical personnel?

Answer. Navy Medicine is dedicated to doing what is right for our active duty and retired Sailors, Marines and their families; and, we are just as committed to doing what is right for our caregivers. Occupational stress and compassion fatigue can undermine professional and personal performance, impact job satisfaction, and result in poor retention. The Navy Medicine Caregiver Occupational Stress Control (OSC) Program, sometimes called "Care for the Caregiver", comprises several strategies designed to enhance individual resilience, strengthen unit cohesion, and support command level assessment of the work environments of caregivers. A main strategy of the Navy Medicine Caregiver OSC program is to provide Navy Medicine personnel multidisciplinary occupational stress training that matches the treatment facility OPTEMPO and creating trained intervention teams, with a mix of officer and enlisted, at our major treatment facilities. This strategy will provide staff with skills and knowledge about the stress continuum model, stress first-aid, buddy care assessment and intervention, self-care/compassion fatigue skills, work-environment assessment, and education outreach. The foundation of dedication, knowledge, skills, and passion that results in Navy Medicine's superior quality of care is also the foundation of caring for our caregivers.

Program Elements:

"Rule Number Two" Lecture Series.—Started in January 2008 to educate Navy Medicine Leaders about the operational and occupation stress on caregivers and leadership strategies to mitigate that stress.

Caregiver Occupational Stress Training Teams.—Completed training of 90 team members for 15 medical treatment facilities in January 2009. Expanded MTF team training started in March 2009 designed to have 20 or more stress and coping peer trainers at each MTF.

All Hands Awareness Training.—Medical treatment facility (MTF) focused training to initiate all hands awareness and core peer support skills started in February 2009.

Caregiver OSC Training Resources.—Caregiver OSC video vignettes and Corpsmen focused graphic training novel in production.

Caregiver Stress Assessment.—Navy Medicine wide assessment of caregiver resilience and stress.

Question. Admiral Robinson, the Department and the VA are working on creating an interoperable medical health record that will allow for a seamless transition for our service members and also provide continuity of care at joint DOD/VA facilities like the future James A Lovell Federal Health Care Center. I understand that premature steps have been taken to procure systems for the Lovell Center that would repeat the mistakes of focusing on site specific fixes rather than our joint enterprise as a whole. Since Navy is an equal partner in this endeavor with the VA, could you please detail us on the current situation, the path forward, and how it integrates into the overarching medical enterprise architecture?

Answer. The electronic medical record is an area where there is pressure to move to one system or the other. Neither AHLTA nor VISTA can sustain the requirements of both DOD and VA. The IM/IT solution being crafted must sustain missions of both organizations. The FHCC establishment date of October 1, 2010 creates mounting time pressures. The time passage of pending Congressional legislation is crucial to implementing the full vision of this project. Because Great Lakes is being touted as the model for future fully integrated federal healthcare, there is enormous self-imposed pressure to do it right. System solutions (financial reconciliation, electronic medical record, information management, etc.) cannot be local fixes, but must be crafted in a manner that lends to exportability throughout the enterprise.

Question. Admiral Robinson, how do you ensure Service specific needs are incorporated in the new enterprise architecture and how do you make sure they don't drive up costs throughout the system?

Answer. The Navy will engage with the central program offices developing the solutions to make sure that they meet the needs of the Navy as well as being in line with the direction of the TriCare Management Activity. If the needs are a part of the overarching architecture then that should not drive up the cost any more than would occur as both agencies are charged with more and more sharing of patient data between DOD and VA. The Navy was identified as the first service branch to complete a single site integration with a VA facility but Army and Air Force are in the queue with four proposed integration sites.

QUESTIONS SUBMITTED BY SENATOR PATTY MURRAY

Question. JCS Chairman Mullen has said publically he's trying to break the stigma of psychological health in the active force, yet the JAGs are still prosecuting as a "crime" depressed people who attempt suicide. While the Surgeons General aren't responsible for the UCMJ, it seems to me that they might be concerned about JAG prosecutions of people who have severe mental distress while serving or after serving in combat. Do you think that the continued criminal prosecution of troops who commit suicide is a problem for the military's efforts to break the stigma of psychological health?

Answer. The decision whether to court-martial a sailor and, if so, for what offense, is within the sole discretion of the cognizant commander, usually with the benefit of input from a judge advocate. However, our research covering the last 5 years does not reveal any instance of a Sailor being charged with a criminal offense relating to a failed suicide attempt.

Even in those cases where a Sailor is determined to be free of any serious mental defect, the Uniform Code of Military Justice does not criminalize suicide or attempted suicide. A charge does exist to address malingering (feigning a debilitating condition or intentionally inflicting self-injury specifically to avoid duty). Similarly, a charge exists to address self-injury in those cases where it is prejudicial to good order and discipline. Either of those charges, in certain circumstances, could conceivably support a prosecution arising out of a failed suicide attempt where a commander believes that the attempt was actually an attempt to avoid duty or was otherwise prejudicial to good order and discipline.

In cases where a Sailor's mental health is in question, the Manual for Courts-Martial requires the commander contemplating charges to request a mental health inquiry pursuant to Rule for Court-Martial (RCM) 706. Although the RCM 706 request is issued by the commander, the need for the request, if not immediately identified by the commander him/herself, may be raised by any investigating officer, the

trial counsel, defense counsel, military judge, or a member of the court-martial, if one is already in progress. Pursuant to the rule, the Sailor's mental health will be evaluated by a board which must normally include at least one psychiatrist or clinical psychologist, and may also include one or more physicians.

If a 706 board determines that a Sailor was unable to appreciate the wrongfulness of his actions at the time of the alleged offense, or does not currently have the mental capacity to assist in his own defense, depending on the stage of the proceedings, charges may be dismissed; or the determination may result in a finding of not guilty due to lack of mental responsibility. In any case, such determination would act as a bar to conviction, if not prosecution. If a 706 board determines that no mental defect exists that would affect the Sailor's mental responsibility at the time of the alleged offense or his ability to assist in his own defense, there is nothing to preclude lawful prosecution.

Question. In your opinion, what additional steps need to be taken to ensure that electronic medical information is available to VA?

Answer. Currently we use the Bidirectional Health Information Exchange (BHIE) but it is considered inadequate as not all of the data is available in an easy to read format. BHIE, or a modernized replacement of BHIE, needs to be made more robust and improvements made in the presentation of the data to the provider. Establishment of trusted networks between the DOD and VA would allow greater access to the data by both agencies. Differences in the information assurance regulations of both Departments, and between the military Services, makes this a cumbersome, time consuming, and difficult process.

Question. How are each of your services obtaining medical records for service members who receive contract care and how big of a problem is this for creating a complete record of care?

Answer. There is limited information sharing for patients who receive care in the direct care system but who may also receive some care in the civilian health care sector. For example, in some cases a military healthcare provider may refer a patient to a civilian healthcare specialist for a consult. These consult results are frequently only returned to the military provider in the form of a written document. In some cases they may be sent as a fax or as an email message (or attachment to an email message).

Regardless of whether the information is received in paper form or via an electronic transfer of a scanned document, there are limitations as to how that information can be incorporated into AHLTA (Armed Forces Health Longitudinal Technology Application). Those limitations make it difficult for military healthcare providers to access that information effectively.

In order to address the current limitations, DOD is pursuing a number of initiatives. We are implementing a capability to capture scanned documents and other images as part of our electronic health record. And, we will index those documents so that they are readily retrievable by military healthcare providers. We are also piloting a more robust interchange capability with the civilian sector through the Nationwide Health Information Network (NHIN) initiative. As the civilian healthcare providers adopt electronic health records, we will be able to take advantage of the NHIN infrastructure to share information in a more flexible form.

Question. The NDAA fiscal year 2008 Section 1623, required the establishment of joint DOD and VA Vision Center of Excellence and Eye Trauma Registry. Since then, I am not aware of any update on the budget, current and future staffing for fiscal year 2009, the costs of implementation of the information technology development of the registry, or any associated construction costs for placing the headquarters for the Vision Center of Excellence at the future site of the Walter Reed National Medical Center in Bethesda. What is the status on this effort?

Answer. As the DOD/VA Vision Center of Excellence is an Army run program, they will best be able to provide the status of this effort.

QUESTIONS SUBMITTED BY SENATOR THAD COCHRAN

Question. The Active Duty Navy has only had a 39 percent completion rate on the Post Deployment Health Reassessment form (PDHRA). This is the lowest of all the Services. What are the reasons for this low input? Is it an issue of resources?

Answer. Navy is committed to protecting and promoting the long term health of our Sailors, especially those facing post deployment stress challenges. Navy leadership led efforts to increase the completion rate of the Post Deployment Health Reassessment (DD 2900). These efforts included communicating its importance; issuing PDHRA guidance and lessons learned; distributing by name lists of Sailors required

to complete the PDHRA to individual commands; and committing human and fiscal resources to the administration and execution of the program.

As of March 24, 2009, the Medical Readiness Reporting System (MRRS), Navy's designated database for PDHRA compliance tracking, indicates a Navy-wide compliance rate of 57.4 percent, with the Active Component (AC) at 46 percent and the Reserve Component (RC) at 93.4 percent. Navy, in an effort to ensure no Sailor is overlooked, used two indicators to identify Sailors required to complete the PDHRA. These "identifiers" are a previously completed Post Deployment Health Assessment (DD 2796) or a Sailor's concurrent receipt of Hardship Duty and Imminent Danger Pays. It has since been determined that the use of these two identifiers "cast the net" too wide and erroneously identified persons who do not meet current criteria for completion of the PDHRA as set forth in DOD Instruction 6490.3, Deployment Health, and OPNAVINST 6100.3, The Deployment Health Assessment (DHA) Process. (This erroneous identification affected the active component almost exclusively and accounts for some of the difference in active and reserve reported compliance rates.)

Approximately 25 percent of the overdue PDHRAs for USN personnel are identified by the two pays and the vast majority (approximately 73 percent) of overdue PDHRAs for USN personnel is due to the completion of a PDHA. Navy has taken a conservative approach to reporting PDHRA compliance. For example, all Sailors have been individually canvassed to confirm the requirement for the Deployment Health Assessment process followed by a manual check of records for the presence of a completed DD 2900. Additionally, early in the DHA administrative process, many Sailors who made routine ship deployments erroneously completed a post DHA. Correcting these data entries has proven to be a time consuming, manpower intensive effort.

A more accurate method to determine Navy PDHRA compliance is being implemented. This new method will eliminate those Sailors who are identified as overdue, but in actuality do not require a PDHRA (e.g., Shipboard Sailors). On March 10, 2009, the PDHRA compliance rate was calculated by the use of the more accurate method to identify Sailors required to complete the PDHRA: a completed Post-deployment Health Assessment (DD 2796) preceded by a Pre-deployment Health Assessment (DD 2795). The PDHRA compliance rate was determined to be 78.4 percent for the Active Component and 96.8 percent for the Reserve Component with a Navy-wide level of 85.0 percent.

Navy is making steady improvements in the PDHRA compliance rate. We are pressing to ensure that those Sailors who need the PDHRA complete the assessment and are working to correct the erroneous method for identifying Sailors required to complete the PDHRA. Efforts toward meeting objectives include:

- In fiscal year 2006, Navy Medicine established Deployment Health Centers (DHCs) with the primary mission to augment military treatment facilities to ensure the availability of adequate medical resources to support PDHRA compliance. There are currently 17 DHCs with 117 medical contract positions, including psychiatrists and psychologists, funded with annual costs of \$15 million.
- MRRS now provides the capability to reconcile the overdue status of Sailors if indicated by a previously completed PDHA not meeting today's criteria.
- The capability to reconcile the status of those erroneously identified by the two pays will be implemented in MRRS in May.
- Navy (BUMED) has identified the need for additional temporary resources to clear any data entry backlogs that currently exist.

Navy's low compliance rate is not an issue of resources.

Question. This Committee is aware of some of the challenges that the Great Lakes consolidation has come up against. Can you talk about some of the pressures that the Navy is experiencing with this consolidation? Would integration like Keesler-Biloxi make more sense than total consolidation?

Answer. Cultural differences between the Navy and the VA are large, and they present challenges in establishing the template for future integrated federal healthcare facilities. This consolidation will not work unless each agency is willing to waive agency specific policies in order to accommodate the broader mission of the Federal Health Care Center (Health Care and Operational Readiness).

The Great Lakes consolidation model was driven from the Health Executive Council (HEC) and Joint Executive Council (JEC) level to the deckplate level in Great Lakes and North Chicago. There is significant interest by Congressional and Senate members in executing a new model of interagency cooperation, and the North Chicago/Great Lakes consolidation is being looked at as the test bed.

Navy Operational Readiness is our number one mission and our primary reason for existence. As we deal with Command and Control, IM/IT, fiscal and clinical support decisions, this Operational Readiness mission has to constantly be re-affirmed

as it is a new concept for the VA. The electronic medical record is an area where there is pressure to move to one system or the other. Neither AHLTA nor VISTA can sustain the requirements of both DOD and VA. The IM/IT solution being crafted must sustain missions of both organizations.

The FHCC establishment date of October 1, 2010 creates mounting time pressures. The timely passage of pending Congressional legislation is crucial to implementing the full vision of this project. Because Great Lakes is being touted as the model for future fully integrated federal healthcare, there is enormous self-imposed pressure to do it right. System solutions (financial reconciliation, electronic medical record, information management, etc.) cannot be local fixes, but must be crafted in a manner that lends to exportability throughout the enterprise.

The Keesler-Biloxi venture is not an integration. It is a joint side-by-side sharing relationship. Construction decisions made 5 years ago, along with direction from the HEC and JEC, are driving the need for a tighter integration in North Chicago. There is not enough physical space to accommodate two organizations (the original space plan was decreased by 50 percent) working side by side with all the necessary additional infrastructure (personnel, equipment, IM/IT systems and support services) required. We must integrate in a tighter fashion compared with Keesler-Biloxi.

QUESTIONS SUBMITTED BY SENATOR MITCH MCCONNELL

Question. Congress has established a national suicide hotline for returning troops, as well as increased funding for mental health for active military personnel. However, there remains a high number of soldier suicides. What preventative measures is DOD taking to address this problem? What, if any, legislative action would DOD need Congress to take to expand suicide awareness and education on posts?

What preventive measures is Navy taking to reduce suicides?

Answer. The Navy recognizes that multiple demands on our Sailors has become a significant source of stress and limits the time available for addressing problems at an early stage. In response, the Navy is increasing dedicated resources to the development of leadership tools for Operational Stress Control (OSC) and suicide prevention. Current efforts focus on inspiring leaders to understand and take suicide prevention efforts as critical to their ability to do their jobs and missions. Other actions include:

- The Chief of Naval Operations (CNO) directed the establishment of the Navy Preparedness Alliance (NPA) to address a continuum of care that covers all aspects of individual medical, physical, psychological and family readiness across the Navy.
- In February 2009, an interdisciplinary Suicide Prevention Cross Functional Team was established to review current efforts, identify gaps, and develop the way ahead.
- Top leadership vigilance. CNO maintains awareness through monthly and ad hoc suicide reports, quarterly Tone of the Force reports, Behavioral Health Needs Assessment Surveys, and targeted surveys of Sailors and Family members.
- Increased Family Support. Navy hired 40 percent more professional counselors to address Sailor and family needs, resulting in improved staffing from 1,044 to 1,444 at Fleet and Family Service Centers. A Family Outreach Working group was established to improve suicide awareness communication and education of family members.
- Operational Stress Control (OSC), a comprehensive approach designed to address the psychological health needs of Sailors and their families, is a program led by operational leadership and supported by Navy Medicine. To date, more than 13,000 Sailors have received an initial OSC familiarization brief. Formal training curriculum at key points throughout a Sailor's career is under development. The OSC Stress Continuum Model has been integrated into Fleet and Family Service Center programs and education and training programs.
- Reserve Psychological Health Outreach Coordinators Program was implemented in 2008 and provides 2 coordinators and 3 outreach team members (all licensed clinical social workers), to each of the 5 Navy Reserve Regions, to engage in training, active outreach, clinical assessment, referral to care, and ensure follow up services for reserve Sailors.
- Personal Readiness Summits and Fleet Suicide Prevention Conferences/Summits are providing waterfront training opportunities for leaders, command Suicide Prevention Coordinators, and installation first responders.
- Front Line Supervisor Training, train-the-trainer, has been provided at six locations throughout CONUS with additional training scheduled throughout 2009.

The Front Line Supervisor Training is an interactive half-day workshop designed to assist deck-plate leaders in recognizing and responding to Sailors in distress.

- First Responder Seminars provide those individuals likely to encounter a suicide crisis situation (security, fire, EMS, medical, chaplains, or counselors) with a review of safety considerations and de-escalation techniques.
- Commands are required to have written command crisis response plans to guide duty officer actions in response to a suicidal individual or distress call. Navy has been training a network of command Suicide Prevention Coordinators (SPC) to assist Commanding Officers in implementing command level prevention efforts and policy compliance.
- Communications and outreach efforts continue. The new www.suicide.navy.mil web URL went live in September 2008 to provide an easy-to-remember link to helpful information. A new four-poster series was distributed to all installations in November 2008 along with a new tri-fold brochure. A new training video will be distributed this summer.
- Warrior Transition Program (WTP) provides a 3-day respite in Kuwait to all Individual Augmentees returning from theater. Conducted by counselors, chaplains, and peers, the WTP provides time for reflection, rituals of celebration or grief, restoration of normal sleeping patterns, and time to say good-byes.
- Safe Harbor. Non-clinical Case Managers are assigned to individuals who are severely or very severely ill or injured to provide continued support through the treatment and transition process and beyond.
- Chaplain Support. Chaplain education in 2008 and 2009 focused on Operational Stress Control for non-mental healthcare givers and resilience and family care. The Chaplain Corps Human Care initiative is working to understand, evaluate and realign chaplain resources for efficient and effective care.

Question. What, if any, legislative action would DOD need Congress to take to expand suicide awareness and education on posts?

Answer. There are no legislative barriers to expanding suicide awareness and education on posts.

Question. What are the typical steps taken for sailors who may have post-traumatic stress disorder (PTSD) and traumatic brain injuries (TBI) to ensure they get the proper care? Are there any further legislative steps that Congress could take to improve screening and the delivery of care to sailors with PTSD and TBI?

Answer. Sailors and Marines are provided unit-level pre- and post-deployment education about signs and symptoms of post-traumatic stress disorder and traumatic brain injury. Navy Medicine has developed the Stress Injury Model to promote early identification and appropriate referral; early identification of symptoms is the best way to mitigate the effects of combat stress.

Unit medical personnel also receive training in PTSD and TBI surveillance. The Post-Deployment Health Assessment and Post-Deployment Health Reassessment contain screening questions specific to both PTSD and TBI, and can assist healthcare providers in making timely and appropriate referrals for specialty evaluation and treatment. After a diagnosis of PTSD or TBI is made the service member is offered the appropriate medical care. For those diagnosed with PTSD, care would include additional psychological assessment to rule out other mental health conditions followed by appropriate evidence-based cognitive therapies (e.g., Cognitive Processing Therapy, Prolonged Exposure). For those diagnosed with TBI, care may range from 7 days of rest to evacuation from theater and surgical treatment. Service Members diagnosed with TBI are assigned a medical case manager to assist with coordinating medical care. For those Sailors and Marines unable to remain on active duty, Navy Medicine has partnered with the VA to ensure a seamless, coordinated transition of care.

Question. Per the Wounded Warrior legislation enacted in 2007 and the Dole-Shalala Commission's recommendations that were reported in 2007, improvements were to be made to the coordination between DOD and VA facilities to better care for our injured troops who are transitioning between the two healthcare systems. What steps have already taken place to improve coordination between the two Departments?

Answer.

Disability Evaluation System (DES) Pilot

The Pilot originally began in 2007 and was expanded January 2009. Features of the pilot are:

- Single physical exam serving DOD separation and VA disability decisions; and
- Single disability rating (by VA) used by DOD in separation/retirement decision and VA in benefits determination.

Case Management—Federal Recovery Coordinator Programs

The Federal Recovery Coordination Program was created in late 2007 and implemented in 2008 through the signing of two memoranda of understanding between DoN and DVA. The goal of the program is to provide assistance to recovering service members, veterans and their families through recovery, rehabilitation and reintegration and benefits.

The first Recovery Coordinators were hired and trained in early 2008 and placed at military treatment facilities where most newly evacuated wounded, ill or injured service members are taken. NMMC Bethesda and NMC San Diego have Recovery Coordinators assigned to work in their facilities. This program is fully supported and endorsed by both departments and additional Recovery Coordinators will be hired in 2009.

The FRC program also includes DOD liaisons and VA detailed staff.

—1 Navy Liaison, 1 Army Liaison, 2 Marine Liaison Officers, 2 Public Health Service staff members.

Post Traumatic Stress Disorder/Traumatic Brain Injury (PTSD/TBI)

Established Defense Center of Excellence and appointed director; private sector benefactors building facility on Bethesda campus of National Military Medical Center. Both DOD and VA established a policy of Mental health access standards and standardized TBI definitions and reporting criteria.

TBI questions added to Post Deployment Health Assessment and Post Deployment Health Reassessment which may trigger a referral.

DOD/VA Data Sharing

Expanded the availability of DOD theater clinical data to all DOD and VA facilities. As of the beginning of 2008, added the bi-directional transmission of provider/clinical note, problem lists, theater inpatient medical data from Landstuhl and medical images between three Military Treatment Facilities and the VA Polytrauma Centers

DOD and VA have signed Information Technology (IT) Plan to support the Federal Recovery Care Coordinator program. A tri-fold on Wounded Warrior pay and travel entitlements (also on web).

Question. What steps remain?

Answer. Further growth and expansion of DES will greatly assist in this endeavor. Involvement of Case Managers and education of both staffs on the intent of DES is critical to success.

Further efforts to ensure smooth data sharing between DOD and VA are critical to the transition of care.

Question. Are these provisions sufficient to provide a seamless transition for wounded warriors from the DOD to the VA system?

Answer. Yes, although continued efforts to refine the processes supporting seamless transition should be encouraged.

Question. Does DOD need further legislation to improve matters? If so, what?

Answer. No needs identified at this time.

QUESTIONS SUBMITTED TO LIEUTENANT GENERAL JAMES G. ROUDEBUSH

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

WELL-BEING OF OUR CAREGIVERS

Question. General Roudebush, while attention must be focused on the resilience training of our Service members and their families, I also suspect that caring for our wounded takes a considerable toll on our caregivers.

What efforts are underway to address the well-being of our caregivers in order to retain these critical personnel?

Answer. The Air Force is also concerned about the stress experienced by our healthcare providers, as well as their exposure to the injured and killed. In order to address this concern, we provide awareness education to healthcare providers prior to deployment, and we closely monitor psychological symptoms post-deployment. These educational and surveillance processes are provided to all deploying Airmen via Landing Gear; the post-deployment health assessment; the post-deployment health reassessment. A study is currently underway at the theater hospital in Balad that assesses risks and protective factors in our deployed medics. Furthermore, the Air Force has hired 97 additional contract mental health providers in the last year to improve access to mental healthcare and to spread out the workload for our busy uniformed mental health providers.

ENTERPRISE ARCHITECTURE

Question. How do you ensure Service specific needs are incorporated in the new enterprise architecture and how do you make sure they don't drive up costs throughout the system?

Answer. The Air Force Medical Service has representation in the MHS integrated requirements and review working groups. These vetting bodies review the initial capability documents and analyze costing before recommending for inclusion in the Central Portfolio. As a general rule, we ensure cost is minimized by finding compatible Tri-Service solutions that use common standards that enhance interoperability.

QUESTIONS SUBMITTED BY SENATOR PATTY MURRAY

SUICIDES

Question. JSC Chairman Admiral Mullen has said publicly he's trying to break the stigma of psychological health in the active force, yet, the Judge Advocates General are still prosecuting as a "crime" depressed people who attempt suicide. While the surgeons general aren't responsible for the enforcement of the Uniformed Code of Military Justice, it seems to me that they might be concerned about prosecutions of people who have severe mental distress while serving or after serving in combat.

Generals, do you think that the continued criminal prosecution of troops who commit suicide is a problem for the military's efforts to break the stigma of psychological health?

Answer. The Air Force is not aware of any instances in which an Airman has been prosecuted based solely on mental distress and/or a suicide attempt. AF leaders work hard to foster a "wingman" culture, in which Airmen look out for one another and seek timely help for both personal and psychological concerns. Our goal is to identify and address psychological concerns before they manifest themselves behaviorally in a way that threatens personal health or safety or that interferes with mission accomplishment. Should those efforts fail, we will continue to provide comprehensive, evidenced-based treatment.

ELECTRONIC MEDICAL INFORMATION

Question. In your opinion, what additional steps need to be taken to ensure that electronic medical information is available to the Department of Veterans Affairs?

Answer. Further interdepartmental collaboration on the creation of common data dictionaries and implementation of Services Oriented Architecture will set a firm footing towards sharing of our data. A dedicated integration program office and a sound funding strategy will do much to ensure data is available to our constituencies.

ACCOUNTING FOR CONTRACT CARE IN THE MEDICAL RECORD

Question. How are each of your Services obtaining medical records for Service members who receive contract care and how big of a problem is this for creating a complete record of care?

Answer. There are two primary scenarios in which the Air Force Medical Service obtains medical records from contracted TRICARE network providers.

Scenario 1:

Military Treatment Facility (MTF) enrolled Active Duty Service Members (ADSMs) referred to a contract TRICARE network provider for specialized health care not available at the MTF.

Records capture process: Following the civilian medical appointment, the referral results or consultation report(s) are submitted to the referring MTF where they are reviewed by the referring provider and permanently filed in the ADSM's record. This process is not considered to be a significant Air Force Medical Service problem or challenge that would otherwise prevent or delay its ability to create a complete record of care.

Scenario 2:

TRICARE Prime Remote (TPR) ADSMs enrolled to a TRICARE network primary care manager instead of an MTF provider.

Records capture process: Health treatment records for Airmen assigned to geographically separated units (GSUs) or remote duty locations (e.g. recruiting squadrons, Military Entrance Processing Centers, unique military detachments, or other similar units without immediate military installation support), are usually maintained at the nearest Air Force MTF.

Prior to PCS reassignment (from the TPR duty location or retirement or separation from the remote duty assignment), Airmen are required to “out-process” through the MTF responsible for maintaining their military health treatment records. At the time of the MTF records department out-processing encounter, MTF records managers and the service member complete a records copy request form. The form is submitted to the Airman’s contracted TRICARE network primary care manager. Upon receipt of the requested information, the medical document copies are added to the Airmen’s health record and the complete health record is forwarded to the gaining MTF or to the Air Force Personnel Center (for separating and retiring Airmen).

The Air Force continues to educate Airmen regarding installation out-processing procedures whenever and wherever possible. However, sometimes Airmen assigned to GSUs do not always visit or “out-process” through the nearest Air Force MTF responsible for maintaining their military health treatment records. Consequently, the MTF doesn’t always know to submit a records copy request to the Airman’s contracted TRICARE network primary care manager. The records capture process for Airman assigned to TPR locations currently does not function as well as it should, and we are reviewing this process to identify improvement opportunities.

VA VISION CENTER OF EXCELLENCE AND EYE TRAUMA REGISTRY

Question. The fiscal year 2008 National Defense Authorization Act, Section 1623, required the establishment of a Joint Department of Defense and Department of Veteran’s Affairs Vision Center of Excellence and Eye Trauma Registry. Since then, I am not aware of any update on the budget, current and future staffing for fiscal year 2009, the costs of implementation of the information technology development of the registry, or any associated construction costs for placing the headquarters for the Vision Center of Excellence at the future site of the Walter Reed National Medical Center in Bethesda, MD.

What is the status on this effort?

Answer. I believe Col. Donald A. Gagliano, the Executive Director for the DOD Vision Center of Excellence, addressed some of those issues during his March 17, 2009, testimony, and I would defer to the the Army as the lead agent to provide a more comprehensive response.

QUESTIONS SUBMITTED BY SENATOR THAD COCHRAN

POST DEPLOYMENT HEALTH REASSESSMENT

Question. One of the tools used to measure the health and well-being of Service members after they return home is the Post Deployment Health Reassessment form, which everyone is asked to fill out 90 and 190 days after their redeployment. As of January 30, the Air Force Reserve had the second lowest completion rate of this form at 46 percent.

What are some of the reasons for this low number of completed responses and what is the Air Force doing to help ensure returning Airmen and women receive needed care?

Answer. Initial rollout of the Post Deployment Health Reassessment was made available to Reservists through the Reserve Component Periodic Health Assessment (RCPHA) system. However, this system proved unable to monitor completion of the PDHRA (Form 2900) or measure unit compliance. The system was abandoned in July 2008 and the Reserve migrated to the medical information system used by the Air Force active component. The migration resulted in corrupted and incomplete records, reflected in a 7 percent indicated compliance rate immediately following the transition. Efforts to correct these errors have rapidly improved the indicated compliance rate, which is currently at 51 percent. By late summer we project our PDHRA compliance to be on par with the active duty and Air National Guard.

KEESLER MEDICAL CENTER AND BILOXI VETERANS HOSPITAL

Question. I understand the Department of Defense and the Department of Veterans Affairs are working to establish joint ventures in areas where both agencies have co-located facilities around the country. I would hope the goal of these joint ventures would be to increase the quality of care and efficiency without decreasing capability or capacity. I understand the Air Force has been working with the Department of Veterans Affairs to integrate Keesler Medical Center and the Biloxi Veterans Hospital.

Can you give me your assessment on this process and if you believe it has been a good news story?

Answer. Based on our experience to date, the joint venture process is effective and the results are good news stories across the board.

When considering Joint Venture opportunities, the viability of a proposed joint facility is assessed across nine separate domains. Through this structured approach, the work group assesses the organizations' current relationship and the potential for a future joint relationship. Phase I and Ib sites are already joint facilities or are in the process of becoming joint facilities. The efforts at those sites have focused on further integration, and Keesler-Biloxi is part of that group. Detailed plans are complete for the integration of all clinical specialty services between Keesler Medical Center and Biloxi Veterans Hospital, with the exception of General Surgery, which will continue to be available at both facilities.

All Phase II sites have the potential to increase their level of sharing and some sites may have the potential to become joint facilities. An example of Phase II efforts is the Colorado Springs Joint Market area, where the Air Force Academy's 10th Medical Group will share operating room time with the Eastern Colorado Health Care System.

We anticipate all of our joint ventures will be win-win efforts that will improve efficiency and access to care for all participating facilities.

JOINT AIR FORCE AND VETERANS AFFAIRS PROJECTS

Question. I have been informed that it is intended these joint ventures, such as the Keesler-Biloxi project, will achieve complete consolidation, much of what's being attempted at Great Lakes in Illinois with the Navy.

Do you believe that the different mission sets in the Department of Defense and the Department of Veterans Affairs make complete consolidation possible or logical at all locations?

Answer. In our experience, despite disparate missions, joint venture sites have been very successful in taking care of their beneficiaries and provide a win-win scenario for both partners. We believe that there are many forms of joint ventures, and not all joint ventures are, or should be, considered for complete consolidation.

We appreciate your interest in the good news story at Keesler. Keesler Medical Center (KMC) and VA Gulf Coast Veterans Health Care System (VAGCVHCS) have had a long history of sharing, but it wasn't until after Hurricane Katrina that the full benefits of DOD/VA sharing were explored. Dual VA CARES and DOD BRAC funding projects caused the two large medical centers to develop an integration plan as an official joint venture site. Using a "Centers of Excellence" (COE) model, all KMC and VA inpatient and outpatient clinical product lines are being realigned/shared at the site where either party has the greater capability. This produces a synergy between the combined staffs and maximizes capabilities for the patient. This approach also reduces or eliminates duplication of effort of similar services. For services that cannot be realigned or fully integrated, we emphasize exploiting any opportunity to open service availability for each other's beneficiaries. The only limits are access to care and service availability itself.

At the same time, this model retains the independent daily governing structures of both facilities, allowing the Air Force and the VA to carry on their important and distinctive missions unimpeded. An Executive Management Team co-chaired by KMC Commander and VA Director provides oversight linkage for sharing initiatives.

We currently have seven signed operational plans for ongoing shared services. These plans detail the scope of care, business office functions and other important aspects of treating each others' patients. The seven signed plans are: Orthopedics, dermatology, plastic surgery, pulmonology/pulmonology function tests, shared nursing staff, shared neurology technicians and laundry.

We have eight more operational plans we anticipated being signed within the next 60 days: Women's health, sleep lab, radiation oncology, MRI, cardiac catheterization, patient transfer, urology and shared referral staff. All services that are sharing in these areas are doing so under our resource sharing agreement and draft operational plans.

We anticipate taking on a significant amount of VA surgical and inpatient workload as the VA's CARES construction project will limit their operating room usage for several months in fiscal year 2010. The VA will be bringing many of their operating room personnel and inpatient nursing staff.

In summary, the integration process has been a great success thus far, and we anticipate this joint venture will be a win-win proposition for both facilities.

QUESTIONS SUBMITTED BY SENATOR MITCH MCCONNELL

SUICIDES

Question. Congress has established a national suicide hotline for returning troops, as well as increased funding for mental health for active military personnel. However, there remains a high number of Soldier suicides.

What preventive measures is the Department of Defense (DOD) taking to address this problem?

Answer. The DOD has established the Suicide Prevention and Risk Reduction Committee to monitor and address suicide trends across the DOD. The DOD has implemented the DOD Suicide Event Reporting System to improve data tracking, and hosts an annual DOD/Veterans Affairs suicide prevention conference that draws experts from around the world.

The military Services each execute their own suicide prevention programs tailored to the needs and culture of their own Service. We are carefully studying each other's best practices to maximize the effectiveness of our programs. The Air Force Suicide Prevention Program (AFSPP) includes 11 initiatives that must be implemented by every Wing Commander. Our program focuses on a total community effort that has helped to reduce our suicide rate by 28 percent since it was implemented in 1996. The AFSPP is listed on the Department of Health and Human Services National Registry of Evidence-based Programs and Practices.

Question. What, if any, legislative action would the Department of Defense need Congress to take to expand suicide awareness and education on posts?

Answer. The Air Force defers to Department of Defense (DOD) on possible DOD legislative proposals. The Air Force Suicide Prevention Program (AFSPP) is intensely invested in awareness and education down to the grassroots level—the AFSPP is a commander's program that targets every Airman. Through our Landing Gear program, we teach all Airmen how to prepare for the psychological effects of deployment, how to recognize risk factors and to know when and how to get help for themselves or others. We have instilled a Wingman Culture in which we are each responsible for our fellow Airmen. The Air Force does not require any legislative action at this time to support the AFSPP, but we greatly appreciate the Congress' efforts to help us address this critical issue.

PTSD/TBI

Question. What are the typical steps for Airmen who may have post-traumatic stress disorder (PTSD) and traumatic brain injuries (TBI) to ensure they get the proper care?

Answer. The Air Force uses a three-part strategy to address and manage PTSD, TBI and other deployment related health concerns. The first component of our strategy involves training and education efforts to enhance awareness and recognition of common deployment-related health concerns. The second component involves repeated health surveillance before, during, and after deployments, as well as annually. The final component involves intervention. Screening that identifies PTSD and TBI symptoms (as well as other health concerns) results in more thorough assessments and referrals to specialists when indicated. We work closely with the Defense Center of Excellence for Psychological Health and TBI as well as civilian subject matter experts to ensure our treatment efforts are in line with clinical practice guidelines and established standards of care.

Question. Are there any further legislative steps that Congress could take to improve screening and the delivery of care to Airmen with post-traumatic stress disorder (PTSD) and traumatic brain injuries (TBI)?

Answer. The entire Department of Defense has put considerable resources and effort into addressing the identification and treatment of service members with PTSD and TBI in a very short period of time. Any additional legislative support for these critical issues would be best recommended by the newly formed Defense Center of Excellence for Psychological Health and TBI. However, we caution against proposed legislation that would mandate face-to-face provider-to-troop screenings for all redeploying military personnel, the majority of whom are not experiencing significant health concerns. We believe our existing program is successfully and expeditiously capturing those who need intervention and treatment. Expanding the program unnecessarily will further constrain resources needed to focus on those with identified health concerns.

WOUNDED WARRIOR

Question. Per the Wounded Warrior legislation enacted in 2007 and the Dole-Shalala Commission's recommendations that were reported in 2007, improvements

were to be made to the coordination between the DOD and VA facilities to better care for our injured troops who are transitioning between the two healthcare systems.

What steps have already taken place to improve coordination between the two departments? What steps remain? Are these provisions sufficient to provide a seamless transition for wounded warriors from the DOD to the VA system?

Answer. With the passage of Wounded Warrior specific sections of the National Defense Authorization Acts of 2007 and 2008 and the creation of a joint DOD/VA disability evaluation system (DES) demonstration pilot, there now exists an unprecedented amount of cooperation, teamwork and cross-functional communication between the Services and the VA. Similar to our Army and Navy counterparts, the Air Force Medical Service is working very hard with the VA to ensure those Service Members who are “medically” separated or retired from the Armed Forces are fairly evaluated and receive the healthcare, compensation and benefits necessary to ensure a seamless lifestyle transition from military to civilian life.

Representatives from each Service’s medical and personnel headquarters offices (including physical evaluation board disability managers) routinely meet with VA and DOD policy officials to evaluate the joint departmental DES demonstration pilot targeted goals and objectives, review disability evaluation findings and trends, and analyze pilot metrics (including process timeliness). Furthermore, the VA/DOD DES demonstration pilot has expanded outside the greater Washington, DC, area (the initial VA/DOD demonstration pilot area) and now includes military installations throughout the Continental United States and Alaska. Within the Air Force, the participating VA/DOD DES pilot expansion sites include Andrews AFB, Maryland; Elmendorf AFB, Alaska; Keesler AFB, Mississippi; MacDill AFB, Florida; Travis AFB, California; and Vance AFB, Oklahoma; with other potential expansion sites currently being considered.

The Office of the Assistant Secretary of Defense for Health Affairs (OASD/HA) has recently obligated an additional \$5.5 million to enable our military treatment facilities to hire more Physical Evaluation Board Liaison Officers (PEBLOs). The PEBLOs are one of our most important non-clinical case managers. The individuals are responsible for providing Service Members traversing the DES with non-clinical benefits and referral support counseling.

Additionally, at the direction of Mr. Michael Dominguez, Principal Deputy Under Secretary of Defense for Personnel and Readiness, the Air Force has created a centralized health treatment records disposition process designed to more efficiently transfer complete medical and dental treatment records for retiring and separating Airmen from the Air Force to the VA. This new process prohibits medical and personnel units at over 74 Air Force installations from directly sending health treatment records to the VA and instead funnels all health treatment records to a single military service personnel out-processing center before the records are forwarded to the VA. The process is designed to reduce the amount of “orphaned” or “loose, late-flowing” medical documents unintentionally separated from the Service Member’s original health records package. This new process is also intended to ensure the medical and dental records for each retiring and separating Airman are shipped to the VA together and on-time. The main goal of the program is to ensure complete health treatments records for retiring or separating Airman are made available to the VA as soon as possible so VA benefits and disability compensation reviews can be completed with little to zero gaps in veteran benefits or healthcare coverage.

With regard to what steps remain, everyday we move closer to totally transitioning from a paper-based health treatment record to an electronic health record. Billions of dollars and countless man-hours have been spent on improving and refining the information and technology necessary to make this transition a reality. The DOD and VA continue to improve and enhance their electronic health record computer systems, but we’re still a few years away from an electronic health record system that offers unfettered bi-directional health information exchange between the two agencies.

Working together with our parallel Service medics and with DOD and VA officials, I believe we’re doing all we can to ensure the provisions identified in the NDAA of 2007, 2008, and 2009 are sufficient to provide a seamless transition for Wounded Warriors from the DOD to the VA system.

Question. Does the Department of Defense need further legislation to improve matters? If so, what?

Answer. Working together with our parallel Service medics and with DOD and VA officials, we’re doing all we can to ensure the provisions identified in the NDAA of 2007, 2008, and 2009 are sufficient to provide a seamless transition for Wounded Warriors from the DOD to the VA system. The Air Force does not require any further legislative action at this time to improve transition between health systems.

QUESTIONS SUBMITTED TO REAR ADMIRAL CHRISTINE M. BRUZEK-KOHLER

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

Question. Admiral Bruzek-Kohler, we recognize that Navy nurses play critical roles in supporting both Disaster Relief and Humanitarian Assistance missions. What staffing support have you received from the Air Force, Army, and civilian organizations to assist you in fulfilling the nursing need for these missions?

Answer. Core nursing teams on these missions are composed of both active and reserve component Navy nurses. We are also supported by nursing colleagues from the Armed Services, U.S. Public Health Services (USPHS), Non Governmental Organizations (NGOs), and partner nation military nurses.

From May 1 to September 25, 2008, USNS MERCY (T-AH 19) embarked a 1,000-person joint, multi-national, Military Sealift Command Civilian Mariner, U.S. Public Health Service and non-governmental organization (NGO) team to conduct Pacific Partnership 2008 (PP08). The core nursing team consisted of active duty Navy and Air Force nurse corps officers. Additional nursing support was provided by Navy reservists. The nursing team was further augmented with partner nation military nurses from Australia, Canada, Indonesia, New Zealand, and the Republic of the Philippines, as well as NGO nurses from International Relief Teams, Project HOPE, and Operation Smile. Nursing specialties embarked for PP08 included medical-surgical, pediatric, neonatal intensive care, obstetric, critical care, and perioperative nursing.

Certified registered nurse anesthetists and family, pediatric, and women's health nurse practitioners were also embarked.

The USNS COMFORT (T-AH 20) is currently deployed in support of Continuing Promise 2009, a 4 month humanitarian assistance mission through Latin America and the Caribbean. Active and reserve component Navy nurses, as well as nurses from the U.S. Army and Air Force, USPHS, various NGOs, (to include Project Hope and Operation Smile) and Canada are embarked on this deployment.

Question. Admiral Bruzek-Kohler, the University of Health Sciences (USU) has determined that conditions are not favorable for the creation of a Bachelors program in nursing at this time. What options for partnering with civilian Schools of Nursing have been discussed as a way to develop and recruit military nurse candidates?

Answer. Navy nurses, at our hospitals in the United States and abroad, passionately support the professional development of America's future nursing workforce by serving as preceptors, mentors, and even adjunct faculty for a myriad of colleges and universities.

Due to the vast array of clinical specialties available at our medical centers at Bethesda, Portsmouth, and San Diego, we have developed multiple Memoranda of Understandings (MOU) with surrounding colleges and universities to provide clinical rotations for nurses in various programs from licensed practical/vocational nursing, baccalaureate, and graduate degrees which include nurse practitioner and certified nurse anesthetist tracks.

In completing their clinical rotations at our military treatment facilities, civilian nursing students are simultaneously exposed to the practice of Navy Nursing and our day to day interactions with members of the multidisciplinary Navy Medicine team. This exposure generates interest in career opportunities in both the active and reserve components of our Corps as well as in our federal civilian nursing workforce.

The Nurse Corps Recruitment liaison officer in the Office of the Navy Nurse Corps at the Bureau of Navy Medicine and Surgery works with a speaker's bureau comprised of junior and mid-grade Nurse Corps officers throughout the country. These officers provide presentations on career opportunities in Navy nursing to students at colleges, high schools, middle and elementary schools. We recognize that the youth of America are contemplating career choices at a much younger age. Over the course of the past year, we have tailored our recruiting initiatives to engage this younger population.

At a recent conference entitled "Academic Partnerships Addressing the Military Nursing Shortage" hosted by Dr. Ada Sue Hinshaw, Dean of the Graduate School of Nursing at the Uniformed Services University of the Health Sciences (USUHS), the Navy Nurse Corps presented information on the state of our Corps and the incentive programs that we have successfully utilized to recruit nurses. The conference was sponsored by funding from the Office of the Assistant Secretary of Defense for Health Affairs and was attended by 35 Deans from Schools of Nursing, the Directors and Deputies from each of the Nurse Corps and leaders from national nursing organizations. The conference objectives included: building collaborative relationships among military nursing services and Schools of Nursing to foster edu-

ditional military students can be enrolled and recommending the types of resources and incentives needed for the Schools of Nursing to be able to accommodate additional students. This meeting was very successful. USUHS also intends to conduct a survey to identify what incentives would be most attractive to recruit potential applicants into schools of nursing with obligations to serve in the military after graduation and successful licensure.

Question. Admiral Bruzek-Kohler, Nurse Corps Officers are promoted to the senior rank of Captain (O-6) at a rate significantly less than their physician counterparts. Do you know if this promotion disparity has led to our more senior, experienced nurses leaving active duty service due to lack of promotion opportunities? What is your exit interview data telling you about why nurses are leaving active duty service?

Answer. The Navy Nurse Corps has not identified promotion disparity as a factor in causing experienced nurses to leave active service.

Exit interviews suggest that factors contributing to a decision to leave the service are often multi-faceted and maybe family related: spouse's employment, children's schools, and/or ill elderly parents.

In May 2005, the Chief of Naval Personnel's Quick Poll of the Navy Medical Community identified the top five reasons for leaving the Navy Nurse Corps as: administrative barriers to doing one's job, civilian job opportunities, overall time spent away from home, impact of deployments on family, and the unpredictability of deployments.

In fiscal year 2008, the Navy Nurse Corps implemented an incentive special pay targeted at retaining individuals with critical war-time specialties.

The Bureau of Medicine and Surgery has contracted to do another retention poll and the results will be completed in late summer 2009.

Question. Admiral Bruzek-Kohler, several professional nursing organizations have proposed that the Doctorate of Nursing Practice (DNP) be the entry level into practice for all advanced practice nurses. Many schools of nursing are proposing to convert their Master of Science nursing degrees to DNP programs over the next several years. The DNP educational track adds an extra year onto the typical Masters level curriculum plan. Has there been any discussion of how this might affect Duty under Instruction planning in upcoming years? Could offering this post-Master's education option serve as a retention tool for mid-levels officers who might otherwise choose to leave active duty service?

Answer. The Navy Nurse Corps' Duty Under Instruction (DUINS) training plan is based on the projected losses in our nursing specialties, the number of nurses in each specialty training pipeline, and the overall nursing end-strength. The typical allotted training time is 24 months for completion of a Masters of Science in Nursing (MSN) and 48 months for a doctoral degree (Ph.D.). Post masters certificate programs are allotted 12-24 months for completion. DUINS exists as an avenue for the mid-level officer to apply for advanced education opportunities. This has served as an exceptional retention tool. Additionally, we have not appreciated a scarcity among quality MSN programs for our nurses to attend.

The Doctorate of Nursing Practicum (DNP) curriculum of 36 months has an impact on DUINS, as it affects the overall number of training opportunities availed each year. Additionally, our current inventory of nursing specialties does not require the additional educational preparation conferred via a DNP. We are presently training master's prepared clinical nursing specialists and nurse practitioners to meet our military nursing requirements in only 24 months. They return to our deployable inventory of specialty nurses with greater knowledge and clinical expertise. If they were enrolled in a DNP program, they would still be matriculating and a lost deployable asset to the Navy Nurse Corps. Consideration of the DNP conferral via a post MSN certificate or bridge program may have greater appeal to the Navy Nurse Corps, as the officer would be lost from the deployable inventory for only 12-24 months vice 36.

QUESTIONS SUBMITTED TO MAJOR GENERAL PATRICIA D. HOROHO

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

HUMANITARIAN ASSISTANCE MISSIONS

Question. General Horoho, we recognize that Navy nurses play critical roles in supporting both Disaster Relief and Humanitarian Assistance missions. What challenges have you encountered when faced with the need to train Army nurses to ad-

minister humanitarian nursing care, to include the need to provide shipboard training to assist with U.S. Navy missions?

Answer. The Army Nurse Corps is focused on ensuring all nurse officers deploy with skill sets required for the specific mission, whether that mission is for combat or a humanitarian mission. As such, the ANC has training venues to train the nurse officers for missions when deploying with Forward Surgical Teams, Combat Support Hospital, and Brigade Combat Teams. The Navy has pre-deployment training venues to train care providers for shipboard missions. If needed, the ANC will ensure the nurse officers receive this training prior to any deployment in support of the Navy.

MILITARY NURSE CANDIDATES

Question. General Horoho, the University of Health Sciences has determined that conditions are not favorable for the creation of a Bachelors program in nursing at this time. What options for partnering with civilian Schools of Nursing have been discussed as a way to develop and recruit military nurse candidates?

Answer. The Army Nurse Corps, along with the Federal Nursing Chief partners, is actively building collaborative relationships among Military Nursing Services and Schools of Nursing to foster educational opportunities. The Uniformed Services University is taking the lead and has recently sponsored a conference that brought together the Deans from many prestigious Schools of Nursing throughout the nation to discuss partnering with Department of Defense assets. Additionally, the Army Nurse Corps is exploring the types of educational programs in which military students can be enrolled and evaluating the types of resources and incentives needed for civilian Schools of Nursing to accommodate additional students.

NURSE CORPS OFFICER PROMOTION

Question. General Horoho, Nurse Corps Officers are promoted to the senior rank of Colonel (O-6) at a rate significantly less than their physician counterparts. Do you know if this promotion disparity has led to our more senior, experienced nurses leaving active duty service due to lack of promotion opportunities? What is your exit interview data telling you about why nurses are leaving active duty service?

Answer. Our current exit survey data does not demonstrate that senior Army Nurse Corps Officers are leaving due to lack of promotion opportunities. Recent increases in authorizations for Colonel have improved promotion rates. However, we are validating all O-5 and O-6 positions in order to optimize the force structure.

Our exit surveys demonstrate that junior and mid-grade officers are leaving for a myriad of reasons to include a perceived lack of ability to remain in the clinical setting as they progress through their careers. To address this concern, we are developing a lifecycle that will enable more senior leaders to remain at the bedside to ensure we have the right mix of experience and leadership available to develop our junior officers and to ensure we provide world-class care.

DOCTORATE OF NURSING PRACTICE

Question. General Horoho, several professional nursing organizations have proposed that the Doctorate of Nursing Practice (DNP) be the entry level into practice for all advanced practice nurses. Many schools of nursing are proposing to convert their Master of Science nursing degrees to DNP programs over the next several years. The DNP educational track adds an extra year onto the typical Masters level curriculum plan. Has there been any discussion of how this might affect Duty under Instruction planning in upcoming years? Could offering this post-Master's education option serve as a retention tool for mid-levels officers who might otherwise choose to leave active duty service?

Answer. The Army Nurse Corps is actively evaluating the impact of the advent of the DNP educational track on our force modeling and selection opportunities. It is important that we maintain currency in our education options to maintain Long Term Health Education and Training as our primary retention and professional development tool. Both the Uniformed Services University Nurse Anesthesia Program and the U.S. Army Graduate Program in Anesthesia Nursing are transitioning to the DNP model to maintain their excellent standing in the civilian community.

QUESTIONS SUBMITTED TO MAJOR GENERAL KIMBERLY A. SINISCALCHI

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

NURSE TRAINING

Question. General Siniscalchi, we recognize that military nurses play critical roles in supporting both Disaster Relief and Humanitarian Assistant missions.

What challenges have you encountered when faced with the need to train Air Force nurses to administer humanitarian nursing care, to include the need to provide shipboard training to assist with U.S. Navy missions?

Answer. The fundamentals of nursing care remain the same regardless of environmental circumstance, whether humanitarian, disaster response, or contingency operations. Air Force nurses play an important role in joint operations. In 2008, U.S. Air Force nurses deployed aboard U.S. naval ships in support of numerous humanitarian missions including Pacific Partnership 2008. In addition to the standard medical deployment training, Air Force medics who are deployed onboard a U.S. Navy ship undergo ship-specific orientation to include: life raft training, ship fire drills, damage control training, and emergency ship egress.

Additionally, Air Force nurses provided humanitarian support alongside U.S. Army personnel in South American locations during Joint Task Force Bravo and also to Central Command and European Command as part of a joint medical team in support of Operations IRAQI FREEDOM and ENDURING FREEDOM.

PARTNERING WITH CIVILIAN NURSING SCHOOLS

Question. General Siniscalchi, the University of Health Sciences has determined that conditions are not favorable for the creation of a Bachelors program in nursing at this time.

What options for partnering with civilian Schools of Nursing have been discussed as a way to develop and recruit military nurse candidates?

Answer. The USAF Nurse Corps is excited at the many opportunities to partner with our healthcare counterparts in civilian universities. As recently as March 14, Ada Sue Hinshaw, the Dean of the Graduate School of Nursing, Uniformed Services University, sponsored a conference that brought together Deans from Colleges of Nursing across the United States and the Tri-Service Military Nurse Corps Chiefs and their deputies. The conference was titled "Conference for Academic Partnership Addressing the Military Nursing Shortage." The objective was to "build collaborative relationships among military nursing services and schools of nursing to foster educational opportunities." It was an invaluable opportunity to share and discuss challenges, options, and ideas among key stakeholders.

As the USAF Nurse Corps continues its collegial relationship with the University of Cincinnati, and as we establish a similar partnership with the Scottsdale Healthcare System in Scottsdale, Arizona, we are encouraged that our presence within these two exceptional civilian medical centers will also draw interest from local nursing students and staff.

The USAF Nurse Corps is also at the precipice of establishing a first-ever Masters in Flight Nursing in collaboration with Wright State University in Dayton, Ohio.

NURSE RETENTION

Question. General Siniscalchi, Nurse Corps officers are promoted to the senior rank of colonel (O-6) at a rate significantly less than their physician counterparts.

Do you know if this promotion disparity has led to our more senior, experienced nurses leaving active duty service due to lack of promotion opportunities?

Answer. The Air Force Nurse Corps has experienced disparity with promotion opportunity, and we believe it may be a factor in some senior nurses leaving active duty. However, we are working closely with Lieutenant General Newton, his team of personnelists and the Air Force Surgeon General to correct this disparity.

Question. What is your exit interview data telling you about why nurses are leaving active duty service?

Answer. We are currently exploring options to initiate/capture data from a Nurse Corps-wide survey, as well as a specific exit-survey. We look forward to obtaining data that will provide us with a more accurate picture of why nurses choose to separate from active duty.

DOCTORATE OF NURSING PRACTICE

Question. General Siniscalchi, several professional nursing organizations have proposed that the Doctorate of Nursing Practice (DNP) be the entry level into prac-

tice for all advanced practical nurses. Many schools of nursing are proposing to convert their Master of Science nursing degrees to DNP programs over the next several years. The DNP educational track adds an extra year onto the typical Masters level curriculum plan.

Has there been any discussion of how this might affect Duty under Instruction planning in upcoming years?

Answer. One of the best recruiting tools in the Air Force is our educational opportunities. Our Nurse Corps officers have the ability to return to school full-time and earn a Masters and/or Doctoral degree. Most chief nurses use educational opportunities as an incentive to join when they do their recruiting interviews. The University of Health Sciences (USU) is uniquely situated in the Washington, DC, metropolitan area giving the university access to a variety of resources to include the National Institutes of Health, Office of the Secretary of Defense, Health Affairs, etc. Our students experience a very rigorous program that prepares them well for the future. Additionally, we are working very closely with Dean Hinshaw from USU to develop a curriculum in which our advance practice nurses can earn a Doctorate in Nursing Practice by 2015 as recommended by the American Nurses Association.

Question. Could offering this post-Masters' education option serve as a retention tool for mid-level officers who might otherwise choose to leave active duty service?

Answer. These opportunities for graduate education are significant retention tools, especially for our star performers. The University of Health Sciences (USU) allows our nurses to work with the other uniformed services in a very collaborative and joint way that is not possible in civilian universities. USU educational options are valuable in both recruitment and retention.

SUBCOMMITTEE RECESS

Chairman INOUE. This subcommittee will reconvene on Wednesday March 25 at 10:30 a.m. At that time we'll receive testimony from the Guard and Reserve. Until then we'll stand in recess.

[Whereupon, at 12:52 p.m., Wednesday, March 18, the subcommittee was recessed, to reconvene at 10:30 a.m., Wednesday, March 25.]

**DEPARTMENT OF DEFENSE APPROPRIATIONS
FOR FISCAL YEAR 2010**

WEDNESDAY, MARCH 25, 2009

U.S. SENATE,
SUBCOMMITTEE OF THE COMMITTEE ON APPROPRIATIONS,
Washington, DC.

The subcommittee met at 10:04 a.m., in room SD-192, Dirksen Senate Office Building, Hon. Daniel K. Inouye (chairman) presiding.

Present: Senators Inouye, Leahy, Durbin, Murray, Cochran, and Bond.

DEPARTMENT OF DEFENSE

NATIONAL GUARD

STATEMENT OF LIEUTENANT GENERAL CLYDE A. VAUGHN, DIRECTOR, ARMY NATIONAL GUARD

OPENING STATEMENT OF SENATOR DANIEL K. INOUE

Chairman INOUE. This morning the subcommittee meets to receive testimony on the status of the National Guard and Reserve components. From the National Guard, we are pleased to have the Vice Chief of the Army National Guard, General Clyde Vaughn, and the Vice Chief of the Air National Guard, General Harry Wyatt.

Before I proceed, I would like to apologize for this brief lateness, but the traffic is, as always, terrible.

And from the Reserve, we welcome the Chief of the Army Reserve, General Jack Stultz, Chief of the Navy Reserve, Vice Admiral Dirk Debbink, Commander of the Marine Forces Reserve, Lieutenant General John Bergman, and the Chief of the Air Force Reserve, General Charles Stenner.

We are very pleased to have you here today and look forward to working with you in the coming years in support of our guardsmen and our reservists.

The subcommittee is sorry that General McKinley was not able to be here today to testify, but we thank him for submitting written testimony for the record.

This hearing will be unlike prior years in that we have not received the fiscal year 2010 budget, nor the fiscal year 2009 supplemental request. For this reason, many members of the subcommittee may wish to submit additional questions after we re-

ceive the budget request later this spring, and we ask for a timely response to these questions.

Gentlemen, the National Guard and Reserve components have maintained a high operational tempo for over 6 years in support of the operations in Iraq and Afghanistan. Through the admirable service of thousands of guardsmen and reservists, the Reserve components have provided essential combat, logistics, and other support capabilities to these operations.

However, the strain of these deployments is beginning to show. Suicide and divorce rates, for example, are on the rise, unfortunately. We must make certain that we are doing everything we can to provide our servicemembers the support they need during and after deployment. Reintegrating after deployment can be particularly difficult for guardsmen and reservists who lack the support network provided at an active duty installation. For this reason, reintegration programs are important in helping our guardsmen and reservists transition back to civilian life.

Despite providing additional resources for these programs in the last year's supplemental funding bill, a Department-wide approach to reintegration activities has been very slow to develop, and our subcommittee hopes that the Department will work quickly to create an effective program that fits the needs of our returning servicemembers without using a one-size-fits-all for all of the Reserve components. What works for the Army may not work for the Navy Reserve.

It is a testament to the dedication and patriotism of our guardsmen and reservists that retention levels remain strong despite the strain of frequent deployments. Recruiting has also continued to improve for all Reserve components. In fact, for the first time in several years, all of the Reserve components are consistently achieving their recruiting goals.

However, as we all agree, challenges remain. Many of the Reserve components are increasing their end strength, which will require continued focus on recruiting and retention, particularly for high-demand specialties. And as the active components continue to grow, it will be increasingly difficult for the Reserve components to attract prior-service candidates. Therefore, we must continue to provide sufficient resources to attract and retain high-quality personnel.

The success of the Guard and Reserve components would also not be possible without the support of our Reserve employers. Employers must fill the holes left by deployed reservists who are sometimes on their second deployment in only a few years' time. The strain has become even greater during the current economic recession, and I look forward to hearing what is being done to make certain that we continue to have the support of our business community in hiring and supporting our reservists.

The subcommittee is pleased to see that equipment shortages continue to be reduced, although we know significant shortfalls still remain. It is important that the Department continues to focus on equipping the Reserve components by requesting sufficient funding in annual budget submissions and prioritizing the fielding of equipment to the Reserve components. We must make certain that the

Guard and Reserves have the equipment they need for training and operations at home and abroad.

I look forward to hearing your perspective on these issues and your recommendations for strengthening our forces during this most demanding time. And I thank you for your testimony this morning, and may I assure you that your full statements will be made part of the record.

We will begin our hearing with the panel of the National Guard, but first, I would like to turn to my distinguished vice chairman, Senator Cochran of Mississippi, for any remarks he may wish to make.

STATEMENT OF SENATOR THAD COCHRAN

Senator COCHRAN. Mr. Chairman, thank you very much. I am pleased to join you in welcoming the leaders of our National Guard and Reserve components to today's hearing.

Today's citizen soldiers, sailors, airmen, and marines are an indispensable and operational reserve. The days of the weekend warrior are history. These everyday people balance a day job, family interests, and are now volunteering for deployments, humanitarian missions, and nonservice traditional assignments around the globe. When they are not supporting operational needs of combatant commanders, they stand ready to assist in dealing with natural disasters here at home.

We appreciate the service that you provide our Nation. Thank you very much. We look forward to your testimony.

Chairman INOUE. Now may I call upon the man who is in charge of the Guard? General Vaughn.

General VAUGHN. Mr. Chairman, Mr. Vice Chairman, it is a privilege to be here with you. As you stated, we have turned in our statements for the record, and so I will be very brief, and I look forward to answering the questions.

The first thing I would like to do is to introduce to this subcommittee a great noncommissioned officer. He happens to be the noncommissioned officer of the year for the entire 1.1 million of our men and women Army. He is a National Guardsman from Montana, and his name is Sergeant Michael Noyce Marino, and he has his wife with him, Shelly.

Of course, we talk very emotionally about what a close-knit family we are in the Guard and Reserve, and that is where our strengths come from, from our communities. So today, as we were having a discussion in my office before we started over here, I asked the typical question, where is everybody from. Shelly's mother and I grew up in the same 4,000-person town in Dexter, Missouri, and Senator Bond—I am sure you know I am going to tell him that deal too. Unbelievable sometimes.

I really appreciate what you have done. You know we look to your leadership with the National Guard and Reserve equipment appropriations. We know what has been done there. We know the money that you put in there, especially for the full-time support piece. Your confidence in us has been well justified. You know we are the strongest Army National Guard right now of all time, and we are making progress every day. We are ready to do whatever

the State and the Nation ask us to do, and it is because of your great support that has made that possible.

As you know, the 2010 budget is not here, and so when it comes, we just ask for your help, again just like you have always given us in doing the right thing.

Please take a look at funding for civil support teams (CSTs), a critical element in our organizations. We want to make sure that they are sufficiently taken care of.

And the last thing is it is probably my last time to appear before this subcommittee, and it has been a privilege and an honor to come over here and testify, something that I will always cherish and remember. So thank you very much.

I look forward to your questions.

[The statement follows:]

PREPARED STATEMENT OF LIEUTENANT GENERAL CLYDE A. VAUGHN

NATIONAL GUARD POSTURE STATEMENT 2010

INTRODUCTION AND EXECUTIVE OVERVIEW

GENERAL CRAIG R. MCKINLEY, CHIEF, NATIONAL GUARD BUREAU

NEW BEGINNINGS

2008 was a year filled with positive change for the National Guard. The National Defense Authorization Act (NDAA) of 2008, enacted in January, designated the National Guard Bureau (NGB) as a joint activity of the Department of Defense (DOD). The law also elevated the grade of the Chief, National Guard Bureau to the rank of General. With this new stature and an explicit linkage to the Secretary of Defense, through the Chairman of the Joint Chiefs of Staff (CJCS), NGB is better positioned to represent National Guard issues and concerns at the highest levels in the DOD.

The Report of the Commission on the National Guard and Reserves and NDAA 2008 both identified the need for a new NGB charter. After almost a year of close collaboration among NGB, the Combatant Commanders, the CJCS, the Armed Services and the DOD staff, Secretary Robert M. Gates signed DOD Directive 5105.77, National Guard Bureau. This unprecedented directive formally lays out the full scope of NGB's functions, roles, and authorities—embedding NGB in DOD's strategic processes. It is sound DOD policy.

AN OPERATIONAL FORCE

The depth provided by the National Guard is no longer the "once in a lifetime" use of a strategic reserve as envisioned during the Cold War. The National Guard has become an operational force that is an integral part of the Army and Air Force; it is populated by seasoned veterans with multiple deployments in support of operations in Iraq, Afghanistan, the Balkans, and many other locations around the world.

In addition to the thousands of National Guard Soldiers and Airmen currently activated for ongoing federal missions, the National Guard provides significant response to unexpected contingencies. Despite major overseas commitments, during the 2008 hurricane season over 15,000 Guardsmen responded on short notice to catastrophic events unfolding in Louisiana and Texas. The National Guard serving here at home also fought extensive fires and flooding and provided disaster relief to numerous states throughout the year.

READINESS

Personnel

Our most precious assets flow from our communities. Citizen-Soldiers and Airmen are employed by their Governors every day to protect American lives and property in the homeland from weather-related events to suspected biochemical contamination. Despite all we have asked of them in the overseas warfight as well as here at home, we are recruiting and retaining National Guard members in impressive numbers. Americans join and stay in the National Guard. But as successful as we

have been to date, we need continued support for recruiting and retention efforts as well as increased endstrength authorizations.

Equipment

The National Guard must have modern equipment if we are to remain successful as defenders of the homeland at home and abroad.

Army National Guard (ARNG) units deployed overseas have the most up-to-date equipment available and are second to none. However, a significant amount of equipment is currently unavailable to the Army National Guard in the states due to continuing rotational deployments and emerging modernization requirements. Many states have expressed concern about the resulting shortfalls of equipment for training as well as for domestic emergency response operations.

The Army is programming \$20.9 billion for ARNG equipment for fiscal year 2009 through fiscal year 2013 to procure new equipment and modernize equipment currently on hand. We appreciate that support and also the strong interest of the Congress and the Department of Defense in closing the gap between our domestic requirements and the available equipment in our armories and motor pools.

The Air Force is in the midst of modernizing and recapitalizing its major weapons platforms, and the Air National Guard (ANG) must be concurrently recapitalized, particularly in order to avoid near to mid-term "age out" of the majority of its fighter force. Our primary concern is that 80 percent of our F-16s, the backbone of our Air Sovereignty Alert Force, will begin reaching the end of their service life in 8 years. To that end, we support the Air Force's recapitalization plan, but request that all roadmaps be inclusive of the Air National Guard as a hedge against this "age out."

STATE PARTNERSHIP PROGRAM

The National Guard State Partnership Program (SPP) establishes enduring and mutually beneficial partnerships between foreign countries and American states through the National Guard. This program is an important component of the Department of Defense's security cooperation strategy, the regional Combatant Commanders' theater engagement program, and the U.S. ambassadors' Mission Strategic Plans. A primary aim is to promote partnership among the many nations working with us to advance security, stability, and prosperity around the globe. Today, American states are partnered with 60 foreign nations (a 60 percent increase over the past 5 years) to focus on military-to-military, military-to-civilian, and civil security activities.

Created in 1993, SPP has helped the United States European, African, Southern, Pacific, and Central Commands engage the defense and military establishments of countries in every region of the globe. The program's benefits include:

- Providing Combatant Commanders and U.S. ambassadors with avenues for building international civil-military partnerships and interoperability during peacetime by linking state capacities to the goals and objectives in the Foreign Assistance Framework of the U.S. Government.
- Enhancing current and future coalition operations by encouraging and assisting partner nations to support efforts such as NATO's Operational Mentor and Liaison Team program in Afghanistan, and exercises supporting the Association of Southeast Asian Nations region.
- Building more cultural and global awareness into Citizen-Soldiers and Airmen to help them operate in today's complex multi-national and multi-agency operations.

This valuable mutual security cooperation program will continue to expand in size and strategic importance to the Combatant Commanders, ambassadors, and broad U.S. Government interagency requirements as we enter the second decade of the 21st century.

THE FUTURE

The National Guard, the nation's community-based force, will always answer the call of the President and the Governors.

Our priorities are constant: Provide for the security and defense of our homeland at home and abroad; support the Global War on Terror; and respond to America's need for a reliable and ready National Guard that is transformed for the 21st century.

It is an honor to be named the 26th Chief of the National Guard Bureau. As a synchronized joint activity, we will capitalize on momentum gained over the past several years and will build new relationships based on our new roles and responsibilities.

The National Guard will remain “Always Ready, Always There.”
The following pages offer a full report on our recent accomplishments along with our ongoing responsibilities for fiscal year 2010.

LIEUTENANT GENERAL CLYDE A. VAUGHN, DIRECTOR, ARMY NATIONAL GUARD, ARMY
NATIONAL GUARD

MESSAGE FROM THE DIRECTOR

Army National Guard (ARNG) Citizen-Soldiers continue the proud tradition of service to our nation both at home and around the world. Our Citizen-Soldiers consistently proved themselves capable of operating across a wide spectrum of missions in Iraq, Afghanistan, Belgium, Bosnia, Djibouti, Egypt, Germany, Honduras, Kosovo, Kuwait, and the Philippines.

The ARNG continues to achieve outstanding results meeting recruiting and retention goals. As of December 31, 2008, Army National Guard assigned strength was 365,814 Citizen-Soldiers, a gain of approximately 35,000 Citizen-Soldiers in about 3 years. At the same time we have reduced our non-participating numbers to 5,404 (from 6,082 in July 2005).

With thousands of our Citizen-Soldiers “on the ground” in foreign lands, we are equally busy at home. National Guard units fought wildfires in California, aided hurricane victims on the Gulf Coast, and assisted numerous environmental clean-up activities around the country. These responses from across our land demonstrate the importance of training and equipping our Soldiers so they are ready to render service and assistance to home communities.

We are committed to deploying Citizen-Soldiers with the best equipment and training possible. The U.S. Army’s similar assurance and ongoing Congressional interest in the welfare of our people will ensure the success of the Army National Guard.

INVESTING IN PRESENT AND FUTURE VALUE

Mobilizations, deployments, modular force conversions, counterdrug assistance, and disaster response dominated the ARNG’s efforts to answer needs at home and abroad. But to remain America’s vital force, the ARNG must invest in people, equipment, operations, and technology like never before.

Meeting Mission Requirements

Heavy demands on personnel and declines in equipment-on-hand due to increased mobilizations and deployments continued in fiscal year 2008. The Army National Guard effectively met mission requirements and continued to support ongoing conflicts. However, for some units returning from deployment, equipping and training levels decreased readiness.

Modular Force Conversion and Rebalance

The Army National Guard successfully met its 2008 goal of transforming 1,300 operating force units to a modular design. This brings the total number of units transformed to more than 2,800.

Converting Army National Guard units to modular configuration in an era of persistent conflict has significantly increased equipment and modernization requirements and has also increased equipment readiness.

The Army National Guard brigade combat teams (BCTs) are composed identically to the active Army and can be combined with other BCTs or elements of the joint force to facilitate integration, interoperability, and compatibility. The Army National Guard transformation into these modular formations provides an enhanced operational force. This is key to meeting the goal of making at least half of Army and Air assets (personnel and equipment) available to the Governors and Adjutants General at any given time. This transformation effort impacts over 87 percent of Army National Guard units across all 50 states, three territories, and the District of Columbia, and crosses every functional capability in the force.

INVESTING IN PERSONNEL

Our greatest asset is our people. We have the best trained force in the world. But we also have unparalleled support of our Citizen-Soldiers and their families. This support is paramount in maintaining our superior standing in the world.

Endstrength: Recruiting and Retention

As previously noted, recruiting and retention was exceptional with an end-of-calendar year assigned strength of 365,814 Citizen-Soldiers. The following programs provided the impetus for these gains.

- The Army National Guard's Recruiting Assistance Program (G-RAP) is a civilian contract recruiting program that, as of December 9, 2008, has processed 80,000 enlistments since its inception in December 2005. At the end of fiscal year 2008, approximately 130,000 recruiting assistants were actively working. In August 2007, G-RAP expanded to include incentives for officer accessions.
- The Recruit Sustainment Program (RSP), launched in 2005, improves our training success rate by easing newly enlisted National Guard Soldiers into the military environment through Initial Entry Training—a combination of Basic Combat Training and Advanced Individual Training.

The war on terror, transformation to modular formations, and domestic operations will continue to test the all-volunteer force. However, the Army National Guard is optimistic and confident that it will grow the force and have manned units to meet all missions at home and abroad.

Full-Time Support

Full-time support (FTS) personnel play a vital role in the ARNG's readiness both at home and abroad. Active Guard and Reserve (AGR) Soldiers and Military Technicians sustain the day-to-day operations of the entire Army National Guard. The AGR and Technician force is a critical component of readiness in the ARNG as the Reserve Components transition to an operational force.

Medical Readiness

Funding, treatment authorities, and medical readiness monitoring through Medical Operations Data Systems (MODS) have helped the ARNG increase medical readiness throughout the nation and allow deploying units to report at all-time high medical readiness levels.

In 2008, 92 percent of ARNG Soldiers reporting to mobilization stations were determined to be medically deployable. This represents a significant improvement upon previous years. This increased readiness throughout the ARNG has reduced pre-deployment training time lost due to required medical corrective actions. The ARNG is implementing the Army Select Reserve Dental Readiness System that will enable commanders to achieve 95 percent dental readiness in support of DOD Individual Medical Readiness standards.

Incapacitation Pay

The Army National Guard Incapacitation (INCAP) benefit provides interim pay to ARNG Soldiers with a service-connected medical condition (provided that they are not on active duty). The INCAP pay software, released in early fiscal year 2008, facilitates the administration of this benefit.

The INCAP process provides compensation in two situations. First, a Soldier who is unable to perform military duty may receive military pay less any civilian earnings. Second, a Soldier who can perform military duty, but not a civilian job, may receive lost civilian earnings up to the amount of the military pay. INCAP incorporates a detailed accounting system of tracking Soldiers who receive INCAP pay, the date initiated, the amount received, and when terminated. INCAP quickly compensates Soldiers, therefore allowing them to concentrate on the rehabilitation process, and focus on their families.

Survivor Services

The ARNG renders dignified Military Honors according to service tradition for all eligible veterans. The ARNG supports 79 percent of all Military Funeral Honors for the Army and 51 percent of all Funeral Honors for all services. In fiscal year 2008, the ARNG provided Military Funeral Honors for over 97,000 veterans and 200 Soldiers killed in action.

INVESTING IN EQUIPMENT AND FACILITIES

Upgrading and maintaining our equipment and facilities is becoming increasingly vital as we face challenges at home and abroad. The era of persistent conflict demands nothing less.

Equipment on Hand and Equipment Availability

The historic equipment on-hand (EOH) percentage for the ARNG has been about 70 percent. In fiscal year 2006, EOH declined to approximately 40 percent due to cross-leveling of equipment to support immediate deployment requirements. It increased to about 49 percent in fiscal year 2007. By the end of fiscal year 2008, the ARNG had 76 percent of its required equipment on-hand when deployed equipment is included.

Equipment Readiness Levels

When items supporting mobilized and deployed units are subtracted out of this equation, the current warfighting equipment on-hand percentage falls to 63 percent of Modification Table of Organization and Equipment (MTOE) requirements available to the Governors of the 54 states and territories.

Domestic response is a critical ARNG mission. The Chief of the National Guard Bureau has pledged that 50 percent of Army and Air Guard forces will be available to a Governor at all times to perform state missions.

The Army has taken positive steps to improve the Army National Guard equipping posture. The Army's goal is to fully equip all BCTs, regardless of components, by 2015.

Congress has been very responsive to ARNG equipping requirements through funds in the National Guard and Reserve Equipment account. This much needed funding has been used to procure critical dual-use items to support the "Essential 10" capabilities.

Ground and Air Operating Tempo

The ground operating tempo (OPTEMPO) program is one of the keystones in equipment readiness. Direct ground OPTEMPO pays for petroleum, repair parts, and depot-level repairables. Indirect OPTEMPO pays for expenses such as administrative and housekeeping supplies, organizational clothing and equipment, medical supplies, nuclear, biological and chemical (NBC) supplies and equipment, and inactive duty training (IDT) travel which includes Command Inspection, staff travel, and cost of commercial transportation for Soldier movement.

In 2008, ground OPTEMPO funding for the Army National Guard totaled \$901 million in base appropriation plus \$73 million in supplemental for a total of \$974 million. This funding directly impacts the readiness of ARNG units to participate in global operations as well as domestic preparedness. Significant equipment remains in theater after Guard units return from deployments. Equipment shortages at home stations compel greater use of what is available. These demanding conditions have resulted in rapid aging of equipment. While the ground OPTEMPO sustains equipment-on-hand, it does not replace major-end items that are battle-lost or left in the theater of operations.

The air operating tempo (OPTEMPO) program supports the ARNG Flying Hour Program which includes petroleum-oil-lubricants, repair parts, and depot-level repairables for the rotary wing helicopter fleet.

In 2008, air OPTEMPO funding for the Army National Guard totaled \$280 million in base appropriation plus \$128 million in supplemental for a total of \$408 million. This funding provides for fuel and other necessities so that 4,708 ARNG aviators can maintain currency and proficiency in their go-to-war aircraft. Achieving and maintaining desired readiness levels will ensure aircrew proficiency and risk mitigation, which helps to conserve resources. ARNG aviators must attain platoon level proficiency to ensure that they are adequately trained to restore readiness and depth for future operations.

Reset Process

The Army continued to work with Army National Guard leaders to refine requirements for critical dual-use equipment and to ensure that the states and territories can adequately protect the lives and property of American citizens during a catastrophic event.

Several changes helped resolve reset issues during 2008. The biggest change provided funds directly to the Army National Guard. This allowed the ARNG to conduct reset operations at home stations. The Army National Guard's initial \$127 million, plus \$38 million from the Army, supported the ARNG's reset efforts. This streamlining process enabled the states to have their equipment immediately available.

Logistics-Depot Maintenance

The Army National Guard Depot Maintenance Program continued to play an integral part in the ARNG sustainment activities during 2008. This program is based on a "repair and return to user" premise as opposed to the equipment maintenance "float" (loaner) system used by the active Army.

The amount of equipment qualifying for depot repair increased by 26.7 percent in fiscal year 2009. This increase was due primarily to the rebuilding of the ARNG's aged tactical wheeled vehicle fleet. During 2008, the Army National Guard Depot Maintenance Program funded the overhaul of 3,405 tactical vehicles as well as calibration services.

Facilities and Military Construction

In more than 3,000 communities across America, the local National Guard readiness center (armory) is not only the sole military facility but also an important community center. For National Guard members, these facilities are critical places where we conduct training, perform administration, and store and maintain our equipment. Many of our aging facilities are in need of repair or replacement. The continuing strong support of the Congress for Army National Guard military construction and facilities sustainment, restoration, and maintenance funding is crucial to our readiness.

In fiscal year 2008, Congress made \$843 million available for facility operations and maintenance in the ARNG. This level of funding covered “must fund” operations including salaries, contracts, supplies, equipment leases, utilities, municipal services, engineering services, fire and emergency services, and program management.

Environmental Program

Recent success in the ARNG’s Environmental Program underscores its mission to excel in environmental stewardship to ensure the welfare of all citizens and communities while sustaining military readiness. Program highlights include:

- The Army Compatible Use Buffer (ACUB) program that supports Soldier training by protecting an installation’s accessibility, capability, and capacity while sustaining the natural habitat, biodiversity, open space, and working lands. Since this program began in 2003, the National Guard, along with civilian partnership contributions, helped to protect 40,000 military-use acres from encroachment at nine ARNG training centers.
- Cleanup and restoration programs that continue to make steady progress at Camp Edwards, Massachusetts, where five major groundwater treatment projects have been completed.
- The final stages of cleaning up an open detonation area that will eventually become maneuver training land at Camp Navajo, Arizona.

INVESTING IN OPERATIONS

Sound management practices demand that we stay focused on operational issues and missions such as readiness, training, ground operating tempo, and aviation, including the Operational Support Airlift Agency.

Domestic Operations

The Army National Guard Domestic Operations Branch coordinates and integrates policies, procedures, and capabilities to ensure critical operations are continued in the event of an emergency, or threat of an emergency, anywhere in the United States and its territories.

The following missions in 2008 exemplify the National Guard’s resolve in protecting and preserving the homeland.

- In June, National Guard troops provided sandbagging, search and rescue, power generation, logistical support, food and water distribution, debris removal, shelter set up, and support to law enforcement during Mississippi River flooding. Over a 3-week period, more than 6,800 Soldiers from Iowa, Indiana, Illinois, Missouri, and Wisconsin provided their respective states with critical capabilities.
- In California last summer, 8,300 wildfires consumed over 1.2 million acres. The California ARNG supplied 1,350 Citizen-Soldiers to protect people and property around the state, including 400 Citizen-Soldiers deployed to the front lines to fight fires. California air crews, assisted by Army and Air National Guard aviation teams from 12 other states, dumped 4.2 million gallons of retardant to extinguish the blazes.
- In August, over 15,000 Citizen-Soldiers from Texas, Louisiana, and other states supported relief efforts after Hurricanes Gustav and Ike. Their mission included food and water distribution, search and rescue, air medical evacuations, communication support, hazardous material assessments, shelter operations, and debris removal.

Army National Guard Citizen-Soldiers stand ready throughout the 54 states and territories to respond to any crisis.

Operational Support Airlift Agency

The Operational Support Airlift Agency is a Department of the Army field operating agency under the National Guard Bureau that supports 114 aircraft worldwide and over 700 personnel. During 2008, these aircraft flew over 54,000 hours, transported about 21 million pounds of cargo, and carried more than 100,000 passengers. This included combat support in the Middle East and Africa, relief efforts

for the Gulf Coast and California wildfires, and criminal investigation task force efforts in Columbia and Cuba.

Training

Muscatatuck Urban Training Center

The 974-acre Muscatatuck Urban Training Center (MUTC), located in Indiana, is a self-contained, contemporary urban training environment.

In its second year of operation, more than 19,000 trainees from military (including 13,000 Army National Guard and Reserve Soldiers), government, and private agencies used the facilities at MUTC. Training helps prepare Soldiers to fight in foreign cities and helps prepare Soldiers and others to deal with the aftermath of attacks on U.S. cities. In the future, MUTC could train as many as 40,000 troops annually at the urban warfare practice facility.

ARNG eXportable Combat Training Capability

The Army National Guard's eXportable Combat Training Capability (XCTC) is a fully instrumented group of field training exercises that provide tough, realistic training for every ARNG unit during pre-mobilization training.

This training incorporates the most current tactics, techniques, and procedures used in theater. In fiscal year 2008, the ARNG conducted two XCTC rotations (Illinois and Oregon) and trained a total of eight battalions. Planning is underway to conduct six XCTC rotations that will provide training for 18 battalions.

By training and certifying pre-mobilization training tasks, the XCTC reduces post-mobilization training time and thus increases the availability of units for "boots on the ground" time in the warfight.

INVESTING IN INFORMATION TECHNOLOGY

During fiscal year 2008, ARNG information technology (IT) resources supported these network security projects:

Network Services

The ARNG IT organization reviewed the communications and network service capabilities that states and territories will require in the event of a natural or man-made disaster or contingency. The solution restores access to network services should a readiness center (armory) lose connectivity regardless of local infrastructure availability. Each deployment will bring a virtual Joint Force Headquarters (JFHQ) node to the affected area and provide voice, video, Internet Protocol (IP) data, and push-to-talk services to a site within 36 hours.

Other specific actions include:

- Acquiring network simulator training that provides network operators and defenders a safe network environment to conduct initial qualification, mission qualification, crew training, position certification, and exercises.
- Planning and implementing secure network access for deploying Brigade Combat Teams and their supporting Battalions.
- Strengthening the Enterprise Processing Center by incorporating backup and storage capability in accordance with the National Guard Bureau's continuity of operations requirements.

LIEUTENANT GENERAL HARRY "BUD" WYATT, III, DIRECTOR, AIR NATIONAL GUARD

MESSAGE FROM THE DIRECTOR

The Air National Guard (ANG) is both a reserve component of the Total Air Force (USAF) and the air component of the National Guard. As a reserve component of the Total Air Force, the ANG is tasked under Title 10 U.S. Code, "to provide trained units and qualified persons available for active duty in the armed forces, in time of war or national emergency . . ."—in essence, a combat-ready surge capability. The ANG augments the regular Air Force by providing operational capabilities in support of Homeland Defense both domestically and overseas. As the air component of the National Guard, the ANG provides trained and equipped units and individuals to protect life and property, and to preserve peace, order, and public safety.

As a reserve component of the Total Air Force, ANG members regularly perform operational missions both in the United States and overseas. For example, over 6,000 ANG members vigilantly stand guard protecting the homeland. Overseas, more than 7,000 National Guard Airmen are deployed at any given time, whether in Southwest Asia or little known locations around the world, providing airpower capabilities such as strike, airlift, air refueling, and intelligence, surveillance, and reconnaissance (ISR) to joint and coalition forces.

The ANG provides a myriad of capabilities to support state and local civil authorities in protecting life and property. We provide capabilities in areas such as airlift, search and rescue, aerial firefighting, and aerial reconnaissance. We also furnish critical support capabilities such as medical triage and aerial evacuation, civil engineering, infrastructure protection, and Hazardous Materials (HAZMAT) response. During 2008, National Guard Airmen helped their fellow citizens after Hurricanes Gustav, Hanna, and Ike; protected life and property from wildfires in the West, tornados in the Midwest, and blizzards and ice storms across the country; and assisted with security at the Republican and Democratic National Conventions.

The ANG faces today's challenges by examining the past, serving in the present, and planning for the future. We are preserving our heritage as a community-based, predominantly part-time force while we adapt to numerous force structure changes, placing our ANG on a clear path for future missions. While we cannot know every potential threat we will face, we do know that success depends on our ability to continually adapt and evolve toward new and exciting missions and capabilities. In order to adapt and effectively support our national security objectives, we must focus our efforts in three areas:

- Modernize and recapitalize the aging ANG fleet of aircraft to ensure that we, as the proven leader in air dominance today, do not become complacent and fail in our vigilance against those who seek to challenge our mastery of the air.
- Maximize the use of associations and community basing to better support the Air Force mission.
- Evolve future mission areas to better support the overall Air Force mission.

A QUICK REVIEW

The ANG's global presence throughout 2008 was felt in the following ways:

- Deployed 20,231 service members to 85 countries on every continent, including Antarctica.
- Participated in missions in Iraq, Afghanistan, and Bosnia; humanitarian airlifts to Southeast Asia and Africa; drug interdiction in Latin and South America; exercises in Europe and Japan; and many other missions.
- Provided not only airpower capabilities, but capabilities in medical, logistics, communications, transportation, security, civil support, and engineering.

This was another crucial year for the ANG as its men and women continued to defend America's interests worldwide in waging the Global War on Terror. Simultaneously, we continued to bring our force structure into balance following historic mission changes initiated by Base Realignment and Closure (BRAC), and Air Force modernization and recapitalization initiatives.

DEVELOPING ADAPTABLE AIRMEN

The Air National Guard values our Airmen, their families, employers, and our civilian employees as our greatest resources. The current corps of Air Guard members contains some of the most skillful and talented in our history. We remain committed to recruiting, retaining, and cultivating Airmen who are ready, willing, and capable of meeting 21st century challenges and leading with a vision that looks beyond tomorrow.

Recruiting and Retention

With the support of Congress, and the use of innovative approaches by our recruiters, the ANG finished fiscal year 2008 with an assigned strength of 107,679 Airmen. We surpassed our recruiting objective for the first time since 2002, achieving 126 percent of our goal. This accomplishment occurred despite a historically high operational tempo, executing BRAC decisions, and implementing Total Force Initiatives.

G-RAP

One program proving highly successful for ANG recruiters was the Guard Recruiting Assistance Program (G-RAP). With the help of current and former (including retired) members, our recruiters tapped into a larger circle of influence that let friends, family, and associates know about the tangible and intangible rewards that come with service in the Air National Guard. In fiscal year 2008, 3,676, or 34 percent, of our enlistments originated from leads generated by G-RAP volunteers. An overall 90 percent retention rate also bolstered our recruiting success for fiscal year 2008. By maintaining a high retention rate, the Air National Guard decreases the cost of replacing valuable members.

READINESS

Even though we met our recruiting and retention goals this year, we face the growing challenge of training the right people with the right skills to meet mission changes while responding to high wartime commitments and dealing with resource constraints. To deal with this we must focus on the three primary areas of readiness—personnel, training, and equipment.

Personnel

Personnel readiness, including skills affected by equipment shortages which bear upon our ability to train, has the greatest impact upon ANG overall readiness rates. As previously mentioned, working through a period with such a large number of units changing missions also skews the percentages. To a lesser degree, but still important, are the numbers of personnel on medical or dental profiles—an issue that affects our ability to deploy worldwide. The Air National Guard is placing increased emphasis upon these many challenges that affect our personnel readiness.

The ANG continues to maintain personnel readiness by supporting our people returning from deployments. We must maintain the ANG readiness posture by ensuring our Airmen receive appropriate and timely medical and dental assessment and treatment at all levels. We offer this through Frontline Supervisors and Landing Gear training programs, and through the Post Deployment Health Reassessment process.

Training

Training readiness is an ongoing challenge as we strive to meet training standards. In order to retain our highly qualified, experienced personnel, we must have the ability to train to both domestic operations and combat standards while meeting deployment demands. Equipment shortages of emergency management equipment for ANG civil engineers, weapons for security forces, and aircraft engines adversely impact training capabilities, and could negatively affect retention rates. While the volume of mission-related training requirements seems to grow exponentially, we will continue to explore and take advantage of every opportunity to meet training requirements in a timely manner.

The most significant challenge for the ANG, however, has been to fit its wartime requirements and mission changes into the traditional framework of a community-based, predominately part-time force. Our members have a history of answering the call to service, and have not lost sight of their mission: to be a combat-ready Air Force composed of dedicated, professional Airmen serving in both state and federal roles.

Equipment

ANG equipment readiness presents greater challenges as long-term costs in operating and maintaining older aircraft continue to rise due to more frequent repairs, fuel prices, and manpower requirements. Although fuel prices have declined in recent months, the cost of aircraft maintenance continues to rise significantly as we struggle to extend the life of our aging fleet.

The current air traffic control system is 1950s technology that received minor radar upgrades in the 1980s. Replacement parts are obsolete and no longer available on the market. Modifying and upgrading the old system would cost more than a new system. The Air National Guard provides 62.5 percent of the United States Air Force's air traffic control (ATC) wartime mission. In support of Operations Enduring Freedom and Iraqi Freedom, the ANG deployed five mobile ATC Radar Approach Controls. Additionally, the ANG has peacetime obligations to support the National Airspace System, providing ATC services at designated military/civil airports.

In the final analysis, the Air National Guard will meet 21st century challenges by proactively shaping its future with combat-ready, adaptable Airmen at its core.

MODERNIZE AND RECAPITALIZE

The age of the ANG fleet is of grave concern. Aircraft and equipment in both the regular Air Force and the ANG are quickly wearing out. The average age of ANG aircraft is now over 25 years, with KC-135s being the oldest at 49 years. The high operational tempo since 1990 has added flying hours that have accelerated this aging process. As already mentioned, long-term costs to operate and maintain these older aircraft have increased. Additionally, our potential adversaries have improved their capabilities, raising concerns about the ability of our current aircraft to defend U.S. interests around the globe.

Modernization of our equipment and training platforms is based on capabilities needed by the Air Force. As the ANG moves increasingly into the worlds of com-

mand and control, intelligence, reconnaissance, surveillance, unmanned systems, and cyberspace, the process has expanded to include expert warfighters in these areas. As a capabilities-based force, the ANG can better assess, plan, and support its federal (Title 10) and state (Title 32) missions, remain relevant to operations, and be interoperable with other forces.

Changing the force structure and orientation of units away from airborne platforms to unmanned systems and capabilities is a difficult, yet necessary transition. These efforts to redefine the ANG will be expanded upon in the Future Mission Areas section of this report.

The ANG is committed to seamlessly integrating into the operational environment. Our modernization program is based on Air Force and Combatant Command requirements and vetted among reserve component and active duty warfighters. Some examples include:

Mobility Aircraft

The ANG will pursue further modifications to flight instruments, communications, navigation, and terrain/traffic avoidance systems along with upgrades to engines and missile warning and countermeasures on ANG mobility aircraft (C-5, C-17, C-130, KC-135) and other aircraft.

Combat Aircraft

Air National Guard combat aircraft (A-10, F-15, and F-16) comprise about one-third of the Air Force's combat capability. Eighty percent of our F-16s will begin reaching the end of their service life in 8 years. While our maintainers continue to keep our fleet combat ready and available, we must replace our legacy systems to remain viable and relevant.

Unmanned Aircraft Systems

The Air National Guard expansion into the world of unmanned aircraft systems continues to move forward in Arizona, California, North Dakota, New York, Nevada, and Texas Air National Guard units, as illustrated with the development of integrated Predator and MQ-9 Reaper Operations Centers. These centers will not only allow smooth operation and control of current and future transformational warfighting and homeland defense missions, but will integrate multiple systems currently running independently. The RQ-4 Global Hawk continues to provide high quality intelligence, surveillance, and reconnaissance (ISR) support for Operation Iraqi Freedom while also supporting homeland missions.

MC-12 and Project Liberty

Mississippi's 186th Air Refueling Wing is taking on an additional mission, training aircrews for the Air Force's newest manned ISR platform, the MC-12. Designated Project Liberty, the program will train nearly 1,000 Airmen during the next 2 years at Key Field near Meridian, Mississippi, at a cost of about \$100 million. The MC-12 is expected to bolster the Department of Defense's intelligence gathering capability in Operations Iraqi Freedom and Enduring Freedom.

Dual-Use Capabilities

Developing and fielding "dual-use" capabilities are the cornerstone to the ANG's cost effective contribution to combat and domestic operations. Many domestic operations capabilities are outlined in the National Guard Bureau's "Essential 10" core military capabilities relevant to Civil Support. In fiscal year 2010, with the support of Congress, we will address critical shortfalls in medical, communications, transportation, logistics, security, civil support teams, engineering, and aviation. The ANG will continue to increase capabilities for use during domestic missions for the foreseeable future.

Competing sustainment costs and funding requirements for recapitalization present challenges for the Total Force. However, by similarly equipping the ANG and the regular Air Force, we directly support efforts in Total Force Integration (TFI). In short, the ANG needs to be concurrently equipped with the active duty force to support our total Air Force mission—to be the dominant air power, second to none.

Maximize Associations and Community Basing

Since Vietnam, the Air Force has understood the importance of unit integrity on combat effectiveness, and has reflected this in war plans for unit mobilizations. As such, the ANG, Air Force Reserve (AFRES), and active Air Force have formed unique alliances that promise to increase mission effectiveness while reducing costs.

Under three types of constructs known as “associations,” ANG, AFRES, and active Air Force units share not only facilities and equipment, but knowledge and experiences (many ANG members spend their careers with the same unit and equipment).

—Under “classic associations” the active duty unit retains principal responsibility for its equipment and the reserve unit shares in operating and maintaining it.

—With “active associations” active duty personnel are assigned to reserve units in local communities where they share in the operation and maintenance of reserve-assigned assets.

—The last association, called “reserve associate,” is similar to the “active” and “classic” relationships in that one air reserve unit retains ownership of the assets and another unit shares in operating and maintaining the equipment as an air reserve component associate unit.

“Community basing” is a core characteristic that forms the foundation of our competitive edge as a cost effective combat-ready reserve. Over 60 percent of the ANG force consists of “traditional” part-time, professional Airmen, who train to the same standards, supply the same capabilities and provide the same response times as the regular Air Force.

The ANG is closely tied to our communities. Generally our members are recruited locally, hold civilian jobs there, and maintain close ties throughout most of their careers in the ANG. Unlike regular Air Force Bases which tend to be self-sufficient, we also depend on our local communities for many common resources needed to support the mission. Shared infrastructure, such as retail stores and housing, reduces operating costs significantly (66 of 88 ANG flying units are co-located at civilian airports, sharing runways, taxiways, and fire/crash emergency response).

The synergy resulting from these relationships is fundamental to the mission readiness of the ANG in these ways:

—Ties to the local area provide personnel stability, resulting in a high level of unit integrity and experience.

—Long-term relationships position the ANG to plan, exercise, and respond to natural and man-made domestic emergencies.

—Shared civil/military work force provides the ANG and the community with broad skill sets.

Future Mission Areas

The ANG is prepared to take on more mission sets to better support the overall Air Force mission. The ANG will continue to work with the Adjutants General to refine and update the modernization and recapitalization plans outlined previously. We will not only support our Governors at home with quick responses to natural and man-made disasters, but will also support the Combatant Commanders with improved mobility, agile combat support, and other mission sets, both tried and new.

Rapid Global Mobility

Continuing ANG participation in inter-theater or strategic airlift (C-5, C-17), intra-theater or tactical airlift (C-130, future C-27/JCA), and air refueling (KC-135, KC-10, future KC-45) is important. Within the Strategic Reserve construct, strategic airlift and air refueling are central due to their surge-to-demand operation and ability to meet scheduled operational force requirements rapidly. Tactical airlift fits well with dual capabilities required by the ANG’s state and federal roles. Its versatility makes it especially valuable in responding to domestic needs, such as Modular Aerial Fire Fighting (MAFF), and aerial delivery of food and supplies to disaster victims, and in search and rescue.

Agile Combat Support

Expeditionary Combat Support (ECS) units will continue to provide essential combat service support in sustaining all elements of operating forces, providing medical support, services, security forces, civil engineers, transportation, logistics support, and airfield maintenance. ECS also includes ANG support to National Guard Civil Support Teams (CSTs) and Chemical, Biological, Radiological, Nuclear, and high-yield Explosives (CBRNE) Enhanced Response Force Packages (NG-CERFP) to assist civil authorities’ response to domestic CBRNE incidents. These units are at the forefront of our dual-use capabilities in responding domestically to man-made and natural disasters as well as overseas disasters and operational missions.

Intelligence, Surveillance, and Reconnaissance (ISR)

The ANG can help meet rapidly increasing ISR requirements for the Joint Force, in areas such as the following: ISR in Special Operations; Distributed Ground Stations; Human Intelligence; National Tactical Integration; ISR Center of Excellence (Nellis AFB, Nevada); Air Force Expeditionary Signals Intelligence; Computer Net-

work Exploitation; Tactics Analysis; Global Aviation Analysis Support Team; and All Source Intelligence Analysis.

United States Special Operations Command (USSOCOM) requested investment in manning ISR aerial ports, which points to the need to further invest in small aircraft to support specific ISR requirements, something the ANG is uniquely qualified to do since it already possesses the appropriate aircraft and experienced aircrews. Platforms such as these have dual-use capability for both homeland and expeditionary operations. Specifically, it can support DOD's "Building Partnership Capacity" efforts with nations desiring a partnership arrangement involving a low-cost multi-utility platform, which could further enhance the National Guard State Partnership Program (SPP). This manned ISR mission, using the small aircraft platform, is potentially the most promising initiative for the ANG in the near future.

Cyberspace

This year the Air National Guard continued to grow into cyberspace by establishing three more information operations squadrons, raising the number of operational units to eight. These new units include the 166th Network Warfare Squadron based at New Castle Airport, Delaware, the 273rd Information Operations Squadron (IOS), Lackland AFB, Texas, and the 229th IOS, located in the Vermont National Guard Armory. While the specifics of each unit's mission vary slightly, all are dedicated to deterring the ever growing number of daily attacks against this nation's cyber-based infrastructure.

Space Operations

ANG units support space and missile operations at several locations in Alaska and the continental United States. Air Force Space Command desires increased ANG involvement in space operations, to include Missile Warning associate squadrons, Missile Operations support squadrons, Distributed Command and Control Mission expansion, and Space Launch/Range operations.

Continuing Missions

The ANG will retain some existing mission sets, such as those associated with Global Persistent Attack. This mission is a surge task that requires a large number of fighter aircraft, particularly in the early stages of a conflict. The Air Force Reserve Components provide the most cost effective way to maintain this surge capability.

The Air Force will not be able to recapitalize its fighter force structure on a one-to-one basis, which means that some ANG fighter units have been required to transition to other mission areas. Developing active and classic associations such as those mentioned above are now underway as we transform to new and promising mission sets.

For fiscal year 2010, fully rebalancing and training will involve a complex interchange of people, training, and resources. These mission changes will directly impact about 15,000 Air National Guard members across the nation.

In an environment where change is considered a constant instead of a variable, we continue to move forward knowing a more capable Air National Guard will better serve the needs of our nation tomorrow and far into the future.

MAJOR GENERAL PETER M. AYLWARD, DIRECTOR, JOINT STAFF, NATIONAL GUARD
BUREAU

MESSAGE FROM THE DIRECTOR

Today's National Guard faces a more complex and challenging world than ever before. There are no easy solutions to our comprehensive problems. America must remain ready to fight and win across the full range of military operations. Enemies are finding new ways to overcome the difficulties of geographic distance. The increase in travel and trade across U.S. borders has created new vulnerabilities for hostile states and actors to exploit opportunities to perpetrate devastating attacks on the U.S. homeland. U.S. military forces enjoy significant advantages in many aspects of armed conflict, but we will be challenged by adversaries who possess or design novel concepts to overcome our advantages.

At home, the terrorism threat coincides with violent drug-trafficking organizations and border security challenges. These trends produce a geopolitical setting that is increasingly complex and unpredictable. Therefore, the National Guard must be flexible and prepared for the unexpected. In addition, the way the National Guard is organized, equipped, and trained provides the unique ability to respond quickly and effectively to natural disasters and man-made catastrophic events. The National

Guard Bureau's Joint Staff has taken on these challenges with the following efforts, teams, and programs.

DOMESTIC OPERATIONS

Weapons of Mass Destruction Civil Support Teams (WMD-CST)

The National Guard continues to strengthen its ability to respond to chemical, biological, radiological, nuclear, and high-yield explosive incidents with 55 WMD-CSTs and two newly established units going through the DOD certification process. These units are manned by 22 full-time Army and Air Guard personnel who provide each Governor with an immediate response capability, specialized expertise, and technical assistance that can be provided to local incident commanders nationwide. WMD-CSTs do not duplicate state CBRNE response capabilities, but support civil authorities by identifying CBRNE agents or substances, assessing current or projected consequences, advising on response options, and assisting with requests for state support. Congress recently expanded the use of CSTs to include response to intentional or unintentional HAZMAT incidents and natural or manmade disasters.

The National Guard's Civil Support Teams, which are so essential to the security of the American people on an almost daily basis, depend on the availability of adequate operations and maintenance funds to carry out their tasks. Any reduction in funding below that requested carries the risk of hindering the operational capability of these essential teams.

Chemical, Biological, Radiological, Nuclear, and High-Yield Explosive (CBRNE)—Enhanced Response Force Package (CERFP) Teams

Army and Air National Guard Citizen-Soldiers and Airmen with technical response skills in this area make up 17 CERFP teams covering every region of the country. The CERFP team is designed to locate and extract victims from a collapsed structure in a contaminated environment, perform medical triage and treatment, and conduct personnel decontamination from a weapon of mass destruction incident.

CBRNE Consequence Management Response Forces (CCMRFs)

Each CCMRF provides 4,700 trained and equipped active and reserve component military personnel ready to assist civil authorities in response to a CBRNE incident. CCMRF capabilities include: CBRNE reconnaissance and detection; casualty search and extraction; decontamination; hazardous material handling and disposal; medical triage, treatment, and care; aero-medical evacuation; explosive ordnance disposal; air and land transportation; and mortuary affairs.

The National Guard Bureau continues to support planning for the standup of all CCMRFs.

Joint Force Headquarters-State (JFHQ-State)

The National Guard continues to strengthen and refine the 54 Joint Force Headquarters throughout the United States. JFHQ-State works to enable effective domestic responses while conducting traditional state National Guard training responsibilities for Army and Air Force reserve component forces. Each JFHQ-State provides the Governor with information and command and control for effective National Guard response; provides improved situational awareness to DOD before, during, and after an emergency response; and facilitates unity and continuity of military (federal and state) effort during Continental U.S. (CONUS) operations.

Critical Infrastructure Program—Mission Assurance Assessment (CIP-MAA) Teams

National Guard CIP-MAA teams are comprised of Citizen-Soldiers and Airmen trained to assess the vulnerability of industrial sites and critical U.S. Government infrastructure to attack. Their analysis helps various government agencies direct prevention, deterrence, mitigation, and response efforts. Currently, three teams are assessing Defense industrial base sites and ten teams are assessing Department of Homeland Security sites.

Joint Enabling Team (JET)

The National Guard Bureau's highly trained professionals making up Joint Enabling Teams establish a logistics and support link between NGB, the supported state, and supporting states and agencies. The JETs help identify potential mission shortfalls and facilitate missions by assisting with the collection, reporting, and sharing of information. They ensure that resources are available and that personnel directly involved in the mission are effectively supported for domestic operations involving floods, hurricanes, and tropical storms.

National Guard Reaction Force (NGRF)

Within hours of an incident, upwards of 500 individuals can assist state and local law enforcement by providing site security, presence patrols, show-of-force, establishment of roadblocks and/or checkpoints, control of civil disturbances, force protection and security for other responders, and protection of DOD assets as required.

Task Force for Emergency Readiness (TFER)

The TFER program enlists National Guard officers at the state level to write comprehensive “state” Homeland Security Plans that address the eight national planning scenario sets. The Federal Emergency Management Agency (FEMA) is currently funding five pilot states (Hawaii, Massachusetts, South Carolina, Washington, and West Virginia) with the intent of expanding TFER to all states based on the anticipated success of the pilot program.

COUNTERDRUG PROGRAMS

In 2008, some 2,400 National Guard personnel supported law enforcement agencies in seizing illegal drugs with a street value of approximately \$28 billion. The National Guard supports law enforcement counterdrug operations with 125 specially equipped Army National Guard OH-58A helicopters and 11 Air National Guard counterdrug RC-26B fixed-wing aircraft.

Synchronizing counterdrug information-sharing among law enforcement agencies, the National Guard, and Department of Defense agencies has greatly increased the efficiency and speed of the effort.

Stay on Track

In 2008, National Guard personnel reached over 3 million people with their positive anti-drug messages. Drug demand reduction programs such as Stay on Track have reached over 115,000 middle school students in 215 schools around the country since 2007. In 2009, Stay on Track plans to reach out to another 150,000 students.

OPERATION JUMP START

The National Guard and the U.S. Border Patrol marked the end of the Operation Jump Start (OJS) mission in 2008 with ceremonies in Washington, D.C. Operation Jump Start began June 15, 2006, and officially ended July 15, 2008. At its peak, the operation saw up to 6,000 National Guard Citizen-Soldiers and Airmen assisting the Border Patrol to increase security and vigilance along the nation’s southern border.

OJS assistance not only freed up hundreds of Border Patrol agents to perform their normal law enforcement duties, but it also allowed time for the Border Patrol to hire and train more agents. “Within law enforcement, there is one word that we put a lot of weight on,” said David V. Aguilar, Chief of the Border Patrol. “That is the word ‘partner.’ Today, I am very proud to call every individual who wears the uniform of the National Guard, has ever worn it, or will wear it, or is in any way affiliated with the National Guard . . . our true partners, and for that we truly thank you.”

Over the 2-year period, more than 29,000 troops from all 54 states and territories participated. As we look back on this operation, we count the following successes:

- Assisted with over 176,000 immigration violation apprehensions;
- Aided in seizing over 315,000 pounds of marijuana;
- Aided in seizing 5,000-plus pounds of cocaine;
- Helped build more than 19 miles of road;
- Helped repair more than 717 miles of road;
- Helped construct 38 miles of fencing; and
- Helped erect 96 miles of vehicle border barriers.

The National Guard provided the Border Patrol logistical and administrative support by operating detection systems, providing communications, and analyzing border-related intelligence. Citizen-Soldiers and Airmen also built new infrastructure, conducted training, and provided additional aviation assets and ground transportation.

JOINT AND INTERAGENCY TRAINING

To continue providing quick and effective support of local and state response forces, the National Guard must continue expanding its capacity to conduct joint and interagency training in a domestic environment. We can accomplish this by increasing the number of National Guard, state and local response forces, DOD, and federal agencies participating in the U.S. Northern Command (USNORTHCOM) and NGB Joint Interagency Training Capability (JITC) programs.

Increased participation by these and other agencies will improve tactical interoperability as well as unity of effort among state, local, and federal agencies during catastrophic man-made or natural disasters. Increasing the number and scope of National Guard regional training centers (such as the Joint Interagency Training and Education Center (JITEC) in West Virginia) will also improve response proficiency and standardize tactics, techniques, and procedures for National Guard teams dealing with chemical, biological, radiological, nuclear, and high-yield explosives (CBRNE).

Joint Interagency Exercise Program (VIGILANT GUARD)

This exercise program conducts four National Guard regional exercises each year that provide valuable experience and training opportunities to the following force elements:

JTF Commander Training Course

This course prepares potential JTF commanders to operate, organize, and function in the unique federal and state environment. The 4-day in-residence course is conducted twice a year at USNORTHCOM in Colorado Springs.

JFHQ/JTF Staff Training Course (JSTC)

This course provides comprehensive training and education for joint staff to support JFHQ and JTF missions in state or federal status.

Collective CBRNE Training Program

Seventeen CBRNE Enhanced Response Force Packages (CERFPs) and 57 Weapons of Mass Destruction—Civil Support Teams (WMD—CSTs) learn to respond to a catastrophic CBRNE event in this program.

Joint Interagency Training and Education Center (JITEC)

In addition to the Joint Interagency Training Capability, JITEC plays an integral part in continuing the National Guard's transformation for the future by building relationships and capabilities with our interagency partners. Joint Interagency highlights include:

- Providing more than 30,000 duty-days of training and interaction in over 800 exercises to some 90 different organizations and agencies since September 11, 2001; and
- Scheduling more than 200 training, exercise, or assessment activities in 2010.

With continuing support from both DOD and Congress, the National Guard will continue to transform itself into a premier homeland security and defense organization, leveraging state and federal responses, capabilities, and expertise.

TECHNOLOGY REVOLUTIONIZES EMERGENCY RESPONSE AND TRAINING

Technology has played a key role in enhancing the National Guard Joint Staff's effectiveness in America's emergency preparedness and response. Emergency response training, information exchange, and command and control activities are more robust than ever to support local communities during a time of catastrophic events. The following highlights our progress.

Joint CONUS Communications Support Environment (JCCSE)

The JCCSE is the National Guard Bureau and USNORTHCOM umbrella platform that establishes communications and information sharing for Homeland Defense and Civil Support missions from the national to the state or territory level. The JCCSE platform ensures the National Guard's capacity to provide Command, Control, Communications, and Computer (C⁴) support necessary to carry out National Guard responsibilities. These capabilities directly supported FEMA operations during Hurricanes Gustav and Ike.

Communications, situational awareness, and command and control were bolstered with the following JCCSE enhancements:

- NGB acquired 84 Joint Incident Site Communications Capability (JISCC) systems to be distributed to the 54 states and territories. These sets provide interoperable communications at the incident site along with a satellite link to command and control centers to share information and tools needed to request or direct support.
- NGB established a Joint Command, Control, Communications, and Computer (C⁴) Coordination Center (JCCC) to monitor the status of all National Guard communications to the Joint Force Headquarters in each state, FEMA, and all emergency agencies involved. During an incident, the JCCC provides help-desk and satellite link support to teams deploying with JISCC.

—NGB established the Joint Information Exchange Environment (JIEE) as a web-based application to provide a common operating picture of all non-federalized National Guard activities. JIEE provides the ability to monitor, track, and share operational information with mission partners in a trusted domestic operations environment that extends down to the incident level. This capability is not currently available in DOD programs of record.

The domestic information environment in which JCCSE must interoperate continues to evolve. Consequently, NGB will continue to request funding to both sustain and adapt JCCSE capabilities as the domestic response requirements emerge.

Emergency Management Staff Trainer (EMST)

The Emergency Management Staff Trainer is a new virtual training application that provides extremely low-cost, scenario-driven training that can be repeated as many times as needed. This capability offers training that is geographically specific, allowing National Guard and civilian emergency management personnel to engage in training specific to their own city or state.

Scenarios developed to date include Hurricane Preparation and Response, Earthquake Response, Building Collapse, and Pandemic Influenza Answer.

Regional and State Online Resource—Emergency Management (RaSOR-EM)

RaSOR-EM supports training activities by combining commercially available mapping programs with links to thousands of emergency management databases and other information sources, dramatically enhancing speed and access to this critical information. All 54 states and territories, numerous federal agencies, and personnel from the Department of Homeland Security currently use the program. Data layers have been added to include critical infrastructure data, locations of schools and reserve centers, and other valuable data.

SUPPORTING THE WARFIGHTER

An effective Citizen-Soldier or Airman is one who knows his or her family is safe, secure, and able to function efficiently while he or she is deployed. An effective Soldier or Airman also needs support in transitioning back to civilian life after long deployments. Keeping our Soldiers and Airmen ready, both physically and mentally, requires the National Guard's support through programs for the individual and the family.

Transition Assistance Advisors

Sixty-two Transition Assistance Advisors (TAAs) were hired in the states, territories, and District of Columbia to provide personalized service to Guard and family members. They educate and assist them on constantly evolving benefits information, assist them in obtaining their federal and state benefits and entitlements, and help them file and track benefits claims. These personalized services include linking Guard members and families to behavioral health resources, disability claims filing, and obtaining disability compensation. These advisors work closely with the liaisons from the NGB and Department of Veterans Affairs (DVA) and have proven themselves invaluable by educating National Guard leadership, Guard members, and veterans on the myriad of complex benefits and entitlements earned through their military service.

In one instance, the TAA, the Seattle Veterans' regional office, and the Washington National Guard teamed up to test an idea that allows persons to file for Veterans Administration benefits and process them within 6 to 8 days of their units returning from active duty—a method previously reserved only for returning active duty units. This is made possible by allowing access to military medical records, often a large factor for delays in claims. The units also complete medical benefits forms on site.

National Guard Joint Family Program

The National Guard Joint Family Program (JFP) provides direct support to the 54 state and territory family program directors, youth coordinators, and 92 Wing Family Program Coordinators. The JFP office provides guidance, resources, and support to National Guard families when Guardsmen are deployed at home or abroad. JFP conducts all training events and national-level seminars and workshops for all of the above positions as well as for an estimated force of over 10,000 National Guard family volunteers.

The program office provides training to families via computer-based training modules, centralized classes, and locally provided training to help make families self-reliant throughout the deployment cycle process.

Family Assistance Centers

Consider these actual family situations:

A New Jersey National Guard Soldier, training for deployment to Afghanistan, receives word that his family's home is gutted by fire.

A Soldier suffers from severe post traumatic stress disorder as he deals with his wife's declining health and the threat of losing their home.

A catastrophic auto accident has left a Soldier a quadriplegic.

These are just a few of the situations Family Assistance Centers (FACs) deal with each day to help our Soldiers. More than 300 FACs across the 54 states and territories provide information, referral, and outreach to families of geographically dispersed members from all services, whether active or reserve component. Family Assistance Centers are critical to mobilization and demobilization and to the long-term health and welfare of service members and their families. The FAC team believes that Soldiers who know their families are cared for, safe, and secure at home, can better concentrate on their tasks and missions in theater.

Yellow Ribbon Reintegration Program

The Yellow Ribbon Program provides information, services, referrals, and proactive outreach to service members, spouses, employers, and youth from the beginning through the end of the mobilization lifecycle.

The program provides a flexible family support system to meet the service member and family readiness needs of the expeditionary service component and geographically dispersed families. The program focuses on ensuring service members and their families receive the information and tools necessary to cope during the mobilization lifecycle.

Yellow Ribbon Program services include: Marriage Enrichment; Employer Support for the Guard and Reserve (ESGR); Warrior Transition Unit Information; Traumatic Brain Injury Information and Support; Child Behavioral Counselors; Veterans Affairs Information; TRICARE/Medical Benefit Information; Family Counseling; Legal Counseling; Financial Counseling; Community Relations; School Support; Child Care Services; Informational meetings and briefings; Preparations for reintegration; and Employment opportunities.

Division of Psychological Health

The newly created Division of Psychological Health will direct and manage a comprehensive psychological health service dedicated to Guard members and their families on a variety of conditions associated with post traumatic stress disorder(s) and/or traumatic brain injury. Fifty-four licensed mental health practitioners will cover all the states and territories.

The Psychological Health service goals include:

- Providing high quality services that are National Guard member-specific;
- Overseeing an individual's mental health and readjustment needs to civilian life;
- Addressing individual health care situations that may hinder reintegration to civilian life; and
- Consulting state and territory National Guard senior management on specific mental health needs and trends based on membership demographics.

The NGB Division of Psychological Health is committed to providing quality care and will develop and implement a program that is practical, meaningful, and beneficial for our Guard members and their families, thereby ensuring our maximum operational readiness.

A Leader in Equal Opportunity

In 2008, the National Guard Bureau Office of Equal Opportunity and Civil Rights developed Reasonable Accommodations procedures that are a model for other federal agencies. The National Guard Bureau is also officially partnering with Operation War Fighter through job fairs, resume reviews from the internet, and participation in ongoing work groups to enhance employment opportunities within NGB for wounded service members during their rehabilitation.

This office ensures the effective management of National Guard Affirmative Action programs to achieve a military and civilian work force structure that reflects the diversity of the 54 states and territories.

With the on-going support from Congress and the American people, the National Guard will continue to secure the American homeland while defending her interests abroad.

Your National Guard is "Always Ready, Always There."

STATE ADJUTANTS GENERAL

Alabama: Major General Abner C. Blalock Jr.
 Alaska: Major General Craig E. Campbell
 Arizona: Major General (AZ) Hugo E. Salazar
 Arkansas: Major General William D. Wofford
 California: Major General William H. Wade II
 Colorado: Major General H. Michael Edwards
 Connecticut: Major General Thaddeus J. Martin
 Delaware: Major General Francis D. Vavala
 District of Columbia: Major General Errol R. Schwartz, Commanding General
 Florida: Major General Douglas Burnett
 Georgia: Major General William T. Nesbitt
 Guam: Major General Donald J. Goldhorn
 Hawaii: Major General Robert G. F. Lee
 Idaho: Major General Lawrence F. Lafrenz
 Illinois: Major General William L. Enyart Jr.
 Indiana: Major General R. Martin Umbarger
 Iowa: Major General (Ret.) G. Ron Dardis
 Kansas: Major General Tod M. Bunting
 Kentucky: Major General Edward W. Tonini
 Louisiana: Major General Bennett C. Landreneau
 Maine: Major General John W. Libby
 Maryland: Brigadier General (MD) James A. Adkins
 Massachusetts: Major General (MA) Joseph C. Carter
 Michigan: Major General Thomas G. Cutler
 Minnesota: Major General Larry W. Shellito
 Mississippi: Major General (MS) William L. Freeman Jr.
 Missouri: Brigadier General (MO) Stephen L. Danner
 Montana: Brigadier General (MT) John E. Walsh
 Nebraska: Major General (NE) Timothy J. Kadavy
 Nevada: Major General Cynthia N. Kirkland
 New Hampshire: Major General (Ret.) Kenneth R. Clark
 New Jersey: Major General Glenn K. Rieth
 New Mexico: Major General (NM) Kenny C. Montoya
 New York: Major General Joseph J. Taluto
 North Carolina: Major General William E. Ingram Jr.
 North Dakota: Major General David A. Sprynczynatyk
 Ohio: Major General Gregory L. Wayt
 Oklahoma: Major General Myles L. Deering
 Oregon: Major General Raymond F. Rees
 Pennsylvania: Major General Jessica L. Wright
 Puerto Rico: Brigadier General (Ret.) Antonio J. Vicens-Gonzalez
 Rhode Island: Major General Robert T. Bray
 South Carolina: Major General (Ret.) Stanhope S. Spears
 South Dakota: Major General Steven R. Doohen
 Tennessee: Major General Gus L. Hargett Jr.
 Texas: Major General Charles G. Rodriguez
 Utah: Major General Brian L. Tarbet
 Vermont: Major General Michael D. Dubie
 Virginia: Major General Robert B. Newman Jr.
 Virgin Islands: Major General (VI) Renaldo Rivera
 Washington: Major General Timothy J. Lowenberg
 West Virginia: Major General Allen E. Tackett
 Wisconsin: Brigadier General (WI) Donald P. Dunbar
 Wyoming: Major General Edward L. Wright

IN MEMORIAM

National Guard Soldiers and Airmen lost during the attacks on 9/11, Operation Noble Eagle, Operation Enduring Freedom and Operation Iraqi Freedom as of January 1, 2009.

CPT Clayton L. Adamkavicius, KY	SPC Segun F. Akintade, NY
PVT Algernon Adams, SC	PFC Wilson A. Algrim, MI
SGT Jan M. Argonish, PA	SPC Azhar Ali, NY
SFC Brent A. Adams, PA	SGT Howard P. Allen, AZ
SGT Leonard W. Adams, NC	1LT Louis E. Allen, PA
SGT Spencer C. Akers, MI	SSG William A. Allers III, KY

SFC Victor A. Anderson, GA
 SPC Michael Andrade, RI
 SGT Travis M. Arndt, MT
 SSG Daniel L. Arnold, PA
 SSG Larry R. Arnold, MS
 SGT Jesse A. Ault, VA
 SGT Christopher J. Babin, LA
 SFC Travis S. Bachman, KS
 SSG Nathan J. Bailey, TN
 SPC William L. Bailey, NE
 SPC Ronald W. Baker, AR
 SGT Sherwood R. Baker, PA
 MSG Scott R. Ball, PA
 1LT Debra A. Banaszak, IL
 SGT Derek R. Banks, VA
 1LT Gerard Baptiste, NY
 SGT Michael C. Barkey, OH
 1LT Christopher W. Barnett, LA
 SPC Bryan E. Barron, MS
 SGT Michael Barry, KS
 SSG Robert J. Basham, WI
 SPC Todd M. Bates, OH
 SSG Tane T. Baum, OR
 SPC Alan Bean Jr., VT
 SGT Bobby E. Beasley, WV
 SSgt Brock A. Beery, TN
 CPL Joseph O. Behnke, NY
 SGT Aubrey D. Bell, AL
 SSG Keith A. Bennett, PA
 SGT Darry Benson, NC
 SPC Bradley J. Bergeron, LA
 LTC Richard J. Berrettini, PA
 SSG David R. Berry, KS
 SSG Sean B. Berry, TX
 SSG Harold D. Best, NC
 SSG Richard A. Blakley, IN
 SGT Dennis J. Boles, FL
 SFC Craig A. Boling, IN
 SSG Jerry L. Bonifacio Jr., CA
 SSG Darryl D. Booker, VA
 COL Canfield Boone, IN
 SPC Christopher K. Boone, TX
 CPL Samuel M. Boswell, MD
 SSG Collin J. Bowen, MD
 PFC Samuel R. Bowen, OH
 SGT Larry Bowman, NY
 SSG Hesley Box Jr., AR
 SSG Stacey C. Brandon, AR
 SPC Kyle A. Brinlee, OK
 SSG Cory W. Brooks, SD
 SFC John G. Brown, AR
 SGT Lerando Brown, MS
 PFC Nathan P. Brown, NY
 PFC Oliver J. Brown, PA
 SPC Philip D. Brown, ND
 SPC Timothy D. Brown, MI
 SGT Charles R. Browning, AZ
 SFC Daniel A. Brozovich, PA
 SSgt Andrew C. Brunn, NY
 SPC Jacques E. Brunson, GA
 PFC Paul J. Bueche, AL
 CPL Jimmy D. Buie, AR
 SSG James D. Bullard, SC
 SPC Alan J. Burgess, NH
 SGT Casey Byers, IA
 SGT Charles T. Caldwell, RI
 MAJ Jeffrey R. Calero, NY
 SSG Joseph Camara, MA
 1LT Jaime L. Campbell, WA
 LTC David C. Canegata III, VI
 SGT Deyson K. Cariaga, HI
 SPC Frederick A. Carlson, PA
 SSG Nicholas R. Carnes, KY
 SPC Jocelyn L. Carrasquillo, NC
 MSG Scott M. Carney, IA
 SGT James D. Carroll, TN
 SPC Dane O. Carver, MI
 SGT Frank T. Carvill, NJ
 SFC Virgil R. Case, ID
 CPT Christopher S. Cash, NC
 SPC Stephen W. Castner, WI
 SPC Jessica L. Cawvey, IL
 CPL Bernard L. Ceo, MD
 SPC James A. Chance III, MS
 SSG William D. Chaney, IL
 MSG Chris S. Chapin, VT
 SSG Craig W. Cherry, VA
 SPC Don A. Clary, KS
 MSG Herbert R. Claunch, AL
 SGT James M. Clay, AR
 SPC Brian Clemens, IN
 SSG Thomas W. Clemons, KY
 SGT Russell L. Collier, AR
 SFC Kurt J. Comeaux, LA
 SPC Anthony S. Cometa, NV
 SGT Brian R. Conner, MD
 SFC Sean M. Cooley, MS
 SSG Travis S. Cooper, MS
 SPC Marcelino R. Corniel, CA
 SGT Alex J. Cox, TX
 SFC Daniel B. Crabtree, OH
 MSG Clinton W. Cubert, KY
 SSG Daniel M. Cuka, SD
 SPC Carl F. Curran, PA
 CPT Patrick D. Damon, ME
 SGT Jessie Davila, KS
 SPC Daryl A. Davis, FL
 SSG Kevin D. Davis, OR
 SPC Raphael S. Davis, MS
 SSG David F. Day, MN
 PFC John W. Dearing, MI
 SGT Germaine L. Debro, NE
 MSG Bernard L. Deghand, KS
 SGT Felix M. Del Greco, CT
 SPC Daryl T. Dent, DC
 SPC Daniel A. Desens, NC
 CPT Bruno G. Desolenni, CA
 PFC Nathaniel E. Detample, PA
 CPL Scott G. Dimond, NH
 SPC Joshua P. Dingle, GA
 SGT Philip A. Dodson Jr., GA
 SPC Ryan E. Doltz, NJ
 SSgt Geronimo "Jerome" M. P. Dominguez, NY
 1LT Mark H. Dooley, NY
 SPC Thomas J. Dostie, ME
 SSG George R. Draughn Jr., GA
 SGT Duane J. Dreasky, MI
 SPC Christopher M. Duffy, NJ
 CPL Ciara M. Durkin, MA
 SGT Arnold Duplantier II, CA
 Sgt Lance O. Eakes, NC
 SFC Amos C. Edwards Jr., GA
 CWO Corry A. Edwards, TX

SFC Mark O. Edwards, TN
 2LT Michael I. Edwards, AK
 SGT Michael Egan, PA
 SGT Christian P. Engeldrum, NY
 SGT Daniel M. Eshbaugh, OK
 CPT Phillip T. Esposito, NY
 SPC Michael S. Evans II, LA
 SPC William L. Evans, PA
 SSG Christopher L. Everett, TX
 SGT Justin L. Eyerly, OR
 SPC Huey P. Long Fassbender, LA
 SGT Gregory D. Fejeran, GM
 CPT Arthur L. Felder, AR
 SGT Robin V. Fell, LA
 SGT Christopher J. C. Fernandez, GM
 SPC William V. Fernandez, PA
 SPC Jon P. Fettig, ND
 SGT Damien T. Ficek, WA
 SGT Courtney D. Finch, KS
 SGT Jeremy J. Fischer, NE
 CPT Michael T. Fiscus, IN
 SPC David M. Fisher, NY
 SGT Paul F. Fisher, IA
 CW3 William T. Flanigan, TN
 CW3 John M. Flynn, NV
 SSG Tommy I. Folks Jr., TX
 SGT Joseph A. Ford, IN
 SGT Joshua A. Ford, NE
 SPC Craig S. Frank, MI
 SSG Bobby C. Franklin, GA
 SSG Jacob Frazier, IL
 SPC Carrie L. French, ID
 SPC Armand L. Frickey, LA
 SSG Joseph F. Fuerst III, FL
 SFC Michael T. Fuga, AS¹
 SSG Carl R. Fuller, GA
 SPC Marcus S. Futrell, GA
 CSM Marilyn L. Gabbard, IA
 SGT Jerry L. Ganey Jr., GA
 SGT Seth K. Garceau, IA
 SPC Tomas Garces, TX
 SGT Landis W. Garrison, IL
 PFC Alva L. Gaylord, MO
 SGT Christopher Geiger, PA
 SPC Christopher D. Gelineau, ME
 SPC Mathew V. Gibbs, GA
 2LT Richard B. Gienau, IL
 SSG Charles C. Gillican III, GA
 SGT Terrell W. Gilmore, LA
 SPC Lee M. Godbolt, LA
 SGT Jaime Gonzalez, TX
 CPL Nathan J. Goodiron, ND
 SPC Richard A. Goward, MI
 SGT Shawn A. Graham, TX
 SGT Jamie A. Gray, VT
 SGT Kevin D. Grieco, IL
 SPC James T. Grijalva, IL
 SGT Shakere T. Guy, CA
 SGT Jonathon C. Haggin, GA
 SFC Peter J. Hahn, LA
 CSM Roger W. Haller, MD
 SSG Jeffrey J. Hansen, NE
 SGT Joshua R. Hanson, MN
 SGT Joshua W. Harris, IL
 SSG Asbury F. Hawn II, TN
 SPC Michael R. Hayes, KY
 CPT Bruce E. Hays, WY
 SGT Paul M. Heltzel, LA
 SPC Kyle M. Hemauer, VA
 1LT Robert L. Henderson II, KY
 SSG Kenneth Hendrickson, ND
 SFC John M. Hennen, LA
 SGT Gary M. Henry, IN
 SPC Michael L. Hermanson, ND
 SPC Brett M. Hershey, IN
 MSG Michael T. Hiester, IN
 SGT Stephen C. High, SC
 CPT Raymond D. Hill II, CA
 SGT Shawn F. Hill, SC
 SFC Matthew L. Hilton, MI
 SGT Jeremy M. Hodge, OH
 PFC Derek Holland, PA
 SFC Robert L. Hollar Jr., GA
 SPC Eric M. Holke, CA
 SPC James J. Holmes, MN
 SPC Jeremiah J. Holmes, ME
 SGT Manny Hornedo, NY
 SGT Jessica M. Housby, IL
 SPC Robert W. Hoyt, CT
 SPC Jonathan A. Hughes, KY
 SGT Buddy J. Hughie, OK
 SGT Joseph D. Hunt, TN
 MSG Julian Ingles Rios, PR
 SSG Henry E. Irizarry, NY
 SPC Benjamin W. Isenberg, OR
 SFC Tricia L. Jameson, NE
 SGT Brahim J. Jeffcoat, PA
 SPC William Jeffries, IN
 SPC David W. Johnson, OR
 SGT Joshua A. Johnson, VT
 SFC Charles J. Jones, KY
 SSG David R. Jones Sr., GA
 SFC Michael D. Jones, ME
 SGT Ryan D. Jopek, WI
 SGT Anthony N. Kalladeen, NY
 SPC Alain L. Kamolvathin, NJ
 SPC Mark J. Kasecky, PA
 SSG Darrel D. Kasson, AZ
 SPC Charles A. Kaufman, WI
 SPC James C. Kearney, IA
 SGT Michael J. Kelley, MA
 SSG Dale J. Kelly, ME
 COL Paul M. Kelly, VA
 SSG Stephen C. Kennedy, TN
 SSG Ricky A. Kieffer, MI
 SSG Bradley D. King, IN
 SGT James O. Kinlow, GA
 PFC David M. Kirchoff, IA
 SGT Timothy C. Kiser, CA
 SPC Rhys W. Klasno, CA
 SPC Chris Kleinwachter, ND
 SGT Floyd G. Knighten Jr., LA
 SPC Joshua L. Knowles, IA
 SGT Brent W. Koch, MN
 SSG Lance J. Koenig, ND
 SGT Allen D. Kokesh Jr., SD
 CW3 Patrick W. Kordsmeier, AR
 SPC Kurt E. Krout, PA
 SPC John Kulick, PA
 SFC William W. Labadie Jr., AR
 SGT Joshua S. Ladd, MS
 SGT Dustin D. Laird, TN
 SFC Floyd E. Lake, VI
 SPC Charles R. Lamb, IL

SPC David E. Lambert, VA
 SGT Denise A. Lannaman, NY
 SFC Issac S. Lawson, CA
 CW4 Patrick D. Leach, SC
 SGT Terrance D. Lee Sr., MS
 SGT David L. Leimbach, SC
 PFC Ken W. Leisten, OR
 SSG Jerome Lemon, SC
 SPC Brian S. Leon Guerrero, GU
 SPC Timothy J. Lewis, VA
 SSG Nathaniel B. Lindsey, OR
 SGT Jesse M. Lhotka, MN
 SSG Victoir P. Lieurance, TN
 SFC Daniel R. Lightner Jr., PA
 SPC Justin W. Linden, OR
 SSG Tommy S. Little, AL
 SPC Jeremy Loveless, AL
 SSG David L. Loyd, TN
 CPT Robert Lucero, WY
 2LT Scott B. Lundell, UT
 SPC Audrey D. Lunsford, MS
 PFC Jonathan L. Luscher, PA
 SPC Derrick J. Lutters, CO
 SPC Wai Phylo Lwin, NY
 CPT Sean E. Lyerly, TX
 SGT Stephen R. Maddies, TN
 SPC Anthony L. Mangano, NY
 SSG William F. Manuel, LA
 SPC Joshua S. Marcum, AR
 SPC Jeremy E. Maresch, PA
 PFC Adam L. Marion, NC
 PFC Ryan A. Martin, OH
 Sgt Anthony L. Mason, TX
 SGT Nicholas C. Mason, VA
 SGT John R. Massey, AR
 SGT Randy J. Matheny, NE
 SGT Patrick R. McCaffrey Sr., CA
 SFC Randy D. McCaulley, PA
 1LT Erik S. McCrae, OR
 SPC Donald R. McCune, MI
 SPC Bryan T. McDonough, MN
 SGT John E. McGee, GA
 SPC Jeremy W. McHalfey, AR
 SFC Joseph A. McKay, NY
 SPC Eric S. McKinley, OR
 LTC Michael E. McLaughlin, PA
 SPC Scott P. McLaughlin, VT
 SGM Jeffrey A. McLochlin, IN
 SSG Heath A. McMillan, NY
 SSG Michael J. McMullen, MD
 SPC Robert A. McNail, MS
 MSG Robbie D. McNary, MT
 SSG Jeremiah E. McNeal, VA
 SPC Curtis R. Mehrer, ND
 PV2 Bobby Mejia II, MI
 SPC Mark W. Melcher, PA
 SPC Jacob E. Melson, AK
 SPC Kenneth A. Melton, MO
 SPC Jonathan D. Menke, IN
 SSG Chad M. Mercer, GA
 SPC Chris S. Merchant, VT
 SSG Dennis P. Merck, GA
 SGM Michael C. Mettille, MN
 SPC Michael G. Mihalakis, CA
 SSG Brian K. Miller, IN
 SPC John W. Miller, IA
 SGT Kyle R. Miller, MN
 CPT Lowell T. Miller II, MI
 SPC Marco L. Miller, FL
 PFC Mykel F. Miller, AZ
 SFC Troy L. Miranda, AR
 SGT Ryan J. Montgomery, KY
 SPC Samson A. Mora, GU
 SGT Carl J. Morgain, PA
 SPC Dennis B. Morgan, NE
 SGT Steve Morin Jr., TX
 SGT Shawna M. Morrison, IL
 SPC Clifford L. Moxley, PA
 LTC Charles E. Munier, WY
 SPC Warren A. Murphy, LA
 SGT David J. Murray, LA
 SPC Nathan W. Nakis, OR
 SPC Creig L. Nelson, LA
 SGT Paul C. Neubauer, CA
 SPC Joshua M. Neusche, MO
 SGT Long N. Nguyen, OR
 SPC Paul A. Nicholas, CA
 SFC Scott E. Nisely, IA
 SGT William J. Normandy, VT
 PFC Francis C. Obaji, NY
 SGT John B. Ogburn III, OR
 SGT Nicholas J. Olivier, LA
 SSG Todd D. Olson, WI
 1LT Robert C. Oneto-Sikorski, MS
 1SG Julio C. Ordonez, TX
 SPC Richard P. Orengo, PR
 SSG Billy Joe Orton, AR
 SGT Timothy R. Osbey, MS
 SSG Ryan S. Ostrom, PA
 SSG Michael C. Ottolini, CA
 SSG Paul S. Pabla, IN
 SGT Mark C. Palmateer, NY
 PFC Kristian E. Parker, LA
 SGT Richard K. Parker, ME
 SSG Saburant Parker, MS
 SGT Lawrence L. Parrish, MO
 SSG Michael C. Parrott, CO
 SPC Gennaro Pellegrini Jr., PA
 SGT Theodore L. Perreault, MA
 SSG David S. Perry, CA
 SGT Jacob L. Pfingsten, MN
 SSG Joseph E. Phaneuf, CT
 PFC Sammie E. Phillips, KY
 SGT Edward O. Philpot, SC
 SGT Ivory L. Phipps, IL
 SSG Emanuel Pickett, NC
 CW2 Paul J. Pillen, SD
 PFC Derek J. Plowman, AR
 SGT Foster Pinkston, GA
 SGT Darrin K. Potter, KY
 SGT Christopher S. Potts, RI
 SGT Lynn R. Poulin Sr., ME
 SFC Daniel J. Pratt, OH
 SFC James D. Priestap, MI
 2LT Mark J. Procopio, VT
 SGT Joseph E. Proctor, IN
 SPC Robert S. Pugh, MS
 SFC George A. Pugliese, PA
 SPC Joseph A. Rahaim, MS
 SPC Eric U. Ramirez, CA
 PFC Brandon Ramsey, IL
 SPC Christopher J. Ramsey, LA
 SSG Jose C. Rangel, CA
 SGT Thomas C. Ray II, NC

SSG Johnathan R. Reed, LA
 SSG Aaron T. Reese, OH
 SGT Gary L. Reese Jr., TN
 SGT Luis R. Reyes, CO
 SPC Jeremy L. Ridlen, IL
 SPC James D. Riekema, WA
 SGT Greg N. Riewer, MN
 PFC Hernando Rios, NY
 SSG Milton Rivera-Vargas, PR
 CPL John T. Rivero, FL
 SSG William T. Robbins, AR
 SSG Christopher L. Robinson, MS
 CPL Jeremiah W. Robinson, AZ
 SGT Nelson D. Rodriguez Ramirez, MA
 SSG Alan L. Rogers, UT
 SFC Daniel Romero, CO
 SGT Brian M. Romines, IL
 SFC Robert E. Rooney, NH
 SPC David L. Roustum, NY
 SGT Roger D. Rowe, TN
 CW3 Brady J. Rudolf, OK
 SGT David A. Ruhren, VA
 CW4 William Ruth, MD
 SPC Lyle W. Rymer II, AR
 SPC Corey J. Rystad, MN
 SFC Rudy A. Salcido, CA
 SGT Paul A. Saylor, GA
 SSG Daniel R. Scheile, CA
 SPC Ronald A. Schmidt, KS
 SFC Richard L. Schild, SD
 SGT Jacob S. Schmuecker, NE
 SPC Jeremiah W. Schmunk, WA
 PFC Benjamin C. Schuster, NY
 SGT Andrew Seabrooks, NY
 SPC Dennis L. Sellen, CA
 SGT Bernard L. Sembly, LA
 SPC Daniel L. Sesker, IA
 SGT Jeffrey R. Shaver, WA
 SGT Kevin Sheehan, VT
 SGT Ronnie L. Shelley Sr., GA
 SGT James A. Sherrill, KY
 1LT Andrew C. Shields, SC
 SPC Bradley N. Shilling, MI
 PFC Ashley Sietsema, IL
 SGT Alfred B. Siler, TN
 SGT Alfredo B. Silva, CA
 SGT Isiah J. Sinclair, LA
 SPC Roshan (Sean) R. Singh, NY
 SPC Channing G. Singletary, GA
 SPC Aaron J. Sissel, IA
 SSG Bradley J. Skelton, MO
 1LT Brian D. Slavenas, IL
 SGT Eric W. Slebodnik, PA
 SPC Erich S. Smallwood, AR
 SGT Keith Smette, ND
 CW4 Bruce A. Smith, IA
 CPL Darrell L. Smith, IN
 SGT Michael A. Smith, AR
 SPC Norman K. Snyder, IN
 SGT Mike T. Sonoda Jr., CA
 Lt Col Kevin H. Sonnenberg, OH
 SGT Matthew R. Soper, MI
 SGT Kampha B. Sourivong, IA
 SFC Theodore A. Spatol, WY
 SFC William C. Spillers, MS
 SPC David S. Stelmat, NH
 SGT Patrick D. Stewart, NV
 SGT Jonnie L. Stiles, CO
 SGT Michael J. Stokely, GA
 Maj Gregory Stone, ID
 MSG John T. Stone, VT
 SPC Brandon L. Stout, MI
 SPC Chrystal G. Stout, SC
 2LT Matthew R. Stoval, MS
 SGT Francis J. Straub Jr., PA
 SGT Matthew F. Straughter, MO
 SGT Thomas J. Strickland, GA
 WO1 Adrian B. Stump, OR
 SSG Daniel A. Suplee, FL
 SSG Michael Sutter, IL
 SGT Robert W. Sweeney III, LA
 SGT Deforest L. Talbert, WV
 SFC Linda A. Tarango-Griess, NE
 SPC Christopher M. Taylor, AL
 SPC Deon L. Taylor, NY
 CPT Michael V. Taylor, AR
 SGT Shannon D. Taylor, TN
 SGT Joshua A. Terando, IL
 MSG Thomas R. Thigpen Sr., GA
 SGT John F. Thomas, GA
 MSG Sean M. Thomas, PA
 SGT Paul W. Thomason III, TN
 CPL Michael E. Thompson, OK
 1LT Jason G. Timmerman, MN
 SGT Humberto F. Timoteo, NJ
 SPC Eric L. Toth, KY
 SSG Robin L. Towns Sr., MD
 SPC Seth R. Trahan, LA
 SPC Quoc Binh Tran, CA
 SSG Philip L. Travis, GA
 CW4 Chester W. Troxel, AK
 SGT Robert W. Tucker, TN
 SGT Gregory L. Tull, IA
 SPC Nicholas D. Turcotte, MN
 1LT Andre D. Tyson, CA
 SPC Daniel P. Unger, CA
 PFC Wilfredo F. Urbina, NY
 SGT Michael A. Uvanni, NY
 1LT Robert Vallejo II, TX
 SGT Gene Vance Jr., WV
 SGT Travis A. Vanzoest, ND
 SGT Daniel R. Varnado, MS
 SSG Jason A. Vazquez, IL
 1LT Michael W. Vega, CA
 SSG David M. Veverka, PA
 SPC Anthony M. K. Vinnedge, OH
 SPC Chad J. Vollmer, MI
 PFC Kenneth Gri Vonronn, NY
 SPC Jason E. von Zerneck, NY
 SSG Michael S. Voss, NC
 PFC Brandon J. Wadman, FL
 SSG Gregory A. Wagner, SD
 SGT Andrew P. Wallace, WI
 SGT Daniel W. Wallace, KY
 SFC Charles H. Warren, GA
 1SG William T. Warren, AR
 SFC Mark C. Warren, OR
 SPC Glenn J. Watkins, CA
 MSG Davy N. Weaver, GA
 SGT Matthew A. Webber, MI
 SFC Kyle B. Wehrly, IL
 SSG David J. Weisenburg, OR
 SPC Michael J. Wendling, WI
 SPC Cody Lee L. Wentz, ND

SPC Jeffrey M. Wershow, FL	SSG Delmar White, KY
SGT Marshall A. Westbrook, NM	SGT Elijah Tai Wah Wong, AZ
SPC Lee A. Wiegand, PA	SPC John E. Wood, KS
LTC James L. Wiley, OR	SFC Ronald T. Wood, UT
1LT Charles L. Wilkins III, OH	SGT Roy A. Wood, FL
SGT David B. Williams, NC	SSG James Wosika, MN
SPC Michael L. Williams, NY	SPC Brian A. Wright, IL
SFC Christopher R. Willoughby, AL	SGT Thomas G. Wright, MI
SSG Clinton L. Wisdom, KS	SGT Joshua V. Youmans, MI
SPC Robert A. Wise, FL	SPC Christopher D. Young, CA
SPC Michelle M. Witmer, WI	

¹American Samoa.

Chairman INOUE. General Wyatt.

STATEMENT OF LIEUTENANT GENERAL HARRY M. WYATT, III, DIRECTOR, AIR NATIONAL GUARD

General WYATT. Thank you, Mr. Chairman, Mr. Vice Chairman, Senator Leahy. Thank you for the opportunity to appear before the subcommittee today and allowing me to testify on behalf of the men and women of the Air National Guard (ANG), authorized end strength of 106,756 gallant airmen nationwide, and for the first time since 2002, our end strength is approaching 108,500.

As we meet today, your Air National Guard is protecting the skies of the United States of America at 16 of the 18 air sovereignty alert sites covering the United States of America.

We are forward-deployed in over 3,300 locations in our States. Our airmen are responding to disasters like hurricanes, tornadoes, and fires, and currently today we have airmen deployed in South Dakota and Minnesota fighting the floods in that region and snowstorms in Montana.

Our airmen continue to volunteer at unprecedented rates to support overseas contingency operations, and we cannot forget the backbone of our force, the traditional Guard members who provide the efficiencies and the search capacity that make the Air National Guard a valued member of the Nation's defense.

The Air National Guard has three primary themes, three primary concerns, as we appear before you today. The first is modernizing and recapitalizing the aging fleet of aircraft, to bridge the gap in mid-term Air Force capability. Second, we intend to leverage the inherent ANG efficiencies that I mentioned before and take on additional Air Force missions as appropriate. And we seek to maximize the use of associations of several different kinds, using the association construct and community basing to better support the air force mission.

I stand ready to answer your questions, sir. Thank you.

Chairman INOUE. Thank you very much, General.

If I may, I would like to call upon General Vaughn first. The Army Guard is currently at 366,500 end strength. This is 13,900 more than authorized and exceeds the entire end strength growth planned for the Guard. Can you tell us why the Guard has exceeded the authorized strength so significantly? And how do you plan to pay for the additional guardsmen?

General VAUGHN. Thank you, Mr. Chairman.

Number one, a couple of years ago, we were tremendously under strength, and there were a lot of doubting Thomases that we could make end strength; however, we did that, we put together a great

program. The States worked it hard; I take tremendous pride in our forces throughout the Nation.

The authorization for us and the money for the Army National Guard in the supplemental is at 358,200. In fact, we are, actually—you know this thing continues to climb in spite of putting the levers in place to stop it. And we are 10,000 over the authorized number.

Next year, to grow the Army piece, we were supposed to be at 358,200. The statutory appropriations, as you outline, is exactly on the mark, 352,600. So, long story short, we have to reduce by 10,000 soldiers between now and the end of the year to get to the authorized level. We will do that.

The way we will do that is that we will change our system. We had an albatross of a system. We had a dinosaur of a system. We take youngsters in that want to be in our formations and swear them in on the first day, and then they sit in our formations for a long time before they ship off to basic training. So in order to overcome that and to keep from cross-leveling like we had to do, we over-drove our end strength with a goal toward correcting that deficiency and pulling it down by the end of the fiscal year, while at the same time growing readiness. We have a plan in place. I have briefed it to General McKinley, and there are three phases to this plan. We have been discussing that with the staff members, and we have discussed it with the Army, and the Army is confident in what we are going to do. But our eyes are on readiness, and I want to assure you that we will be at a level where we have been authorized to be at the end of the year.

Chairman INOUE. I can assure you that the subcommittee and I support you on this, but just for the record, we wanted your explanation, sir.

If I may ask General Wyatt. The Air Guard has announced plans to grow by 7,000 in fiscal year 2010. Active duty Air Force and Reserve announced similar plans last year to grow their end strength levels. They argued that these increases were necessary to restore cuts. The Guard was not part of the reductions. So why are these additional personnel required?

General WYATT. Mr. Chairman, you are correct in that the Air National Guard did not take personnel cuts when we were asked to respond to a PBD previously. We took those cuts in flying hours, took a little risk in their flying hour program.

To answer your question, sir, if we take a look at the missions right now that the Air Force has asked the Air National Guard to perform—current authorized end strength of 106,756—if we look at the validated manpower requirements for those missions which we currently have accepted from the Air Force, we would need 2,228 additional military positions to fully man the missions that the Air Force has assigned the Air National Guard.

We also have a need to populate our joint force headquarters which is really the tool that the Adjutants General use to execute the missions for the Governors, but also to assist in our mobilization and deployments for the Federal warfight and to administer a lot of the airmen care programs that you mentioned in your opening comments.

We also understand that the appetite for Air Force capability exceeds the authorizations at this point for manpower. We are poised with our current upward vector in recruiting. We are poised to answer the call should the Air Force need our assistance in manning some of these additional responsibilities if, again, our senior leaders determine that the Air National Guard should play a part in that. So we stand ready to answer that call, and those are the reasons why we would be looking at a possible increase in manpower if the Air Force would so request.

Chairman INOUE. General, I thank you for your leadership. I think you are on the right track.

General Vaughn, if I recall, in fiscal year 2006, you were just about 40 percent of your equipment needs, and now you are over 75 percent. How has this affected readiness?

General VAUGHN. Well, Mr. Chairman, it affects readiness in a significant way, and the actions, again, that this subcommittee has taken has enabled us to have the kind of world-class capability that we have today. The Army is making good on the promises. I have to tell you that with the pressure that has been on this particular issue—and the amount of money in it is a substantial amount of money, and our view of this is that we are getting better every day at equipping.

The thing about the Guard, and like the other Reserve components back here, it is all about people. And we are moving so fast to having a great personnel readiness force that it deserves to have its equipment. It is not a hollow force anymore. At one time, that was true, but this 75 and 76 percent across the board right now—you know, there is a lot of turbulence and there is equipment that has been left behind, so forth and so on. We are not crying over that. The fact of it is that we are now seeing equipment delivered. After we got into this thing in 2006, we are now seeing in 2008—and we will see more of it in 2009. We are seeing it delivered into our force, and what it does for readiness, in a short answer, is substantial.

AGING FLEET

Chairman INOUE. Thank you very much. I believe you made a statement saying that about 85 percent of your F-16s will reach the end of their lives in about 8 years. What are you doing to meet this shortfall?

General WYATT. Thank you very much, Chairman Inouye, for your question.

That is one of the primary concerns that I have, the recapitalization of the Air National Guard. It is not just a problem that the Air National Guard faces. It is an issue that the entire Air Force faces, active duty, Guard, and Reserve.

A large percentage of the Air Force F-16 fleet resides within the Air National Guard, and because of that fact and because of the aging aircraft, the Air National Guard is the component that faces the most risk for any delays in recapitalization of the United States Air Force. If you take a look at the air sovereignty alert (ASA) locations that I mentioned in my opening statement, those 16 ASA sites, that the Air National Guard mans, 11 of those are manned by F-16 units; the rest, F-15 units in the Air National Guard. Be-

cause of the service life of our jets, we face the very real projection of losing 80 percent of those aircraft, beginning in 2010, over the next 8 years. That would take the number of F-16 wings, squadron equivalents, if you would, in the Air National Guard from about 19 down to about 4.

It is a very serious problem that we have. We are working with the United States Air Force, as they address their recapitalization issues, and we have received great support from Air Combat Command. But those are some decisions, as far as the degree of recapitalization, what type of platforms we are talking about, and how many, that obviously will be answered by our Nation's leaders.

The Air National Guard stands ready to work with the United States Air Force. I have likened our position to flying close formation with the Air Force, but doing so cautiously because we know there are fiscal pressures to recapitalization entirely in fifth generation fighters, and we are preserving our options, depending upon the decisions that are made by our national leaders, but also by the United States Air Force as they address the issue of recapitalizing, not only their own fleet but our fleet.

Talking about F-22s, we, the Air National Guard, need to be a part of that, if there are additional acquisitions of F-22s. Our position is that the number one mission and the one that the Air National Guard is most involved in is the air sovereignty alert, and we feel that the best airplane in the world needs to be defending the best country in the world.

F-35S

The question is when and how many. Regardless of the number, we need to be with our United States Air Force and Air Force Reserve brothers and sisters in a proportional and concurrent fielding of that platform. But it also goes to any other platforms that may be acquired, depending upon the fiscal situation. We need to be concurrently and proportionately fielded with the United States Air Force.

Chairman INOUE. General, we are all sensitive to what is happening in our economy, but I believe I speak for the subcommittee when I say we will do our very best to make certain that replacements for your fighter units would be available—the funding.

General WYATT. Thank you, Mr. Chairman.

Chairman INOUE. Senator Cochran.

Senator COCHRAN. Mr. Chairman, thank you very much.

General Vaughn, over the past few years, new programs have been implemented to assess the health condition of soldiers after they have been deployed overseas, and particular attention is being placed, I think, in a review of the Guard forces. With a large number of guardsmen and men and women who have been deployed or alerted for deployment—many of them are in my State, as you know—I am concerned about this ability to provide a continuum of medical care and attention for those who need to have their medical situation addressed.

Could you give us a reaction of whether or not there has been similar reactions to the stresses of deployments in the Guard and Reserve forces as there have been with regular active duty forces?

And how is the Bureau working with the Department of Defense to deal with this challenge?

MENTAL HEALTH

General VAUGHN. Mr. Vice Chairman, there have been similar things happen to our soldiers. Whether they are active duty soldiers or Guard soldiers that come back that transition back into the civilian world, there have been several things that have happened.

The chairman mentioned, for instance, suicides. Our suicide rate is up in alarming fashion. I mean, if we look at what it has been over the last couple years—now, this is on active duty and this is off active duty. The great majority of them are off active duty when they come back. Now, at the same time, a substantial number—the greatest number, have never deployed.

So you are looking at friction across the whole system in the United States of America, our suicides are about 140 to 150 percent right now in the Army Guard. We are attacking this along with the United States Army. General Chiarelli has been over and testified. We are embedded in that. You know, the Yellow Ribbon, an integration piece that the chairman talked about on the front end—we are engaged in that.

We think we have helped lead the way in something called a “blast tracker” for those soldiers that were involved in events down range, explosive events, and they were not hurt substantially enough, and nowhere does it appear on the record. We are involved in that.

The sidebar question, are we getting better medically? I think we are. I think a number of the problems that are out there, last year in 2008, 92 percent of our soldiers went to the MOB station in good shape. That is a record. We are better than that. There is a program and I think we need to take our nondeployables and fix them before they go. I mean, if you had a car, you would put the right repair part on and fix them, and when do you fix them? Do you fix them a year out? That is probably a pretty good tack to take on that.

But I think overall, what you championed is exactly right. We do not need to have two or three levels of citizens. These are wonderful citizens that we have defending us and doing the things we ask of them. So anything we can do, in terms of healthcare and getting this right for this country, we have got to do.

Now, I rambled around on several things, and I think that you were getting at two or three of those things when you asked that question. So thanks for that question.

Senator COCHRAN. General Wyatt, what is your reaction to that question?

General WYATT. We share the same concerns that General Vaughn does. If we look at our statistics, we pretty much mirror the United States Air Force in our experience rate as far as suicides. Our difficulty is, until recently, we have had difficulty tracking the off-duty suicides because we have no legal authority to compel investigators to get into the cause of a particular death. You cannot tell in an automobile accident, for example, if it is accidental or intentional. So we have those problems that we are work-

ing through. But because of the close relationships that the Air National Guard has with the local communities, we feel pretty confident that our data is correct.

We have similar programs that the Army National Guard has. We are taking steps, through General McKinley's leadership at the National Guard Bureau, to integrate our activities with the Army National Guard so that our combatant commanders in the States, our Adjutants General, when they administer these programs to a guardsman, whether it be Army or Air, that they efficiently maximize the use of the resources available to them.

And I think what we have got to remember is that the Adjutants General on their own—having been one, I have been there, and I know that the Adjutants General go to great lengths in working with their State resources provided by their Governors to help facilitate some of the Federal programs. And a lot of the work that is being done at the joint force headquarters—I mentioned the need earlier for Air National Guard infusion in manpower into our joint force headquarters. That would help us facilitate a couple of things, not only working with the Army National Guard to make our programs more joint and more efficient, but also merging the capabilities that the Adjutants General bring in through State health departments, mental health programs that may be available in the States. And there are some great private programs out there too that the Adjutants General know about.

JOINT CARGO AIRCRAFT

The key is that one size does not fit all, as the chairman indicated, on some of our programs. We need to allow flexibility to the Adjutants General because the needs vary from State to State, the programs vary in their availability from State to State.

Senator COCHRAN. General Wyatt, our subcommittee has provided funding for purchasing the Air Force joint cargo aircraft, and I wonder if you could tell us what your reaction is to the need in the Air National Guard for this aircraft and whether or not we have funding that is available for you to begin meeting that new requirement.

General WYATT. Senator Cochran, thank you for the question.

That airplane is critical to the Air National Guard not just because it addresses some of the States that lost flying missions because of BRAC, but because of the capability that it provides the United States Air Force and the Joint Warfighter.

To answer your question about is there a funding stream sufficient to acquire the airplane, based upon the data from last year, I do not believe so. That is one of the acquisitions that I will be talking to the United States Air Force about.

The need for the airplane, I believe, is there. The way that the airplane is operated differs a little bit between the Air Force and the United States Army, but I think if you talk to the leadership in the United States Air Force, they will tell you that they recognize the need of making that aircraft available to the land component commander to face the issues that the land component commander has. And we stand ready, should the President and Congress see fit to fund acquisitions, to field those in the Air National Guard and would relish the opportunity to do that, sir.

Senator COCHRAN. Thank you.

Thank you, Mr. Chairman.

Chairman INOUE. Senator Leahy.

Senator LEAHY. Well, thank you, Mr. Chairman. I am glad you and Senator Cochran are having this hearing. Senator Bond, of course, and I co-chair the National Guard Caucus, and I think that is the reason for everybody up here.

And I am trying to wear two hats at the same time. We also have a hearing in the Judiciary Committee with Director Mueller of the Federal Bureau of Investigation, and I will be going back there.

General Wyatt, I am glad to see you here at your first meeting before this panel, and I appreciate the time you spent with me yesterday afternoon in going over some of the issues of the Air National Guard.

General Vaughn, this may be your last appearance before this subcommittee, and I want to take the opportunity to publicly applaud you for the superb job you have done. I think the Army Guard is going to be better equipped, better trained, and in a better position because of your service. And I think that is service that has been also complemented by the brave men and women in the Guard. So, General Vaughn, I compliment you, sir.

General Vaughn, also Senator Bond and I have written to the Secretary of Defense and the Chairman of the Joint Chiefs a number of times about the issue of transparency in budgeting for equipment for the Reserve components. We approve here in Congress budget requests based on justification documents that say a certain amount of gear will go to the Guard and Reserves, but then when it starts going, we do not find where that reference is as the actual distribution goes about. And no one can actually certify the equipment slated for the Guard and Reserve actually made it to the Guard and Reserve.

How do we fix this? I mean, there ought to be some transparent way that we can say, okay, we wanted x amount of equipment to go there. It either did or it did not, and if it did not, well, then what was the reason? It may have been a national emergency. It may have been an international emergency. But at least have some reason other than as it is now. Senator Bond and I—we talk to the Guard Caucus. We have to kind of guess at what happened.

General VAUGHN. Senator Leahy, thanks for your leadership and Senator Bond's on this particular issue. A lot of people have had their shoulder over the wheel, you know, on this one for a long time and I think is making a lot of difference. I have a lot of friends inside of the Army, and we are able to argue about things and still come back and be comrades in arms. And I will tell you that I think that the Army is finally making great strides on this, and I have confidence that they are trying to deliver the equipment.

As I stated very early on, we made some assumptions. First of all, we went out and tried to get a dollar value of everything that we had received lately. And then we made a guess as to which appropriations it probably came out of. And then we took—together with the G-8 of the Army, we took a range of 18 to 24 months and said it is likely that it would take this long for this equipment to appear. Now, if the assumptions, as you well know, are somewhere

near right, it appears like we probably got about what we were supposed to get.

The problem is it is not auditable, and Steve Speakes—I am sure he will testify later. There will have to be an auditable system in place rather than something that takes a battalion of folks to come up with some kind of an answer 2 or 3 years later.

Senator LEAHY. So should we do something different in the appropriation process itself to make it easier?

General VAUGHN. Sir, the appropriations process itself—if we knew how complex it would be to have separate appropriations for equipment for the Guard and Reserve, I could probably give you a pretty good answer. The first thing that has got to be sorted out, if you had a separate appropriations that went directly toward the Guard or Reserve for this, what else goes with it? There may be so much burden in that.

The first thing I would say is that the Army is on the right track now. They finally got this thing teed up, got everybody's attention, and they are getting at it. It has to be a "push-of-a-button" of some kind to give you and us the auditable results of what happened with the appropriations and the equipment.

Senator LEAHY. I may have my staff work with your staff to follow up on that. And I appreciate what you are saying about the equipment. I mean, that is our ultimate goal because we want to make sure that happens.

General Wyatt, you and I talked about—just if I can brag for just a moment, not that any parochialism ever appears in this subcommittee on our different things. But the 158th Fighter Wing from Vermont Air National Guard has carried out some tremendous air defense missions. I mentioned that right after 9/11, they did the air cover over New York City.

AIR SOVEREIGNTY ALERT

But Senator Bond and I recently released a Government Accountability Office (GAO) report we commissioned on the management of the air defense mission. It says, more than 7 years after 9/11, the Air Force has yet to budget for the air defense mission even though we see some significant areas where we need that in the foreseeable future. It mentions what has already been mentioned here, about concerns over the Air Guard's ability to carry out the mission because of aging aircraft. Some of them are flying some of the oldest aircraft in the Air Force, particularly the F-16s. They are going to be retired before we even see the follow-on.

What can you suggest to us in that area?

General WYATT. Thank you for the question. And if I may take a little liberty here to explain where I believe the Air National Guard is in response to your question.

Modernization of the fleet is one thing. Recapitalization of the fleet is another. For years, we have embarked upon modernization, and thanks to the great support of this subcommittee, through the National Guard Reserve Equipment Account (NGREA) and some congressional adds, the Air National Guard has been able to modernize its fleet, not to the level that we need, but when the combatant commanders request a certain capability, they expect the Air National Guard to answer with that capability.

We have a process through our Weapons and Tactics Center that we run with the Air Force Reserve that identifies fleet-wide, not just the fighter force, but the lift force, intelligence, surveillance, and reconnaissance (ISR) force, all the platforms inside the Air National Guard, Air Force Reserve, and the Air Force that could use some modernization. And we put together a bottom-up driven process that identifies the capabilities that we need to modernize, and this subcommittee has been very supportive with NGREA accounts that help us modernize the force.

As the GAO report indicates and some of the recent articles that I have seen in the Air Force Times indicate and our own data indicates that we are at that point in time where we have got to start looking toward recapitalization.

Think of this in contextual themes, if you would, one of those being the GAO report that you just mentioned that recognizes the resourcing issues that the Air Force has and its reluctance to fully fund and fully support the air sovereignty alert mission. It is still not into the fight if it is not in the budget line. It is handled on a 2-year-by-2-year basis. That is one problem.

The other problem is recapitalization not just of the air sovereignty alert (ASA) fleet. We have got to remember that the air sovereignty alert fleet, when it is not flying air sovereignty alert, is participating in air and space expeditionary forces rotations. So it is not a specialized fleet. They have a specialized capability, but they can use that in AEF rotations and they do. Thirty-six percent of the combat sorties flown in Iraq and Afghanistan last year were flown by the Air National Guard.

Senator LEAHY. With aging equipment.

General WYATT. With aging equipment, yes, sir.

Think about the comments that General Renuart, the NORTHCOM commander, issued just a few days ago. Our ASA posture is a non-negotiable in the upcoming quadrennial defense review (QDR). I see short- to medium-term risk in our ASA force structure due to the legacy age-out issue. That is what you are talking about.

Secretary Donley a couple of weeks ago made the comment: I look forward to TFI, total force integration, part 2. He recognizes the need to leverage the inherent strengths of the three components of the Air Force to efficiently provide the capability that we need in the future.

General Schwartz has said with declining resources and increasing demands, we must remember that innovation is still free.

Part of the problem is recapitalizing, but part of the problem is also thinking about a force structure and a way for the three components to work together that maximizes those precious resources that the taxpayer pays for.

Senator LEAHY. General, I think we are going to probably, in the coming year, have a lot of conversations on this.

Thank you, Mr. Chairman.

I am also going to put into the record a couple of other questions. One, General Vaughn refers to our Mountain Division. Colonel Roy in Vermont has handled that very well, but with the upcoming deployment to Afghanistan—this is more of a personal nature—I wish you would take a look at that question. Thank you.

Mr. Chairman, I am going back to the Director.

Chairman INOUE. Senator Durbin.

Senator DURBIN. Thank you, Mr. Chairman.

I would like to thank the witnesses.

Eight years ago, I took up an issue. It was an issue related to Guard and Reserve activation and the fact that many private employers across the United States make good on the income and salary of these Guard and Reserve activated soldiers and airmen and others. It turned out that the largest employer of the Guard and Reserve activated did not. The largest employer, of course, is the Federal Government. If a member of the Federal workforce was a member of the Guard and Reserve and activated, there was no guarantee or protection that their salary would not diminish, and in some instances, it did.

We have talked a lot about the stress of deployment. In these times, we can understand the economic stress.

Well, I offered this for 8 years and lost it every time. I would pass it in the Senate, big votes, and it would disappear in conference committee. Or there would be some opposition here and there.

Well, lo and behold, I guess perseverance pays off, and in the omnibus bill, it finally passed. So now the Federal Government is going to make good on the salaries of activated Federal employees in the Guard and Reserve.

I would like to know if you are aware of this and if you are involved in helping it work.

General VAUGHN. I am aware, and it was a great action, Senator Durbin. You know, the great capability of the Guard and Reserve is really warehoused on the back of the employers of the Nation, and when they start to let our soldiers and airmen and sailors and marines down, then we have really got a problem. At the back we think almost all of the really tragic circumstances surrounding suicides and so forth and so on—you know, failed relationships, and the key driver, it appears, happens to be the ability to take care of their families through a lost job or an opportunity.

And so at every turn—and in fact, in the next panel, the champion of something across the Nation for the Reserve is Jack Stultz. His program we believe in totally, and we are working that program, but it is going to take everyone to have the employers—to pat them on the back and guide them in the right way and keep this great capability warehoused.

So thank you very much. I am very, very much aware of that.

Senator DURBIN. Good.

General WYATT. Senator, likewise. I had the privilege about 1 week ago to appear before General Schwartz who was involved with the Air Force/Navy warfighter talks, to appear on his behalf in Fairbanks, Alaska, for the Chamber of Commerce military appreciation night, attended by approximately 500 Fairbanksans. I learned a new term while I was there. One of the comments that I made referenced the Omnibus Appropriations Act of 2009 that you sponsored, and the relief that that provided our civilian workers.

The reaction of the crowd was one that you would be proud of. Several employers came up afterward and said it is nice to know

that some of the things that we as private employers have been doing have now been validated by the United States Government and they have seen fit to follow our lead. So they felt like they were out there.

They obviously did not know how hard you had worked to get that passed, but it is a huge thing that you did for the Guard.

Senator DURBIN. I kept telling my colleagues for 8 years it was a good idea, finally we do have it. Can I ask you about the Individual Ready Reserve (IRR) program? Last week, the Department of Defense announced that it was going to end the practice of stop loss, and since 2001, 120,000 servicemembers have been held past their service obligations in that program. Even today, 13,000 servicemembers who have done their duty, completed their enlistment, are prevented from moving on with their lives. Secretary Gates says the stop loss practice “breaks faith,” with our troops. The Army still uses IRR soldiers, Individual Ready Reserve, to fill National Guard units that are not at full strength. IRR soldiers have fulfilled their enlistment requirements but have time remaining on their military service obligations. They are not paid and do not train while in the IRR and have moved on with their civilian lives without expectation that they are going to be recalled to active duty except in the most dire situations like world war III, God forbid. We have had briefings from the Army and believe that the IRR system really needs a close look at this point.

Do you believe the end of the stop loss program, General Vaughn, will affect the rate of call-ups from the Individual Ready Reserve?

General VAUGHN. Senator Durbin, I do not. I think the end of stop loss is a great thing. I do not want to get out too far in front of releasing how we are going to execute this program. As you know, my buddy Jack Stultz in the Army Reserve is supposed to move into that August 1. We move in on September 1. We gladly said we are going to move into it September 1. Stop loss for the Guard—and I will let Jack talk to the Army Reserve piece, obviously, but around 72 percent of our soldiers reenlist down range; whereas, on the active side, it is a much different figure.

There will be a bonus that goes with this to stabilize our formations, which is what we need. The very best thing to stabilize your formations is stop loss for personnel, for families and whatnot, maybe that is a very tough thing. Unfortunately, we had to cross-level a lot when we first started. We have made enormous changes. We do not have to cross-level as much now as we did. We think the use of the IRR in a sense in our formations is not a good thing. It is not a good thing. And so in order to keep from doing that, that is why we went to battle on lowering our force structure, taking our end strength way up over. The chairman asked me a question earlier about the end strength piece. That is why we did it, is to keep the stop loss thing from happening.

So I hope that gets at those two elements of your questions sufficiently. Thank you.

Senator DURBIN. So do you anticipate using IRR? I mean, we are having to draw down the force in Iraq. And I am trying to get to the bottom line here as to whether or not you think that we are going to make up the difference by discontinuing stop loss and

drawing down in Iraq by going to the Individual Ready Reserve more.

General VAUGHN. I think what is going to happen with us—and the economy has probably got something to do with this. One year out, we're going to look at all those soldiers whose time of service is coming up, and we are going to give them a high unit retention bonus if they stay with us. And so we will know at 6 months whether or not they are going to stay with us. And we think the cross-leveling piece from within our Guard units, because this bonus opportunity and the chance to get them in the retention window, and our improved strength posture is going to keep us from having to go as deep in the IRR. There are, as you know, functional areas in the IRR that we are all having trouble with, military intelligence being one of those. And so there is always going to some number—I'm telling you from the Director of the Army Guard, I would like to minimize that to nothing.

Senator DURBIN. Thank you. Thank you both for your service and for being here today.

Thank you, Mr. Chairman.

Chairman INOUE. Thank you.

Senator BOND.

Senator BOND. Thank you very much, Mr. Chairman, and Senator Cochran.

I would like to begin by welcoming back General Vaughn and welcoming for the first time General Wyatt. It is good to see an Adjutant General assume this very important position, and I look forward to working with you on addressing the issues which you have already mentioned.

But first, I have to join with my colleague, Senator Leahy, in noting that this is likely General Vaughn's last appearance before the subcommittee. And I would be remiss if I did not recognize and thank General Vaughn for the exceptional leadership and strategic vision he has provided as the Director of the Army National Guard. He has put the Army Guard in a position of strength and relevance not seen at any time since World War II. From his very successful recruitment program, the G-RAP, to the visionary agricultural development teams that he and I worked on, to filling the critical equipment shortfalls that we had after Katrina, General Vaughn's leadership has been second to none. We are grateful, General, for your service and in your debt.

And I look forward to working with Senator Leahy and the subcommittee to address the equipment shortfalls and ensuring transparency, as you mentioned. We must do the latter to ensure the equipment this subcommittee provides, especially for dual-mission homeland defense, is in fact directed to the Guard for that very purpose.

But now, speaking about equipment, regarding the Air National Guard, as General Wyatt has already discussed, I think we can all agree that tactical fighters are a paramount piece of equipment for the Air Guard to fulfill its mission. From defending the territorial air sovereignty of the United States in Operation Noble Eagle to taking out terrorists in Iraq like Abu Musab Al Zarqawi that the Guard got, the Air National Guard provides a paramount mission for our country and at a fraction of the cost to the taxpayer.

But, unfortunately, as I have stated in this subcommittee for several years, the senior Air Force leaders continue to pursue plan A, a fifth-generation-only fighter strategy, a strategy in my view that not only ignores the current budget constraints but will disproportionately eviscerate the Air Guard force structure if left unchanged. This would, in turn, atrophy the Nation's aerospace industrial base, diminish the Air Guard's ability to perform missions abroad, and put the air sovereignty alert mission at significant risk.

Senator Leahy and General Wyatt both cited the GAO study on the air sovereignty alert. They concluded, "Given the importance of the capability to deter, detect, and destroy airborne threats to the United States, it is important that the Air Force address current and future requirements of the ASA mission to ensure its long-term sustainability. Further, the Air Force should ensure that it has fighter aircraft available to conduct ASA operations since the F-15s and the F-16s used for these operations are beginning to reach the end of their useful lives."

Now, we all know that the bottom line is that the Air Force has stated the defense of the homeland is their most important mission, but it has not done much to demonstrate that it realizes it is an important mission. As the GAO report stated, the ASA mission must be established as a steady state mission and then put the necessary resources toward fulfilling the mission.

While I believe, as General McKinley does—and I discussed it with him yesterday—that regardless of what happens with the Joint Strike Fighter (JSF), the Air Guard needs an interim bridge to ensure that the Air Guard does not become a hollow force.

The Air Guard cannot rely on the F-35 program to provide a sufficient, if any, number of aircraft to address its shortfalls in a timely manner. Last week, the GAO released another report providing an assessment of the F-35 JSF program. Highlights of the program: Program costs have increased by \$23 billion since last year alone. Operating costs, which were projected at \$346 billion a few years ago, are now estimated at \$650 billion. GAO's auditors expect development and procurement costs to increase substantially and schedule pressures to worsen based on performance to date.

The report says, "The contractor has extended manufacturing schedules several times, but test aircraft delivery dates continue to slip. The flight test program has barely begun, but faces substantial risks as design and manufacturing problems continue to cause delays. If we continue to ignore them and rely on the continued Air Force strategy, the Air Guard will be eviscerated." As a high-ranking official told me yesterday, you could buy three F/A-18s for the current price, which can only go up, of one F-35.

Now, General Wyatt, what is your assessment of the future of the Air Guard facing these equipment shortfalls?

General WYATT. Senator, thank you for the question. I share your concerns. I think in answering some of the questions of previous members of the subcommittee, we have laid out the perilous position that the Air National Guard fighter fleet is in.

We have a plan. I do not call it necessarily a plan B. I call it the Air National Guard plan. It is a strategic plan that is based upon a matrix of decisions, some of which will be made at levels much higher than me, when we talk about the national security strategy,

defense strategy, military strategy, the Air Force's role, QDR decisions that come down, budget decisions that we will hope to learn of in the future.

As you pointed out, the Air Force is on a recapitalization vector that relies entirely on fifth-generation fighters. We have worked very well with the Air Combat Command (ACC) in bringing to their attention that the force most at risk for recapitalization is the Air National Guard fleet and specifically the ASA fleet that protects the United States of America. We think that is job one, and we think that is where most of the recapitalization attention should be applied.

We are making progress in promoting our position to ACC, and they have written us in earlier into the fielding plans of the F-35. The F-22—obviously, we would need to get into that.

But I likened this earlier to flying in close formation with the United States Air Force, but there are going to be some decisions that they will not be able to make. We are preserving our options to include a fourth-generation buy. I have not ruled that out. Obviously, there are some decisions that will be made at a much higher level that may require not just the Air National Guard, but also the United States Air Force to consider a fourth-generation buy or a 4.5-generation buy. That is one of the issues, the platform, the expense.

The other is, regardless of the platform, whether it is F-22, F-35, F-15, F-16, fourth-generation, 4.5-generation buys, we still need to consider what structure we use. This is the other one-half of the plan, is we have to take a look at the structure of the United States Air Force. Associations are the coin of the realm. It maximizes the efficiencies that all three components bring to the Air Force. It minimizes, and in some cases eliminates, the weak points that those components bring. When we talk about associations and we talk about platforms, we have got to merge the thought processes together to provide the most capability for the United States, whether that be fifth generation or fourth generation.

Senator BOND. Well, thank you very much, General Wyatt. I know you were gratified to hear, as I was, the chairman say that within the budget constraints, we will work to make sure that we have the aircraft necessary for the Guard and its vital missions.

Mr. Chairman, I appreciate your indulgence. I have a lot more to say about this that I will submit for the record, for anybody who missed my initial comments. Thank you, sir.

Chairman INOUE. Thank you.

Senator Murray.

Senator MURRAY. Thanks very much, Mr. Chairman, Senator Cochran.

Thank you both for your service and also to the men and women who serve under you. We really appreciate all they are doing today.

General Vaughn, I want to start with you. Since our last hearing, I understand that the National Guard has implemented the new blast tracking system. You mentioned it a few moments ago. That is a system that I know is meant to help us track and link soldiers to situations where they might have been exposed to an adverse situation like an IED explosion.

I really want to commend you on this effort. I appreciate what you are doing with this, and I think that efforts like that are going to help us collect the data so that we make sure we have the resources we need to fully address those men and women who have traumatic brain injury (TBI) exposure or post-traumatic stress disorder (PTSD). And I wanted you to share with this subcommittee a little bit more about the blast tracking system and how it works.

General VAUGHN. Thank you, Senator Murray. To go back to the last of your question that you graciously asked about this—and as I explain this, when I finished—you know, we had a soldier behind me say, sir, you know, that is me. They do not have the record of the five explosions that I was in. That is me. So I wish I had had him testify. It would have been a lot better than me doing it.

Our issue is this. About 1½ years ago, we looked at this and said, you know, we have got all these soldiers that are coming back that are not on active duty and they do not have in their medical records a substantial annotated injury. They have been returned to duty. But, yet, is this an accumulation of effects, I mean, all the questions that are being asked of this—there was no tracking mechanism. So simply what we wanted to do was put into place a tracking mechanism that if a soldier—for instance, the unit that I was watching was a route clearance outfit that in—their daily business is explosions. And I saw some really tragic ones at the end of this, but also I talked to a lot of soldiers that had been returned to duty with it.

And so, I looked at this closely and said, wow. All of these are coming back. All of these soldiers will get off active duty, and they will be wards of the State. Now, I do not mean wards like indigent—I mean the State will end up having to deal with them.

Now, as you know, my sister ran the Head Injury Council in Missouri for many years. So I was just battered with all the head injury stuff. It has always been in my mind. I thought, you know, what is our role? What is the missing link in all this? And our role was to help get them on the path if they needed treatment or recovery. In other words, are they going to come in 5 days, 5 months, 5 years, 15 years, and where are they going to come to? Are they going to come to the armory? And if they are not, how do we route them into the right State agency? And when we do, is there a stigma behind this that prevents them from, you know, from doing this, or do they have to explain everything?

And the way we envisioned this was an automated database system that was operational in nature that when it happened, it was a commander's responsibility to note that this individual was in an incident, and, oh, by the way, if he or she was hurt badly, they were already in the medical health system, but if we noted in such a way and they came back to the State at some point, then you would have a mechanism to be able to channel them back onto active duty for treatment or into the Veterans Administration (VA) with a record behind them, and, oh, by the way, you would be able to do research on all the data.

What we did is we took about \$500,000 and sent a team down range, and we put together an automated database that was already there, the Army system. The greatness of this system is—as

you well know, you have got to have an LOD, a line-of-duty investigation, you know, before you can get into the system.

And so where is an LOD 5 or 10 years from now going to be? This automated system is the LOD. It will always track with them.

Now, where are we? If we commanded and control everything down range through the Adjutants General, this would not be hard. But once they go overseas in an active duty environment, it gets a little bit tough because most folks are going to come back on active duty; whereas, most of ours are not going to come back on active duty. So we met with all the personnel officers and the Adjutants General and those that we command and control—they are doing this. And I think we have 1,700 and some odd soldiers today. We will get the precise numbers for you.

Senator MURRAY. Okay.

General VAUGHN. Are we reaching everybody? No. I met with the Surgeon General of the Army and the G-1, and they said, we are going to do this. We are not going to wait on everybody to cut an order. We have already told them, you know, because we are different, the Guard and the Reserve. Again, they are not on active duty. And if we do not get this right, we are going to have families that are indigent out here looking for care and they are still trying to prove what happened to them.

Senator MURRAY. Right.

General VAUGHN. It is an emotional issue I think for all of us, and I think that we are probably on the right track with this, and it will get better and better and better. But I think that we need to get this thing—I am getting ready to retire here, but we need to push this thing over the goal line and have all Army, Navy, Air Force, and marines doing this because, again, if they get off of active duty, they are coming back to the State, and we have got to figure out then that inter-linkage, and it is easy because at the State inter-agency level between the Adjutant General working for the Governor, there has to be someone in the interagency over there on the social services side and most head injury councils or MTBI councils or whatnot—that this data and this linkage will happen seamlessly.

And so that's a long answer I know. We have done what I think that you asked us to do.

Senator MURRAY. I really commend you. I think you have made a lot of progress with that, and it is so important because many soldiers I have talked to do not even remember that they were close to a blast. And we also know that the symptoms can appear in a vast timeframe, sometimes a few days after exposure, sometimes as long as 18 months later. So oftentimes people do not link the event with the adverse effect. So that is really important, which leads me to my next question, about the transferability of the data that you are collecting to the VA so that when soldiers leave active duty, the data follows them.

Are you ensuring that that does go into the system as part of the seamless transition, or how are you doing that?

General VAUGHN. A great question, and the one that needs the work because you know it is not protected. It is not locked down. It is an operational tool. And my thoughts were that we needed an organization at the interagency level, again, head injury council,

that in consultation with the Adjutants General, so that you had military view of this, we knew which way to move it. This was not competition between VA and Army, Navy, Air Force, Marine Corps medical care. It is getting them back on the right track. I think this record is open to VA. I think it is open to the military healthcare systems. Yet to be worked out, but again, somebody has got to do that because folks like me are not going to be operating a system. We will have to get them over to the right people and do it in a very caring manner.

Senator MURRAY. Are you talking to the VA about the system now and making sure it is being transferred, or where is the conversation happening?

General VAUGHN. I have folks working with me that I feel are talking to the VA. As you know, we having—there is a council on this, this afternoon, where it is being discussed again, and those—you know, we are in the process now of bringing the data back and getting to the next stage. Any suggestions as we go forward on this—there needs to be everybody involved in it. It is not us coming up with some bright idea. I mean, this just needs to be done. And the Army is solidly behind this. Secretary Geren is a tremendous supporter, as well as the Vice Chief of Staff of the Army. I have seen it. He is all over it. He has got it.

Senator MURRAY. Okay, good. Well, this is something we will continue to follow with you. I really appreciate your work on it.

I also have a continuing concern about the backlog of claims for VA disability benefits. And one of the ways that we tried to speed up the delivery of the VA benefits has been through the benefits delivery discharge, or BDD, program, which allows claims to be filed within 180 days of discharge, with a goal of providing benefits within 60 days after release or discharge from active duty.

Unfortunately, members of our National Guard and Reserve have little or no access to the BDD program and are not able to expedite the processing of their VA claims. Can either of you talk to me about what members are doing to make sure that the VA does get them benefits more quickly?

General VAUGHN. Senator, you know, early on we put liaison officers and general officer over there to work these type of activities. I think we are getting better. You know, when we started out down this track, I mean it was like, you know, we were out in left field, you know, on the whole thing. The report that I get says that there is progress on this, but this is a continuing education piece that kind of goes in line with this blast tracking thing. Well, all systems were not set up to be advantageous for anyone, you know, that had an injury or follow-on care. And, you know, when they talk about the seamlessness between the services, you know, and whatnot, it is just not true. The benefits in the way we fly into the various healthcare systems is the primary bugaboo in all this. And again, you know, I'm stumbling around on the answer, but I will tell you we have people engaged, you know, with you, with VA, and you have heard my answer on the blast tracker. They are key to what we are going to do.

Senator MURRAY. Yes. General Wyatt.

General WYATT. Senator Murray, I echo the comments of General Vaughn. The problem on the Air National Guard side is that we

are kind of late to the game as far as the blast tracker and the information that we have.

I know that—and I am going to relate back to my experience as the Adjutant General in Oklahoma. I deployed the 45th Infantry Brigade combat team to Iraq in 2007, and we did not have such a program. I was not smart enough to figure out that we needed the program, but the University of Oklahoma was. And they came forward with an offer out of their pockets to fund baseline studies of our soldiers. We could not make them do that, but we offered that service to them that provided a baseline so that if something happened in theater, at least we would have a baseline to operate from to measure the degree of injury.

BLAST TRACKER

The advantage of the blast tracker is that it does that, but it also operationalizes the reporting, which I think is key to the whole situation. When we try to tie that to Veterans Affairs benefits, when the soldier, airman, sailor, or marine comes home, we still have problems in that at the joint force headquarters of our various States, some of them are resourced rather well to facilitate the integration of those services into not only post-mobilization briefings and Yellow Ribbon reintegration programs, but also before they deploy.

And that is one of the reasons that the Air National Guard needs to get more in tune with what the Army National Guard is doing and to follow their lead, integrate with their program because the Adjutants General, whether they wear blue, green, whatever color uniform, are responsible for all of the soldiers and airmen in their formations. And what I am hearing from the Adjutants General is that they need the flexibility to administer the program within their States, but they need access to the VA. And it needs to rely upon the strength of the national VA, not necessarily the strength of the State VA programs.

We have a very strong State VA program in Oklahoma, but I am advised that that is not true in a lot of States.

Senator MURRAY. Right.

General WYATT. And soldiers and airmen should not have to rely upon the inequities—

Senator MURRAY. Wherever they live. Yes.

General WYATT [continuing]. In the State VA systems to acquire the care that they need.

Senator MURRAY. So we have made some progress, but there is lots of work left to do, so don't take our eye off the ball, right? Okay.

General Vaughn, I did want to ask you one other question. Since our last hearing, I am excited that you established a National Guard Youth Challenge Program in the State of Washington. I had the opportunity to meet a couple of cadets from the program, and I think it is great. If you can just give us a quick update on what is happening with that.

General VAUGHN. You know, a tremendous program. And as you know—you mentioned being excited about it. I think 34 States that we are up to now. There is always a struggle for resources, and so I think that there is probably some language that has to do with

making it a little bit easier for the States right now to be involved in this.

I would recommend everybody support that to the maximum they can. You know, when we look at the great crises that we have, one of them is the left-behind, left-out youth of America, we really feel good about what we have been able to do. The States with Youth Challenge and STARBASE programs for the left-out and left-behind—you know, we run one of the Nation's largest GED-plus programs to get their GEDs, and then ship them on to active duty, and whether they come back to the Guard or Reserve or active Army, we care less. We just want to turn them around.

I think there is another piece to this. I think there is a high school piece that we need to be involved in, and I think this goes to the dropout piece. I think you link great programs, Youth Challenge, STARBASE, but in order to get a high school degree with those folks who have dropped out, you know, after their sophomore year, and you look at the Youth Challenge statistics—I mean, the number just jumps day after day about all those that make the tragic mistakes and cannot carry on with a great life and end up averaging us like \$750,000 apiece for incarceration for the rest of their lives. And the percentage is huge. So it is a staggering problem, and there is great talent out there.

I am not saying we should run social programs necessarily in the Army Guard, but we have got such an outreach here that the loyalty that you see from, for instance, those folks that go through the GED-plus program and Youth Challenge toward our Nation and giving everybody a second chance, I think it is the way we recruit. I think it is a big piece of the educational benefits. I think it is an education piece that we ought to be jumping after.

So am I for big-time Youth Challenge? Absolutely. And you have seen the tear-jerking things that I have. We have had folks testify that, you know, if you had not given us a turnaround, I would not be a surgeon today. We actually had that happen 2 years ago, you know. And so we all need to watch it, and I know that the question is loaded.

Senator MURRAY. I think that is absolutely great.

General VAUGHN. I really appreciate you asking about that.

Senator MURRAY. It is a great program, and I want to commend you for doing that. We are following it and hoping that we can keep it going as long as we have kids out there who need a second chance, which I think will be a long time. So thank you.

One last quick question. In December, I sent a letter to the National Guard Bureau signed by the whole congressional delegation of Washington State requesting to have the HAMMER Training Center be named the Western Regional Training Center for National Guard Support Teams and Related Training. HAMMER is a fantastic facility that trains people on everything from weapons of mass destruction to all kinds of other important skills. And I wondered if you could give the subcommittee or me, if you do not have it today, a written update on HAMMER's designation as a national training site.

General VAUGHN. No, I will have to follow up because, you know, the way it is broken out, the joint homeland piece comes under General McKinley on this. And I'm not pushing—you know me. I

am candid enough to try to answer the question. But, unfortunately, I do not have the data. We will get it to you quickly.

Senator MURRAY. If you can get it to me, that would be great. I appreciate it.

Thank you very much, Mr. Chairman.

[The information follows:]

The Hammer Training Center has provided strong support and excellent services to our National Guard Civil Support Teams since 2001. The National Guard Bureau has conducted site visits to the Hammer Training Center and concurs that the training and facilities available for Chemical, Biological, Radiological, Nuclear, and high Explosive (CBRNE) training are excellent. At present, the number of facilities necessary to meet the Nation's CBRNE collective training requirements has not been determined and a national training plan for this type of mission has not been finalized. We are currently developing a capabilities gap analysis and will work in conjunction with Northern Command (NORTHCOM) to ascertain the appropriate set of CBRNE training facilities. The Army will include the Hammer Training Center in its considerations prior to any decisions regarding regional training sites.

ADDITIONAL COMMITTEE QUESTIONS

Chairman INOUE. I thank you very much. General Vaughn and General Wyatt, on behalf of the subcommittee, I thank you for your testimony. And may we, through you, thank the men and women of the Air and Army Guards for their service to our country? We thank you very much.

[The following questions were not asked at the hearing, but were submitted to the Department for response subsequent to the hearing:]

QUESTIONS SUBMITTED TO LIEUTENANT GENERAL CLYDE A. VAUGHN

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

LIGHT UTILITY HELICOPTER

Question. General Vaughn, in the fiscal year 2009 Defense Appropriations Act, the Vice Chairman of the subcommittee, Senator Cochran, provided the leadership to accelerate the production of Light Utility Helicopters. A majority of these helicopters are to be provided to the National Guard to meet important MEDEVAC, homeland security, and general support missions.

Could you describe how the accelerated production of the Light Utility Helicopter will benefit the Army National Guard?

Answer. The Army National Guard (ARNG) will begin to see significant and positive benefits from the Light Utility Helicopter (LUH) production acceleration beginning in fiscal year 2011 and subsequent fiscal years. The ARNG Light Utility Helicopter fielding, prior to this acceleration, would not have been complete until fiscal year 2017. The ARNG, with this acceleration, will now complete fielding of its 200 aircraft in fiscal year 2015 which will enhance our ability to meet mission readiness in support of our domestic and overseas operations. Additionally, this acceleration allows the ARNG to divest OH-58 aircraft which the light utility helicopter replaces, over a shorter timeframe.

Question. General Vaughn, approximately three-quarters of the Light Utility Helicopters intended for the National Guard are to be equipped to support homeland security missions, while the rest are to be equipped as MEDEVAC helicopters.

Is this the right mix of mission equipment to meet the National Guard's missions?

Answer. The Army National Guard (ARNG) and the Army consider MEDEVAC Light Utility Helicopters as part of the support capability to meet Homeland Security aviation requirements. The MEDEVAC Light Utility Helicopter will be an element of the ARNG Security and Support Light Utility Helicopter Battalions, one eight ship MEDEVAC company per each of the six Security and Support Light Utility Helicopter Battalions. The ARNG in coordination with the Army in 2006 developed this mix of MEDEVAC and non MEDEVAC Light Utility Helicopters to meet requirements for Homeland Security, Domestic Support to Civil Authorities, Training and ARNG Post, Camp and Station requirements. We have preliminarily indicated to the Army leadership that we believe there are still some light utility heli-

copter capability gaps within the ARNG and that we would pursue options to define those gaps and requirements within the very near future.

QUESTIONS SUBMITTED BY SENATOR RICHARD J. DURBIN

MILITARY CONSTRUCTION

Question. In your prehearing testimony, you stated: “Many of our aging facilities are in need of repair or replacement. The continued strong support of the Congress for Army National Guard military construction and facilities sustainment, restoration, and maintenance funding is crucial to our readiness.”

a. Is the Army sufficiently attentive to the Army National Guard’s Military Construction needs to ensure the Army National Guard can meet its state and federal obligations?

b. What is the impact of these “aging facilities” on the Army National Guard’s ability to perform its dual state/federal missions?

Answer. a. Yes. The Army established a Reserve Component Military Construction General Officer Steering Committee (MILCON GOSC). The MILCON GOSC is a forum in which General Officers from the HQDA Staff and ten General Officers from the National Guard and U.S. Army Reserve meet every 6 months to discuss priorities and programs of the National Guard and Reserve Components.

Total Long Range Plan requirement for military construction is over \$13 billion and our current average budgeted level around \$500 million.

b. With the increased demand on the Army National Guard, there is an increased risk to carry on in functionally obsolete and energy inefficient facilities. There are cases where work functions are spread over several buildings or locations, resulting in spending time traveling rather than training. Our aging facilities are showing the wear with leaky windows, limited insulation and worn our mechanical equipment.

We continue to make strides to improve our facilities and you can be assured that the Guard continues to achieve a high performance level in support of our dual state/federal missions in spite of aging facilities.

FAMILY READINESS LEVELS

Question. A recent RAND study noted concerns about the readiness level for families of deploying members of the Guard and Reserve. Only 60 percent of spouses surveyed felt their family was ready for the deployment. Almost 80 percent reported some type of deployment-related problem.

How does the Army National Guard support families before, during, and after their servicemember’s deployment? Is the Army Guard pushing the right information to families at the specific time it is needed?

These problems are particularly acute when the servicemember deploys with a different unit (such as when an Illinois reservist and deploys with a California unit).

Answer. The National Guard Yellow Ribbon Reintegration Program and supporting initiatives are the key instruments to support our families before, during and after their Soldier’s deployment. The Yellow Ribbon Program consists of events at seven critical points during the deployment cycle: (1) Alert, (2) Pre-Deployment, (3) During Deployment—within 90 day of Soldier’s departure, (4) During Deployment—within 90 days of Soldier’s return, (5) Reintegration—about 30 days after return from Active Duty (REFRAD), (6) Reintegration—about 60 days after REFRAD, and (7) Reintegration—about 90 days after REFRAD. Events 2–6 are primarily for providing Families with information, resources, points-of-contact, and similar information to support them before, during and after their Soldier’s deployment. They will receive briefings on how their benefits will change, where they can go if they need information or financial assistance while their Soldier is gone, information regarding childcare, respite and youth programs designed to support their children and increase their resiliency. They will receive Family Program and Family Readiness Group points-of-contact, as well as resources within their community. During deployment events focus on financial readiness, stress management, preparing for the Soldier’s return, Battlemind Training, and other resiliency-building and life skills seminars. Reintegration events include resources that support the Soldier’s transition back to civilian life and provide information and resources to address the potential stresses that may arise during that transition—Job Fairs, Strong Bonds Marriage and Single Soldier Relationship Enrichment Seminars, Strong Bonds Family Seminars. Local points-of-contact from the Department of Labor, Veteran’s Affairs, Law Enforcement, and other community partners also participate in these events and provide information about the programs that support Veterans and their families.

The National Guard Yellow Ribbon Reintegration Program policy memorandum outlines the events and resources that should be provided.

In addition, the Soldiers, Families Support Services Division publishes a bi-monthly magazine, called The National Guard Soldier & Family Foundations. It is distributed to the homes of 350,000 Soldiers. The magazine provides information about support programs and resources and highlights feature stories about the Soldiers and their families. The National Guard Soldier & Family Foundations magazine has been well-received and reaches even those families that opt not to attend Yellow Ribbon events.

Question. How does the Army National Guard provide family support when a servicemember cross-levels with another unit?

Answer. The family support process may vary by state/territory, but in general, when a Soldier is mobilized, his/her information is pulled from Standard Installation Division Personnel System (SIDPERS) database and downloaded to the Guard Family Management System. The State Family Program Director (SFPD) from the Soldier's home state will contact the Program Director from the gaining state. When the Soldier goes through the Soldier Readiness Process (SRP) at the unit, prior to going to the mobilization site, Family contact and location information is gathered. The SFPD then distributes this family information to the Family Assistance Center closest to where the family lives. For example, if Soldiers are cross-leveling from the state of California (CA) to a unit in the state of Indiana (IN), the CA SFPD may contact the IN SFPD to establish contact and a flow of information regarding the unit to these families and vice versa. Once the Soldiers go through SRP, the Family Assistance Center located nearest their home will be reached and provided their families' contact information. The Family Assistance Center Coordinators are responsible for checking in with families of deployed Soldiers on a monthly basis to ensure they have the support and assistance they need while their Soldier is deployed.

The deploying unit's commander can establish a Virtual Family Readiness Group (VFRG) page as well where family support information can be made available to unit families regardless of their geographical location.

Some of our main challenges that we are facing are: Soldiers providing incorrect contact information or no contact information for their families; families move during the deployment and do not provide forwarding information; and families opting not to be contacted.

DEPLOYMENT CHALLENGES

Question. Before 9/11, it was uncommon for large units of a particular state Guard to deploy as a large group (such as an entire brigade). For example, the current Illinois deployment is the largest deployment of state Guard members since WWII. Other states have likewise had large groups of their civilian populations called to active duty to deploy with National Guard units.

How has the Army Guard managed the administrative challenges of deploying so many members from one location at one time?

Answer. The Army National Guard (ARNG) has developed several Information Technology solutions to assist the States and Territories' mobilize Soldiers more efficiently. We created "e-mob" to leverage the interactive Personnel Electronic Records Management System (iPERMS) records of individual Soldiers to be accessed anywhere via the WEB. The use of the RCAS application of the Mobilization Personnel Data viewer and the ability to load records into the Active Components Deployment and Reconstitution Tracking Software (DARTS) application has helped to process personnel in a more expeditious manner. The Line of Duty (LOD) Investigation Module developed into the Army's Medical Operational Data System (MODS) has greatly enhanced the processing and documenting of injuries incurred during mobilization from approval that used to be almost a year down to approval in days from submission. The ARNG administers the TRICARE Early Eligibility Program to transition Guardsmen and their families to DOD's Healthcare system before deployment.

Today most of our States and Territories Joint Forces Headquarters field "White Cell" teams consisting of administrative personnel who meet the redeploying unit and work with the various Power Projection Platforms during the Demob process to ensure Soldiers have completed Line of Duty, Evaluations, awards and try to convince Soldiers injured and ill while deployed to stay on active duty through the Medical Retention Process (MRP) or at least be examined through the MRP-E (Examination) program to rule out long term injury that would be better treated at a Military Medical Treatment Facility. This effort is an unfunded requirement often taken out of other programmed requirements in order to better take care of our Soldiers.

Question. What steps are the Army Guard taking to make sure it is ready to deal with the reintegration of so many soldiers of one community?

Answer. The ARNG has implemented the Yellow Ribbon Combat Veteran Reintegration program in accordance with the joint guidance issued by National Guard Bureau and with funding allocated for this purpose. The objective of the Yellow Ribbon program is to facilitate the post-mobilization reintegration process and reconnect the Service member with his or her Family, employer, and community while providing information and access to national, state and local resources. Over the past few years, the ARNG has established a framework for successful Yellow Ribbon events in support of large unit reintegration involving Soldiers and units that are dispersed over a multi-state area:

- Timely and accurate information dissemination at all levels.
- Emphasis on Family Readiness Group outreach programs including e-mails, newsletters, and communication from all levels in the chain of command.
- Utilization and coordination of resources at the local level to minimize logistical challenges and limit the need for extensive Soldier and Family Member travel.
- Utilizing the newly fielded Joint Services Support (JSS) portal to coordinate and disseminate Yellow Ribbon events and ensure maximum Soldier and Family Member participation.
- Providing Yellow Ribbon contractors beginning fiscal year 2009 to augment state efforts; these contractors assist in all phases of the event to provide training, briefings, and activities that support Service Members and their Families while ensuring effective information flow at all levels.

INDIVIDUAL READY RESERVE (IRR)

Question. In the last year, how many Individuals Ready Reserve (IRR) soldiers has the Army National Guard requested to help fill its deploying units? Of that number, how many were involuntarily mobilized? Of the number of IRR soldiers requested, how many ultimately mobilized and deployed with the Army National Guard?

Answer. The requirements were for 2,312 Soldiers.

Mobilized Soldiers—97 were voluntary and 5,671 were involuntary for a total 5768.

The 1,368 Soldiers joined units between July 15, 2008 through July 15, 2009.

Question. At the hearing, you stated that the Army National Guard will continue to fill certain Military Occupational Specialties with IRR soldiers.

Please provide me with a list of these specialties.

Answer. Top Military Occupational Skills (MOS) and grade:

- 11B E4 (Infantry)
- 11B E5 (Infantry)
- 11B E3 (Infantry)
- 88M E4 (Transportation)
- 31B E4 (Military Police)
- 88M E3 (Transportation)
- 68W E4 (Health Care Specialist)
- 92F E4 (Fuel Handler Specialist)
- 63B E4 (Mechanic)
- 31B E3 (Military Police)

Question. As described at the hearing, family support and reintegration can be difficult for soldiers and their families when the soldier is cross-leveled.

What changes in procedure are necessary for Army National Guard units to be able to cross-level IRR soldiers who already live near the unit?

Answer. The Army National Guard (ARNG) supports drawing IRR Soldiers from the same State as the mobilizing unit they will join when such is feasible. This could be accomplished via a two-step process for filling IRRs that would garner IRR fillers from the same State as the mobilizing unit where possible.

Under the current practice, the ARNG sends a request for IRR Soldiers through channels to HQDA G1. The G1 has a contractor (ASM Research) run a database query, identify the population of suitable IRR Soldiers to fill the requisition, and order them to duty (plus an appropriate overage to account for expected attrition). The process as currently conducted does not take the Soldier's geographical location into account.

Our proposal would be to add an intermediate step: When ASM Research received our IRR requisition, they would identify all qualified candidates for fill. From this population, they would first apply any qualified IRRs living in the same State as the mobilizing unit, and then turn to the national population to fill any shortfall

not covered by IRR residents of that State (to include the overage required to offset attrition at the re-training or "re-greening" station).

This modified approach would have at least four benefits:

First, it would provide a recruiting opportunity for the ARNG. Currently we have little opportunity to retain IRR Soldiers that serve with our units as they usually live in another geographical area outside commuting distance. By filling with IRRs residing in the same State first, however, it gives us the opportunity to capture and retain IRR Soldiers serving with our units who become bonded with their colleagues during the deployment, as there is a greater chance that the Soldiers would reside close enough to commute to drill with the Soldiers they bonded with in combat.

Second, it would help the Soldier by enabling the unit to include the Soldier's family in all support group activities and family support while the Soldier is deployed, which is difficult now as the families usually do not live in the same geographical area as the unit.

Third, by affiliating with the local-area deploying ARNG unit prior to attending re-training (as required of all IRR Soldiers) the IRR Soldier is now affording the opportunity to prepare for remedial training and has a familiar chain of command to assist with any personal, family, or administrative issues through the home station ARNG unit while at training.

Fourth, it would facilitate accomplishment of all required reintegration activities by the Soldier with the unit he or she deployed with—again, difficult now as the Soldier does not reside in the same geographical area and may not live near a military installation.

PERSONNEL

Question. The fiscal year 2009 Omnibus contained the provision to help federal employees in the National Guard and Reserves avoid a loss of income when they are called the active duty.

What efforts will the Army National Guard undertake to quickly implement this new provision?

Answer. How quickly the Army National Guard implements any new authority/program is dependent upon DOD publishing an Instruction or Directive, then the Army must publish guidance to their Components.

Question. Can you provide the number of current Army Guard members who are federal government employees?

Answer. The Army National Guard has 32,927 Non-AGR personnel who are federal government employees.

Question. Of that number, how many have served at least one tour in Operation Enduring Freedom or Operation Iraqi Freedom? How many are currently deployed?

Answer. Of the 32,927 Soldiers who are federal government employees; 4,312 are currently mobilized for Operation Iraqi Freedom and Operation Enduring Freedom, and are receiving Hostile Fire Pay.

Since September 11, 2001, there have been 20,688 Army National Guard federal government employees (identified by unique social security numbers) from the list who have received Hostile Fire Pay for Operation Iraqi Freedom or Operation Enduring Freedom.

QUESTION SUBMITTED BY SENATOR PATTY MURRAY

HAMMER

Question. In December, I sent a letter to the National Guard Bureau signed by all the members of the Washington State Congressional delegation requested to have HAMMER training center be named the western regional training center for National Guard Civil Support Teams and related training. In the case of events with weapons of mass destruction, National Guardsmen trained there can identify the type of agent used to help support police, firefighters and other emergency workers who would be the first to respond to the problem. "HAMMER has established a reputation as a premier training site because of its excellent chemical, biological, radiological, nuclear and explosive . . . facilities and skilled on-site Department of Energy radiation and nuclear professionals". HAMMER had 39 Civil Support Teams conduct training on its campus in 2007 and 2008 and already has 12 STEP training programs scheduled for fiscal 2009, which started in October.

General Vaughn, can you provide me any update on HAMMER's designation as a regional training site?

Answer. The HAMMER Training Center has provided strong support and excellent services to our National Guard Civil Support Teams since 2001. The National

Guard Bureau has conducted site visits to the HAMMER Training Center and concurs that the training and facilities available for Chemical, Biological, Radiological, Nuclear, and high Explosive (CBRNE) training are excellent. At present, the number of facilities necessary to meet the Nation's CBRNE collective training requirements has not been determined and a national training plan for this type of mission has not been finalized. We are currently developing a capabilities gap analysis and will work in conjunction with Northern Command (NORTHCOM) to ascertain the appropriate set of CBRNE training facilities. The Army will include the HAMMER Training Center in its considerations prior to any decisions regarding regional training sites.

QUESTION SUBMITTED BY SENATOR BYRON L. DORGAN

END STRENGTH

Question. With increased operational demands placed on the reserve component for the past several years, signs of stress and strain are showing. All reserve component services are facing increased challenges retaining experienced, mid-grade career service members, precisely those eligible for retirement after having served 20-years of service. I am concerned we are not maintaining a balanced force, retaining enough of the very individuals who have gained the benefit of experience these past years of increased operations. I'm considering introducing legislation that would enhance retention of those experienced career servicemembers, providing an incentive to serve beyond 20-years, initial retirement eligibility, to continue to serve in the reserve component in exchange for lowering the age at which they will be eligible to receive retired pay. For example, if a member commits to serving 2 years beyond 20, the age for which they are eligible to receive retired pay would be lowered by one year.

What is your opinion of this idea?

Answer. The Army National Guard (ARNG) agrees, a 1 year reduction in retirement eligibility for each additional 2 years spent over 20 years of service would improve retention and keep experienced mid-grade Officers and Non Commissioned Officers (NCO) in our ranks longer.

QUESTION SUBMITTED BY SENATOR THAD COCHRAN

MONTICELLO READINESS CENTER

Question. General Vaughn, the Monticello Readiness Center in Monticello, Mississippi is a 55-year-old facility that is undersized, significantly deteriorated, and does not meet Army requirements for fire, safety, health codes and force protection. Congress has provided planning and design funding for this project and a new facility which has been a top concern for the Mississippi Adjutant General for the past 6 years; yet it has never been included in the Army's Future Years Defense program budget plan. I don't understand how this can be the top priority for the State Adjutant General for years and still not be included somewhere in the budget.

In light of the high priority assigned this readiness center by the State Adjutant General, I hope you will look into this request and ensure this facility and other similar facilities are carefully evaluated as a candidate for the Army's construction plans.

Can you please comment on this?

Answer. The Readiness Center in Monticello, Mississippi is in poor condition and should be replaced. The National Guard Bureau has granted design authority funds to the Army National Guard of Mississippi for planning and design of the Readiness Center in Monticello. Unfortunately, there are insufficient funds available to include this project in the Future Years Defense Plan (FYDP).

The Readiness Center in Monticello, Mississippi is not the only Adjutants General top priority project that has not made it to the FYDP. These projects compete with other Army priorities for limited funds.

QUESTIONS SUBMITTED TO LIEUTENANT GENERAL HARRY M. WYATT, III

QUESTIONS SUBMITTED BY SENATOR BYRON L. DORGAN

RESERVE COMPONENT STRESS

Question. With increased operational demands placed on the Reserve component for the past several years, signs of stress and strain are showing. All Reserve component Services are facing increased challenges retaining experienced, mid-grade career servicemembers, precisely those eligible for retirement after having served 20 years of service. I am concerned we are not maintaining a balanced force, retaining enough of the very individuals who have gained the benefit of experience these past years of increased operations. I'm considering introducing legislation that would enhance retention of those experienced career servicemembers, providing an incentive to serve beyond 20 years, initial retirement eligibility, to continue to serve in the reserve component in exchange for lowering the age at which they will be eligible to receive retired pay. For example, if a member commits to serving 2 years beyond 20, the age for which they are eligible to receive retired pay would be lowered by 1 year.

What is your opinion of this idea?

Answer. The Air National Guard is not facing the same challenges as our Air Force Reserve counterpart in retaining members past 20 years service. Out of 106,635 members assigned 25,378 (23.8 percent) are retirement eligible with over 20 years of service, 7,400 (6.94 percent) are within 18–20 years service, and 73,857 (69.26 percent) have not reached retirement eligibility.

We agree that legislation to reduce the retirement age for service beyond 20 years would be of benefit in retaining members past the 20 year mark. With the evolution of the increased operational demands we believe this incentive would enhance our overall retention.

119TH WING, HECTOR FIELD, ND

Question. With the recent increase in the number of Air National Guard personnel authorized to provide direct support for contingency operations, are there plans to increase the number of authorized and assigned personnel in the North Dakota Air National Guard 119th Wing, Hector Field, Fargo, North Dakota, providing MQ-1 Predator/MQ-9 Reaper unmanned aircraft systems operations?

Answer. The Program of Record for the 119th Wing, North Dakota Air National Guard, is to provide one steady-state Combatant Command (COCOM) Combat Air Patrol (CAP) with a surge capability to two CAPs utilizing authorized manning through volunteerism and/or mobilization. The wings current manning document reflects the necessary manning to meet this Program of Record. Currently, the 119th Wing is operating under surge conditions, providing two COCOM CAPs utilizing all Air Combat Command assigned equipment. Should Air Force requirements change to dictate an increase in COCOM CAPs for ANG units, as a steady state requirement, the National Guard Bureau will work with to ensure proper resourcing, manning and equipping for those units.

Question. What is the Air National Guard's plan for maintaining current C-21 flying mission at the 119th Wing, Hector Field, North Dakota? How long will the Air National Guard continue to support this mission at its current level of funding, personnel, and equipment?

Answer. The current C-21 flying mission at the 119th Wing, Hector Field, North Dakota is intended to bridge the gap between the loss of their F-16s and the establishment of a follow on mission. The National Guard Bureau is committed to support the C-21 flying mission at the 119th Wing until it's follow on mission is in place.

Question. What is the Air National Guard's plan for procurement, assignment and basing the Joint Cargo (C-27) at the 119th Wing, Hector Field, Fargo, North Dakota? When will the Air Force procure these aircraft, when will they begin to arrive in Fargo, and how many aircraft will be permanently assigned to the 119th Wing?

Answer. The Air National Guard stands ready to support the Air Force's commitment and requirement for the C-27 program. The delivery schedule and aircraft numbers are dependent upon the Air Force's C-27 procurement action. The Chief, National Guard Bureau, has announced that Hector Field will be one of our units that operate the C-27.

QUESTIONS SUBMITTED BY SENATOR RICHARD J. DURBIN

AIR NATIONAL GUARD MILITARY CONSTRUCTION

Question. In Lieutenant General Vaughn's prehearing testimony, he stated: "Many of our aging facilities are in need of repair or replacement. The continued strong support of the Congress for Army National Guard military construction and facilities sustainment, restoration, and maintenance funding is crucial to our readiness."

Is the Air Force sufficiently attentive to the Air National Guard's Military Construction needs to ensure the Air National Guard can meet its state and federal obligations? What is the impact of these "aging facilities" on the Air National Guard's ability to perform its dual state/federal missions?

Answer. Air National Guard (ANG) facilities are constructed to support the operational and training requirements for federal missions assigned to various ANG locations. As the Air Force accepts "risk in infrastructure" and limits the availability of current mission military construction (MILCON) funding, some facilities will continue to age beyond the planned replacement timeline previously expected. This will require continued investment with operations and maintenance (O&M) funding to keep facilities sustained, restored, modernized, and operable until they can be recapitalized. In the case of new mission beddowns, some MILCON funding has been provided later than the mission dictated, causing additional reliance upon O&M funding for mission/facility workarounds. In all cases the missions have been bed down on an initial operational capability basis to provide equipment and facilities to being training ANG members until permanent full operational capability MILCON investments can be addressed.

State mission capabilities are assumed to be contingent upon the existing equipment and infrastructure being available at the local bases. As a community based force, the ANG is responsive to community needs in the event of local disasters or acts of nature that would require the capabilities in place at ANG bases. Thus, the impact of "aging facilities" on the ANG's ability to perform the State mission is judged to be limited and tolerable at the current budget funding level.

AIR NATIONAL GUARD FAMILY SUPPORT

Question. A recent RAND study noted concerns about the readiness level for families of deploying members of the Guard and Reserve. Only 60 percent of spouses surveyed felt their family was ready for the deployment. Almost 80 percent reported some type of deployment-related problem. These problems are particularly acute when the service member deploys with a different unit (such as when an Illinois reservist and deploys with a California unit).

How does the Air National Guard support families before, during, and after their service member's deployment? Is the Air National Guard pushing the right information to the families at the specific time it is needed? How does the Air Guard provide family support when a service member cross-levels with another unit?

Answer. The key is to ensure there are effective communications. Wing Family Program Coordinators (WFPCs) are trained and are in place to assist families and to include them in activities or meetings held on base. If there are problems concerning the military member, WFPCs work the issue and, as a minimum, they conduct 30 day (monthly) welfare calls to maintain regular contact with families to identify issues before they become overwhelming.

During the pre-deployment process, military members fill out a family readiness pre-deployment checklist and indicate if the Family Readiness Group may contact their loved ones. WFPCs take care of a military member's loved ones regardless of location. If they should need assistance in a locality other than their home area, WFPCs contact the Air National Guard unit that can best provide the services that the families are in need of.

Air National Guard units typically do not deploy all unit members at the same time, which is more characteristic of Army National Guard units. If there are notional taskings, remaining unit members are usually engaged at some level with a deployed member's family (i.e., phone calls, e-mails or visits). There are many personnel who tag on or fill in other unit line numbers. Rarely do families relocate as a result of a deployment situation. So from that standpoint families are supported from their Air National Guard unit similar to when a full scale deployment occurs.

The Department of Defense Yellow Ribbon Reintegration Program (YRRP) will help the flow of information between units and service member families. With the five phases of deployment identified, the Air National Guard's Defense Department YRRP contractor and/or WFPCs will have more opportunities to communicate with individual members and their families. They will identify their needs and assist

them as needed. This program will also increase pressure on unit commanders to provide assistance to and/or contact service member families.

Prior to the Yellow Ribbon Program, WFPC conducted a pre-deployment briefing for Airmen and their families but family members rarely attended. The presentation included but was not limited to the following topics: Air National Guard at home for impacted family members, healthy/unhealthy coping strategies, readiness planning issues (i.e., bill paying, power of attorney, wills, organizing vital documents, household/seasonal maintenance activities, etc.) as well as resources available to assist families. WFPCs distributed a variety of handouts such as Military OneSource information, Military Family Life Consultant business cards, Family Services contact information, personal organizers, and a guide to Family Readiness.

FEDERAL EMPLOYEES IN THE NATIONAL GUARD AND RESERVES

Question. The fiscal year 2009 Omnibus contained the provision to help federal employees in the National Guard and Reserves avoid a loss of income when they are called to active duty.

What efforts will the Air National Guard undertake to quickly implement this new provision?

Answer. The Office of the Assistant Secretary of Defense for Reserve Affairs, Manpower and Personnel, and the Office of Personnel Management, in coordination with the Department of Defense, will implement the federal employee provision for income replacement. The Air National Guard will follow those implementation guidelines when published.

Question. Can you provide the number of current Air Guard members who are federal government employees? Of that number, how many have served at least one tour in Operation Enduring Freedom or Operation Iraqi Freedom? How many are currently deployed?

Answer. Currently, there are 27,603 members of the Air National Guard who are federal government employees. Of that number, 18,878 have served at least one tour of duty supporting Operations Enduring Freedom or Iraqi Freedom. 1,300 of the 27,603 are presently deployed supporting a named contingency operation.

QUESTIONS SUBMITTED BY SENATOR THAD COCHRAN

F-15 AESA RADAR SYSTEM

Question. General Wyatt, I understand the Air Force previously upgraded some of the Air National Guard's F-15s with next-generation Active Electronically Scanned Array radar systems, but it has not budgeted to complete retrofits on the entire fleet.

General, can you describe for the Subcommittee the importance of the capabilities provided by the next generation radars, and provide an update on the status of funding for retrofitting the entire Air National Guard F-15 fleet?

Answer. The F-15's air-to-air advantage remains in the Beyond-Visual-Range arena. Beyond-Visual-Range requires the ability to detect current and future generation airborne threats in order to retain the first shot, first kill advantage, which is essential to effective employment. The APG-63(v)3 AESA radar provides the Air National Guard with the capability to detect, track, and kill asymmetric threats, such as cruise missiles and drones, which is paramount in both the Homeland Defense and wartime roles. This state-of-the-art AESA radar is flexible enough to be continuously upgraded, allowing the Air National Guard F-15s to meet future threats and new mission sets that were not previously possible. The APG-63(v)3 is performing very well in flight test and is months from operational fielding.

The Air National Guard's minimum requirement is for 48 AESA-equipped F-15s. This allows Air National Guard units to provide constant 24/7 homeland defense vigilance with AESA radars, while simultaneously providing the Air National Guard the ability to deploy AESA-equipped F-15s in the Air and Space Expeditionary Force construct to meet wartime and combatant commander taskings.

In fiscal year 2006, Congress appropriated \$52.2 million to "procure six AESA systems for the Air National Guard." In fiscal year 2007, Congress appropriated \$72 million for "procurement of AESA radars only for the Air National Guard F-15C fleet" which provided eight AESA radars. In the fiscal year 2008/fiscal year 2009 Emergency Bridge Supplemental, Congress appropriated \$34 million for "Air National Guard AESA," providing four AESA radars. The current fielding plan for these funded AESA radars is six at Jacksonville, Florida (installs beginning in January 2010), six at Portland, Oregon (installs beginning in October 2010), and six at New Orleans, Louisiana (installs beginning in July 2011).

Our immediate need is \$62.5 million to procure and install approximately eight APG-63(v)3 AESA radar systems, six at Barnes, Massachusetts and two at Great Falls, Montana. Our preferred option would be for \$110 million to procure approximately 12 APG-63(v)3 AESA radar systems for the Air National Guard. Six of these would be installed at Barnes, Massachusetts (104th Fighter Wing) and six would be installed at Great Falls, Montana (120th Fighter Wing). This would bring the total to 30, leaving an additional 18 to meet the Air National Guard's 48 minimum requirement.

186TH AIR REFUELING WING

Question. General Wyatt, the 186th Air Refueling Wing currently flies KC-135 tanker aircraft out of Key Field in Meridian, Mississippi. Due to a 2005 Base Realignment and Closure decision, all of their aircraft will be reassigned by 2011. The Air Force has talked about replacing the tankers with Joint Cargo Aircraft, but I'm told those planes won't be available for Meridian until 2015. That creates a 4 year gap without a flying mission. At last year's hearing, General Blum said the Guard Bureau was committed to arranging a mission to bridge the flying gap at Key Field.

General, would you provide us an update on the progress you are making in assigning a "bridge" flying mission to Key Field.

Answer. The National Guard Bureau is working with the Air Force to identify a "bridge" to the future C-27 mission at Key Field, Meridian, Mississippi. Following the 2005 BRAC, the Air Force identified a Component Numbered Air Force augmentation unit as the replacement for the KC-135 air refueling mission and the National Guard Bureau announced that Meridian, MS would also receive the C-27 (JCA).

Due to their experience in the RC-26, the 186th Air Refueling Wing at Key Field was selected and is currently conducting mission qualification training in the MC-12W. The MC-12W is a manned-intelligence, surveillance, and reconnaissance capability which the Air Combat Command is fielding to support overseas contingency operations in the U.S. Central Command. While this training mission is currently considered to be temporary, there is the possibility that it could be an enduring mission depending on Air Force established requirements. Should the Air Force determine it to be a long-term requirement, Meridian would likely be a strong contender for that mission.

GUARD PRESENCE ON UNITED STATES/MEXICAN BORDER

Question. General Wyatt, your testimony outlined some of the successes the Guard achieved in assisting the Border Patrol as part of Operation Jump Start.

What presence do we currently have on our southern border?

Answer. Currently, all Air National Guard personnel on the Southwest Border are involved with Counterdrug operations through the Joint Force Headquarters of the bordering states of Mexico. The missions the Air National Guard participates in include: Incident Awareness and Assessment, Linguist support, Aviation Refueling, and Innovative Readiness Training (Civil Engineering). Each state controls their border operation. The National Guard, both Army and Air, have a total of 681 personnel assigned to the counterdrug effort.

Question. With the recent escalation in violence on the southern border, and the plan announced yesterday by the Administration for more federal agents, do you see a need for the continued presence of the National Guard on the United States/Mexican border?

Answer. The National Guard involvement in Operation Jump Start provides highly effective cross-functional capabilities to the Southwest border. If called upon, we stand ready to fulfill any future requirements.

RESERVES

STATEMENT OF LIEUTENANT GENERAL JACK C. STULTZ, CHIEF, ARMY RESERVE

Chairman INOUE. And now we call upon General Stultz, Vice Admiral Debbink, Lieutenant General Bergman, and General Stenner to come forward to present their testimony on the Reserve component.

Gentlemen, thank you for joining us this morning, and may I assure you that your full statement will be made part of the record? May I now call upon General Stultz.

General STULTZ. Yes, sir. Mr. Chairman, Mr. Vice Chairman, and Senator Murray, it is an honor to be here.

Senator Inouye, I would like to report to you first—go for broke—that 100th of the 442d, I just visited them recently in theater. They are doing very, very well. It is their second deployment out of the Pacific. And I also sent a task force just recently out to the Pacific to visit their families to make sure we are taking care of them. They were in Guam, Saipan, and Samoa, and so the 442d is doing well, your old regiment, and proud to serve this Nation.

Thank you, first of all, from the 204,000-plus Army Reserve soldiers that I represent here today for what you have done for us in terms of your support, things like the National Guard and Reserve equipment account and other appropriations, and what your staffers have done for us, working very diligently with us to maintain support for our Nation through the Army Reserve.

I have submitted my statement for the record, so I do not want to take up any time there, but I do want to highlight one thing.

The theme that you will see in the Army Reserve posture statement and us going forward this year is return on investment. And what we are trying to highlight is what a great return on investment your Army Reserve is for this Nation. The dollars that we are given to operate with we value, and we invest them very, very carefully to make sure that we are getting all for our Nation.

As you well know, 2009 for the Army is the Year of the Noncommissioned Officer, and today I have got three noncommissioned officers (NCOs) with me, and I would just ask them to stand. And it really is to highlight the Year of the Noncommissioned Officer, but for the Army Reserve, it really highlights return on investment, return on this investment that we get for this Nation. I will give you just a couple of tidbits here.

Sergeant Jason Ford is here with me. Sergeant Ford is a drill sergeant. He goes and trains basic trainees at Fort Leonard Wood, Missouri. He also deployed for this Nation and trained the Iraqi army. While on patrol, leading 25 Iraqis—and he was the only American in charge—he came under attack and suffered wounds and was awarded the Purple Heart, along with the Bronze Star. But when Sergeant Ford finishes his tour in Iraq, he comes back

home to Brockton, Massachusetts, where he is a policeman. That is a return on investment for this Nation. That is taking capability that we are building that we provide for our military in uniform; but, we bring back to the communities of America and put it back into our communities.

Sergeant Henry Farve from California. He is a diesel mechanic, works for the Government, also deployed to Iraq, and while there, his son, who happened to be part of 32 Stryker from Fort Lewis, was wounded. Sergeant Farve maintained his mission even though he had the concerns about his own son, and then comes back to America and goes back to work for this Government as a diesel mechanic. What a great investment we have got.

We have got to do all we can to retain these great NCOs. This is the corps. This is what distinguishes the American Army from any other army in the world, our noncommissioned officer corps.

So, I look forward to your questions. I thank you for your support. It is because of what you do for us that we are able to man America's Army with great NCOs like these individuals, as well as bring them back to America's communities. I look forward to your questions, sir.

[The statement follows:]

PREPARED STATEMENT OF LIEUTENANT GENERAL JACK C. STULTZ

The annual Army Reserve Posture Statement is an unclassified summary of Army Reserve roles, missions, accomplishments, plans, and programs. The 2009 Army Reserve Posture Statement also addresses the support required in fiscal year 2010 to continue the Army Reserve transition to a fully operational force.

Unless otherwise noted, all statistics and facts are current through March 20, 2009. This document is available on the Army Reserve Web site at: www.armyreserve.army.mil.

WINTER, 2009.

THE ARMY RESERVE—A POSITIVE INVESTMENT FOR AMERICA

After 7 years of war, the most compelling evidence of Army Reserve success is the confidence deployed commanders have in the quality and ability of our Soldiers. The men and women of the Army Reserve-Warrior-Citizens are full-time patriots who put their civilian careers on hold to protect American interests at home and abroad.

Army Reserve Warrior-Citizens represent America's best and brightest. The Soldiers' and their Families' commitment and willingness to sacrifice at home, or by carrying the fight to the enemy on desolate battlefields, allow Americans to pursue their dreams and live free from fear. In this document, we highlight the remarkable quality of the people on the Army Reserve team: men like the Harvard-trained physician who, after age 50, applied his medical expertise to saving lives on the battlefield; or the commercial airline pilot who put his civilian career on hold to serve as a trainer with the Army Reserve; or the lawyer with an MBA and a successful professional career, serving as an aviation mechanic in the Army Reserve. Men and women like these, and countless others, add immeasurable value to the Nation.

The contribution of Citizen-Soldiers, their Families, and prudent investments over the course of this decade, have allowed the Army Reserve to evolve from a strategic reserve to an indispensable operational force. In this environment of persistent conflict, turbulent markets, and tight competition for scarce resources, we must continue to invest our national treasure wisely. As an operational force, the Army Reserve is one of the best returns American taxpayers get for their money. To continue to succeed, the Army Reserve requires your support.

The Army Reserve leverages your investment to attract and develop talent. The expertise we nurture is employed on the battlefield and in the boardroom. Army Reserve Soldiers bring cutting-edge ideas from the marketplace to the military, enabling the Army to accomplish missions with maximum impact and minimum risk. In turn, Army Reserve Soldiers bring the skills and values they acquire in uniform—leadership skills, decision-making ability, confidence, and discipline—back to American industry to build stronger businesses and stronger communities.

To maximize Americans' return on investment, we have streamlined our command and control structure, standing down non-deployable support commands and establishing in their places operational and functional commands. Reducing the number of support headquarters and developing more deployable commands is generating more specialized capabilities in our core competencies: medicine, transportation, supply, civil affairs, military police, engineers, intelligence, and chemical, among others.

We are aggressively refining our training strategy to reduce post-mobilization training time and maximize Boots on the Ground contributions of our fighting units. Following the dictates of the Base Realignment and Closure (BRAC) Commission we are disposing of outdated facilities and replacing them with state-of-the-art centers to optimize training and support. Our training strategy, along with new facilities, will better prepare our Soldiers for the challenges ahead. Continuing to refine these efforts requires resources to complete BRAC mandates, develop and employ advanced training techniques, and to acquire technology enablers: communications and information systems, training simulators, and cutting-edge medical processes.

We continue to improve readiness at all echelons. During our transition from a strategic to an operational force, we have recognized the need and advantage of having leaders and staff working full-time to support and prepare units in advance of their deployment. We continue to seek, and have commissioned research to determine, the optimum amount of full-time support to build and sustain readiness. We will be working with Congress closely this year to achieve this objective.

The Army Reserve provides capability the Army could ill afford to maintain on active duty. The unique skill sets of Warrior-Citizens have proven, over the course of a century, to be cost effective and cost efficient. We are further striving to improve our value by striking up strategic partnerships with industry. Our way ahead is to build America's premiere skill-rich organization by teaming with civilian employer partners to produce a human capital strategy model for the 21st century. Our efforts to create a public-private partnership to find, develop, and share talent will leverage the creativity and responsiveness of the civilian sector with the organizational skills, discipline, and leadership talent of the military. Working with industry, we develop our greatest asset—people. At the same time, we ensure the security of a system to realize peace and prosperity, keeping America shining as a beacon of hope for a troubled world.

Over the history of the grand American democratic experiment, our Nation has risen to greatness because of the character of ordinary citizens and their willingness to defend freedom. The Warrior-Citizens of the Army Reserve and their Families embody that lasting commitment to serve. Since September 11, 2001, more than 170 Army Reserve Soldiers have sacrificed their lives in the fight against tyranny. Today, thousands stand in harms way, while tens of thousands more stand ready to answer the call. America can make no better investment.

Thank you for your untiring support of the Warrior-Citizens of the Army Reserve.

LIEUTENANT GENERAL JACK C. STULTZ,
Chief, U.S. Army Reserve.

COMMAND SERGEANT MAJOR LEON CAFFIE,
Command Sergeant Major, U.S. Army Reserve.

FISCAL YEAR 2008 RETURN ON INVESTMENT

As America remains a Nation at war, the Army Reserve continues to be a cost-effective force. In fiscal year 2008, the \$6.9 billion Army Reserve appropriation represented only 4 percent of the total Army budget, yet we achieved remarkable accomplishments:

Personnel.—In 2008, we recruited 44,455 Soldiers and reenlisted 16,523 (111 percent of our annual goal), yielding a net gain of 7,142 in our ranks. Sustaining momentum to build personnel strength is the most important priority for the Army Reserve. Due to significant gains in end strength for fiscal year 2008, the Army Reserve is on schedule to meet its 2010 end strength objective of 206,000 Soldiers. The Army Reserve continues to implement a series of programs to attract skill-rich professionals. Future strategic recruiting initiatives target shortage specialties, mission-critical skill sets, and mid-grade officer shortages. Through our Employer Partnership Initiative, we produce a human capital strategy. Businesses and the Army Reserve now share in the training and development of quality individuals who contribute to both our Nation's defense and the economy. Our collaboration with industry in recruiting eliminates the unnecessary expenditure of resources when recruiting in competition with each other.

Readiness.—In 2008, we mobilized more than 27,000 Warrior-Citizens in support of the Global War on Terror. We developed Regional and Combat Support Training

Centers (CSTC) to enhance unit readiness, increasing the time our units are available to combatant commanders. Our civilian-related skills and highly experienced Soldiers afford our Army its extended stability operations capacity. We increased the Boots on the Ground time for: Combat Support Hospital units by 45 days, Military Police Battalions by 37 days, and Combat Engineer Companies by 31 days by streamlining pre- and post-mobilization training schedules and eliminating all unnecessary and duplicate activities. As a federal force with personnel and equipment nationwide, we provide a unique capability as a Department of Defense "first responder" in times of domestic emergencies.

Materiel.—We attained or exceeded the Army standard of 90 percent availability for reportable equipment that requires maintenance. All redeployed equipment not inducted into national level maintenance was recovered, repaired, and serviced. In light of acknowledged shortages, this equipment was then immediately transferred to "next deployers" or critical training locations in order to sustain pre-mobilization and pre-deployment training.

Services and Infrastructure.—We strengthened programs to improve the well-being of our Soldiers and their Families. The development of the "virtual installation," which afford Soldiers and Families ready access to services and pre/post-mobilization transition assistance, is the cornerstone of this effort.

ARMY RESERVE PRIORITIES

Continue to provide the best trained, best lead, best equipped Soldiers and units to combatant commanders to achieve U.S. objectives and ensure national security.

Recruit and retain the best and brightest Warrior-Citizens to sustain a robust and capable operational Army Reserve.

Transform the Army Reserve (operational structure, support services, and training and equipping paradigms) to optimize the efficiency and effectiveness of a fully operational force.

Provide Warrior-Citizens and their Families with the training, support, and recognition to sustain a cohesive, effective fighting force.

Build and maintain a partnership with industry to facilitate the Warrior-Citizens' contribution to both a prosperous economy and a skilled, experienced, and capable Army.

To advance these priorities, the Army Reserve must obtain from Congress full support and necessary authorities.

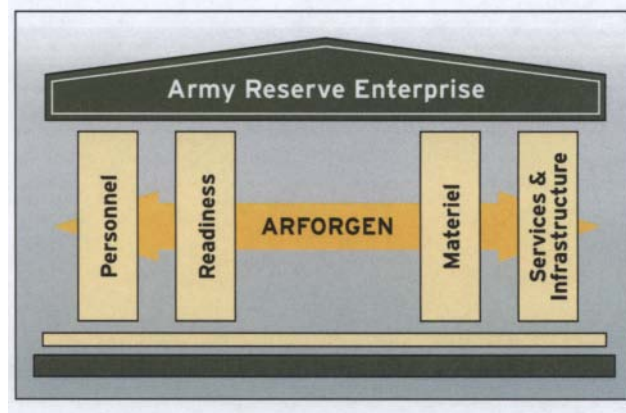
The President's budget request will allow the Army Reserve to: Grow and maintain Army Reserve end strength; continue Army Reserve transformation; improve medical and dental readiness; equip units and soldiers to train and fight; provide quality services and support to soldiers and their families; and sustain Army Reserve installations and facilities.

STRATEGIC CONTEXT

In accordance with Title 10 of the U.S. Code, the United States Army Reserve "provides trained units and qualified persons available for active duty in time of war or national emergency." Since the September 2001 attacks on America, the Army Reserve continues to deliver on its Title 10 obligation by serving in a prolonged operational capacity for which it was originally neither designed nor equipped, but for which it is currently being transformed. Each day, Army Reserve Soldiers and their Families make unprecedented sacrifices in response to lengthy and repeated deployments. The Army Reserve is an operational force providing critical combat, logistics, and stability support capabilities for homeland defense, overseas contingencies, and war. The demands of today's conflict, coupled with the existing and foreseeable stresses on our force, have redefined the way this institution, the Army, and the Nation views the Army Reserve.

The Army Reserve defines itself as a community-based, federal operational force of skill-rich Warrior-Citizens, that provides integral capabilities for full spectrum operations. The basis of this definition is reflected in the fact that today Army Reserve forces mobilize almost continuously. The Army Reserve has supported nine major operations and several lesser contingencies since 1990. This legacy of service and our most recent contributions set the conditions necessary to embrace the future for the Army Reserve.

One way to view this future is to look at the Army Reserve as an enterprise organization: a conceptual model applying a holistic approach to strategic leadership to improve organizational efficiencies. The enterprise approach is fundamentally about seeing the entire organization—its relationships among its people, processes, functions, and organizational parts.



In this document, we present the Army Reserve enterprise across four core management areas: Personnel, Readiness, Materiel, and Services and Infrastructure.

To optimize Army Reserve performance we must:

- Attract and retain the very best Warrior-Citizens to serve our Nation (Personnel);
- Prepare, train, organize, and equip Soldiers and units (Readiness);
- Provide Soldiers with the latest, mission-ready, modular force weapons and equipment (Materiel); and
- Provide for the well-being of our Soldiers, Families, Army Civilians, and employers while providing state-of-the-art training capabilities, unit facilities, and secure, redundant communications (Services and Infrastructure).

The following sections of this document highlight our accomplishments and discuss the challenges and needs for strengthening the organization across these core functions (Personnel, Readiness, Materiel, and Services and Infrastructure). The Army Reserve will continue to generate a positive return on investment building, sustaining, and maintaining warfighting and support capability for America.

Personnel

Today's Army Reserve Soldiers are patriotic men and women who have a vision for their lives, have roots in a civilian community, and have a desire to serve their country. Their commitment translates into our success.

The Army Reserve exceeded its fiscal year 2008 recruiting and retention objectives by accessing 44,455 new recruits and retaining 16,523 Soldiers. Yet, recruiting an all-volunteer force in a time of war presents challenges. The Army and the Nation face significant hurdles—from a lower propensity of young people to enlist, to a shrinking pool of fully qualified prospects, to an increasing trend of mid-grade Soldiers leaving the service.

One initiative the Army Reserve is advocating to combat the loss in mid-grade ranks is a “continuum of service” for a fully integrated force—active and reserve. By presenting options, the Army Reserve hopes to create an environment for Soldiers to move back and forth among components as their personal lives and civilian careers dictate. We have taken this continuum concept a step further with our Employer Partnership Initiative by developing a human capital strategy model to leverage the skill sets of volunteers, the innovations of industry, and the human development capacity of the Army.

Increasing Army Reserve End Strength

During fiscal year 2008, the Army Reserve increased end strength by 7,142 Soldiers. A successful community-based recruiting effort; targeted programs and incentives; and personnel policies to control unanticipated losses resulted in this substantial net gain.

CRITICAL NEEDS

Obtain from Congress full support and necessary authorities.

- Sustaining recruiting and retention incentives for Army Reserve Soldiers, with specific emphasis on mid-grade commissioned and noncommissioned officers;
- Developing and sustaining adequate full-time support (FTS) to train and administer a fully functioning, robust, and capable operational force, and to ensure Soldier and Family readiness; and
- Enhancing employer partnerships to optimize the development of human capital for the mutual benefit of industry and national security.

In fiscal year 2008, the Army Reserve achieved 106 percent of its accessions goal and 111 percent of its reenlistment mission. Three critical initiatives contributed to this progress. Command emphasis and guidance provided the greatest impact focusing energy and effort on filling the ranks. The Army Reserve Recruiting Assistance Program (AR-RAP) brought a tangible reward to Soldiers for finding other patriots to serve. This innovative recruiting assistance program produced 3,751 accessions this past fiscal year. Finally, the Critical Skills Retention Bonus, Army Reserve (CSRB-AR), allowed us to address specific skill-set and grade shortfalls and retain much-needed talent and expertise in our ranks. These targeted financial incentives for continued service in critical specialties ensured 809 captains and 128 experienced staff sergeants and sergeants first class stayed in uniform.

As we gain momentum, building to a strength of more than 206,000 Soldiers, and while the Army Reserve is within the congressionally mandated end strength window, we recognize a significant gap in capability. Overall, the Army Reserve is short on the order of 10,000 officers in the grades of captain and major. In the enlisted ranks, we are challenged to develop and retain senior mid-grade noncommissioned officers (staff sergeants and sergeants first class). We are working aggressively to grow and shape the force to overcome these challenges. Continued re-sourcing of recruiting and retention incentives will maintain our manning momentum.

Full-Time Support for an Operational Reserve

We now have a strategy to guide the transformation of Full-Time Support (FTS) in the Army Reserve in order to better support our operational force in this era of persistent conflict and global engagement. In 2008, we developed an initial strategy called FTS 2017, which envisioned a culture shift in how we support the readiness and mobilization of Army Reserve units on a continual basis. This strategy defines and directs the effort to transform all aspects of Army Reserve full-time support. The strategy improves operational capability by providing a more dynamic, responsive, and flexible system to support global operations.

Completing the transition from a strategic to a fully operational force requires more than having the right-sized full-time support force. The current full-time support model remains a strategic reserve legacy. Key legislative and policy modifications may be required to change personnel support processes. Evolving the full-time support program requires addressing: active-reserve Soldier staffing (AGRs); Army civilians; contractors; and unit members on orders beyond their statutory 39 training days per year.

Currently three studies are under way to quantify full-time support issues and inform policy-makers. One study is determining the adequacy of full-time support billets across the Army Reserve and Army National Guard. Another study is providing a “capabilities and competencies” analysis of full-time support across the Army Reserve. The third is examining the use of dual-status military technicians within the Army Reserve. These studies will lead to the development of a capabilities-based full-time support solution for the operational demands of the Army Force Generation (ARFORGEN) unit training and employment construct. We anticipate initial study recommendations by early fall 2009. At that time, working with Congress, we will determine the optimum full-time support strategy and identify additional actions required to appropriately staff the organization to sustain the Army Reserve as an ARFORGEN-enabled operational force.

Employer Partnerships

The Army Reserve is implementing leading-edge employer relations programs that promote a continuum of service, sustain Soldiers’ well-being during mobilization periods, and provide career-enhancing employment opportunities. The Army Reserve’s Employer Partnership Initiative benefits employers by referring highly quali-

fied, competent, disciplined Soldiers to work within their communities. By collaborating with employers, the Army Reserve can augment existing Soldier proficiencies while simultaneously building new capabilities to complement civilian job and military skills. By aligning military and civilian credentialing and licensing requirements, the Army Reserve and partner employers optimize a shared workforce. As employers are critical for sustaining the Army Reserve, sharing the same talent pool of Soldier-employees builds mutually beneficial relationships. Developing and maintaining effective partnerships allows the Army Reserve and employers to capitalize on particular strengths while minimizing weaknesses.

Our way ahead is to build a skill-rich organization by working closely with civilian employer partners. From an individual's perspective, we see it working this way: a local hospital struggles to find quality, skilled personnel to fill technical positions. The Army Reserve becomes a personnel source for this hospital through our Employer Partnership Initiative. We recruit an individual seeking to be a radiology technician. We train that individual as a Soldier and certify him or her as a radiology technician. After finishing advanced training, the Soldier walks into a civilian job with that local hospital where that Soldier continues to develop and refine his or her skills. Through our cooperative efforts, the hospital and the Army gain a more competent, more experienced, and more capable Soldier-employee.

We see other advantages of partnering with employers. A major trucking company—our civilian partner—uses a state-of-the-art training center complete with truck driving simulators. Our Army Reserve Soldiers—employees of this trucking company—use the simulators to confront an array of driving hazards. The drivers train and work daily operating trucks safely on the road. When these Soldiers get in the cab of one of our military trucks, they are better, more experienced drivers. The training and experience they gain from our industry partner benefits the Army Reserve. America gets a better, more disciplined, service-oriented employee, a more skilled and capable truck driver, and a stronger Soldier.

Over time, our Employer Partnership Initiative will become more than a key human capital strategy. It could well serve as the foundation of our identity. Two entities share and enhance the skills of one individual who contributes both to the defense of our Nation and to sustaining a robust national economy. We are building human capital in the Army Reserve and the private sector with highly skilled, career-oriented Warrior-Citizens.

Readiness

Our military success in the Global War on Terror depends on our ability to train and equip Army Reserve Soldiers and fully cohesive units for current and future operations. Training units for full spectrum operations is directly linked to resourcing. The Army Reserve applies a sophisticated training strategy to ensure Army Reserve warfighting unit readiness. Fully funding the Army Reserve integrated training strategy will ensure trained and ready Army Reserve units and individual Soldiers are available to meet the operational needs of the United States Army.

Building an Effective, Fully Operational Force

Army Reserve support of the fiscal year 2008 Grow the Army plan began with the realignment of 16,000-plus spaces from generating force structure to critically needed operating force structure. As the planned end-strength objective is to grow the Army Reserve by 1,000 to 206,000 Soldiers, we are investing an additional 1,000 spaces to increase operating force structure. Together this translates to a total 17,000-plus spaces of capability. In addition, the Army Reserve continues to rebalance and right size by employing new operating force modular command and control structure and reducing generating force command, control, and support structure. Streamlining command and control maximizes available forces to support Army operational requirements.

Army Reserve units are now aligned to headquarters in the same way they are aligned on the battlefield. The Army Reserve streamlined its institutional force by replacing seven institutional training divisions with three training commands to provide initial entry, military skill reclassification, and professional and leader development. We harvested additional structure as four two-star regional support commands assumed the base support operations functions for more than 900 Army Reserve centers across the country. These four support commands relieve operational commands of facility and garrison-type service functions allowing the operational commands to focus on unit readiness and training. The Army Reserve continues to explore innovative structuring options to maximize the number of warfighting units available to support operations.

CRITICAL NEEDS

Obtain from Congress full support and necessary authorities.

- Continuing transformation of Army Reserve support command structure and the building of operational and functional commands, properly organizing Soldiers and units to develop capability for diverse national security missions;
- Implementing the Army Reserve Training Strategy (ARTS) to develop Soldiers and build cohesive, capable, and effective units while maximizing Boots on the Ground and optimizing the Warrior-Citizens' impact and contribution to mission success;
- Implementation of the training strategy involves three primary elements:
 - Army School System Training Centers—for developing individuals
 - Regional Training Centers—for unit pre-mobilization training
 - Combat Support Training Centers—for rigorous mission-focused training
- Support for training man-days to sustain the Army Force Generation (ARFORGEN) process and maintain the Army Reserve as a fully operational force.

Improving Medical and Dental Readiness

Soldier medical and dental conditions have proven to be one of our greatest mobilization challenges. More than half of our Soldiers not in a mobilization or alert window are not ready to deploy. In 2008, the Army Reserve moved aggressively to improve medical and dental readiness by addressing a number of Soldier and Family health concerns. The Army Reserve Surgeon working with members of the Office of the Surgeon General, the U.S. Army Medical Command, U.S. Army Dental Command, the Army National Guard, Department of the Army G-3, the Chaplains Office and other agencies developed and implemented three paradigm-shifting initiatives to improve Soldier and Family readiness:

- A comprehensive Reserve Component Soldier dental readiness program;
- A Whole-Life Fitness program to improve the physical, emotional, spiritual, social, family, finance, and career facets of Soldier wellness;
- A partnership with civilian medical and nursing schools to educate and develop medical professionals for military service.

Additionally the team identified medical readiness barriers and implemented measures to mitigate each obstruction.

To ensure unit commanders know the status of their Soldiers' medical conditions, the Department of Veterans Affairs and the Department of Defense must effectively interface. The Reserve Health Readiness Program (RHRP) provides the platform for commanders and Soldiers to meet medical and dental readiness now. One significant advance for the Army Reserve is to develop and adopt automated information systems that interface with current medical data systems: Medical Protection System (MEDPROS), and eventually Veterans Health Information Systems and Technology Architecture (VISTA). The Army Reserve adapted a paperless dental record—DENCLASS—and is in the process of converting Soldiers' paper treatment records to the electronic health readiness records.

Improving what we know about the status of Army Reserve Soldiers' health has set the conditions for the Army Reserve to implement two comprehensive treatment programs: Dental Readiness and Whole-Life Fitness. Working across agencies and leveraging civilian health care, we are treating dental problems and addressing holistically the well-being of Soldiers and Families. This effort includes a mental health component and is appropriately linked with our Yellow Ribbon Reintegration Program efforts.

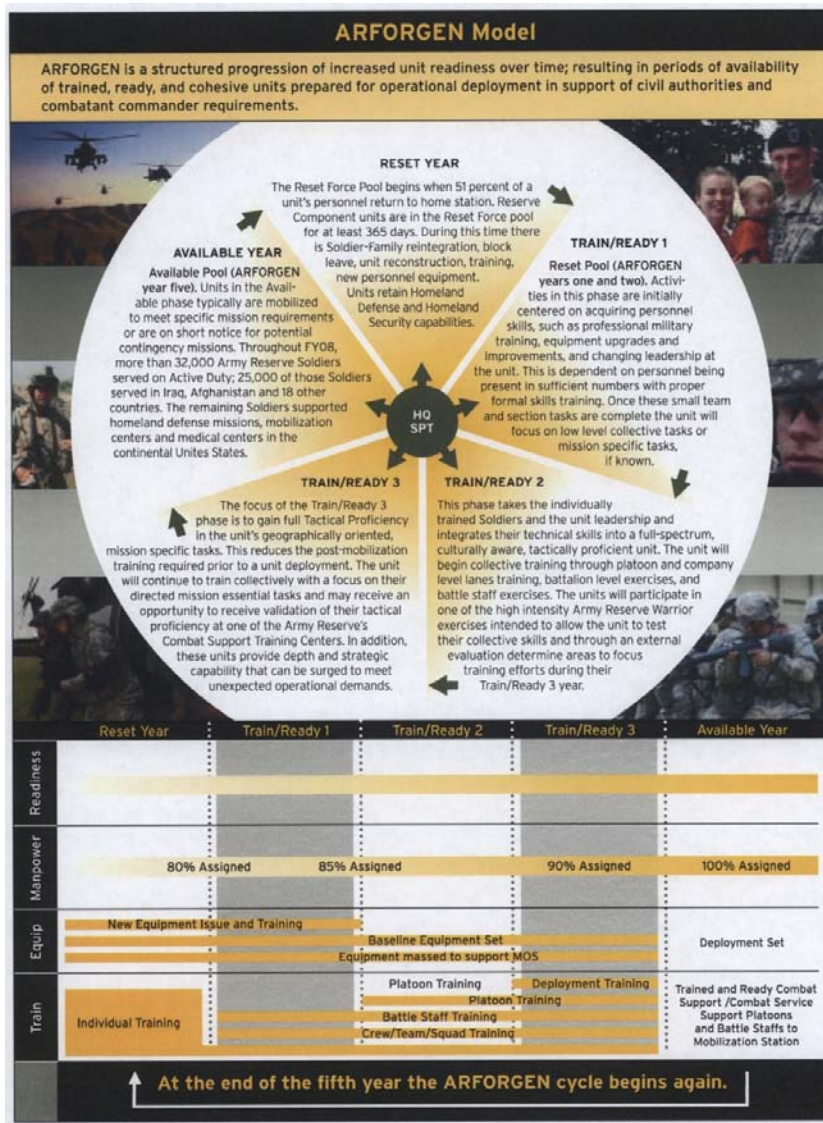
We are supporting and promoting these medical and dental readiness initiatives with a multimedia communication outreach effort to all Soldiers and Families. Our communications efforts and these new programs coupled with TRICARE and TRICARE Reserve Select have allowed us to address in significant ways our medical and dental readiness challenges.

Focus on Training Readiness

The Army Reserve is committed to providing trained platoons, companies, and battle staffs to combatant commands. To fulfill this commitment the Army Reserve must be resourced as an operational force. While the mobilization training centers provide the finishing touch, the Army Reserve is responsible to develop and sustain the following, prior to mobilization: Adaptive, competent, and broadly skilled Soldiers prepared for changing operational environments; agile, adaptive, and cul-

turally astute leaders; and rapidly deployable and employable, trained, ready, and cohesive units.

We develop readiness through the execution of a progressive Army Reserve Training Strategy (ARTS). The training strategy uses the ARFORGEN model as the “means” to meeting mission commitments. Further, the strategy uses three training domains—Soldier, Leader Development, and Unit—as the ways of achieving desired training end-states. The “Soldier” domain concentrates on completing individual, functional, warrior task, tactical and low-level collective training. The “leader development” domain entails completing professional military education and preparing leaders and battle staffs to execute full-spectrum operations and directed missions. The “unit” domain requires, through a progression of collective training events, achieving unit technical and tactical proficiency for collective tasks in full-spectrum and directed mission environments.



Preparing Army Reserve Forces for Future Missions

Army Reserve forces are arrayed across the Army Force Generation (ARFORGEN) training and employment cycle. The duration of the entire cycle is 5 years. Our objective is for a unit to train for 4 years in preparation for an “available” year where the unit could mobilize and deploy. Army Reserve units flow through this cycle aligned within Army force pools to meet global mission demands. Units are to spend 1 year in the Reset pool, 3 years in Train/Ready pool, and 1 year in the Available pool. Army Reserve units can expect to deploy to meet theater commander requirements in the available year. Upon returning from a deployment, a unit begins the cycle anew.

Army Reserve Training Centers

Success in operationalizing the Army Reserve has hinged on our ability to reduce post-mobilization training in order to maximize in theater Boots on the Ground. In 2008, the Army Reserve stood up three regional training centers to execute theater-specific required tasks. These tasks are those perishable individual, crew, and leader warrior tasks and battle drills that Soldiers must complete to standard prior to arriving in theater. The regional training center initiative reduced the average amount of training time for Army Reserve units in mobilized status from 70 to 40 days, adding 30 days to Boots on the Ground time in theater. Currently, regional training centers are ad hoc training facilities supported by mobilized personnel and resourced with supplemental funds. When regional training centers are resourced we are able to leverage this success and ensure an enduring, pre-mobilization training capability.

To further enhance readiness, one of the Army Reserve’s key training efforts has been establishing a major collective training exercise capability—Combat Support Training Centers (CSTC). This exercise capability provides support forces a realistic collective training experience to assess tactical proficiency under rigorous conditions. A combat support training event tailors the environment and integrates extensive exercise support capabilities to include opposing forces and observer/controllers. The event provides opportunities for support brigades and their subordinate units to train on directed mission-essential tasks. The CSTC program leverages training readiness platforms to provide Army Reserve commanders an array of institutional and collective training capabilities to meet training requirements. The Army Reserve will conduct a CSTC proof of principle exercise at Fort McCoy in July 2009.

Capabilities-based Army Reserve Centers

To minimize turbulence for Soldiers and their Families caused by training demands during the first 2 years of ARFORGEN, the Army Reserve initiated an effort to create capabilities-based reserve centers to support full-spectrum individual-crew-squad-team training requirements. We are outfitting reserve centers with digital training capabilities and weapon simulator training rooms. This effort provides an array of targeted training enablers to meet the training needs of units. During 2008, the Army Reserve established 53 digital training facility locations and three weapons simulator training rooms. The Army Reserve is working with the Army Training and Doctrine Command to determine the way ahead to field additional training enablers to make these state-of-the-art facilities. The Army Reserve is also working to integrate these training capabilities into new facilities.

Training Resources

We are succeeding in managing unit readiness, with the new paradigm for training an operational Army Reserve force. Adequate funding allows the Army Reserve to execute pre-mobilization training man-days, develop infrastructure, and acquire the latest technology and equipment to meet pre-mobilization readiness objectives. We lack, however, the ability to fully train Army Reserve Soldiers on the same equipment the Army uses in the field.

Reset Pilot Program

The Army has established several recent key force readiness initiatives to prepare units for future missions. One of these initiatives is the Reset Pilot Program. Currently the Army Reserve has three pilot units for fiscal year 2008 and three for fiscal year 2009. In phase one of the program, units complete inventories in theater, report combat losses, direct equipment for reset, reserve quotas in the Army School System for unit Soldiers, and prepare for home station activities. Upon redeployment, the units move to phase two. The units conduct a Welcome Home Warrior-Citizen ceremony, focusing on Soldier, Family, and employer reintegration and reconstitution of the unit. If successful, this reset program will serve as a model to ensure redeploying unit readiness.

Ready Response Reserve Unit (R³U) Pilot Program

The R³U Pilot Program is a Department of the Army-directed initiative to test the feasibility of nontraditional access and employment of Army Reserve units. This pilot will test our ability to man, equip, train, and employ units in three specific capability categories: short or no-notice employment; support to known basic training surge requirements; and sustainment of dental readiness in the Army Reserve force. The pilot units being assessed in each category, respectively, are a platoon of a biological detection company, a company of drill sergeants, and a dental detachment. After bringing these units up to the highest levels of readiness during fiscal year 2008 we will evaluate their readiness during fiscal year 2009. Key tenets of an R³U are that they are manned with all volunteers, that they sustain a high level of readiness, and that they are used outside of the traditional “one weekend a month, 2 weeks annual training” concept of reserve duty. For example, the drill sergeant company will conduct a complete 10-week basic combat training cycle at Fort Jackson, South Carolina, during fiscal year 2009. Usually, it takes five drill sergeant companies 2 weeks each to accomplish that one cycle. The R³U Pilot will test the Army Reserve’s ability to sustain nontraditional units like this and provide non-mobilized, enhanced capabilities to meet specific Army requirements.

Meeting Homeland Defense and Disaster Relief Missions

The Army Reserve can be a federal first-responder to support civil authorities during domestic emergencies. As such, the Army Reserve is an important element of the current DOD “Lead, Support, Enable” strategy for homeland defense and civil support. U.S. military forces organize, train, and equip to operate in contaminated environments, as well as manage the consequences of chemical, biological, radiological, or nuclear explosion incidents. The Army Reserve was recently tasked to provide increased support as a federal responder for man-made or natural disaster situations.

Materiel

Patriotic men and women who join the Army Reserve today know that mobilization and deployment are a reality, not a possibility. Our Nation expects much from our Warrior-Citizens, their Families, and their employers.

When preparing to perform a dangerous mission, our Soldiers must have modern equipment and state-of-the-art training facilities. The Army Reserve is working hard to make these requirements a reality. During fiscal year 2008, we continued to refine our sustainment concept supporting the Army Reserve Training Strategy (ARTS) and the ARFORGEN model. We fielded new equipment; repaired, reset, and reconstituted unit equipment; adjusted equipment sets at regional training centers; redeployed support assets (manpower, tools, and support equipment) to sustain those sets; and continued to field aviation capability in accordance with the Army Campaign Plan. As we develop more competent and capable Soldiers and unit teams, we seek to provide those teams with the best tools available to accomplish diverse and challenging national security missions.

Unit Equipment

The Army Reserve has been successful meeting expeditionary demands primarily by falling in on stay-behind equipment or receiving new equipment in theater. We have managed our domestic contingency response and training missions by aggressively managing equipment on hand, authorized substitutes, and training sets. Looked at holistically, however, today the Army Reserve faces momentous equipping challenges.

The Army Reserve has 73 percent of its required equipment on hand. Under currently programmed funding, the Army Reserve should reach 85 percent equipment on hand by fiscal year 2016 with the goal of 100 percent on hand by fiscal year 2019.

CRITICAL NEEDS

- Obtain from Congress full support and necessary authorities.
- Equipping Army Reserve units with the latest, fully integrated, modular force equipment to develop Soldier skills and unit equipment mastery through realistic training in years two and three of the ARFORGEN cycle;
 - Equipping Soldiers and units with all the latest required and authorized, fully integrated, modular force equipment to accomplish deployment and contingency standby missions in accordance with the ARFORGEN construct and national security mission demands of the ARFORGEN employment cycle; and
 - Resetting and reestablishing unit readiness, replacing lost, damaged, and committed (theater stay-behind) equipment expeditiously to ensure optimum training and mission readiness sustaining the world-class operational Army Reserve.

Army Reserve Aviation

The Army Reserve currently has a fleet of more than 130 aircraft—fixed and rotary wing for combat and support operations. In addition to sustaining current capability, the Army Campaign Plan identifies growth of three aviation medical evacuation companies within the Army Reserve. The first company is standing-up in Clearwater, Florida. Congress initially approved \$1.6 million to lease and modify existing hangar space for the aviation company over the next 5 years. As the Army Reserve aviation capability grows, Department of the Army has agreed to replace 10 King Air 350 aircraft the Army Reserve provided for operations in Iraq. The Army Reserve needs these aircraft to ensure the readiness of fixed wing aviation warfighting formations. Continued, previously funded, multi-year procurement and replacement of aircraft transferred to theater and associated aviation support infrastructure are essential to optimizing the Army Reserve's aviation capability.

Depot Maintenance

In fiscal year 2008, the Army Reserve executed \$130 million in programmed depot maintenance funds to overhaul 3,256 major end items at Army depots or by commercial facilities. The Army Reserve depot maintenance program allows the Army Reserve to extend equipment service life, reduce life cycle costs, and maintain safe operation of older pieces of equipment. Through maintenance and restoration programs, the Army Reserve is able to restore and maintain older items to sustain unit capabilities while we wait for the fielding of modern modular force equipment.

Services and Infrastructure

Our Warrior-Citizens are the lifeblood of the Army Reserve. They live and work in civilian communities across the country while volunteering to serve the Nation. They all serve at a time when the stakes for our national security are high and the demands they and their Families face are significant. America owes them the best quality of life and health care possible.

The Services and Infrastructure element of the enterprise approach encompasses those programs, facilities, and systems that improve the well-being of Soldiers and their Families, and supports key management processes to ensure readiness and promote Army Reserve institutional transformation.

Yellow Ribbon Reintegration Program

The Army Reserve Yellow Ribbon Reintegration Program provides information, services, referral, and proactive outreach programs to Army Reserve Soldiers and their Families through all phases of the deployment cycle. The goal of the Yellow Ribbon Reintegration Program is to prepare Soldiers and Families for mobilization, sustain Families during mobilization, and reintegrate Soldiers with their Families, communities, and employers upon release from active duty. The program includes information on current benefits and resources available to help overcome the challenges of reintegration. The program is comprised of seven events through all four phases of the deployment cycle. Soldiers are required, and Families highly encouraged, to attend a 1-day event at alert and again at pre-deployment to help ensure the Soldier and Family are prepared for an extended deployment. During the separation, commands provide two 1-day events to help sustain Families mentally, spiritually, and emotionally. For the local events, we leverage local resources as necessary. Upon redeployment, the Soldier is required, and Family members highly encouraged, to attend a 30- and 60-day reintegration weekend. We conduct a "Soldiers

only” weekend event 90 days post-deployment to perform Post Deployment Health Re-Assessments (PDHRA). During this weekend, Soldiers also participate in small group discussions to explore and resolve any lingering deployment issues.

CRITICAL CHALLENGES

Obtain from Congress full support and necessary authorities.

- Developing, improving, and sustaining Soldier and Family programs to achieve comprehensive Soldier and Family well-being across relationship, spiritual, health, and fitness dimensions;
- Sustain a robust and appropriately integrated secure communications and information technology to connect Army Reserve Soldiers and units across the Army enterprise ensuring the Army Reserve remains an effective, contributing operational component of the total force;
- Providing the facilities to train and sustain the Army Reserve as an active, integrated, robust, and capable operational force. The Army Reserve is managing facilities and infrastructure transformation through three main efforts:
 - Base Realignment and Closure (BRAC) to consolidate and modernize;
 - Accommodating “Grow the Army” and emerging mission set facility and training center requirements to optimize unit disposition, training, and readiness;
 - Improving maintenance facilities and storage capacity to ensure unit readiness and maximize equipment service life.

Spiritual Care

Army Reserve Soldiers, Families, and Army civilians deserve the best religious support and spiritual care available. In addition to providing pastoral support and direct ministry, unit ministry teams (chaplains and chaplain assistants) provide training and education in a variety of fields: Strong Bonds, Basic Human Interaction, Suicide Intervention and Prevention, Clinical Pastoral Education, Traumatic Event Management, and Family Life Chaplain Skills. All these services aid in providing this spiritual care to the Army Reserve Family.

Over 200 Strong Bonds events were conducted by Army Reserve commands throughout the country and territories during fiscal year 2008, enhancing Soldier and Family communication and relationship skills. The Army Reserve provided specialized training for couples, Families and single Soldiers during pre- and post-deployment. This training helps Soldiers and Families relieve stress and address relationship issues during every phase of deployment.

Army chaplains are key enablers of Soldier well-being. Today there is a critical shortage of chaplains in the grades of captain and major. To address this issue, the chaplain corps partners with religious organization endorsers to help recruit and retain high-quality chaplains, chaplain assistants, and civilians committed to a professional Army chaplaincy.

Army Reserve Warrior and Family Assistance Center (AR-WFAC)

The Army Reserve Warrior and Family Assistance Center ensures that Warrior-Citizens receive appropriate support under the Army Medical Action Plan. This center provides a sponsor to each Army Reserve Soldier and Family currently assigned to a Warrior Transition Unit (WTU), Community Based Health Care Organization (CBHCO), or Veterans Affairs PolyTrauma Center. It also manages a toll-free hotline (1-866-436-6290) and Web site (www.arfp.org/wfac) to provide Army Reserve Soldiers, Families, and Retirees with assistance in areas such as medical, financial, administrative, and pastoral issues.

Family Programs and Services

The Army Reserve Family Programs (ARFP) is committed to fostering Army Strong Families. We continue to develop and evolve to meet Soldier and Family needs. ARFP capabilities include program management, marketing, information, follow-up and referral, mobilization, deployment and reintegration, partnerships, outreach, training and development, crisis management, and command consultation. Our vision is to have a Family Programs “face” at every battalion or equivalent formation to promote resilient Soldiers, Families, and volunteers.

Army Family Covenant.—The Army Family Covenant recognizes the commitment and strength of Soldiers and Families, while committing to a supportive environment and a partnership with Army Families. Together, we must make the Army

Family Covenant a reality, focusing on the five deliverables: Family Programs and Services; health care; Soldier and Family housing; excellent schools, youth services, and childcare; and expanded employment and education opportunities for Family members.

Family Readiness Groups.—Army Reserve Families participate in Virtual Family Readiness Groups (VFRG) utilizing information and resources provided by the Army's integrated Family support network, now called Army One Source. We have begun hiring 127 Department of the Army civilian Family Readiness Support Assistants (FRSA) to provide administrative and logistical support to volunteer Family readiness group leaders. Taking the administrative burden off volunteers enables Family readiness group leaders to concentrate on outreach to Soldiers and Families in the command.

Outreach.—Family Programs published its third issue of "Family Strong"—a full-color quarterly publication providing Family Readiness information to all Army Reserve households of deployed Soldiers. The entire Army Reserve population will receive future issues of this publication. Family Programs continues to enhance its on-line information portal, www.arfp.org, to meet the needs of Soldiers and their Families 24 hours a day, 7 days a week. The Family Programs outreach and support office is available to Soldiers, Families, and civilian employees at 1-866-345-8248.

Welcome Home Warrior-Citizen Award Program (WHWCAP).—This welcome home program publicly recognizes the sacrifices Army Reserve Soldiers and their Families make on behalf of the Nation. Since the program's inception in fiscal year 2004, 124,887 Soldiers, their Families, and employers have received special awards honoring their service and support.

Child, Youth, and School Services (CYSS).—Child, Youth and School Services supports readiness and well-being of geographically dispersed families by reducing the conflict between parental responsibilities and mission requirements. CYSS has 21 full-time staff members dedicated to ensuring children of our Warrior-Citizens have support in their communities throughout the deployment of their loved ones. Programs and initiatives meet the needs of children from youth to young adult and include childcare, youth development, and school support services.

Reserve Enrichment Camps.—Enrichment camps provide youth an opportunity to learn new skills, develop relationships, and learn more about the Army Reserve. In 2007, we conducted the first two Army Reserve Enrichment Camps in North Carolina and Wisconsin, serving 100 Army Reserve youth. In 2008, we expanded the program to include five more campsites that served an additional 250 Army Reserve children.

Support to Families of Our Fallen Soldiers

The Army Reserve has lost 170 Warrior-Citizens to date in Operations Enduring Freedom and Iraqi Freedom. We recognize the ultimate sacrifice these Soldiers and their Families have made for the cause of freedom, and we proudly honor our fallen comrades in ceremonies and with personal tributes. By remembering the distinguished service of our fallen, their selfless acts of bravery and leadership, the Army Reserve remains Army Strong. As part of our commitment to the Families of the fallen, the Army Reserve conducts memorial services to honor their loved ones' sacrifices, offers chaplain support if requested, as well as ongoing support to help the Families through the difficult time. Soldier Outreach Services currently falls under Army Reserve Family Programs and is coordinated through the Chaplains' Office in the Warrior and Family Assistance Center.

Communication (Information Technology)

The Army Reserve is implementing a 5-year secure communications project that includes secure data, voice, and video to the battalion level. Secure communications capabilities are essential to unit preparation and training. As units move through the ARFORGEN cycle, secure communications connectivity will reduce time required for pre-mobilization by allowing access to classified information and "real world" data not currently available through unclassified means.

Supporting Army information technology enterprise operations, the Army Reserve is leading the way to consolidating network management and data center services. Consolidation of services generates efficiencies and supports the Army's Global Network Enterprise Construct (GNEC). The return on investment will support future information technology improvements to increase Army Reserve unit readiness.

The Army Reserve must have highly integrated information technology capabilities from the tactical to strategic level—technologies that are both modular and scalable. In order to provide these integrated capabilities, the Army Reserve must move toward network-managed services to reduce overall operating costs, while maintain-

ing acceptable service levels nationwide. Sustaining Army Reserve information technology capabilities is essential to a fully operational Army Reserve.

Army Reserve Facilities and Base Realignment and Closure (BRAC)

In the midst of the ongoing war and transformation efforts to grow, restation, and modernize the Army, the Army Reserve is building new capability. The Army Reserve is disposing of obsolete facilities and constructing new state-of-the-art training, maintenance, and administrative facilities. In fiscal year 2009, the Army Reserve will initiate 12 “Grow the Army” projects, 21 BRAC projects, and eight Military Construction Army Reserve (MCAR) projects. We are working aggressively to address all our facilities and infrastructure requirements to ensure Soldiers receive the best training and support possible, and that we adequately support and maintain on-hand and inbound modular force equipment to ensure unit readiness.

The initial BRAC 2005 assessment underestimated the facility requirements of the number of units and Soldiers in facilities identified for closure. This impacts force readiness. To mitigate some of these BRAC costs, the Army Reserve, through our Transformation Integration Office, provides detailed planning and systematic follow-through for each BRAC action. We manage from land acquisition, from coordination with local redevelopment authorities, to final property closure and disposal. This level of attention to specific BRAC mandates enables our commanders to plan unit relocation while minimizing impact on operational missions.

Through our construction efforts, we intend to provide a facilities support framework to support and sustain Army Reserve transformation. We will maximize the utilization of Army Reserve installations and facilities at Fort Dix, Fort McCoy, Fort Buchanan, Fort Hunter Liggett, and the Combat Support Training Center at Camp Parks to support ARFORGEN. We have embraced a “retool mindset” and are thinking jointly with other components and services wherever possible. We will maintain our community-based presence, and provide flexible, multiuse, complete facilities for our units. By reducing our footprint where possible, we seek to optimize the return on investment. The Army Reserve is building readiness.

Business Transformation

The Army Reserve is constantly looking for ways to streamline operations, improve unit readiness, develop greater efficiencies—in short, increase the rate of return on investment Americans make in the Army Reserve.

One example of the success of our efforts is our increasing the Boots on the Ground time for Army Reserve units through restructuring pre- and post-mobilization training processes. The goal was to reduce training time for mobilized units to no more than 45 days, to maximize potential “boots on the ground” for a 1-year deployment. We approached the challenge deliberately identifying three unit elements requiring very different training regimens: combat support hospitals, military police companies, and engineer companies. By streamlining the pre- and post-mobilization training schedules and eliminating unnecessary and duplicate activities, we reduced training time by an average of 38 days. This resulted in post-mobilization cost savings ranging from \$768,000 to \$5.6 million per unit deployed. Intangible benefits identified include compliance with the Train-Alert-Deploy foundation of ARFORGEN, reducing rotational span, and realigning pre- and post-mobilization training. While these projects focused on specific types of units, the results and findings are universally applicable to Army Reserve units.

Through other business transformation initiatives, we improved the Army Reserve’s active component to reserve component transition rate. We achieved the highest transition rate in the program’s history, with a projected cost avoidance of approximately \$13 million in training dollars for fiscal year 2008. Through our business process transformation efforts we further decreased the processing time for incapsulation pay from 79 to 45 days. The Army Reserve is a forward-looking, progressive organization. We will continue to seek to maximize America’s return on investment.

ARMY RESERVE GENERATING RETURN ON INVESTMENT

The Army Reserve today is undoubtedly a strong return on investment for America. We are an effective, cost efficient organization that complements the needs of the Army. The Army Reserve delivers combat support and combat service support capability to the Army for America’s defense. Our value to America goes beyond providing military capability. Working with our civilian partners, we are building a human capital strategy where both employer and military share and enhance the skills of one individual, who contributes both to the defense of our Nation and to sustaining a strong national economy. Bottom line, the Army Reserve gets a better Soldier; the employer gets a better employee. That is a good investment for America.

The values and talents that are a part of our skill-rich organization benefit this nation beyond the traditional role of defense. This is the legacy of our Warrior Citizens. When we produce truck drivers for America's trucking industry, medical technologists for America's medical community, law enforcement officers for America's law enforcement agencies, among other specialties, it is a good value for America.

Transitioning the Army Reserve from a strategic reserve to an operational force is also good value for this nation. It is difficult and complex to operationalize the reserve component, especially in a wartime environment; however, we are making it happen. We are moving away from a legacy structure that served us well as a strategic reserve to a leaner organization that accommodates command and control of an operational force. Using the Base Realignment and Closure (BRAC) Commission mandate, we are also restructuring to add capability for the future. This is the capability we need to support new Army missions, such as Stability Operations. We are supporting the requirements of this expanding new mission by adding civil affairs professionals, transportation specialists, engineers, and military police as part of our internal reorganization while adding about 16,000 operational spaces of capability for the future. The Army Reserve is doing the right thing internally while transforming externally.

Our success in current and future military operations is dependent on our ability to man, equip, train, and prepare Army Reserve Soldiers as full cohesive units for current and future operations. Our force of Warrior Citizens serves the Nation as an operational force for which they are not designed nor resourced; as a result, our primary focus is on the demands of current operations. With sufficient means, we cannot only grow and transform the force, but we can also train Soldiers and units during an era of persistent conflict. We, however, risk failure if faced with a rate of change that exceeds our capability to respond.

We take our commitments to our Nation, to our Army, and to our Soldiers, Families, and our Employer Partners seriously. We are effective stewards of our Nation's resources. We serve with an unwavering pride that the America's sons and daughters willingly answer the call to duty in a time of war or national emergency. As we position ourselves as an essential provider of combat support and combat service support to the United States Army, we look to Congress and our fellow citizens for strength and support as our partners in building an operational Army Reserve for the 21st century.

SPECIAL HONOREES

AWARD OF THE SILVER STAR

Sergeant Gregory S. Ruske is the fourth Army Reserve Soldier to receive the Silver Star for heroism.

Sergeant Gregory S. Ruske of Colorado Springs, Colorado, earned the Silver Star for placing himself in the line of enemy fire while he planned and led the rescue of an Afghan National Police officer felled in a firefight. While assigned to Combined Joint Task Force 101, operating in Afghanistan's Kapisa province, he and his fellow Soldiers from 3rd Platoon, "A" Company, Task Force Gladiator, were on a patrol in a remote area when Taliban operatives attacked them with heavy grenade, machine-gun and rifle fire.

Trapped with his unit out in the open, Sergeant Ruske returned fire so most of the platoon could move to protective cover. After taking a bullet to the hip, Sergeant Ruske repositioned himself to a rooftop and continued laying fire.

At that point, Sergeant Ruske realized that two Afghan National Police officers were pinned down in the open, taking fire from their Taliban attackers. One ran for cover, but the other officer—one Sergeant Ruske had worked with at vehicle checkpoints and chatted with through an interpreter—had been shot and was trying to crawl to safety through a hail of bullets.

Sergeant Ruske said he did not take time to think about his own safety, but simply reacted using the training the Army Reserve gave him in preparation for combat.

Sergeant Ruske credited his mentor during his 3 years of active duty, Sergeant First Class Glen Boucher, with instilling the discipline and skills that he drew on while under fire.

"I don't consider myself a hero," he said. "I was just an ordinary guy put in an extraordinary situation. I reacted based on my upbringing, training, and compassion, and thankfully, it worked out in the end."

FIRST ARMY RESERVE SOLDIER WINS ARMY SOLDIER OF THE YEAR

“Best Warrior is a tremendous honor; however, the real ‘Best Warriors’ are those who serve, those who have served, and those who desire to do so. To represent the United States Army Reserve Command at the Department of the Army level means I have a responsibility to bring due-credit to the Army Reserve training and leadership of which I am a product,” said Army Soldier of the Year, Specialist David Obray.

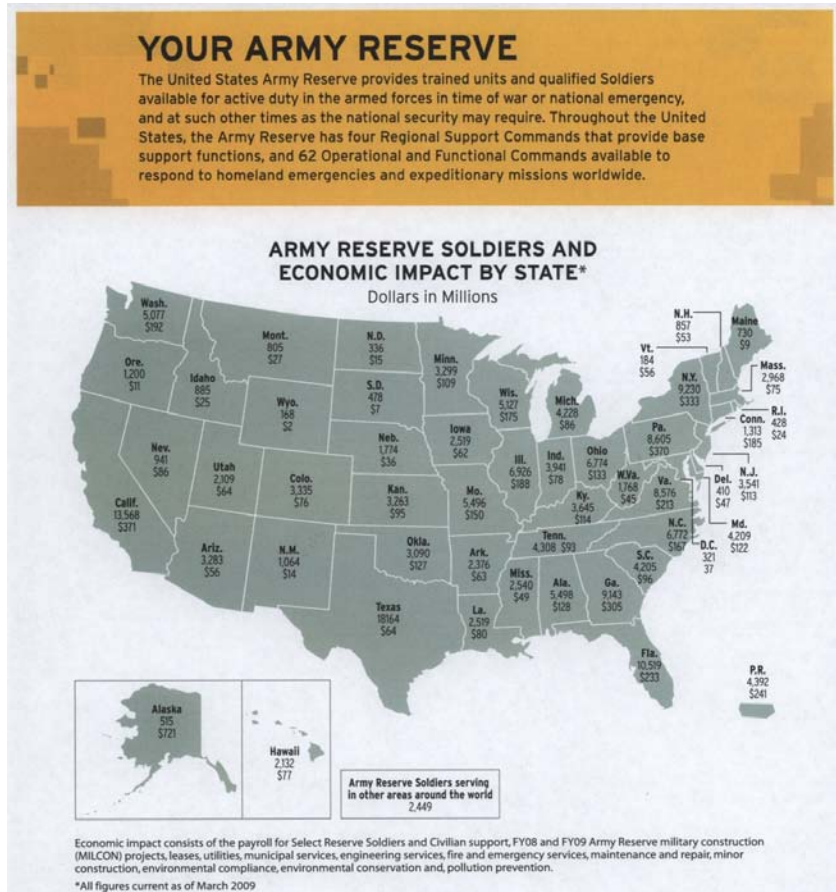
Specialist David Obray is a Construction Equipment Repair Specialist with the U.S. Army Reserve, 492nd Engineer Company, 414th Engineer Command, Mankato, Minnesota.

With 3 years experience in the U.S. Army Reserve, Specialist Obray is the first Reserve Soldier to win the prestigious Army title.

A native of Fairmont, Minnesota, Specialist Obray attends Winona State University where he is president of the Student Association and pursuing a bachelor’s degree in Law & Society and Business Law. His plans include obtaining a Juris Doctorate and Master of Business Administration degree, retiring from the Army Reserve as a Command Sergeant Major, and pursuing his dream of becoming a United States Senator.

For Specialist Obray, service to country is a family business. His sister and brother currently serve in the Army, and his grandfather and great-grandfather served in World War II and World War I respectively.

Specialist Obray’s Army goals include becoming a fire team and squad leader and a Battalion Command Sergeant Major. Weighing 300 pounds at age 16, Specialist Obray credits military discipline with giving him the courage and ability to become physically and mentally fit. He is proud to represent the U.S. Army as “Soldier of the Year.” “The Best Warrior is the personified Strength of the Nation,” says Specialist David Obray. “The title represents the entire United States Army and shows the proficiency of all Soldiers and Noncommissioned Officers. It is a great honor to be selected.”



ARMY RESERVE SNAPSHOT

Vision.—A community-based federal operational force of skill-rich Warrior-Citizens providing complementary capabilities for joint expeditionary and domestic operations.

Mission.—To provide trained and ready Soldiers and units with the critical combat service support and combat support capabilities necessary to support national strategy during peacetime, contingencies and war.

Desired End State.—An Army Reserve with a culture that embraces continuous transformation, is capable of predictably and perpetually providing relevant operational forces to Combatant Commanders, and maintains strong mutually supporting Warrior-Citizen relationships among Soldiers, Families, Army Reserve Civilians, Employers, and the Army.

Key Leaders

Secretary of the Army: The Honorable Pete Geren

Army Chief of Staff: General George W. Casey, Jr.

Chief, Army Reserve and Commanding General, U.S. Army Reserve: Lieutenant General Jack C. Stultz

Deputy Commanding General, U.S. Army Reserve Command: Major General Alan D. Bell

Deputy Chief Army Reserve: Major General Mari K. Eder

U.S. Army Reserve Command Chief of Staff: Colonel Charles E. Phillips, Jr.

Deputy Chief Army Reserve: Brigadier General Julia A. Kraus

Director for Resource Management: Mr. John C. Lawkowski

Chief Executive Officer: Mr. Kenneth N. Williamson
 Command Chief Warrant Officer: Chief Warrant Officer 5 James E. Thompson
 Command Sergeant Major: Command Sergeant Major Leon Caffie

Army Reserve Basics

Established: April 23,1908
 Designated Direct Reporting Unit to Army: October 1, 2007
 2010 Authorized End Strength: 206,000
 Selective Reserve Strength: 202,500
 Accessions for Fiscal Year 2008: 44,455
 Reenlistments for Fiscal Year 2008: 16,523 (111 percent of annual goal)
 Accessions Goal for Fiscal Year 2009: 43,154
 Soldiers Currently Deployed: >27,000
 Soldiers Mobilized Since September 11, 2001: >170,000
 Number of Army Reserve Centers: 1,136

Distinctive Capabilities

The Army Reserve contributes to the Army's Total Force by providing 100 percent of the:

Chemical Brigades	Medical Groups	Water Supply Battalions
Internment Brigades	Railway Units	
Judge Advocate General Unit	Training & Exercise Divisions	

. . . more than two-thirds of the Army's:

Civil Affairs Units	Transportation Groups	Hospitals
Psychological Operations Units	Motor Battalions	Medical Brigades
	Chemical Battalions	Theater Signal Commands

. . . and nearly half of the Army's:

Petroleum Battalions	Petroleum Groups	Terminal Battalions
Adjutant General Units	Transportation Command	Public Affairs Units

Army Reserve Demographics

	No.
Ethnicity (in percent):	
Caucasian	59.7
Black	22.0
Hispanic	12.3
Asian	3.4
Pacific Isl	1.0
Native Amer	0.7
Average Age	38.8
Officers	30.6
Enlisted	41.8
Warrant	44.1
Married (in percent)	44.5
Officers	63.1
Enlisted	39.6
Warrant	73.0
Gender (in percent):	
Male	76.1
Female	23.9

Army Reserve Budget Figures

	Total fiscal year 2009 budget: \$7.5B	Total fiscal year 2010 program: \$7.9B
Operations and Maintenance	\$2.6B	\$3.1B
Military Personnel	\$4.6B	\$4.4B
Military Construction	\$282M	\$381M

Army Reserve Installations

Fort Buchanan, Puerto Rico
 Fort McCoy, Wisconsin

Devens, Massachusetts
Fort Hunter Liggett, California
Fort Dix, New Jersey
Camp Parks, California

Chairman INOUE. May I now call upon Admiral Dirk Debbink?

STATEMENT OF VICE ADMIRAL DIRK J. DEBBINK, CHIEF, NAVY RESERVE

Admiral DEBBINK. Chairman Inouye, Vice Chairman Cochran, pleasure to be with you this morning. Thank you for the opportunity to testify before you. As you know, this is my first testimony before the subcommittee. I would like to begin by thanking you for your terrific support of the 67,217 sailors and their families that comprise your Navy Reserve.

I would like to communicate three things to you in my testimony today. First and foremost, my written testimony goes into some length describing what we are doing for our Navy today and, by extension, our Nation. As I testify this morning, Navy Reserve sailors are operating in every corner of the world, and you see our sailors in the news, but you do not see the caption that reads "Reserve" because we are part of the total force, and seeking to optimize the way we operate as a total force Navy. From certifying strike groups at home before they deploy overseas, to our naval special warfare teams in Iraq, Afghanistan, and around the world, our sailors are making significant contributions across the full spectrum of both naval and joint operations. And we are very closely linked with the active component and our civilians to constitute the total force our Navy depends on every day to execute our maritime strategy and our national tasking.

Second, I would like to tell you more about the outstanding sailors who are actually doing the work of our Navy Reserve. Following a strength reduction of nearly 25 percent since 2003, our central focus of our manpower strategy is now to establish a true continuum of service culture. This is a culture that offers our sailors the opportunity to truly be a sailor for life, providing a life/work balance that accommodates individual circumstances while also sustaining the inventory of skilled and experienced professionals we need for our total force missions.

And finally, I would like to bridge from the what we are doing and who is doing it to communicate what I believe is a real value proposition of the Navy Reserve. We are proud of what we bring to the fight today. We are also acutely aware of the necessity of our long-term contribution to our Navy and our Nation, and I believe we are demonstrating that daily by the incredible return on investment that your Navy Reserve represents. Today's Navy Reserve, from civil affairs to Navy SEALs, are integral to total force; and we stand shoulder to shoulder with our active component executing full-spectrum operations that represent every facet of Navy's global maritime strategy for the 21st century. We have proven ourselves to be a ready, responsive, and adaptive operational force while maintaining our strategic depth. This is an important and, I think, very meaningful time for all of us to be serving our Nation's defense and particularly, I would assert, as a reservist.

I thank you for your continued support and I look forward to your questions, sir.

Chairman INOUE. I thank you very much, Admiral.
[The statement follows:]

PREPARED STATEMENT OF VICE ADMIRAL DIRK J. DEBBINK

INTRODUCTION

Chairman Inouye, Senator Cochran, and distinguished members of the Defense Subcommittee, thank you for the opportunity to speak with you today about the capabilities, capacity, and readiness of the dedicated men and women who serve in our Navy's Reserve Component (RC). I offer my heartfelt thanks for all of the support you have provided these great Sailors.

On July 22 last year I had the distinct honor of reporting to the Chief of Naval Operations (CNO), Admiral Gary Roughead, as the 12th Chief of Navy Reserve. In that capacity, I have the privilege of working for over 67,000 Sailors in our Navy's RC. I take to heart that each of them has promised to support and defend the Constitution of the United States, against all enemies, foreign and domestic. That promise is their covenant to our Nation, and my covenant back to these Sailors is to do everything I can to make their service truly meaningful, significant, and rewarding; these Sailors form an incredibly capable and motivated force, and they deserve nothing less. I find myself amazed and truly in awe of the daily sacrifices our RC Sailors are making for our Nation and our Navy.

My predecessor, Vice Admiral John Cotton, laid a strong foundation during the past 5 years for a more responsive and operational force; and we are a better Navy because of his leadership. We remain steady on course and we will look to increase speed where able by improving upon our strengths and efficiencies to further advance our "Support to the Fleet . . . Ready and Fully Integrated." We are also working on new initiatives in order to more fully implement the Navy Reserve's vision of: "Ready Now. Anytime, Anywhere."

The Navy Reserve is an integral component of our Total Force—inextricably linked with the Active Component (AC), civil servants, and contractor personnel. Our focus is on strategic objectives and specific initiatives that will enable us to optimize our support for the CNO's priorities: (1) Build the Future Force, (2) Maintain Warfighting Readiness, and (3) Develop and Support our Sailors, Navy Civilians, and Families. Within this framework, I would like to take this opportunity to update you on the operational contributions, support to the Sailor and family, and the people policies and programs of the Navy Reserve.

OPERATIONAL CONTRIBUTIONS

The Navy's RC contributions are directed when and where they make the most operational and cost-effective sense—the right Sailor, in the right assignment, at the right time, and importantly, at the right cost. Leveraging valuable military and civilian skill-sets and capabilities—when possible and consistent with volunteerism—Navy Reservists operate in all corners of the world. RC Sailors are on the ground in Iraq and Afghanistan; they help project power from the Arabian Gulf; and they aid in providing a stabilizing influence in the Eastern Mediterranean. They patrol waters off the Horn of Africa and deliver humanitarian assistance and disaster relief throughout the world.

To meet global requirements, the Navy continues to mobilize thousands of Selected Reserve (SELRES) RC personnel. These mobilized SELRES personnel provide a growing spectrum of capabilities to prosecute our current fights by integrating seamlessly into a multitude of augmentation missions, in addition to mobilizing as Navy units. We are called to execute missions well beyond core requirements with new capability missions (Civil Affairs Units, Mobile Training Teams, and Provincial Reconstruction Teams, in particular) and mission-unique training such as Detainee Operations and Customs Inspection battalions. One-third of Navy augmentees currently serve in non-traditional missions that involve new capabilities or require unique training. Mobilized SELRES Sailors have sustained their largest footprints in Iraq (1,018 Sailors), Kuwait (796 Sailors), and Afghanistan (277 Sailors). At the Landstuhl Regional Medical Center (LRMC), more than 90 percent of the expeditionary medical support personnel are RC augmentees. Navy RC medical augmentees are generally activated for mobilization employment periods from 3 months to 1 year from various Operational Health Support Units to form the highly valued Navy Expeditionary Medical Units (NEMUs). Over 380 RC medical personnel served in our NEMUs in 2008, and 294 are expected to serve in 2009 and 2010.

In addition to the contributions of mobilized SELRES and those conducting Active Duty Operational Support in fiscal year 2008, an additional 21,803 Navy Reservists

provided 385,291 man-days of Fleet Operational Support above the traditional 39 days each SELRES provides under current law. The Navy Expeditionary Combat Command (NECC) sets the example of RC's operational contributions. Led by Rear Admiral Carol Pottenger—a Full Time Support (FTS) Officer of the RC (the Navy RC equivalent of Active Guard and Reserve (AGR)), its expeditionary forces deployed across five continents and 12 countries in 2008, and continue fighting the war on terror and supporting the Global Maritime Strategy. With 48 percent of the NECC force comprised of RC members, NECC's global support to the Navy Component Commanders (NCCs) and unified Combatant Commanders (COCOMs) is only executable with integral contributions from the RC. In 2008 alone, nearly 2,300 RC members from 17 NECC units deployed globally, with more than 95 percent of the deployed units and personnel supporting Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) in the Central Command (CENTCOM) Area of Responsibility (AOR). NECC RC forces continue to support operations that include: construction/engineering operations with the Naval Construction Forces (e.g., Construction Battalions, or SEABEES), maritime expeditionary landward and seaward security with Maritime Expeditionary Security Forces (MESF), Customs Inspections and port/cargo operations with Navy Expeditionary Logistics Support Group (NAVELSG), warfighting documentation with Combat Camera, document and electronic media exploitation with Navy Expeditionary Intelligence Command, and Anti-Terrorism/Force Protection (AT/FP) training with the Expeditionary Training Command.

The Navy's RC has been the driver behind an enormous success story Navy-wide through its lead role in the critical Customs Inspection mission, currently providing virtually the entire deployed footprint with more than 500 RC Sailors on Individual Augmentee (IA) assignments. The Navy is projected to sustain this footprint in 2009 with planned Customs rotations throughout the year. The mobilized Customs Inspectors include police officers, corrections officers, state police/sheriffs, full-time students, engineers, and small business owners. Others include teachers, postal clerks, carpenters, nurses, emergency medical technicians, auto technicians, and fire fighters. The most recent rotation of RC Sailors to deploy for an 8-month Customs/Ports tour of duty in Iraq and Kuwait departed in November. These Customs personnel are drawn from 96 Navy Operational Support Centers (NOSCs) representing 38 states and territories, including Puerto Rico and Guam.

RC Sailors are also found in the Navy Special Warfare (NSW), Maritime Expeditionary Security, and Explosive Ordnance Disposal (EOD) communities. Reservists comprise 17 percent of the NSW community, including SEALs and Special Warfare Combatant-Craft Crewmen (SWCC). As a CNO initiative to relieve stress on the AC EOD force, the RC EOD force was established in 2007. In 2008, RC EOD units deployed to support two OIF/OEF/Global Naval Force Presence Posture (GNFPP) requirements. Through Maritime Expeditionary Security units, the Navy's RC also directly augments the Maritime Expeditionary Security mission.

The RC aviation community is equally involved in Total Force operational support. Electronic Attack Squadron 209 (VAQ 209) mobilized, deploying 188 FTS and SELRES personnel to Bagram Air Base, Afghanistan in support of Coalition operations from January 14th thru March 14th in 2008. Helicopter Sea Combat Squadron 84 (HSC 84) continues its deployment to Balad Air Base, Iraq to conduct air assault combat missions in support of CENTCOM Joint Special Operations. RC members of Helicopter Sea Combat Squadron 85 (HSC 85) are deployed to Kuwait to support the 2515th Naval Air Ambulance mission, while RC members of Helicopter Mine Countermeasures Squadron 15 (HM 15) are deployed alongside the AC to the CENTCOM AOR for Fifth Fleet and Navy tasking by the U.S. Central Command. Eight RC Sailors from HM 14 are also deployed to Korea, conducting Airborne Mine Countermeasures and Vertical Onboard Delivery (VOD) missions.

A detachment from Carrier Airborne Early Warning Squadron 77 (VAW 77), consisting of more than 30 FTS/SELRES personnel and 25 maintenance contractors completed 4 month deployments in 2008 to various sites in the Southern Command (SOUTHCOM) AOR for counter-narcotics operations, directly assisting in the capture of cocaine and heroin with an approximate street value of \$700 million. A 25-person detachment from Helicopter Antisubmarine (Light) Squadron 60 (HSL 60) deployed aboard the USS Dewert (FFG 45) last year to support SOUTHCOM and Fourth Fleet counter-narcotics operations, assisting in the interdiction of cocaine that was valued at \$350 million. Currently, HSL 60 has another 25-person detachment onboard USS Samuel B. Roberts, seizing seven metric-tons of narcotics to date. The Navy Air Logistics Office scheduled aircraft and forward-deployed detachments from all 15 Fleet Logistics Support Wing (VR) squadrons, enabling the efficient and effective transport of more than 127,000 personnel and 21.7 million pounds of cargo to/from various overseas locations in support of COCOM and the-

ater-validated requirements. The VR Wing routinely fulfills three CENTCOM Deployment Orders, and in excess of 160 RC personnel from the VR Wing are deployed to Japan, Italy, Qatar, and Bahrain each day.

The VR Wing also enables the Fleet Readiness Training Plan (FRTP) by transporting personnel and cargo throughout the Continental United States in support of FRTP airlift requirements for Carrier Air Wings (CVWs), Carrier Strike Groups, Fleet Replacement Squadron (FRS) detachments, and NSW training requirements. Fighter Squadron Composite 12 (VFC 12), Fighter Squadron Composite 13 (VFC 13), Fighter Squadron Composite 111 (VFC 111), and Strike Fighter Squadron 204 (VFA 204) also enable FRTP initiatives by executing adversary sorties for multiple CVW and FRS detachments. The Squadron Augmentation Units (SAUs) from Commander, Naval Air Training Command (CNATRA) flew 20 percent of all sorties conducted in support of student Pilot/Naval Flight Officer (NFO) production during 2008, while the FRS SAUs flew nearly 10 percent of the syllabus flight events in support of Pilot/NFO and aircrew production.

EQUIPPING THE NAVY RESERVE

For Navy Reservists to continue providing superior operational support to the Navy through the competencies they have acquired both in the Fleet and in their civilian careers, the Navy must also have interoperability between all elements of the Total Force. The acquisition of AC and RC equipment, enhancements and upgrades to programs, and equipment redistribution (AC to RC, as well as RC to AC) have virtually eliminated capability and compatibility gaps between AC, RC, and Joint forces. Current and future RC equipment requirements that are vital to our combat forces include aircraft and NECC equipment.

The aircraft needed to recapitalize the RC and ensure complete alignment with the AC are: the EA-18G "Growler" for Electronic Attack, the P-8A "Poseidon" Multi-Mission Aircraft, the KC-130J "Hercules" for over- and out-sized cargo intra-theatre transport, and the C-40A "Clipper" for intra-theatre cargo and passenger transport. In addition to RC operators, the AC will also have aircrew personnel who will operate the EA-18G, P-8A, and the KC-130J (USMC AC). The C-40A is unique among these aircraft as it is only operated by RC aircrew personnel—the AC does not have any "Clipper" operators. Further, the C-40A is essential to providing flexible, time-critical, and intra-theater logistics support, serving as a connector between strategic airlift points of delivery to Carrier Onboard Delivery and VOD locations. The C-40A is the replacement for aging DC-9/C-9B and C-20G aircraft, and it can simultaneously transport cargo and passengers. The Clipper has twice the range, payload, and days of availability of the C-9 models, and it has twice the availability and eight times the payload of the C-20G. The C-40A is an outstanding asset and has provided enormous operational support, while facilitating the FRTP, since its arrival in 2001.

NECC provides equipment for its subordinate commands, such as SEABEE, MESF, EOD, and NAVELSG units. The equipment utilized by these type commands include counter-IED (Improvised Explosive Device) equipment, tactical vehicles, construction and maintenance equipment, material handling equipment, communications gear, boats, and expeditionary camp equipment. Like NECC's mission, the equipment it operates is both dynamic and diverse.

The Navy has trimmed the RC force structure to the appropriate capacity and capability required to sustain the operational Reserve Force. The perceived value and the return on investment that the RC delivers in personnel and equipment to the Total Force are measured on a daily basis. Critical recapitalization continues to be a priority, and budgetary dynamics make us ever reliant on a combination of the service priority and the direct appropriation for these aging and depreciating assets. Some of these requirements have been mitigated by your continued support through the National Guard and Reserve Equipment Appropriation.

SUPPORTING THE SAILOR AND FAMILY

As we continue supporting the Fleet, we proactively extend our support to individual Sailors and their families. Our Sailors will do almost anything we ask of them, and we see evidence of their dedicated service everyday, especially in Iraq and Afghanistan. Their expectation that we will support their families while they are away from home is both fair and reasonable.

With so many RC Sailors filling IA and mobilization requirements, the July 2008 release of the RC IA Business Rules (Navy Administrative message 235/08) directly addressed how we care for our RC Sailors. In particular, these business rules authorized RC Sailors who volunteer for unit mobilization to combat zones inside their

1:5 “Dwell Time,” to reset their “Dwell Clock” and receive Post-Deployment/Mobilization Respite Absence (administrative leave).

To ensure that our Reserve Force was ready to deploy at any time, the Navy’s RC introduced the Medical Readiness Reporting System (MRRS) to address Individual Medical Readiness. MRRS use was expanded in fiscal year 2008, and is now used by the Navy’s AC and RC, as well as the Coast Guard and Marine Corps. In addition, MRRS was recently enhanced to allow more accurate tracking of those Sailors at risk due to combat operational stress, and to ensure they receive the appropriate attention during Post Deployment Health Re-assessments (PDHRAs) conducted 90–180 days after demobilization.

To facilitate a continuum of readiness, given the stress that oftentimes results from operational deployments overseas, funding was approved in 2008 to establish the Navy Reserve Psychological Health Outreach Program. This program provides outreach services to Reservists returning from deployment, both during the reintegration process and beyond. It ensures early identification and timely clinical assessments of Navy Reservists at risk for stress injuries. The Program Coordinators facilitate access to psychological health support resources for the service members and their families, and serve as Facilitators at Psychological Health/Traumatic Brain Injury seminars and Returning Warrior Workshops.

The Navy Reserve continues to make exceptional progress in advancing a standardized, world-class Continuum of Care for SELRES Sailors, FTS Sailors, and their families through all phases of the mobilization deployment cycle. United States Fleet Forces (USFF), as executive agent for IA and IA Family Support, was vital to the evolution of a Total Force Continuum of Care in 2008 by standing up the IA and IA Family Cross Functional Team and Executive Steering Committee. The Navy Reserve is a lead stakeholder supporting USFF in this initiative, and is well-aligned with the Total Force in developing and implementing deployment support and reintegration programs for deploying IA personnel and units throughout all phases of the mobilization cycle.

The Returning Warrior Workshop (RWW) is now available to RC and AC Sailors, Marines, and their spouses throughout the country. The RWW serves as a model in the development of a broad spectrum of additional “Continuum of Care” programs and events. The workshops epitomize Sailors taking care of Sailors; they reflect the Navy’s dedication to supporting, educating, and honoring our Sailors and families, and they communicate a strong message that the Navy values their service and sacrifice.

RWWs are “five-star events” conducted on weekends and attended by up to 200 Sailors, Marines, and spouses. Attending participants have the opportunity to address personal, family, or professional situations experienced during deployment and receive readjustment and reintegration support and resources from a network of counselors, psychological health outreach coordinators, chaplains, and Fleet and Family Support Center representatives. Throughout the weekend, participants benefit greatly from considerable counseling opportunities to educate and support the Navy Family and assist Sailors in re-acclimating with their families and to civilian lives.

The future for RWWs is bright given the unprecedented success of the workshops completed in 2008 and those already completed in 2009. The recent event in Albuquerque, New Mexico was the 21st successful event since the inception of the program by Navy Region Southwest Reserve Component Command (at Navy Operational Support Center, Phoenix) in late 2007. Looking ahead, 29 additional workshops are contracted and funded through July 2010.

Our Return-Reunion-Reintegration team is placing strong emphasis on the development, implementation, and enhancement of several other transformational programs and events. These high profile initiatives include: Full implementation of DOD’s Yellow Ribbon Reintegration Program by Navy; modification of the Chaplain’s Religious Enrichment Development Operation (CREDO) retreats to provide a “One-Day Up-Check” for returning Sailors as an alternative to the RWW; and development of comprehensive roles and responsibilities for Psychological Health Outreach Coordinators assigned to each region.

PEOPLE POLICIES AND PROGRAMS

A central component of Navy’s Total Force strategy is the establishment of a culture of a “Continuum of Service” to provide opportunities for Sailors to transition in and out of active service at different stages of their careers. The Continuum of Service represents a new operating paradigm which can be summarized by the phrase: “Recruit once, Retain for life.” Last year, the Navy’s accession and retention bonuses for RC Sailors increased to \$108 million, enhancing our ability to recruit

and retain the right people for the right job. For fiscal year 2008, Navy Recruiting Command achieved 100 percent of the RC enlisted accession goal, and 105 percent of RC General Officer goal. As recently stated by our Chief of Naval Personnel, VADM Mark E. Ferguson, we believe we are on track to repeat this success in fiscal year 2009. Once we recruit, train, and lead these Sailors through their initial tours of duty, our imperative is to give them opportunities to transition between the Active and Reserve Components, allowing them to find the life/work balance that's right for them. This will strengthen the focus on retention and reduce the burden on recruiting.

In addition to achieving the Navy's recruiting goals, the retention and attrition for RC personnel have been just as successful. Improved retention and lower attrition rates are attributed to a slowing economy and an effective recruiting campaign through our "Stay Navy" initiatives. These efforts target affiliation and retention bonuses on skill sets we need the most. In fiscal year 2009, we continue to target high-demand/low-supply communities and critical skill sets with competitive monetary incentives.

Navy Reserve end strength has declined by approximately 20,000 Sailors from 2003 through 2008 (88,156 RC Sailors in 2003 to 68,136 RC Sailors in 2008). The anticipated steady state end strength is approximately 66,000 in fiscal year 2013. During fiscal year 2008, to provide for a stable RC inventory, we implemented several force shaping measures that included a reduction in prior service accessions, as well as proactive management of Transient Personnel Units (TPUs), overmanned designators, and Sailors reaching High Year Tenure. These measures proved to be effective, as the Navy ended fiscal year 2008 with 68,136 RC personnel (approximately 0.5 percent above our statutory end strength authorization of 67,800).

In fiscal year 2009, we already see higher retention and fewer losses than planned in the enlisted and officer populations. To mitigate this over-execution, we continue to enforce current policies and adjust enlisted prior service accessions. Our goal is to finish fiscal year 2009 with a more stable, balanced inventory of Sailors that positions our Reserve force for continued Total Force support.

Vice Admiral Ferguson and I are identifying legislative, financial, technological, and policy barriers impeding a Continuum of Service and developing management practices to quickly and efficiently transition Sailors between components to meet changing workforce demands. One of our key initiatives is to implement a process that transitions Sailors between the AC and RC within 72 hours. As we provide opportunities to transition seamlessly between active and reserve statuses, Navy's Total Force will capitalize on the spirit of volunteerism to encourage a Sailor's lifetime of service to the Nation.

The Navy needs Total Force systems that will reduce administrative impediments to a Continuum of Service. The administrative inefficiencies created by multiple electronic pay and manpower systems create waste and unnecessary burdens on Sailors, and they also hinder Force readiness. A common AC/RC pay and personnel system is crucial to building seamless transitions and the success of our Sailor for Life and Continuum of Service initiatives. In the future, manpower transactions will ideally be accomplished with the click of a mouse, and records will be shared through a common data repository within all DOD enterprises. Navy fully supports this vision of an integrated set of processes to manage all pay and personnel needs for service members, concurrently providing necessary levels of personnel visibility to support joint warfighter requirements. Manpower management tools must facilitate audits of personnel costs, and support accurate, agile decision-making at all levels of DOD.

One constraint to seamless transitions is the multiple RC funding categories. We are working closely with the Office of the Secretary of Defense to reduce the number of duty types, aiming to improve efficiency while retaining the flexibility Navy Reservists need to manage their careers and personal lives. Coupled with a well-developed, web-enabled personnel management system, this initiative will enable RC Sailors to rapidly surge to support validated requirements. The consolidation of most RC order writing to the Navy Reserve Order Writing System (NROWS) has been a significant evolution in Navy's effort to integrate its Total Force capabilities by aligning funding sources and accurately resourcing operational support accounts.

The Honorable Secretary of the Navy Donald C. Winter recently approved the Navy's request to transition to a community management-based promotion policy for the RC Officer community—both SELRES and FTS. As a result, the Navy has implemented a policy change to "decouple" its Reserve Officer promotion zones from the AC Officer promotion zones, as was the current practice under the Running Mate System (RMS). In place since 1947, the RMS linked RC and AC promotion zones without consideration of RC community needs. Under the Navy Total Force construct, Officer Community Managers (OCMs) now have the flexibility to develop

promotion plans and policies that meet individual community and component needs, especially for SELRES Officers.

For Navy Reservists who look to further their professional development, the Navy has recently obtained Joint and Combined Warfighting class quotas for RC personnel (both FTS and SELRES) at the Joint Forces Staff College. These new class quotas complement the Advanced Joint Professional Military Education course that is already in place. The Navy is also in the early stages of establishing an RC Foreign Area Officer (FAO) program. RC FAOs will be part of a cadre of Officers aligned with the AC who have the skills required to manage and analyze politico-military activities overseas.

CONCLUSION

Since 9/11, nearly 53,000 contingency activation requirements have been filled by SELRES personnel, along with an additional 4,300 contingency requirements filled by FTS Sailors in support of on-going conflicts in Iraq, Afghanistan, and the Horn of Africa. On any given day, more than 18,000 Navy Reservists, or about 26 percent of the Force, are on some type of orders that provide support to global operation requirements of Fleet Commanders and COCOMs. Our more than 67,000 Sailors serving in the RC are forward deployed in support of Coalition forces, at their supported commands around the world, or in strategic reserve, ready to surge 24/7 each day if more Navy Total Force requirements arise.

I am proud to be a Navy Reservist, and I am humbled by the commitment of the men and women of our Navy Reserve. It is very rewarding and fulfilling to stand shoulder to shoulder with the Navy's AC as we meet our Nation's requirements. Although I readily admit my bias, there has never been a more meaningful time to be part of the Navy-Marine Corps team, and our Navy Reserve is clearly an integral part of the this hard-working, high-spirited and amazingly capable force.

The Navy's ability to be present in support of any operation, in war and peace, without permanent infrastructure in the area of operations, is a key advantage that will become even more important in the future. Our Navy remains the preeminent maritime power, providing our Nation with a global naval expeditionary force that is committed to global security, while defending our homeland as well as our vital interests around the world. The Navy Reserve's flexibility, responsiveness, and ability to serve across a wide spectrum of operations clearly enhances the Navy Total Force, acts as a true force multiplier, and provides unique skill sets towards fulfilling Navy's requirements in an increasingly uncertain world.

On behalf of the Sailors, civilians, and contract personnel of our Navy Reserve, we thank you for the continued support within Congress and your commitment to the Navy Reserve and our Navy's Total Force.

Chairman INOUE. Now may I call upon General Bergman?

STATEMENT OF LIEUTENANT GENERAL JACK W. BERGMAN, COMMANDER, MARINE FORCES RESERVE, UNITED STATES MARINE CORPS

General BERGMAN. Good morning, Chairman Inouye, Vice Chairman Cochran. First, thank you, to you and all the members of the subcommittee, for your continued support, your continued strong support because, without it, the Marine Corps Reserve's ability to sustain capability, warfighting capability, in the longest call-up of Reserve and Guard units in the history of the Nation, it has made a big difference. Your support has made the Marine Corps Reserve the ready and relevant fighting force that it is today.

During the past several years, a basic underlying change has occurred. Instead of being a strategic reserve, we are now largely in the Marine Corps as an operational reserve. About 80 percent of our drilling reservists are unit-based, and that makes up our operational reserve. As that unit-based force, we have implemented the force generation model. This model creates maximum predictability, predictability for everyone, predictability for the marines, for their families, for their employers, and for our active component as we work on the ever-complex issues of force flow and who goes in what rotation, predictability for manning, equipping, training,

all of which are tied to budgeting. The force generation model is now just beginning to allow us to plan for a 5-year well-budgeted, highly effective training/dwell time for our units.

I would suggest to you that there is nothing more adaptable than a marine in the fight. Our force generation model has enabled us to transition to that highly adaptable operational reserve.

However, because of recent Marine Corps focus on building the active component to 202,000, which we have successfully done and will be 2 years ahead of schedule here by the end of this fiscal year, some of the manpower planning and policies that were focused on the active component are just now beginning to be refocused to ensure that this transition from the strategic to the operational Reserve is effectively planned for and effectively implemented.

I look forward to your questions.

Chairman INOUE. Thank you very much.

[The statement follows:]

PREPARED STATEMENT OF LIEUTENANT GENERAL JACK W. BERGMAN

Chairman Inouye, Senator Cochran, and distinguished Members of the Subcommittee, it is my honor to report to you on the state of your Marine Corps Reserve.

I am pleased to report that your Marine Corps Reserve continues to equip and train the best and brightest of our Nation's sons and daughters. In an environment where the Marine Corps continues to rapidly adapt to broad strategic conditions and wide-ranging threats, your Marine Corps Reserve—a primarily Operational Reserve—continues to meet all challenges and commitments. Whether in Iraq today, Afghanistan tomorrow or in subsequent campaigns, your Marine Corps Reserve continues to answer the clarion call to arms in defense of this great Nation.

On behalf of all our Marines, sailors and their families, I would like to take this opportunity to thank the Subcommittee for its continuing support. The support of Congress and the American people reveal both a commitment to ensure the common defense and a genuine concern for the welfare of our Marines, sailors and their families.

TODAY'S MARINE CORPS RESERVE

Your Marine Corps Reserve continues to be fully capable of war fighting excellence. As a vested partner in the Total Force Marine Corps, we faithfully continue our steadfast commitment to provide Reserve units and personnel who stand shoulder-to-shoulder with their Active Component counterparts in all contingencies, operations and exercises.

As of March 3, 2009, 52,369 Reserve Marines and approximately 99 percent of U.S. Marine Corps Reserve units were activated since 9/11—98 percent of our activated units deployed to the U.S. Central Command area of responsibility.

Today's Marine Corps Reserve is characterized by a strong resolve that enables us to sustain the current operational pace during the longest mobilization period in our Nation's history. However, to continue this unprecedented pace will require adequate funding. Without the total funding, currently provided through baseline and supplemental processes, we would be unable to maintain a truly Operational Reserve.

The Force Generation Model, implemented in October 2006, continues to provide predictability of future activation and deployment schedules for our Marines and sailors. The predictability the Model provides has been well received by our Marines, sailors and employers. The Model provides our Reservists the opportunity to effectively plan their lives throughout their Reserve contractual agreement, enabling them to creatively strike a successful balance between family, civilian career and service to community, country and Corps. I am happy to report that we recently activated the fifth rotation based upon the Model to Operations Iraqi and Enduring Freedom (OIF and OEF) with 5,500 Marines being activated and deployed during fiscal year 2008. Additionally, we have activated approximately 2,500 more Marines during the timeframe November 2008 to February 2009.

The Force Generation Model continues to assist Service and Joint Force planners in maintaining a consistent flow of fully capable Marine Corps Reserve units. This steady flow of Reserve units is essential in enabling our Active Component to reach

a 1:2 dwell time. The Model, based on 1-year activation to 4-plus years in a non-activated status, continues to be both supportable and sustainable. Predictable activation dates permit unit commanders to focus training on core mission capabilities early in the dwell period; and then train to specific OIF and OEF mission tasks once the unit is within 12 to 18 months of activation. Additionally, the amount of cross-leveling has been significantly reduced. With each subsequent rotation, the requirement to cross-level continues to decrease. For example, the upcoming activation of the St. Louis, Missouri-based 3rd Battalion, 24th Marine Regiment, will require minimal cross-leveling of enlisted personnel.

We believe the full benefit of the Force Generation Model will begin to be realized once we have completed a full cycle of nine rotations and the Active Component reaches the authorized end strength of 202,000. A very important byproduct of the Force Generation Model will be our emerging ability to more accurately budget for training and equipment requirements during the 5 year dwell time.

In addition to the 5,500 Marines activated and deployed during fiscal year 2008 in support of OIF and OEF, we deployed an additional 3,300 Marines worldwide in support of joint and/or combined Theater Security Cooperation Exercises. In each of the past 3 years, between OIF, OEF, Theater Security Cooperation Exercises, and recently emerging security cooperation mobile training teams that conduct Phase-0 operations, nearly one-third of our force has deployed outside the continental United States both in an activated and non-activated status.

During this past year, more than 3,300 Marines from Fourth Marine Division have served in Iraq. Included are two infantry battalions, as well as armor, reconnaissance, combat engineer, military police, and truck units. Of particular note, the El Paso, Texas-based Battery D, 2nd Battalion, 14th Marine Regiment, became the second Marine Corps High Mobility Artillery Rocket System (HIMARS) unit to be deployed. Another highlight was the success of New Orleans, Louisiana-based 3rd Battalion, 23rd Marine Regiment, in al-Anbar Province. This infantry battalion, with companies in Louisiana and Texas, played a key role in the redevelopment of the Haditha K3 Oil Refinery and transport of crude oil in al-Anbar Province. Their efforts, spurred primarily by several of the battalion's Marines who are consultants and executives within the U.S. oil and energy industry, resulted in the successful rail transport of crude oil into Anbar and restart of the oil refinery by July 2008, several years after the refinery and rail system had ceased to operate. Also of note was the ability and flexibility of the Division units to train for and conduct "in lieu of" or provisional missions due to changing operational requirements in OIF/OEF.

Fourth Marine Division also deployed two of its regimental headquarters in the role of Marine Air Ground Task Forces (MAGTF) command elements. Kansas City, Missouri-based 24th Marine Regiment deployed as a Special Purpose MAGTF to U.S. Southern Command to support the new Partnership of the Americas series of small combined Theater Security Cooperation Exercises in South America. The San Bruno, California-based 23rd Marine Regiment led a combined joint regimental headquarters in support of exercise African Lion in Morocco as well as a combined joint battalion headquarters in support of Exercise Shared Accord in Ghana. These three exercises alone incorporated the deployment of more than 1,100 Marines from across Marine Forces Reserve. Fourth Marine Division also conducted training to assist our allies in foreign militaries from Korea to the Republic of Georgia. Calendar Year 2009 will be a busy year for the Division as they conduct training in Benin, Brunei, Ukraine, the Dominican Republic, the Bahamas, Brazil, Guatemala and Guyana. Returning to exercises in Morocco and Australia and supporting the 50th anniversary of UNITAS Gold with a command element from 24th Marine Regiment will be key engagements. From May through August 2009, an activated Reserve reinforced rifle company from the 24th Marine Regiment and a composite platoon of Marines from the 4th Amphibious Armored Battalion, in partnership with the U.S. Navy, will conduct training and exercises in Brunei, Singapore, Malaysia, Indonesia, Thailand and the Philippines during exercise Cooperation and Readiness Afloat Training (CARAT).

Fourth Marine Aircraft Wing has continued to provide essential exercise support and pre-deployment training normally provided by Active Component squadrons. The Marine Corps' premier pre-deployment training exercise, Mojave Viper, received a majority of air support from our fixed wing and helicopter squadrons. Fourth Marine Aircraft Wing deployed Mount Clemens, Michigan-based, Marine Wing Support Squadron 471 as a Provisional Security Company to Camp Lemonier, Djibouti, in the Horn of Africa, provided a truck platoon to support combat operations for the Active Component's 3rd Battalion, 7th Marine Regiment in Iraq, and sourced multiple Marine Air Control detachments from Chicago, Illinois-based Marine Air Control Group 48. Marine Transport Squadron Belle Chasse (Louisiana) Detachment is

currently in theater with the UC-35 Citation Encore aircraft providing critical Operational Support Airlift capability to U.S. Central Command.

Additionally, Fourth Marine Aircraft Wing has participated in multiple combined, bilateral and joint exercises in Africa, Asia, Europe, and South America. Humanitarian Assistance construction projects were conducted in Trinidad-Tobago, Peru, and Honduras. Participation in these exercises includes support of U.S. and Marine Corps forces and facilitates training and interoperability with our allies. For example, African Lion participation enabled the Moroccan Air Force to develop better close air support and aerial refueling techniques.

Fourth Marine Aircraft Wing continues to be an integral partner in the Marine Corps Aviation Transition Strategy. In the near term, transition from legacy to leap-ahead aviation capabilities (i.e. MV-22, UH-1Y, AH-1Z and JSF) in the Active Component required a transfer of certain Reserve Component aviation manpower, airframes and support structure to the Active Component Marine Corps. As a result, two Reserve Fighter/Attack F/A-18 squadrons were placed in cadre status and a Light Attack UH-1N/AH-1W helicopter squadron, a Heavy Lift CH-53E helicopter squadron, an Aviation Logistics Squadron and two of four Marine Aircraft Group Headquarters were decommissioned. A second Heavy Lift CH-53E helicopter squadron has been reduced in size. As the Active Component transitions to the new airframes, Fourth Marine Aircraft Wing has assumed the Fleet Replacement Squadron role for the legacy model KC-130s, UH-1s, and AH-1s. Additionally, as part of the Aviation Transition Strategy, two Tactical Air Command Center Augmentation Units were commissioned. To complete the Aviation Transition Plan, beginning in 2014, Fourth Marine Aircraft Wing will begin transitioning to the new airframes and Command and Control (C²) capabilities.

Fourth Marine Logistics Group continues to provide fully capable units, detachments and individuals prepared to deliver sustained tactical logistics support. In the past year, Fourth Marine Logistics Group provided approximately 1,300 Marines and sailors from across the spectrum of combat service support to augment the Active Component's 1st and 2nd Marine Logistics Groups engaged in OIF. In addition to the requirements of the Force Generation Model, Fourth Marine Logistics Group provided additional support to OIF by sourcing 265 Marines to staff the al-Taqaaddam Security Force and to OEF by sourcing 279 Marines from the Portland, Oregon-based 6th Engineer Support Battalion to staff Provisional Security Company 8 at Camp Lemonier, Djibouti, in the Horn of Africa.

Increased augmentation in support of OIF/OEF will include a complete Combat Logistics Battalion (CLB-46) formed with more than 800 Marines and sailors from across Fourth Marine Logistics Group's nine battalions. Combat Logistics Battalion 46 will provide tactical level logistics support to a Marine Regimental Combat Team in al-Anbar Province, Iraq. This will be the first CLB formed and deployed by Fourth Marine Logistics Group.

Continuing to aggressively support overseas joint and combined exercises, training, and other events in support of the Combatant Commanders' Phase-0 operations, Fourth Marine Logistics Group participated in 29 overseas events spread across all of the Unified Commands, ranging in size from exercises involving 75 Marines down to 3-person Traveling Country Teams that conducted engagement with foreign militaries. Olympic Thrust in June 2008 began the preparation of Fourth Marine Logistics Group's battalions' staffs to form the nucleus of a CLB headquarters. Exercise Javelin Thrust (June 2009) will be a capstone preparation event for CLB-46.

Fourth Marine Logistics Group has taken the lead on coordinating Marine Forces Reserve's participation in Innovative Readiness Training (IRT) program events. The purpose of the IRT program is to provide civic assistance projects in the United States, possessions and territories while simultaneously improving military readiness. Fourth Marine Logistics Group has initiated and conducted IRT planning during the last year and will execute two events in Alaska and one event in the Marianas Islands during 2009. These events will focus on infrastructure improvements and medical/dental assistance projects.

In addition to ground, aviation, and logistic elements, Marine Forces Reserve has provided civil affairs capabilities since the start of OIF. Air-Naval Gunfire Liaison Detachments from Marine Forces Reserve have augmented the supported Marine Air Ground Task Forces and adjacent commands with air/ground fires liaison elements. Marine Forces Reserve also continues to provide intelligence augmentation, to include Human Exploitation Teams, Sensor Employment Teams, and Intelligence Production Teams.

The trend in recent years toward increased participation of Marines in the Individual Ready Reserve (IRR) continued in fiscal year 2008. During the fiscal year, the Marine Corps Mobilization Command (MOBCOM) mustered more than 1,500 Marines from the IRR to screen and prepare them for activation. More than 1,500

sets of mobilization orders were issued with a total of 1,002 IRR Marines reporting for activation during fiscal year 2008. MOBCOM also processed more than 8,100 sets of shorter duration active duty orders for IRR Marines during fiscal year 2008. We have expanded our family programs to reach out to the families of our deployed IRR Marines, using local Peacetime/Wartime Support Teams as well as MOBCOM assets. With the advent of Yellow Ribbon Legislation, we continue to develop programs to better support our deploying and returning Marines and their families.

MOBCOM modified its IRR muster program during 2008, from large scale metropolitan musters to a combination of large scale musters and smaller, more personalized musters at Reserve sites. We completed the fiscal year screening of approximately 11,000 of the 55,000 Marines in our IRR population. Our screening effectiveness continues to rise as we continue to develop better communication methods with our IRR population. For example, MOBCOM contacted and engaged the IRR Marines through email, letter correspondence and telephone calls. Higher quality communications keeps our Marines better informed and prolongs their connection with each other and our Corps. We believe that these longer-term connections will be critical as we truly seek to create the Continuum of Service necessary to support a sustainable Operational Reserve.

The Marine Corps Reserve's continuing augmentation and reinforcement of the Active Component is not without cost. Continuing activations and high Reserve operational tempo highlight personnel challenges in select military occupational specialties and significant strain on Reserve equipment.

PERSONNEL

The Selected Marine Corps Reserve is comprised of Reserve unit Marines, Active Reserve Marines, Individual Mobilization Augmentees, and Reserve Marines in the training pipeline, which when added together, form the inventory of the end strength in the Selected Marine Corps Reserve.

End Strength

Although we continue to benefit from strong volunteerism of our Reserve Marines, a degradation in our ability to achieve authorized end strength has occurred. Fiscal years 2002 to 2005 had percentages of authorized end strength above 100 percent and fiscal year 2006 percentage of authorized end strength at 99.71 percent. Fiscal years 2007 and 2008 percentages of authorized end strength were at 97.36 and 94.76 percent—shortfalls of 1,044 and 2,077 Marines respectively. This resulted in the only fiscal years since 9/11 that the Selected Marine Corps Reserve fell below the Title 10 allowable 3 percent variance from authorization.

As previously stated in my testimonies before the House and Senate Appropriations Committees' Subcommittees on Defense during 2008, we anticipated an adverse affect on meeting an acceptable percentage of authorized Marine Corps Selected Reserve end strength as greater numbers of Reserve Component Marines volunteered for full-time active duty due to the Marine Corps' accelerated build to a 202,000 Active Component Marine Corps.

During the past fiscal year, we accepted the short-term risk in our ability to obtain our Selected Marine Corps Reserve Component end strength of 39,600 as the Reserve accession plans were adjusted and our experienced and combat tested Reserve Marines were encouraged to transition back to active duty to support the build effort, and they responded in force: From 2007 to present, approximately 1,946 Reserve Marines returned to, or are awaiting return to, active duty.

The fact is that the Active Component Marine Corps will continue to rely heavily upon augmentation and reinforcement provided by our Reserve Marines. I firmly believe our authorized end strength of 39,600 is still highly relevant and appropriate, and will consequently drive recruiting and retention. This number provides us with the Marines we require to support the Force and to achieve our goal of a 1:5 deployment-to-dwell ratio in the Selected Marine Corps Reserve.

Additionally, it is worth noting, the Marine Corps is on pace to reach an active duty end strength of 202,000 by the end of fiscal year 2009, which will enable the Marine Corps to refocus the Reserve recruiting and retention efforts to achieve the expected percentage of authorized Selected Marine Corps Reserve Component end strength. The bonuses and incentives for recruiting and retention provided by the Congress are essential tools for helping us accomplish this goal and I thank you for your continued support.

Recruiting

The Marine Corps is unique in that all recruiting efforts (officer, enlisted, regular, Reserve, and prior-service) fall under the direction of the Marine Corps Recruiting Command. Operationally, this provides the Marine Corps with tremendous flexi-

bility and unity of command in order to annually meet Total Force Marine Corps objectives.

Like the Active Component, Marine Corps Reserve units primarily rely upon a first term enlisted force. Currently, the Marine Corps Reserve continues to recruit and retain quality men and women willing to manage commitments to their families, their communities, their civilian careers, and their Corps. Despite high operational tempo, the morale and patriotic spirit of Reserve Marines, their families, and employers remains extraordinarily high.

The Marine Corps Recruiting Command achieved 100 percent of its recruiting goal for non-prior service recruiting (5,287) and exceeded its goal for enlisted prior service recruiting (2,672) during fiscal year 2007; and achieved 100 percent of its recruiting goal for non-prior service recruiting (4,235) and prior service recruiting (4,501) in fiscal year 2008. As of February 1, 2009, 1,756 non-prior service and 1,227 enlisted prior service Marines have been accessed, which reflects 48 percent of the annual enlisted recruiting mission for the Selected Marine Corps Reserve. We fully expect to meet our Selected Marine Corps Reserve recruiting goals again this year.

An initiative implemented during June 2006 at Marine Forces Reserve to enhance recruiting efforts of prior service Marines was the Selected Marine Corps Reserve Affiliation Involuntary Activation Deferment policy. Realizing that deployments take a toll on Active Component Marines, causing some to transition from active duty because of high personnel tempo, we continue to offer this program. This program allows a Marine who has recently deployed an option for a 2-year deferment from involuntary activation if they join a Selected Marine Corps Reserve unit after transitioning from active duty. The intent of the 2-year involuntary deferment is to allow transitioning Marines the opportunity to participate in the Selected Marine Corps Reserve without sacrificing the ability to build a new civilian career.

Junior officer recruiting and consequently meeting our Reserve company grade requirement remains the most challenging area. Historically, the Active Component Marine Corps has been the source of company grade officers to the Selected Marine Corps Reserve, due to initial active duty contractual requirements of all Reserve-commissioned officers. There are, however, three programs in place now that enable Reserve officer accessions without the typical 3 to 4-year active duty obligation: the Reserve Enlisted Commissioning Program (RECP), the Meritorious Commissioning Program—Reserve (MCP—R) and the Officer Candidate Course—Reserve (OCC—R).

These programs strive to increase the number and quality of company grade officers within deploying Reserve units while addressing our overall shortage of junior officers in our Reserve units. The three programs combined to access 108 Reserve officers during fiscal years 2007 and 2008, and are an essential tool to help mitigate company grade officer shortages in the Selected Marine Corps Reserve.

Eligibility for the RECP was expanded to qualified Active Duty enlisted Marines. The MCP—R was established for qualified enlisted Marines, Reserve and Active, who possess an Associates Degree or equivalent number of semester hours. The third program, the OCC—R, has proven to be the most successful as 93 candidates have been commissioned second lieutenants in the Marine Corps Reserve during fiscal years 2007 and 2008. We anticipate commissioning between 50 and 75 more second lieutenants through the OCC—R this fiscal year.

The OCC—R focuses on ground-related billets, with an emphasis on ground combat and combat service support within Reserve units that are scheduled for mobilization. The priority to recruit candidates is tied to the Marine Forces Reserve Force Generation Model. Refinement of the OCC—R program to target geographic company grade officer shortfalls is a logical next step.

Retention

All subordinate commanders and senior enlisted leaders at each echelon of command are required to retain quality Marines. On a monthly basis, these leaders identify Marines who either have to re-enlist or extend. Identified Marines are counseled concerning the opportunity for their retention in the Selected Marine Corps Reserve.

Enlisted retention trends remain a concern and are being monitored very closely, but were obviously affected by the Active Component 202,000 build. The good news is that the Active Component Marine Corps is no longer making a concerted effort to draw personnel from the Selected Marine Corps Reserve to active duty.

For fiscal year 2008, Reserve officer retention remained at the same level as during the previous fiscal year, which was above historic levels.

We continue to offer retention incentives for enlisted Marines in the Selected Marine Corps Reserve, to include the maximum allowable \$15,000 Selected Marine Corps Reserve Affiliation Bonus for an initial 3-year commitment. We also offer a \$10,000 Selected Marine Corps Reserve Officer Affiliation Bonus for those officers

who affiliate with a Selected Marine Corps Reserve unit and agree to participate for 3 years. I greatly appreciate the continuance of the increased reenlistment incentive, which was initially provided in the fiscal year 2008 National Defense Authorization Act.

These incentives are necessary tools to help us retain quality Marines and consequently assist us in achieving an acceptable percentage of authorized Selected Reserve end strength.

I read with interest the Memorandum of July 24, 2008, by Secretary Gates concerning the recommendations of the Commission on the National Guard and Reserves. I am pleased to see the strong emphasis on study of the various recommendations that pertain to the Continuum of Service personnel management construct. As the Continuum of Service concept is refined, it should facilitate the affiliation of prior service Marines into the Selected Marine Corps Reserve as well as retain those good Marines already serving.

EQUIPMENT

The Marine Corps Reserve, like the Active Component, has two primary equipping priorities: first—equipping individual deploying Marines and sailors, and second—equipping our units to conduct home station training. We will continue to provide every deploying Marine and sailor with the latest generation of individual combat and protective equipment. Our unit equipping efforts include the full complement of equipment to support training efforts across the MAGTF. This complement includes essential communications; crew-served weapon systems such as Light Armored Vehicles (LAVs), Assault Amphibian Vehicles (AAVs), Tanks, and Artillery; ground mobility; and ground support equipment, which requires continued adequate funding of our Operations and Maintenance accounts. Your continued support in this area has enabled us to adequately sustain home station training and pre-deployment operations.

As with all we do, our focus will continue to be on the individual Marine and sailor. Ongoing efforts to equip and train this most valued resource have resulted in obtaining the latest generation individual combat and protective equipment: M16A4 service rifles, M4 carbines, Rifle Combat Optic scopes, improved helmet pad suspension systems, enhanced Small Arms Protective Insert plates, Modular Tactical Vests, and the latest generation AN/PVS-14 Night Vision Devices, to name a few. Every member of Marine Forces Reserve has deployed fully equipped with the most current authorized Individual Combat Clothing and Equipment to include Personal Protective Equipment.

Marine Forces Reserve's unit equipping priority is to obtain the principal end items necessary to establish or replenish the appropriate inventory of equipment to the level dictated by our Training Allowance (TA). Training Allowance is the amount of equipment needed by each unit to conduct home station training. Our Reserve units should train with the equipment necessary for Marine Forces Reserve to effectively augment and reinforce the Active Component.

Currently, our equipping focus is on mitigating the short-term impact of reduced supply of certain principal end items, e.g.; seven LAV variants, Digital Terrain Analysis Mapping Systems, and the Theater Provide Equipment Sensors. We employ adaptive resourcing and training management approaches to ensure our Reserve units can adequately train. The inherent latency in procurement timelines and competing priorities for resources continue to challenge the training and equipping of our Operational Reserve. Since the Marine Corps procures and fields equipment as a Total Force, equipment modernization efforts of the Marine Corps Reserve are synchronized with the efforts of the Active Component. The approved \$37.3 million fiscal year 2009 NGREA will provide Marine Forces Reserve the funds to procure much needed Tactical Laptop Computer Packages (Ruggedized Laptops and General Purpose Laptops), Supporting Arms upgrade to Digital Virtual Training Environment (DVTE), Bright Star FLIR, Light Armored Vehicle 25 A2 Variant (LAV-25A2), and a Tactical Remote Sensor Suite (TRSS).

To maintain an inventory of current equipment necessary to conduct home station training, Marine Forces Reserves utilizes several resources and programs. Routine preventive and corrective maintenance are still performed throughout the country by our Marines. However, ground equipment maintenance efforts have expanded over the past few years, leveraging contracted services and depot-level capabilities. Marine Corps Logistics Command (LOGCOM), through mobile maintenance teams, provides preventive and corrective maintenance support to our Reserve units. Marine Forces Reserve is actively involved in the Marine Corps Depot Level Maintenance Program (DLMP) to support the continued operation of principal end items. Marine Corps Logistics Command continues to uniquely provide Marine Forces Re-

serve a “Repair and Return” (R&R) program which enables us to request additional maintenance support when requirements exceed the Marine Forces Reserve maintenance capacity.

Another key maintenance program utilized by Marine Forces Reserve is the Corrosion Prevention and Control (CPAC) program which extends the useful life of all Marine Corps tactical ground and ground support equipment. This program reduces significant maintenance requirements and associated costs due to corrosion through the application of corrosion-resistant compounds, establishing environmentally-safe wash-down racks, and providing climate controlled storage. Additionally, the program identifies, classifies, and effects repair, or recommends replacement of equipment that has already succumbed to the elements.

Marine Corps Reserve ground equipment readiness rates are currently above 90 percent (Maintenance—97 percent and Supply—92 percent as of March 9, 2009), based on our Reserve equipment Training Allowance. The Marine Corps Reserve equipment investment overseas MAGTF operations since 2004 is approximately 5 percent of our overall equipment and includes various communications, motor transport, engineer, and ordnance equipment, as well as several modern weapons systems such as the new HIMARS artillery system and the latest generation Light Armored Vehicle. This investment has presented challenges for our home station training requirements yet greatly adds to the war fighting capability of the Marine Corps. Deliberate planning at the Service level is currently underway to reset the Total Force, to include resourcing the Reserve equipment. This resourcing will enable the Marine Corps Reserve to remain ready, relevant, and responsive to the demands of our Corps.

Marine Corps Reserve equipment requirements are captured as part of Marine Corps Total Force submissions. Priority Reserve equipment requirements that cannot be timely met with these vehicles are identified in the Commandant’s Unfunded Programs List and/or my NGREA Request.

We especially appreciate Congress’ support of the Marine Corps Reserve through NGREA. It would be impossible for me to overstate the importance of NGREA and in particular, the consistency of these appropriations. Since 2002, NGREA has provided more than \$240 million for equipment procurements. The stability of NGREA funding has significantly increased our ability to forecast meeting priority equipment requirements. The NGREA provides immediate flexibility, allowing procurement of items necessary to meet specific combat capability, training, and support requirements.

In the last 3 years, we have been able to close the gap on combat equipment requirements necessary to effectively train our Marines and sailors. Examples of high-priority combat equipment purchases we have made or will make through fiscal years 2007, 2008 and 2009 NGREA funding are: the LITENING II Targeting Pod; the AN/ARC-210 (V) Multi-Modal Radio system for our KC-130 aircraft; the UC-12+ aircraft; multiple C² systems component; and as previously stated, the BRITE STAR FLIR; the Tactical Remote Sensor System; and the LAV-25A2. Through consistent NGREA funding, we have been able to completely eliminate some deficiencies.

Additionally, with NGREA, we have been able to establish a robust ground combat modeling and simulation program, our NGREA-procured Virtual Combat Convoy Trainers (VCCTs), Combat Vehicle Training Simulators (CVTSs), Medium Tactical Vehicle Replacement—Training Systems (MTVR-TS), HMMWV Egress Trainer, and Digital Virtual Training Environments (DVTEs) enable us to overcome many resource and time-related challenges while increasing the individual and unit’s combat readiness. Our fiscal year 2009 NGREA plan includes Supporting Arms-Helmet Mounted Displays (SA-HMDs) for our DVTEs, giving our Marines the ability to enhance Forward Air Control and Indirect Fire Control proficiency without leaving the Reserve Training Center. It is accurate to say that we could not have provided some critical capabilities without these NGREA funds.

TRAINING

The collective lessons wrought from our unit and individual combat experiences, Theater Security Cooperation Exercises and other Active Component operational tempo relief deployments have helped improve nearly all facets of our current Reserve Component training. In this regard, one of the most exciting areas where we are continuing to transform the depth and scope of our training remains the cutting-edge arena of Modeling and Simulations Technology.

Rapid advancement in modeling and simulation software, hardware and network technologies are providing new and increasingly realistic training capabilities. Marine Forces Reserve is training with and continuing to field several complex digital

video-based training systems which literally immerse our Reserve Component Marines into “virtual” combat environments, complete with the sights, sounds and chaos of today’s battlefield environment in any climate or place, day or night, spanning the full continuum of warfare from high-intensity conventional warfare to low-intensity urban conflict.

One new capability that we are fielding to support our Reserve Marines is the Indoor Simulated Marksmanship Trainer-XP. This interactive audio/video weapons simulator provides enhanced marksmanship, weapons employment and tactical decision making training for a variety of small arms. The system consists of infantry weapons instrumented with lasers that enable Marines to simulate engaging multiple target types.

Another system addressed in last year’s testimony that continues to prove invaluable in the pre-deployment training of our tactical drivers is the Virtual Combat Convoy Trainer-Reconfigurable Vehicle System. This is an advanced, full-scale vehicle simulator that trains Marines in both basic and advanced combat convoy skills using variable terrain and roads in a variety of weather, visibility and vehicle conditions. The simulator is a mobile, trailer-configured platform that utilizes a HMMWV mock-up, small arms, crew-served weapons, 360-degree visual display with after-action review/instant replay capability. Marine Forces Reserve was the lead agency for initial procurement, training and evaluation of this revolutionary training system, which is now being used throughout the Marine Corps. We are now preparing to accept the fourth generation of this invaluable training system at Camp Wilson aboard the Marine Air Ground Combat Center in Twenty Nine Palms, California. Upon installation, student throughput capability for combat convoy training will double.

It is important to recognize the key role that Congress has played in the fielding of all four generations of the VCCT. Procurement of the VCCT resulted directly from NGREA. Of all the training packages our deploying units complete, returning combat veterans have consistently praised the invaluable benefits of having had the opportunity to train in tactics, techniques and procedures using this advanced simulation system.

Beginning this summer, Marine Forces Reserve will field the newly developed Deployable Virtual Training Environment (DVTE). This advanced, first-person, immersive, simulation-based training system, made up of 16 laptops and peripherals packaged in ruggedized deployable cases, is capable of emulating and simulating a wide variety of weapons systems and generating hi-fidelity, relevant terrain databases. The DVTE also provides small-unit echelons with the opportunity to continuously review and rehearse Command and Control procedures and battlefield concepts in a virtual environment. The system consists of two components, the Combined Arms Network, which provides integrated first person combat skills, and Tactical Decision Simulations, which provides individual, fire team, squad and platoon-level training associated with patrolling, ambushes and convoy operations. Additional features include combat engineer training, small-unit tactics training, tactical foreign language training and event-driven, ethics-based, decision-making training.

One of our newest and rapidly advancing training initiatives involves the collocation of a select number of the previously cited training systems aboard Camp Upshur at Marine Corps Base Quantico, Virginia. Our intent is to provide an advanced, unit-level training capability within easy access of the I-95 corridor. When fully established this summer, the Camp Upshur training capabilities will include eight mobile VCCT trailers, two mobile HMMWV egress trainers, a mobile multi-platform tactical vehicle operator simulation system, three Indoor Simulated Marksmanship Trainers that are networked for combined arms training, and 80 DVTE terminals. These resources, in combination with the billeting, training ranges and facilities available aboard MCB Quantico, will provide the opportunity for reinforced battalions to conduct training and force-on-force exercises using combinations of live, virtual and constructive training systems and resources. This initiative provides state-of-the-art training support to units while revitalizing long-established Camp Upshur into a cost effective, vital and dynamic training resource for Marine Forces Reserve and other agencies. In addition to facilitating training at Camp Upshur, the numerous mobile training systems will remain available for movement and redeployment anywhere in the lower 48 states in support of training Reserve Marines.

All of these advanced training systems have been rapidly acquired and fielded with vital Supplemental and NGREA funding. These critical funding resources are not only providing a near-term training capability in support of combat deployments, but are also providing a solid foundation for the transformation of our training environment from legacy static training methods to more realistic virtual com-

bat training environments designed to prepare our Marines and sailors to succeed on future battlefields.

FACILITIES

Marine Forces Reserve is comprised of 185 locations in 48 states, the District of Columbia, and Puerto Rico. These facilities are comprised of 32 owned and 153 tenant locations. In contrast to Active Duty installations that are normally closed to the general public, our Reserve sites are openly located within civilian communities. This arrangement requires close partnering with state and local entities nationwide. Thus, the condition and appearance of our facilities may directly influence the American people's perception of the Marine Corps and the Armed Forces as well as possibly impacting our recruiting and retention efforts.

Marine Forces Reserve Facilities Sustainment, Restoration, and Modernization (FSRM) program funding levels continue to address immediate maintenance requirements and longer-term improvements to our older facilities. Sustainment funding has allowed us to maintain our current level of facility readiness without further facility degradation. Your continued support for both the Military Construction Navy Reserve (MCNR) program and a strong FSRM program are essential to addressing the aging infrastructure of the Marine Corps Reserve. With more than 57 percent of our Reserve Centers being more than 30 years old and 44 percent being more than 50 years old, the continued need for support of both MCNR and FSRM cannot be overstated.

The Base Realignment and Closure (BRAC) 2005 continues to move forward and the Marine Corps Reserve will begin relocating many Reserve units to new consolidated Reserve centers during fiscal year 2009. Like other BRAC Business Plans, the Marine Corps Reserve BRAC program is tightly linked to other service's business plans for our shared reserve centers. Of the 25 BRAC actions for the Marine Corps Reserve, 21 are in conjunction with Army and Navy military construction projects.

In September 2008, the Department of the Navy and the State of Louisiana signed a lease for a new Federal City in New Orleans, which will provide a new headquarters compound for Marine Forces Reserve. The state of Louisiana is providing construction dollars for the new headquarters facility and saving the federal government more than \$130 million.

Our Marine Forces Reserve Environmental Program promotes accepted stewardship principles as well as compliance with all regulatory requirements in support of training both on site and outside the fence line. We employ the Environmental Management System (EMS), which uses a systematic approach ensuring that environmental activities are well managed and continuously improving. Additionally, Marine Forces Reserve has initiated a nationwide program to reduce waste production and ensure proper disposal at our centers. We have also executed several major projects to protect the nation's waterways near our Reserve centers.

HEALTH SERVICES

Military healthcare support (medical prevention and treatment) programs have grown exponentially over the past few years—fiscal year 2008 being one of the most significant. A myriad of programs are now provided to our Marines, sailors, and their families during pre-deployment, deployment and post deployment.

Our Health Services priorities are: (1) maximize education and awareness of TRICARE support for Reservists; (2) attain DOD/DON Individual Medical Readiness (IMR) goals; and (3) ensure general awareness of all health service programs in support of our service members.

TRICARE remains the foundation of our medical support programs, providing the full spectrum of medical, dental and behavioral health services. As a result of the 2009 Defense Authorization Act analysis of TRICARE Reserve Select costs, monthly premiums for TRICARE Reserve Select dropped by 42 percent for individual coverage and by 29 percent for family coverage on January 1, 2009. Reservists now pay \$47.51 a month for single coverage, down from \$81, while the cost for families is down from \$253 to \$180.17 a month. Reservists and their family members are eligible for different TRICARE benefits depending on their status: as a member of the Select Reserve, a Reservist may qualify for and purchase TRICARE Reserve Select; on military duty for 30 days or less a Reservist is covered under Line of Duty care; when activated he and his family are covered by TRICARE Prime; and when deactivated a Reservist is eligible for transitional health plan options.

All deploying service members are now required to complete a Baseline Pre-Deployment Neuro-Cognitive Functional Assessment. The tool used to complete this assessment is called the Automated Neuro-Psychological Assessment Metric (ANAM). Results from the ANAM will assist leaders and medical providers with

evaluating service members who screen positive and require necessary medical treatment. The intent is that ANAM results and implementation of the Psychological Health Outreach Program will provide standardized guidance for providers who follow up on identified issues and concerns from results of the Post-Deployment Health Assessments, to include development of protocols and creation and implementation of an information/benefits tracking system. Our Commanders and staff are coordinating with the Navy's Bureau of Medicine (BUMED) in order to ensure that deploying Marines and sailors are properly evaluated prior to deployment.

Efforts to assess health post deployment have also increased significantly over the past year. In addition to completing a Post Deployment Health Assessment prior to returning to the United States, our Marines and sailors now complete a Post Deployment Health Reassessment (PDHRA) 3 to 6 months after returning from deployment. The PDHRA is crucial in identifying and addressing health concerns with specific emphasis on mental health issues which may have emerged since returning from deployment. Active tracking of this process ensures that we meet the post-deployment health care needs of our Marines and sailors.

The Psychological Health Outreach Program, introduced by BUMED, is another specialty program which addresses post deployment behavioral health concerns. This program is designed to provide early identification and clinical assessment of our Reserve Marines and sailors who return from deployment at risk for not having stress-related injuries identified and treated in an expeditious manner. This program, funded by supplemental Defense Health Program appropriations, provides outreach and educational activities to improve the overall psychological health of our Reservists and identifies long-term strategies to improve psychological health support services for the Reserve community. We are currently developing our concept and implementation strategy to best support the Force.

Individual medical and dental readiness for our Marines and sailors remains a top priority. To improve current readiness of our Reservists, which is 64 percent and 73 percent as of March 1, 2009 respectively, we continue to utilize the Reserve Health Readiness Program (RHRP). This program funds medical and dental contracted specialists to provide health care services to units specifically to increase individual medical and dental readiness. During fiscal year 2008, this service provided more than 3,020 Preventive Health Assessments; 4,013 Dental examinations, 402 Dental Panoramic x-rays; 529 Blood Draws; 803 Immunizations; and 3,149 PDHRAs for our Marines and sailors.

The Armed Forces Health Longitudinal Technology Application (AHLTA), which provides electronic health records for the entire U.S. Armed Forces, is currently being rolled out to all Reserve Components to include Marine Forces Reserve. The transition to electronic medical records will enable optimal health services to our Marines and sailors with the end result being increased individual and unit medical readiness.

QUALITY OF LIFE

We continue to aggressively institute new Family Readiness Programs, revitalize services, and proactively reach out to our Reservists and their families to ensure our programs and services meet the needs and expectations of our Marines and their families.

As part of widespread Marine Corps reforms to enhance family support, we are placing full-time Family Readiness Officers (FROs), staffed by either civilians or Active Duty Marines, at the battalion/squadron level and above to support the Commander's family readiness mission. Modern communication technologies, procedures and processes are being expanded to better inform and empower family members including spouses, children and parents of single Marines.

The Marine Forces Reserve Lifelong Learning Program continues to provide educational information to service members, families, retirees, and civilian employees. More than 1,200 Marine Forces Reserve personnel (Active and Reserve) enjoyed the benefit of Tuition Assistance, utilizing more than \$2.4 million that funded more than 4,000 courses during fiscal year 2008. Tuition Assistance greatly eases the financial burden of education for our service members while enabling them to maintain progress toward their education goals.

The Marine Corps' partnership with the Boys and Girls Clubs of America (BGCA) and the National Association for Child Care Resources and Referral Agencies (NACCRRRA) continues to provide a great resource for service members and their families in selecting child care, before, during, and after a deployment in support of overseas contingency operations. The Boys and Girls Clubs of America provide outstanding programs for our Reserve Marines' children between the ages of 6 and 18 after school and on the weekends. Under our agreement with BGCA, Reserve

families can participate in more than 40 programs at no cost. With NACCRRRA, we help families of our Reservists locate affordable child care that is comparable to high-quality, on-base, military-operated programs. The NACCRRRA provides child care subsidies at quality child care providers for our Reservists who are deployed in support of overseas contingency operations and for those Active Duty Marines who are stationed in regions that are geographically separated from military installations. We also partnered with the Early Head Start National Resource Center Zero to Three to expand services for family members of our Reservists who reside in isolated and geographically-separated areas. Additionally, our Marine families (on active duty 30 or more days) enrolled in the Exceptional Family Member Program are offered up to 40 hours of free respite care per month for each exceptional family member. This allows our families the comfort that their family member will be taken care of when they are in need of assistance.

We fully recognize the strategic role our families have in mission readiness, particularly mobilization preparedness. We prepare our families for day-to-day military life and the deployment cycle (Pre-Deployment, Deployment, Post-Deployment, and Follow-On) by providing educational opportunities at unit Family Days, Pre-Deployment Briefs, Return and Reunion Briefs, and Post-Deployment Briefs. This is accomplished through unit level Family Readiness programs that are the responsibility of the Commanding Officer managed by the full-time, non-deploying FRO and supported by trained volunteers and Force level programs such as Lifestyle Insights, Networking, Knowledge, and Skills (L.I.N.K.S.).

Every Marine Corps Reserve unit throughout the country has a Family Readiness program that serves as the link between the command and family members—providing official communication, information, and referrals. The FRO proactively educates families on the military lifestyle and benefits, provides answers for individual questions and areas of concerns, and enhances the sense of community and camaraderie within the unit. The L.I.N.K.S. program is a training and mentoring program designed by Marine spouses to help new spouses thrive in the military lifestyle and adapt to challenges—including those brought about by deployments. This program has recently been expanded to support the extended family of a Marine—children and parents. Online and CD-ROM versions of L.I.N.K.S. make this valuable tool more readily accessible to families of Reserve Marines who are not located near Marine Corps installations.

To better prepare our Marines and their families for activation, Marine Forces Reserve is fully engaged with OSD to implement the Yellow Ribbon Reintegration Program, much of which we have had in place for quite some time. We continue to implement an interactive approach that provides numerous resources and services throughout the deployment cycle. Available resources include, but are not limited to, family-related publications, online volunteer training opportunities, and a family readiness/mobilization support toll free number. Family readiness educational materials have been updated to reflect the current deployment environment. Specifically, deployment guide templates that are easily adapted to be unit-specific were distributed to unit commanders and family readiness personnel, as well as Marine Corps families, and are currently available on our Web site. Services such as pastoral care, Military OneSource, and various mental health services are readily available to our Reserve Marines' families. Also, through the DOD contract with the Armed Services YMCA, the families of our deployed Reserve Marines are enjoying complimentary fitness memberships at participating YMCA's throughout the United States and Puerto Rico. Our Active Duty Marines and their families located at Independent Duty Stations have the ability to access these services as well.

Managed Health Network (MHN) is an OSD-contracted support resource that provides surge augmentation counselors for our base counseling centers and primary support at sites around the country to address catastrophic requirements. This unique program is designed to bring counselors on-site at Reserve Training Centers to support all phases of the deployment cycle. Marine Forces Reserve has incorporated this resource into post-demobilization drill periods, Family Days, Pre-Deployment Briefs, and Return and Reunion Briefs. Follow-up services are scheduled after Marines return from combat at various intervals to facilitate on-site individual and group counseling. Additionally, we are utilizing these counselors to conduct post-demobilization telephonic contact with IRR Marines in order to assess their needs and connect them to services.

The Peacetime/Wartime Support Team and the support structure within the Inspector-Instructor staffs at our Reserve sites provides families of activated and deployed Marines with assistance in developing proactive, prevention-oriented steps such as family care plans, powers of attorney, family financial planning, and enrollment in the Dependent Eligibility and Enrollment Reporting System. During their

homecoming, our Marines who have deployed consistently cite the positive importance of family support programs.

To strengthen family support programs, we will continue to enhance, market, and sustain outreach capabilities. The current OSD-level oversight, sponsorship, and funding of family support programs properly corresponds to current requirements. We are particularly supportive of Military OneSource, which provides our Reservists and their families with an around-the-clock information and referral service via toll-free telephone and Internet access on a variety of subjects such as parenting, childcare, education, finances, legal issues, elder care, health, wellness, deployment, crisis support, and relocation.

Marines and their families, who sacrifice so much for our Nation's defense, should not be asked to sacrifice quality of life. We will continue to be a forceful advocate for these programs and services. We will continue to evolve and adapt to the changing needs and environments in order to ensure that quality support programs and services are provided to our Marines and their families.

CASUALTY ASSISTANCE AND MILITARY FUNERAL HONORS

One of the most significant responsibilities of the Reserve site support staff is that of casualty assistance. It is at the darkest hour for our Marine families that our support is most needed. By virtue of our dispersed composition, Marine Forces Reserve site support staffs are uniquely positioned to accomplish the vast majority of all Marine Corps casualty notifications and are trained to provide assistance to the family. Historically, Marine Forces Reserve personnel have been involved in approximately 90 percent of all notifications and follow-on assistance to the next of kin. There is no duty to our families that we treat with more importance, and the responsibilities of our Casualty Assistance Officers continue well beyond notification. We ensure that our Casualty Assistance Officers are adequately trained, equipped, and supported by all levels of command. Once a Casualty Assistance Officer is designated, he or she assists the family members in every possible way, from planning the return and final rest of their Marine to counseling them on benefits and entitlements to providing a strong shoulder to lean on when needed. The Casualty Assistance Officer is the family's central point of contact and support; available to serve as a representative or liaison with the media, funeral home, government agencies, or any other agency that may become involved.

Additionally, Marine Forces Reserve units provide significant support for military funeral honors for our veterans. The active duty site support staff members, with augmentation from their Reserve Marines, performed more than 12,000 military funeral honors in 2008 (91 percent of the Marine Corps total) and we anticipate supporting nearly 13,000 during 2009. The authorization and funding to bring Reserve Marines on active duty to assist in the performance of military funeral honors has greatly assisted us at sites such as Bridgeton, Missouri, Chicago, and Fort Devens, Massachusetts, where we frequently perform more than 10 funerals each week. As with Casualty Assistance, we place enormous emphasis on providing military funeral honor support.

CONCLUSION

The Marine Corps Reserve—your Operational Reserve—continues to shoulder the war fighting burden with our Active Component counterparts. Operations Enduring and Iraqi Freedom, as well as support to Combatant Commanders' Theater Support Cooperation Exercises, have required continuous activations of Selected Marine Corps Reserve forces. We will continue to focus upon the future challenges to the Total Force and corresponding requirements of modernization, training and personnel readiness to ensure that the Marine Corps Reserve remains on equal footing with our Active Component. Your consistent and steadfast support of our Marines, sailors and their families directly contributes to our ability to do so. *Semper Fidelis!*

Chairman INOUE. General Stenner.

STATEMENT OF LIEUTENANT GENERAL CHARLES E. STENNER, JR., CHIEF, AIR FORCE RESERVE

General STENNER. Chairman Inouye and Vice Chairman Cochran, Senator Murray, I am very, very happy to be here today on behalf of the Air Force Reserve and the Air Force Reserve Command.

Before I go any farther, I would like to tell you that I am joined today by my command chief, Chief Master Sergeant Troy MacIntosh, who is the senior ranking enlisted member of that very, very powerful and strong backbone that we have as an Air Force Reserve, the enlisted force. And I am pleased that he has been around to help me as we move through the transitions that we have been making and keep us strong in that regard. So thank you very much, Chief, for being here.

I also have to say thank you, as have the rest of my compatriots, for all of the things that this Appropriations Committee has done for the Air Force Reserve. The fact that we are, in fact, able to provide 14 percent of this Nation's total air force for just a little over 5 percent of the military personnel budget is a very cost-effective way to deliver the capability that the combatant commanders need.

I believe that we are, in fact, funded appropriately to be that tier-one force that can join our two component partners in the Guard and the active duty regular Air Force, to seamlessly provide that capability as we are showing on a daily basis, whether it is deployed or whether it is in place at home station. And the capability we provide from home station is sometimes a little bit unnoticed as well because we do fight in place with our mobility forces and our space forces and our cyber forces, our intercontinental ballistic missile (ICBM) forces, et cetera, all of which play a part in a three-component Air Force.

I will also tell you that the modernization has happened. Our Air Force is modernizing and recapitalizing, and the NGREA dollars have been well used to take the equipment that we have and get it into the fight earlier, quicker, along with our Guard and active component partners.

My priorities—and I am on the record as to how we are about to do business and continue to do business—are to be cognizant of the fact that we are, first and foremost, a strategic reserve, which I believe we are leveraging on a daily basis to provide an operational capability and be that operational force around the world. And we will continue to do that and retain and recruit the best and the brightest. And as a Reserve, we are able to be everywhere we need to be and move folks to and from, growing into the new capabilities, and then adjust what we need to do in that capability, both in the unit world and in that very unique individual mobilization augmentee world that we have as well, bringing again a dramatic capability to the Air Force.

The military construction that is required and the manpower that we will need to do the new mission sets that are coming in, the unmanned aerial systems, the intelligence, surveillance, reconnaissance and with our nuclear fleet of bombers—all of these things are part and parcel of what we as an Air Force Reserve do as part of that three-component Air Force. And we are very, very proud of the 67,400 men and women that are deployed around the world today doing what the Nation needs us to do, and we look forward to your questions about how we can do that better.

Thank you, sir.

Chairman INOUE. Thank you very much.

[The statement follows:]

PREPARED STATEMENT OF LIEUTENANT GENERAL CHARLES E. STENNER, JR.

Mr. Chairman and distinguished members of the committee, I appreciate the opportunity to appear before you today and discuss the state of the Air Force Reserve.

The Air Force Reserve is a powerful manifestation of the finest American qualities; pursuit of happiness and dedication to our Nation. It is an organization of ordinary working people, wedded to the fabric of our great Nation through their individual pursuits. Reserve Airmen are linguists, utility technicians, police, railway engineers, entomologists, school teachers, salespeople, analysts, aviators, and nurses, to name just a few. All are dedicated to the greater purpose of serving our Nation; all are essential.

The Air Force Reserve provides these dedicated individuals the opportunity to be a citizen and an Airman. Like the Reserve Components from our sister services, we perform the essential task of bringing citizens to service. In doing so we gain from them their civilian skills, capabilities and experience; alternative approaches to solving problems; and expertise and judgment. Civilian employers benefit from Air Force Reservists who are instilled with the enduring values of the Air Force—integrity, service before self, and excellence in all we do.

Secretary of Defense Robert Gates recently remarked that if we are to meet the myriad of challenges facing our Nation, we must strengthen and fully integrate other important elements of national power; that military success is not sufficient to win in conflict; that we must urgently devote time, energy and thought to how we better organize ourselves to meet these challenges.

The Air Force is already recognizing the benefits of using all of its resources from the Reserve, Guard, and Regular Components as it increasingly relies on Reservists to support operational missions throughout the world. Moreover, the Air Force is encouraging the Reserve and Guard to integrate more fully with the Regular Air Force in a whole host of missions, adding tremendous value to the forces the Air Force provides to the joint warfighter.

As the Nation looks for ways to strengthen its organizations and integrate all of the untapped resources it will need in facing the challenges of the 21st Century, we submit that a model by which ordinary people, dedicated to serving their country in a way that meets both their needs and the needs of the Nation, is already manifest in the U.S. Air Force everyday—in the extraordinary Americans of the Air Force Reserve.

I'm proud to serve along side these great Airmen and as Chief and Commander of the Air Force Reserve, I have made a promise to them that I will advocate on their behalf for resources and legislation that will allow them to serve more flexibly in peace and war with minimum impact to their civilian career and employer. I will work to eliminate barriers of service, so that they can more easily serve in the status that meets their needs and those of the Air Force. And, I will work to efficiently and effectively manage our Air Force Reserve to meet the requirements of the Joint warfighter and the Nation.

RECRUITING AND RETENTION

Over the last 8 years, the Air Force Reserve has exceeded its recruiting goals. Our success in great part has been due to the accessions of experienced Regular Air Force members upon completion of their active duty commitments. Indeed, recruiting highly trained individuals is essential to lowering training costs for the Air Force Reserve. For the past couple of years we have been able to recruit experienced Airmen from the Regular Air Force as a result of force structure changes and internal Departmental decisions.

We no longer have the luxury of large numbers of experienced Airmen leaving Regular service. As both the Regular Air Force and the Air Force Reserve once again build end strength, we expect we will face some recruiting challenges in the near future: not only will the Air Force Reserve have access to fewer prior service members, but we will be competing with all other services for non-prior recruits.

We are also facing challenges with retention. The Air Force Reserve continued to execute force structure changes in fiscal year 2008, to include BRAC and Total Force Initiatives, which prompted a reduction of over 7,000 positions. As a result, we again missed our historical officer and enlisted retention targets but met end strength requirements. Second term reenlistments and extensions fell slightly for the third straight year—we also attribute this to the large population of Airmen affected by the Air Force drawdown over the past few years. There is, however, a bright spot: in fiscal year 2008, for the first time in 3 years, we saw a dramatic upswing in reenlistments/extensions for first-termers and a modest gain for career Airmen.

Nevertheless, our forecast models indicate that we will continue to face challenges. Accordingly, as outlined in our Air Force Reserve priorities discussed below in greater detail, we are striving to improve Reserve Airmen awareness of benefits, incentives and policies affecting deployments; we are emphasizing the importance of the Employer Support of the Guard and Reserve (ESGR) program and the Yellow Ribbon Reintegration Program (YRRP); and we are striving to better understand this very complicated dynamic by surveying the attitudes and beliefs of our Airmen on the array of policies, benefits and incentives that affect them to determine what appropriate adjustments can be made to improve our retention outlook. The Department of Defense and the Air Force have improved our ability to make deployments more predictable. And as I discuss below, I believe we need to take a hard look at the number of Airmen held in Reserve.

I am confident that as we act on not only our Air Force Reserve priorities, but those of the Air Force and the Department of Defense, and with the continued support of this committee and Congress, we will be able to continue to meet the needs of combatant commanders and the Nation with a viable operational and strategic Air Force Reserve.

PRESERVING, LEVERAGING AND IMPROVING AIR FORCE RESERVE VALUE AND OUR PRIORITIES

The Air Force Reserve is a repository of experience and expertise for the Air Force. Air Force Reserve Airmen are among the most experienced Airmen in the Air Force. Air Force Reserve officers average roughly 15 years of experience, and enlisted members average 14 years of experience, compared to 11 years and 9 years for Regular Air Force officers and enlisted respectively. In fact, roughly 64 percent of Air Force Reserve Airmen have prior military experience.

Airmen of the Selected Reserve remain mission-ready, training to the same standards and maintaining the same currencies as those in the Regular Air Force, and are capable of deploying within 72 hours of notification. These Airmen provide the insurance policy the Air Force and the Nation need: a surge capability in times of national crises.

Reserve Airmen are a cost-effective force provider, comprising nearly 14 percent of the total Air Force authorized end-strength at only 5.3 percent of the military personnel budget. Put differently, Air Force Reserve Airmen cost per capita is 27.7 percent of that of Regular Air Force Airmen, or roughly 3.5 Reserve Airman to one Regular Airman.¹

The Air Force leverages the inherent value of the Air Force Reserve in furtherance of its priorities, which are to: reinvigorate the Air Force nuclear enterprise; partner with the joint and coalition team to win today's fight; develop and care for Airmen and their families; modernize our air and space inventories, organizations and training; and recapture acquisition excellence.

Preserving, utilizing and improving this value in pursuit of Air Force priorities underlie each of our Air Force Reserve priorities. We must provide an operational, combat ready force while maintaining a strategic reserve. We must preserve the viability of the triad of the relationships Reservists must sustain with their families, the Air Force Reserve and their employers. We must broaden Total Force Initiatives. And we must modernize our equipment and facilities. Each of these priorities is vital to preserving our value and sustaining our forces as we meet the needs of the Nation.

OPERATIONAL, COMBAT READY FORCE WHILE MAINTAINING A STRATEGIC RESERVE

The Air Force Reserve is first and foremost a strategic reserve, providing the Air Force with a surge capacity in times of national crisis. Over time, the Reserve has become a mission-ready reserve force capable of serving operationally throughout the world. Since OPERATION DESERT STORM, Air Force Reserve Airmen have

¹Fiscal year 2008 President's Budget request, figures derived from ABIDES (Automated Budget Interactive Data Environment System), the budget system currently in use by the Air Force and recognized as the official Air Force position with respect to the Planning, Programming and Budget Execution (PPBE) system. Inflation data used for any constant dollar calculations were based on average Consumer Price Index for All Urban Consumers (CPI-U) rates for the past 10 years: roughly 2.6 percent average annual rate of inflation. Medicare Eligible Retirement Health Care (MERHC) is an accrual account used to pay for health care of Medicare-eligible retirees (age 65 and beyond). Cost per capita figures were derived dividing cost of Selected Reserve program by Selected Reserve end-strength. When MERHC figures are included, the cost of Air Force Reserve Airmen to Regular Air Force Airmen increases to 30.4 percent.

been continuously engaged around the world supporting ongoing contingencies, serving side by side with the joint team.²

Using Reservists in operational missions makes sense: it leverages the experience and comparatively lower costs of a predominantly part-time force. Moreover, it im-

²Airmen of the Selected Reserve are mission-ready, capable of performing ongoing operations. Collectively, they have met the operational needs of the Air Force for decades—largely through volunteerism, but also through full-time mobilization. For example, Reserve and Guard Airmen have continuously supported Operation Coronet Oak in Southern Command year-round, 24/7, since 1977. Between 1991 and 2003, Reservists supported the no-fly areas of Operations Northern and Southern Watch. Since the attacks on September 11, 2001, 54,000 Reservists have been mobilized to participate in Operations Enduring Freedom, Noble Eagle and Operation Iraqi Freedom—6,000 remain on active duty status today. It is a fact that the Air Force, more than any other time, now relies on members of the Reserve and Guard to meet its operational requirements around the globe.

Our Reserve community continues to answer our Nation's call to duty with large numbers of volunteer Reservists providing essential support to Combatant Commanders. Forty-six percent of the Air Force's strategic airlift mission and 23 percent of its tanker mission capability are provided by Reserve Airmen. We currently have over 450 C-17, C-5, KC-135 and KC-10 personnel on active duty orders supporting the air refueling and airlift requirements.

In Operations Enduring and Iraqi Freedom, Reserve C-130 crews flew over 6,000 hours in 2008; Reserve F-16 and A-10 crews flew over 3,700 hours. The Air Force Reserve provides 24 crews and 12 fighter aircraft to USCENTCOM in their regularly scheduled rotations for the close air support mission.

The Air Force Reserve maintains 60 percent of the Air Force's total Aeromedical Evacuation (AE) capability. Reserve AE crews and operations teams provide a critical lifeline home for our injured warfighters. Our highly trained AE personnel fill 39 percent of each AEF rotation and fulfill 12 Tanker Airlift Control Center tasked AE channel missions each quarter—all on a volunteer basis. On the home front in 2008, the Air Force Reserve provided 21 of 24 AE crews, 88 percent of the mission requirement, for the response to Hurricane's Ike and Gustav. Additionally, the Reserve provided 4 standby crews, 100 percent of the mission requirement, in support of the Democratic and Republican National Conventions.

In 2008, the men and women of our Combat Search and Rescue forces have been heavily engaged in life saving operations at home and abroad. Since February, Airmen of the 920th Rescue Wing at Patrick Air Force Base, Florida, and their sister units in Arizona and Oregon, flew over 745 hours and saved more than 300 U.S. troops on HH-60 helicopter missions in support of U.S. Army medical evacuation operations in Iraq and Afghanistan. While mobilized for 14 months in support of combat missions abroad, the 920th continued to provide humanitarian relief in response to natural disasters at home, as well as provide search and rescue support for NASA shuttle and rocket launches.

The Reserve made use of its organic ISR and firefighting capabilities to protect the lives and property of our citizens threatened by an especially severe fire season. Defense Support to Civilian Authorities engagement started with planning and directing exploitation and analysis of the first Global Hawk imagery to support Incident Analysis and Assessments. In fact, the first Distributed Ground System Mission Commander was an Air Force Reserve Officer that directed analysis of the areas devastated and movement of the fire lines. Aircrews in the 302nd Air Expeditionary Group (AEG) flew more than 980 airdrops and delivered in excess of 1.3 million gallons of fire retardant to help firefighters on the ground and mitigate further damage and destruction. The AEG is a Joint unit made up of eight C-130 Hercules aircraft equipped with the Air Force Modular Airborne Fire Fighting System, six Marine Corps helicopters, and two Navy Reserve helicopters. Two of the C-130s belong to the Air Force Reserve's 302nd Airlift Wing at Peterson Air Force Base, Colorado. Reserve and Guard personnel helped fight the more than 2,000 fires that ravaged the California wilderness this past summer.

The Air Force Reserve provides 100 percent of the airborne weather (hurricane hunting) capability for the Department of Defense. This past hurricane season tied as the fourth most active with 16 named storms and five major hurricanes. Throughout the year, Air Force Reserve "Hurricane Hunters", C-130J aircraft flown by citizen Airmen of the 403rd Wing at Keesler Air Force Base, Mississippi flew over 1,000 hours, collecting life-saving data that was sent directly to the National Hurricane Center in Miami, Florida, contributing to better forecasts and landfall predictions. Following the end of the hurricane season in the Caribbean, the 403rd deployed 2 aircraft and 4 crews to the Pacific region to continue its support of storm research.

In addition to our hurricane mission, the Air Force Reserve provides 100 percent of the aerial spray mission in support of the Federal Emergency Management Agency, the Centers for Disease Control, and state public health officials. Air Force Reserve aircrews and C-130s from the 910th Airlift Wing, Youngstown Air Reserve Station, Ohio, sprayed more than a million storm ravaged acres of land with pesticides to control the spread of disease.

Our intelligence, surveillance and reconnaissance professionals are providing critical information as they answer the Nation's call to service. In 2008, 192 intelligence personnel deployed in support of world-wide contingency missions to include Afghanistan and Iraq. For the foreseeable future, Reserve intelligence professionals will continue to be deployed throughout the Combatant Command theaters, engaged in operations ranging from intelligence support to fighter, airlift, and tanker missions to ISR operations in Combined Air Operations Centers and Combined/Joint Task Forces.

These are but a few examples of the dedication and contributions our Air Force Reserve Airmen have made and will continue to make around the clock, around the world, each and every day.

proves relationships between Regular Air Force and Air Force Reserve members—it gives Airmen of each component an opportunity to demonstrate their capability and relevancy to each other, as well as Sister Services and coalition forces; it provides Airmen of each component the opportunity to lead each other. Equally important, operational duty provides Reserve Airmen the benefit of operating as a member of the joint team in diverse environments. Operational taskings also improve unit morale and enhance unit pride—important factors in achieving and sustaining high performance.

Yet, for all of our operational capability and contributions, we must not lose sight that we—along with our Air National Guard brothers and sisters—are also a strategic reserve that must be available to surge in times of national emergency. For us to serve as both an operational and strategic reserve, it is critical that we find the right balance between the two. Too few Reserve Airmen means a higher operational tempo for all Airmen—Regular or Reserve; it means less capacity to surge in times of national emergency; it means exhausting our people and jeopardizing the cornerstone of Air Force Reserve service.

We are now 18 years in continuous combat operations, and in our eighth year of OPERATION ENDURING FREEDOM; soon to be in our sixth year of OPERATION IRAQI FREEDOM. By any measure, our Airmen are performing admirably. But, our retention rates are dropping, our experience levels are dropping, indeed the Air Force is “going deep” into the Inactive Ready Reserve and Retired Reserve with its Limited Pilot Recall Program. Are these anomalies that can each be explained; or are they the signposts of a more serious problem? My concern and challenge, indeed our collective challenge, is to ensure we are able to refocus, reconstitute and recapitalize while remaining engaged in the full spectrum of operations—in a word, our efforts must be “sustainable” over the long run.

Volunteerism is vital to the overall capability of not just the Air Force Reserve, but the entire Air Force—today we meet roughly 80 percent of our taskings through volunteerism. Without it, I do not believe we can sustain this level of commitment indefinitely. From this essential fact flow all of my other priorities.

PRESERVING THE VIABILITY OF THE RESERVE TRIAD (FAMILY, AIR FORCE RESERVE AND EMPLOYER)

Air Force Reserve Airmen must strike a balance between their commitments to the Air Force, their families and their civilian employers, i.e., their main source of income. We must be ever mindful of these commitments and the balancing act our Reservists undertake to sustain these relationships. We must strive to preserve these relationships through open communication with each of these essential partners. And, we must strive to provide predictability in deployments, and parity with benefits. Doing so is critically important in ensuring we provide ready and capable Reserve Airmen to the Nation.

This past year, the Air Force Reserve has endeavored to improve communication with Reservists by rolling out awareness campaigns concerning the differences in benefits Congress has provided over the past few years, and how these accrue for those who voluntarily deploy and those who are mobilized. We have also put a spotlight on other important benefits such as reduced eligibility age for retirement pay, improved availability of health benefits, and lower premiums for TRICARE Reserve Select. We have begun surveying focus groups within the Air Force Reserve to better understand the needs of our Reservists and whether we are meeting these needs. And I personally send e-mails to all of our Selected Reserve members to highlight important issues concerning their service. In the coming months, as we learn more, we will be rolling out an awareness campaign on the Post 9/11 Montgomery GI Bill and how it works vis-a-vis other education benefits.

We have worked with the Small Business Association to provide Reservists and Employers awareness of improved access to increased, uncollateralized, low interest loans that Congress authorized last year. We have made it a point to educate our Airmen about the importance of the ESGR program, and we have asked that they nominate their employers for ESGR recognition and take time to accurately fill out employer data in the DOD employer database. I am pleased to report that we have increased our nominations by 149 percent this past year.

We are moving ahead with implementation of the YRRP to support Reserve members and their families throughout the entire deployment cycle. Prior to the enactment of this program, Air Force Reserve Wings dedicated time and a notable level of effort to support their deploying Airmen and families, as evidenced by the number of deployment support and reintegration activities in the past. In 2008, the Air Force Reserve hosted 58 YRRP events that served over 1,250 Airmen and 500 family members.

In addition, the Air Force Reserve Command has formed a Yellow Ribbon Reintegration Office. This multi-functional team has begun identifying challenges, assessing strategic, operational and fiscal gaps, and evaluating effective and implementable options. We're working towards full implementation of Department of Defense directives.

In the future, the Air Force Reserve will publish an overarching YRRP strategy that optimizes benefits to service members and their families. A key component of this strategy will be to support and unify the current independent efforts, and identify the successes of those efforts.

As a Total Force, we continue to work through continuum of service (CoS) challenges to better enable varying degrees of service commitment that members can provide as their life circumstances change throughout their career. The Air Force and the Air Reserve Components are taking a coordinated approach to identifying the issues that make reserve component members disinclined to frequently volunteer for active duty tours. We're identifying barriers and options for reducing or removing impediments to service. These impediments range from financial, cultural, technological to policy and legislative. Through this program the services have thus far identified dozens of impediments, three of which were mitigated by improving policies concerning enlisted promotion, chaplain service age waiver, and security clearances. Although still in its formative stage, the Air Force developed a CoS Tracking Tool which is gaining wider DOD acceptance and we hope will continue to gain momentum as all Services look to act on this important reform initiative.

The fiscal year 2008 National Defense Authorization Act included legislation to authorize reimbursement of travel expenses not to exceed \$300 for certain Selected Reserve members who travel outside the normal commuting distance because they are assigned to a unit with a critical manpower shortage, or assigned to a unit or position that is disestablished or relocated as a result of defense base closure, realignment or another force structure reallocation. Because of this authorization, the Air Force Reserve has been able to retain trained and qualified personnel, rather than having to recruit and train new personnel.

BROADEN TOTAL FORCE INITIATIVES

The Air Force leverages the value of its reserve components through association constructs. The basic model is an associate wing in which a unit of one component has primary responsibility for operating and maintaining equipment (such as aircraft), while a unit of another component (Air Force Reserve, Air National Guard, or Regular Air Force) also operates and maintains that equipment.³ This arrange-

³The Air Force uses three types of associations to leverage the combined resources and experience levels of all three components: "Classic Association", "Active Association", and "Air Reserve Component Association".

Under the "Classic" model, so-called because it is the first to be used, a Regular Air Force unit is the host unit and retains primary responsibility for the weapon system, and a Reserve or Guard unit is the tenant. This model has flourished in the Military Airlift and Air Mobility Commands for over 40 years. We are now beginning to use it in the Combat Air Forces (CAF): our first fighter aircraft "Classic" association at Hill Air Force Base, Utah, attained Initial Operational Capability in June 2008. This association combined the Regular Air Force's 388th Fighter Wing, the Air Force's largest F-16 fleet, with the Air Force Reserve's 419th Fighter Wing, becoming the benchmark and lens through which the Air Force will look at every new mission. The 477th Fighter Group, an F-22 unit in Elmendorf, Alaska, continues to mature as the first F-22A associate unit. This unit also achieved Initial Operating Capability in 2008 and will eventually grow into a two-squadron association with the Regular Air Force.

The Air Force Reserve also established its first Intelligence Squadron Association with the 50th Intelligence Squadron at Beale Air Force Base, California. This unit of Reserve and Regular Airmen delivers real-time, tailored intelligence to combat forces engaged in missions in Iraq and Afghanistan, with data derived from theater Predator/Reapers, Global Hawks and U-2s, in partnership with the Total Force team. The Air Force is considering additional associate intelligence units for Beale and Langley Air Force Bases. These new capabilities create a strategic reserve force ready to respond to the call of our Nation, capable of being leveraged as operational crews ready and willing to support the Regular Air Force in everyday missions around the world. This model has proven itself and is the basis for the growth of associations over the last 5 years.

Under the "Active" model, the Air Force Reserve or Guard unit is host and has primary responsibility for the weapon system while the Regular Air Force provides additional aircrews to the unit. The 932nd Airlift Wing is the first ever Operational Support Airlift Wing in the Air Force Reserve with 3 C-9Cs and 3 C-40s. Additionally, the Air Force Reserve will take delivery of an additional C-40 in fiscal year 2011, appropriated in the fiscal year 2009 Consolidated Security, Disaster Assistance and Continuing Appropriations Act. This additional C-40 will help to replace the 3 C-9Cs, which are costly to maintain and fly. To better utilize the current fleet of C-40s at the 932nd, the Air Force created an Active Association. We also are benefiting from our first C-130 Active Association with the 440th AW at Pope AFB.

ment effectively places more people against a piece of equipment, thereby gaining more utility from each piece of equipment, and the ability to surge as needed, and pull back when not.

Beyond fiscal efficiencies, however, associations use the inherent values that each component brings to the mix. For example, less experienced Airmen from Regular Air Force can be more favorably balanced against higher experienced Reserve Component Airmen. Moreover, these constructs can foster mutual respect among components, and can lead to a cross flow of ideas. Regular Air Force Airmen can bring a wider perspective of Air Force operations to an associate unit based on their ability to change assignments on a regular basis. For their part, Reserve Airmen lend stability and continuity to the organization and the mission. The ultimate goal is to provide the Air Force and combatant commanders the best possible capabilities with fewer physical resources by leveraging the combined resources of the Regular Air Force, Air National Guard, and Air Force Reserve.

The Air Force has been using associations modestly, with varying degrees of success, since 1968, primarily in the air mobility missions. However, during the last 5 years we have aggressively pursued fundamental change to maintain our war fighting capabilities. Our central strategy is to use integration/association initiatives to leverage the strengths of all three components to make one strong Air Force in many mission areas. Failing to consider the Air Force holistically risks unbalancing the contributions of each component, which are central to the success of the efficient and effective delivery of combat capability to the war fighter.

Associations also present new challenges in the way we develop plans to meet the needs of combatant commanders. It used to be, and in some cases still is, that our mobilization plans were developed for a unit and its equipment to deploy together in support of a given operations plan. Associations now must be worked into those plans. We have made progress in developing war mobilization plans that deploy equipment separately from the units that deploy. But we will undoubtedly encounter difficulties in the execution of these plans. We still will have to find the sweet spot in the Regular Air Force/Air Reserve Component (ARC) manpower mix when allocating our people against various missions within the Air and Space Expeditionary Force construct. We will have to determine how long and how best to access ARC personnel—i.e., mobilize or volunteer—to meet that mix so that we can give combatant commanders the most effective force. And we should consider measuring taskings by associations instead of wings.

If it is to succeed, the Air Force must educate Airmen about the unique challenges of associations—at all levels, within and among each of the components. Advancement within each Service is premised upon joint education and experience; advancement should also be premised on joint component education and experience. Candidates for leadership in associations should be screened and selected based on their experience and abilities to lead and work well with other components.

Force integration is not a process unto itself; it has a purpose, an end state. Properly understood, an integrated force is a unified, harmonious, effective entity. We are merely at the beginning of this process; it will take many, many years before we approach the end state. We must look beyond the fiscal efficiencies touted as the basis for our undertaking, roll up our sleeves, and get to the hard work needed to make us a more effective combat force. Should we do so, we will some day look about us and recognize a truly integrated Air Force.

MODERNIZE EQUIPMENT AND FACILITIES

The Department of Defense's goal is to fully equip Reserve Component units, thereby providing a trained and ready force at every stage of the service's force rotation plan. The Air Reserve Components, along with the Regular Air Force, face significant modernization and recapitalization challenges, for both our aircraft and infrastructure. Some Air Force Reserve platforms remain out of the fight due to lack of defensive and countermeasure systems needed in the USCENTCOM Area of Re-

Under the "Air Reserve Component (ARC)" model, now resident at Niagara Falls Air Reserve Station (ARS) in New York, the Air Force Reserve has primary responsibility for the equipment while the Guard shares in the operation of the equipment and works side by side with the Reserve to maintain the equipment. The Air National Guard has transitioned from the KC-135 air refueling tanker to the C-130, associating with the 914th Reserve Airlift Wing. The 914th added four additional C-130s, resulting in 12 C-130s at Niagara ARS. This ARC Association model provides a strategic and operational force for the Regular Air Force while capitalizing on the strengths of the Air National Guard and Air Force Reserve. Additionally, in this case it provides the State of New York with the needed capability to respond to state emergencies.

The Air Force Reserve has 9 host units and is the tenant at 53 locations. There are currently more than 100 integration initiatives being undertaken by the Air Force and Air Reserve Components.

sponsibility, including some of our C-5A, A-10 and C-130 aircraft. In addition, as with the Regular Air Force, we are facing unpredictable fatigue, corrosion, and structural component availability concerns on platforms that even our superior maintainers cannot correct forever, as we have seen in our C-5, KC-135 and A-10 fleets. While we continue to meet the requirements of the Air Force and the Joint team, the current high operations tempo has led to our current reality—the increasing uncertainty of our long-term fleet viability. Similarly, continued risk in the Air Force Military Construction (MILCON) program has caused a significant growth in the Air Force Reserve Command's facility project backlog. Timely modernization is critical to remaining a relevant and capable combat ready Reserve force.

National Guard Reserve Equipment Account (NGREA)

The NGREA appropriation has resulted in an increase in readiness and combat capability for both the Reserve and the Guard. For fiscal year 2009, we received \$37.5 million in NGREA appropriations which resulted in the Air Force Reserve Command's ability to purchase additional upgrades for Reserve owned equipment. Some of the items that we purchased using NGREA funding include: Defensive Systems for C-5s, Line of Sight/Beyond Line of Sight capability and new upgraded radar for our C-130 aircraft, and an upgrade to the F-16 Commercial Fire Control Computer. Many of these new capabilities are directly tied to better air support for our Soldiers and Marines in Iraq and Afghanistan. NGREA funding has helped the Air Force Reserve to remain relevant in today's fight as well as the ability to remain ready and capable in future conflicts. We thank you for your support with this critical program.

Milcon and Facilities Modernization

Along with challenges in modernizing our equipment, we face challenges modernizing our facilities. During the fiscal year 2008 budget formulation, both the Regular Air Force and the Air Force Reserve took risk in MILCON appropriation in order to fund higher priorities. This reduction coupled with past shortfall funding in MILCON has resulted in a backlog nearing \$1 billion for the Air Force Reserve.

We will continue to work within the fiscal constraints and mitigate risk where possible to ensure our equipment and facilities are modernized to provide a safe and adequate working environment for all of our Airmen.

CONCLUSION

Mr. Chairman and Members of this Committee, I am excited to have been able to take on this role as Chief of the Air Force Reserve and Commander of Air Force Reserve Command. I take pride in the fact that when our Nation calls on the Air Force Reserve, we are trained and ready to go to the fight. Over 67,000 strong, we are a mission-ready reserve force capable of serving operationally throughout the world with little or no notice.

The rapidly changing security and economic environment will cause Congress, the Department of Defense, and the Air Force to make some difficult choices in the year ahead. The Air Force Reserve is highly experienced, cost-effective force provider well-suited for this challenge. I submit it is a hedge against the uncertainties we are facing for which you pay a relatively small premium. I firmly believe paying this premium will enable the Air Force to achieve its force integration goals and address not only its priorities, but also help Congress address the more pressing issues we will face as a nation in the years to come.

I appreciate the support of this committee for the appropriations it provides to fund our readiness and combat capability. I look forward to working with each of you in the future on the challenges facing the Air Force Reserve, the Air Force, and the Nation.

YELLOW RIBBON REINTEGRATION PROGRAM

Chairman INOUE. I would like to begin asking a question. In the fiscal year 2008 Defense Authorization Act, the Defense Department was directed to establish a centralized office for the Yellow Ribbon Reintegration Program. Now, some have questioned the wisdom of this. I would like to get your thoughts on this. General Stultz.

General STULTZ. Yes, sir. I think my candid assessment on that, it probably slowed down the process for us to implement the Yellow Ribbon Program because anytime we try to bring all the services

together and gain some kind of consensus of how we are going to implement something, it takes a long time. And I think what we came to agreement on is we cannot apply a cookie-cutter approach. Each service is different in terms of the way we mobilize and deploy soldiers, in terms of the length of time we deploy them, and to what they are exposed to during those deployments. And so at the end of the day, we came back and said—you know, let each service sort of design its own implementation plan. So I think we have slowed down part of the implementation by going through that process.

At the same time, I will say when you do raise it to that level, to the OSD level, you get buy-in as a Department that this is not just a program we are going to throw to the services and say you figure it out. It is something that Congress has mandated this to us, and as the OSD level, we are going to fund it, we are going to buy into it, fund it, and make sure it gets implemented properly.

From the Army Reserve's perspective, we have already conducted 70 of the programmed events this year. We are well on our way. We have got another 70 or so already scheduled. The challenge we are finding with the Yellow Ribbon Program is the difficulty in trying to bring a dispersed force back together. Unlike an active duty force where everybody comes back home to Fort Hood and you can go through a reintegration process there at Fort Hood, with the Army Reserve, because our units are geographically dispersed, you may have a soldier who lives three States away from the unit and he is willing to travel, a lot of times at his own expense, to be part of that unit, but when we come back for a Yellow Ribbon event and we try to engage the families, it makes it tough.

One approach that was developed was to say, okay, let us have a regional approach. Let us have geographic events, and that way soldiers can choose where to go to the reintegration event based on their geography. I have an issue with that, and I have told my commanders that because I think it is imperative that we bring soldiers back together as a unit and we look the soldiers in the eye and put them through that reintegration together as a unit. If you took me and said you go somewhere off to an event that is not part of your unit and I go sit in the corner and sit there and nobody else knows who I am there, they are going to say, well, he's just a quiet guy. If I go and do the same thing with my unit, they are going to say something is wrong with Jack. He needs help because he is not himself. And so it is imperative, if we implement a Yellow Ribbon Program properly, it is a unit-based program and the exceptions are where we have to disperse geographically. We will always have the exceptions.

Of particular concern to me on Yellow Ribbon is the IRR, the Individual Ready Reserve. We do not really have a Yellow Ribbon Program for them, in my opinion. I get occasionally, not very often, an IRR soldier that is assigned to the Army Reserve. It is my, I think, obligation to take care of that soldier and his family with the Yellow Ribbon Program. Even though the unit may be from Pennsylvania and he goes back to Texas, I have got to figure out how to get him the reintegration he needs back in Texas. But I just get a very small piece of the IRR.

Most of the IRR are filling active duty units, and when that unit comes back to Fort Hood and that soldier goes back to Pennsylvania, nobody looks out for him. I have raised this at the Vice Chief and the Chief of Staff level to say we have got to figure out to do Yellow Ribbon for our IRR soldiers, as well as my active Reserve soldiers.

I think it is a great program, sir, and I appreciate the funding we have gotten for that. I think we are still learning as to the best way to implement it, and we have been a little bit slow to get there.

Chairman INOUE. Admiral, any thoughts on this?

Admiral DEBBINK. Yes, sir, Chairman. The Yellow Ribbon Program has been instrumental in the Navy Reserve to helping us really propel our Returning Warrior Workshop, as our main program, forward with the funding that came with it. It has been a very successful program. They're done on weekends not because it is a Reserve program, but because that is when we can get the spouses there too, which is also very important to us because it is a reintegration event. You want to bring the members back together who served, as well as the families.

The other thing we have done is employed the funds from Yellow Ribbon to deploy psychological health outreach coordinators to each of our regions, and they have been instrumental as well, staying in touch with our sailors, particularly those who might be at risk for psychological health reasons. And I have had a couple of great new stories of interventions of possible suicides. So we have been very pleased with the funding. It has been very instrumental to our programs.

Chairman INOUE. Thank you.

General Bergman.

General BERGMAN. Yes, sir. General Stultz articulated it very, very well. I will just add to the fact that the unit-based approach is important because the marines in the unit know the other marines. They know who is in distress quicker than if you just show up at an individual event by yourself. That has paid dividends.

Number two, Mobilization Command, which is the Marine Corps' element in charge of managing the IRR, has been a great asset in ensuring that, at least to the 80 percent level, we maintain some level of in-touch capability with those IRR members. Regardless of whether they went to an active component unit or whether they came to a reserve unit, they are included.

And as Admiral Debbink said, the Marine Corps also utilizes a psychological health outreach program that has been established for us. We are in the process of building the 32 teams across the country which will be comprised of about four mental health professionals each that will allow us to ensure that we dig a little deeper each time. So we appreciate the continued funding and support.

Chairman INOUE. Thank you.

General Stenner.

General STENNER. Mr. Chairman, thanks. I do agree with just about everything that has been said as far as units are concerned. We would love to be able to deploy as a unit. We would love to be able to reintegrate and take a look at everybody as they come home at the 30-, 90-, 180-day point as a unit. We are, however, also in-

volved with our individual mobilization augmentees (IMA) who do regularly deploy. So we are reintegrating them as well.

Some of the things the program has done, regardless of the implementation, has certainly raised the awareness of what is out there, what is necessary, and how we might go about doing this. As an example, I was at Youngstown, Ohio, a couple of weeks ago, and they had a wonderful Yellow Ribbon Program event that brought a security forces squadron back together with their families, and it was a wonderful time for all.

Across the river in Pennsylvania at Pittsburgh 2 weeks earlier they had had a similar event, their first. Those two units, being in proximity, have in fact generated some great discussion, and they are going to share assets, will be able to share resources, will be able to, as an example, use the time that they are having at one location to have other folks come over, if they cannot make it somewhere else.

We are looking at all those kinds of locations to put our IMAs, who also need to be understood and taken care of as well, as well as the Individual Ready Reserve. And I think that one of the best things that we can do right now is we can get a database that shows where these things are. It is up to each of us as commanders and unit-equipped members to figure out how best to monitor and watch and get all of our folks, regardless of unit, IMA, IRR, reintegrated appropriately and monitored carefully. So we are working together with our service partners to do that as well.

Thank you, sir.

Chairman INOUE. Thank you.

General Stultz, you have implemented an Employer Partnership Program. How is that working?

General STULTZ. Yes, sir. It has probably been about 1½ years ago, we started really looking seriously. If we are going to sustain the up tempo we have with our Army Reserve force, we have got to have the employers. I have got to have soldiers who have the confidence that they can have a civilian career and be in the Army Reserve. And that led us into some discussions with employers to sit down and talk about how we are going to work together, make sure we have got their support.

What we found is that the employers of America have the same challenge we have in the military, and that is finding the talent—not the workers, the talent—that they need to run good corporations or good industry in America. And so rather than having the discussion about what is going to happen when I take workers away from those employers to be soldiers for me, I said we ought to be having a discussion—let me bring soldiers to you to be workers for you because I have got great talent in my ranks. These three individuals that I introduced earlier represent that.

And what we found is there is a natural synergy where we have in the Army Reserve, because we are a combat support, service support, the same skill sets in our ranks that American industry is looking for. We have truck drivers. The American Truckers Association said they were desperately short of long-haul truck drivers in America. We have medical technologists. America's medical centers said that we are desperately short of medical technologists, respiratory, x-ray, surgical, ER. Law enforcement. We have mili-

tary police. A lot of law enforcement agencies, to include right here in the District of Columbia, said we are desperately short of law enforcement. And it goes on and on and on.

So we started this initiative called the Employer Partnership where we basically said let the Army Reserve become a reservoir of talent to help populate America's industry. Let us develop a human capital strategy where I can go recruit a soldier to be a medical technologist for me in one of my Army Reserve hospitals on the battlefield in Bilad. But when they come home, they will come to work for you here at Inova Health Care Center in Northern Virginia.

And so we started signing agreements where we said we will go help you. We will find the talent. And as word got out, it just kind of snowballed. To date, we have 225 companies that have come to us and said we want to sign up with the Army Reserve to be partners with you. We have got probably another 100 that are on a waiting list.

The recognition is when we bring an Army Reserve—and I would just say not Army Reserve. It is Navy Reserve, Marine Corps Reserve, National Guard, Air Reserve, whatever—that comes to work for us, these industries tell us it is a different individual, different work ethic. They understand leadership. They understand team work. They understand responsibility. They are drug-free. They are physically fit. They have an aptitude. And so it is very, very positive.

I was just a few weeks ago in Kosovo visiting one of my units, and a sergeant came up and said, sir, I was not sure what I was going to do when I got home, but I went on the Army Reserve Employer Partnership website and I have three offers now for a job when I get home. So it is very, very encouraging.

We are still in the infant stages of how we properly implement this to match the talent and then expand it across all the services that are represented here. But it is very, very successful to date, and we have got companies, everything from Joe's garage in Slidell, Louisiana, to General Electric, which has 300,000 employees around the world, and Wal-Mart or somebody like that. So it spans the spectrum in terms of employers that really are reaching out and saying we want to engage with the talent that you bring us.

Chairman INOUE. Congratulations.

General STULTZ. Thank you, sir.

Chairman INOUE. Do the other Reserve components have similar programs?

General STENNER. Sir, I will tell you that one of the most valuable resources that we deal with, as far as an Air Force Reserve, is the rated crew member that generally has a civilian job as an airline participant one way or the other, whether as a pilot or in some other kind of other capacity. So right now, to share that resource, to understand how we use them, and where we can, leverage the talents that come from the Air Force Reserve, we are working with the Airline Transport Association to see how we can, in fact, deploy our folks, get them back, and get that talent where it needs to be. And we bring in folks that the airlines would like to have for exactly the same reasons that General Stultz is talking about, and I think that we are leveraging that, at least in that ca-

capacity right now. And I will emulate his program. It sounds like it is a good one.

Thank you, sir.

Chairman INOUE. Admiral.

Admiral DEBBINK. Mr. Chairman, I would offer that we are terrifically excited about the program that the Army Reserve has put in place, and the four of us, plus the National Guard Chiefs as well, get together on a monthly basis and share these stories. And so we are eager, as this program continues, to see how we can piggyback on it.

In the meantime, we think one of the very important programs that we are all very supportive of that has been a longstanding program in a similar vein is the employer support of the Guard and Reserve and using that as a very important outreach to the employers that really are the third leg of the stool that we all rely upon, the servicemember, the family, and the employer.

Chairman INOUE. General Bergman.

General BERGMAN. Sir, back when General Jones was Commandant in around the 1999–2000 timeframe, the Marine Corps implemented the Marine for Life Program which put drilling marine reservists, some on active duty, some on the drilling reserve status, around the country to facilitate reintegration into the communities for the marines coming back, whether it be through helping them find jobs, connect with employers, or just in general re-assimilating back into their community.

Our program is not anywhere near as evolved as the Army's, but nonetheless, for the last 8-plus years, it has been serving on a smaller level. So I applaud the Army Reserve and General Stultz for what they have done because they really have become the model for all of us.

Chairman INOUE. Thank you very much.

Senator Cochran.

Senator COCHRAN. Mr. Chairman, I just wanted to raise one issue. I noticed in the Army's report, it talks about meeting homeland defense and disaster relief missions and how you need to maintain a training level and equipment status in order to make that kind of contribution. I was just curious to know whether in Hurricane Katrina you had experiences in helping to provide assistance to the victims of that terrible tragedy?

General STULTZ. Yes, sir, very much so. A lot of those CH-47 helicopters you saw picking people up off the roofs or dropping sandbags into the dikes were Army Reserve helicopters that we sent down there. A lot of the trucks that you saw bringing in bottled water and other medical supplies and everything were Army Reserve trucks that we dispatched down there to that location. Some of the engineers that were down there working hand in hand with the Guard folks were Army Reserve engineers.

The challenge we have got is I had no authority to do that because it had not been declared a Federal disaster at that point. Knowing that my counterparts in the National Guard and all, as well as my own soldiers and their families who lived in Mississippi, Louisiana, and that area, were suffering, we said we cannot wait. We have got to go ahead and get the help down there.

You know, we went through this in Hurricane Andrew when I was in Florida, and the question from some of the Guard folks was, how come we are driving past Army Reserve equipment that could be helping us? And we said, we do not have the authority yet to put that equipment into the operation.

What I did is I put them on annual training. You know, I am authorized to do annual training every year, and so I said, okay, this is going to be a training exercise for you guys. Get down to Louisiana and get those helicopters down there, get everything down there, and eventually we will get you into a proper status, but we cannot wait.

What we have said—and the Office of the Secretary of Defense has taken it on as far as legislative initiative—we need to put some kind authority in place for call-ups of title 10 forces for homeland emergencies other than just the one we have now, which is for weapons of mass destruction. But we have a lot of resources populated around America that are ideal for these homeland type missions, but again, because of the way the laws are written and the title 32 status for the National Guard being responsive but it is still a State response, even though I have got units sitting there available, they cannot be utilized. That is what I am pushing for. We have got to change the law to be able to say let us be able to utilize the Marine Corps Reserve, the Navy Reserve, the Army Reserve, the Air Reserve in homeland missions and give us the authority to put these people on orders on short notice.

Senator COCHRAN. I wonder if any of the other services have had similar experiences, maybe not with Hurricane Katrina. General Stenner.

General STENNER. Yes, sir. Thank you very much for that question because it is, in fact germane, I think to all of the services here, as our title 10 reserve status puts us in that predicament.

But our combat search and rescue helicopters have been very much involved in almost every one of these kind of disasters. We know that our spray mission at Youngstown, Ohio is going to be called upon almost immediately afterward to start making sure that we do not have those infestations that we have had in the past with bugs and disease. We know that our lift capacity is going to be just as essential as anything else that is in there as the supplies continue to get to where they need to be.

So all of those things that—we have gone out of our way to make sure they are positioned as far as we can take them before we have the authorities to get them into the fight. So we will bring them from all over the country, preposition and prestige with our component Air Force. We will coordinate in-house as far as we can to the point of what General Stultz said and put them on an appropriate order to get the job done until we can get the rest of the authorities in place.

So I have the same issues. I have the same, I think, requirements and what we can do as four services would be wonderful.

Senator COCHRAN. Thank you.

General Bergman.

General BERGMAN. Yes, sir. Well, as I am sure you are very well aware, our amphibious assault vehicles, headquartered in Gulfport, were out swimming literally before Katrina had moved all the way

through doing lifesaving kinds of missions and continued to do that throughout as necessary.

We had also in advance, from both the east and the west, prepositioned some long-haul vehicles to a point, let us say, somewhere between their station of assignment and the central gulf coast area in anticipation of a potential event. We were as prepared as we could be.

But more importantly, the lesson learned from that that I think paid dividends, let us say, in Hurricane Ike was the fact that, for example, the advance coordination between the local community and the local governments with our Reserve unit there in Galveston allowed for a clearer understanding of who was going to do what, who had the capabilities to do what. In other words, do not count on us because we are probably going to be evacuated. We will be coming back from a different direction.

In echoing what General Stultz has said, the need for ongoing dialogue to understand in our region of the country—and I would suggest to you every region, but we just happen to have a defined hurricane season every year that allows us to preplan for—the lesson learned from Katrina and from follow-on hurricanes has helped us become better prepared.

Senator COCHRAN. Admiral Debbink.

Admiral DEBBINK. Mr. Vice Chairman, I'd offer our example would be the California wildfires last year where HSC-85, a Reserve helicopter squadron, worked through our regional organization there, Navy Region Southwest, to provide support. Using this total force look at things, one of our Navy reservist's home was threatened by the fire, and Navy Region Southwest, the active component, relocated that sailor. So the way we see it is employing it through our total force, and it is working pretty well for us.

Senator COCHRAN. Well, thank you very much for the contributions you have made to not only our national security interests in terms of traditional military activities, but some of these other events that are just as important and can be just as deadly. But thank you very much for your service.

ADDITIONAL COMMITTEE QUESTIONS

Chairman INOUE. General Stultz, Admiral Debbink, General Bergman, General Stenner, we thank you very much for your testimony and for your vision and your wisdom. And through you, may we thank the men and women in your Reserve components for their service to our country.

[The following questions were not asked at the hearing, but were submitted to the Department for response subsequent to the hearing:]

QUESTIONS SUBMITTED TO LIEUTENANT GENERAL JACK S. STULTZ

QUESTION SUBMITTED BY SENATOR BYRON L. DORGAN

END STRENGTH

Question. With increased operational demands placed on the reserve component for the past several years, signs of stress and strain are showing. All reserve component services are facing increased challenges retaining experienced, mid-grade career service members, precisely those eligible for retirement after having served 20-years of service. I am concerned we are not maintaining a balanced force, retaining

enough of the very individuals who have gained the benefit of experience these past years of increased operations. I'm considering introducing legislation that would enhance retention of those experienced career service members, providing an incentive to serve beyond 20-years, initial retirement eligibility, to continue to serve in the reserve component in exchange for lowering the age at which they will be eligible to receive retired pay. For example, if a member commits to serving 2 years beyond 20, the age for which they are eligible to receive retired pay would be lowered by one year.

What is your opinion of this idea?

Answer. The Army Reserve continues to seek to shape the force ensuring we keep the right talent, expertise and experience to sustain a superior level of operational performance. Benefits and incentives are among the tools the Army Reserve can utilize to shape the force. We are looking at other targeted incentives to retain the right talent as well. There is no evidence that a reduced retirement age would serve as an incentive to retention. RAND studies and current information does not support this assertion. Furthermore, reduced retirement would create expensive entitlements with no demonstrated improvements in force management. It does little to improve the compensation and benefits for those who are bearing the burden of mobilization and deployment.

QUESTIONS SUBMITTED BY SENATOR RICHARD J. DURBIN

INDIVIDUAL READY RESERVE (IRR)

Question. As the Army Reserves have transitioned from a strategic force to an operational force, what is your opinion on whether the Individual Ready Reserve has kept pace with that transformation? What, if any, role do you see for the Army Reserves to manage the Individual Ready Reserve?

Answer. With the creation of the Army Human Resources Command (HRC) in 2003, the Individual Ready Reserve (IRR) was moved from the command and control of the Chief, Army Reserve and placed under the command of the Commanding General, HRC. In 2006, the Secretary of the Army approved the IRR Transformation Plan, which was an integrated and systemic approach to reset and reinvigorate the IRR. Since implementation, the IRR, along with the rest of the Army Reserve, has undergone major transformation from a strategic to an operational force and made significant progress towards creating a viable pool of trained, ready and deployable Soldiers to meet the needs of today's Army.

However, this transformation and the recent operational pace have also caused the IRR to evolve away from its traditional role as a place where Soldiers can "take a knee." No longer can Soldiers simply wait in the IRR while catching up on military education or choosing to focus on family and civilian work after a deployment—they are subject to mobilization in the IRR. Some active component Soldiers are even choosing to be discharged rather than opt to serve in the IRR upon transitioning out of the Active Component.

I believe the Army Reserve needs a place for Soldiers to disengage from traditional unit affiliation or possible mobilization in the IRR and provide them with a short-term, transitional status. Additionally, I think that the Army Reserve would benefit from a program that affiliates IRR Soldiers with Army Reserve Units to serve as a "force in reserve" for contingency operations. This would also benefit the IRR Soldiers by providing a home unit for training and support requirements.

Management of the IRR must continue to be a coordinated effort between both the Active Army and Army Reserve since the IRR plays an integral part in the readiness of the Total Force. I see a role for the Chief, Army Reserve in the management of programs that would affiliate IRR Soldiers with Troop Program Units and provide a respite for Soldiers in transition.

PERSONNEL

Question. The fiscal year 2009 Omnibus contained the provision to help federal employees in the National Guard and Reserves avoid a loss of income when they are called the active duty.

What efforts will the Army Reserve undertake to quickly implement this new provision?

Answer. At this point, we are coordinating with the relevant agencies within the Army to develop the appropriate policies to implement these initiatives. It doesn't appear that legislation is necessary, but if that viewpoint changes, we will inform the Committee promptly.

Question. Can you provide the number of current Army Reserve members who are federal government employees?

Answer. The Army does not maintain a central data base that allows us to garner the data for all Army Reserve Soldiers who are employed by the Federal Government.

Currently we are able to provide information on the Dual Status Military Technicians. There are 8,180 Army Reserve Soldiers employed as Military Technicians.

Question. Of that number, how many have served at least one tour in Operation Enduring Freedom or Operation Iraqi Freedom? How many are currently deployed?

Answer. Of the Dual Status Military Technician population:

—There are 894 currently mobilized; 375 for OEF, 516 for OIF. Of the 894 currently mobilized, 667 have past mobilizations.

—There are 4,723 not currently mobilized that have past mobilization.

—There are 2,563 with no mobilization (current or past).

Source is FTS provided file of employee SSN and DFAS pay files (mid-month July 2009) using APC directly correlating to OIF and OEF only.

QUESTIONS SUBMITTED BY SENATOR PATTY MURRAY

TRICARE

Question. Is there a need to find a way to extend TRICARE service to cover the “gray area” between the end of affiliation with the Reserves and the start of retirement benefits?

Answer. Expanding TRICARE coverage to “gray area” retirees must be weighed against costs and the ultimate impact to overall force readiness—an effort to be undertaken by the Army Surgeon General and Program Analysis. Study and validation of cost estimates and cost sharing is required. Expanding TRICARE coverage (authority to utilize TRICARE Reserve Select) similar to the fee based enrollment offered to members of the National Guard and Army Reserve in the National Defense Authorization Act of Fiscal Year 2007, offers potential benefits to the force, which would become clearer once cost study analysis is furthered. Expanding TRICARE coverage as a benefit for “gray area” retirees could be used as a retention/force management tool, through appropriate qualifying criteria, to retain or release select populations of service members—advancing a “continuum of service” to more effectively manage the total force.

END STRENGTH

Question. Gentlemen, each of you has a full time support entity within your organization. With the increase in usage of the Reserve component, do you feel you have the full time end strength to fulfill your obligations to each of your active duty components requirements?

Answer. The increased demand and resultant operational tempo since September 11, 2001 caused the Army to integrate and employ the Army Reserve as an operational force. The Army Reserve has realigned the force in accordance with the Army Force Generation (ARFORGEN) unit deployment construct and changed its training paradigm from a “mobilize, train, deploy” to a “train, mobilize, deploy” process. To sustain the Army Reserve as a truly operational force requires increased readiness best achieved by evolving and improving full time support (FTS) manning and processes.

While we have commissioned studies (to be completed by September 2009) to determine the optimum strength and balance of FTS staffing (Active Guard and Reserve (AGR), full time equivalents (FTE), military technicians, civilians) we have recognized we must increase FTS to support the unit deployment model. FTS provides both steady-state support for generating ready forces but also must be flexible enough (potentially through FTEs) to meet dynamic, evolving Army Reserve mission requirements. A unit in a reset posture may require current “strategic reserve” staffing (12 percent), however, as the unit moves through progressive years of training in preparation for deployment FTS must increase until ultimately the entire unit is mobilized on to active duty (100 percent). Our preliminary estimates suggest, at a minimum, Army Reserve FTS must increase as a percent of total strength of between 3 to 6 percent (bringing FTS/FTE to approximately 15 percent). Appropriately building FTS capability is required for the Army Reserve to continue to fulfill obligations to the Army.

Question. If you do not have the end strength numbers, what increase would each of you like to see if there was an acceleration plan for your projected future growth?

Answer. The Army Reserve has reached its fiscal year 2013 end-strength objective of 206,000. We are postured to continue to grow. However, we have select grade and skill set shortages that will require us to continue to shape the force so we have the highest quality force available. Further growth of the Army Reserve will be determined by the needs of the total force and future mission demands.

QUESTIONS SUBMITTED TO VICE ADMIRAL DIRK J. DEBBINK

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

Question. Admiral Debbink, the Navy Reserve is initiating a Continuum of Service program to make it easier for sailors to transition between the active and reserve components.

What is the timeline for implementing this program?

Answer. The Navy's Continuum of Service is a personnel management strategy, to include a series of policy initiatives, enhancements and management actions designed to simplify the processes used by Sailors to move between Active and Reserve Components. Opportunities for this type of movement have always existed; the Navy's current focus is to remove barriers and establish or revise policies and programs to streamline the process. The Navy needs to better integrate both HR business processes between the Components and develop a single Navy pay and personnel system to streamline a Sailor's transition between Components.

I am working closely with the Chief of Naval Personnel, VADM Mark Ferguson, on the many moving parts involved in the Continuum of Service. The timeline for implementing initiatives to develop career and workforce flexibilities that encourage volunteerism, increase options to "Stay Navy," and promote a lifetime of service to the Navy Total Force is 2012. Efforts are underway to make seamless transitions a reality sooner than our overall 2012 objective.

Question. Given the current economic situation, are you concerned that these initiatives could temporarily hurt Navy Reserve retention as reservists transition to full time active duty positions?

Answer. We do not expect Active or Reserve retention to be negatively affected by the Continuum of Service. Opportunities for Reservists to transition to the Active Component will be managed closely to maximize FIT and health of officer and enlisted communities within fiscal and end strength controls for both the Reserve and Active Components.

Question. Admiral Debbink, with the active duty Navy currently well over its authorized end strength, do you expect that there will be active duty slots available for reservists to fill? How will the active component afford to pay for these additional personnel given the budgetary constraints that the Navy is currently under?

Answer. Movement between the Active and Reserve Components is built into annual officer and enlisted strength plans, and funding is programmed accordingly. Plans are monitored and adjusted continuously through the fiscal year to ensure the Navy remains within fiscal and end strength controls established by Congress.

QUESTION SUBMITTED BY SENATOR BYRON L. DORGAN

Question. With increased operational demands placed on the reserve component for the past several years, signs of stress and strain are showing. All reserve component services are facing increased challenges retaining experienced, mid-grade career servicemembers, precisely those eligible for retirement after having served 20 years of service. I am concerned we are not maintaining a balanced force, retaining enough of the very individuals who have gained the benefit of experience these past years of increased operations. I'm considering introducing legislation that would enhance retention of those experienced career servicemembers, providing an incentive to serve beyond 20 years, initial retirement eligibility, to continue to serve in the reserve component in exchange for lowering the age at which they will be eligible to receive retired pay. For example, if a member commits to serving 2 years beyond 20, the age for which they are eligible to receive retired pay would be lowered by 1 year. What is your opinion of this idea?

Answer. Current Navy manpower policies provide the necessary incentives for the individuals the Navy Reserve needs to deliver its required capabilities, including career personnel.

Bonus payment plans for retention strategically targeted at specific year groups (to include those service members with 20 years of qualifying service) and critical wartime specialties. These bonuses enhance the Navy's ability to recruit and retain the right people for the right job. The Reserve bonuses also target the "right type"

of Sailor and focus on undermanned ratings and critical skills. Congress has been generous with the authorization of these bonus plans, and I appreciate the Congress' foresight and concern for retention of our Reserve servicemembers.

Another key aspect that enables high RC retention, at all pay-grades, is to provide the Sailors with real and meaningful work. Having recently visited the Central Command Area of Responsibility, I met with many RC Sailors in-theatre and know that their motivation is high and that their desire to continue serving is remarkable. My job as the Chief of Navy Reserve is to ensure that RC Sailors are provided the opportunities for such real and meaningful work—I intend to do that.

For amplification, Enlisted and Officer Reserve retention rates remain high, and attrition rates remain at historic lows. The fiscal year 2008 Enlisted attrition rate was ~25 percent, and the fiscal year 2008 Officer attrition rate was ~15 percent, down from the 3-year rolling averages of ~29 percent and 19 percent, respectively. As a result, the Navy Reserve Officer corps is actually "over-manned" in the ranks that are tied to 20 years of qualifying service. In addition, we continue to enforce policies to shape the Force and maximize "Fit," while targeting the optimal number of prior service Enlisted accessions to ensure we remain within budgetary limits and strength controls.

Our goal remains to finish fiscal year 2009 with a stable, balanced inventory of Sailors that positions our Reserve Force for continued, outstanding Total Force support, now and well into the future.

QUESTIONS SUBMITTED BY SENATOR RICHARD J. DURBIN

Question. The fiscal year 2009 Omnibus contained the provision to help federal employees in the National Guard and Reserves avoid a loss of income when they are called the active duty.

What efforts will the Navy Reserve undertake to quickly implement this new provision?

Answer. The Navy Reserve, in coordination with the Employer Support of the Guard and Reserve (ESGR), is planning an informational campaign aimed at highlighting Section 751 benefits to Reservists throughout the country. The specifics of this program will be discussed at ESGR presentations and annual pre-deployment briefings at Navy Operational Support Centers (NOSCs) and other Navy Reserve Activities (NRAs).

Question. Can you provide the number of current Navy Reserve members who are federal government employees?

Answer. There are currently 4,720 current Navy Reservists who are federal government employees.

Question. Of that number, how many have served at least one tour in Operation Enduring Freedom or Operation Iraqi Freedom? How many are currently deployed?

Answer. Of the 4,720 Navy Reservists that are federal government employees, 2,014 have been mobilized during OEF/OIF operations. Currently, there are six such Reservists who are deployed, plus another 89 Reservists from this group who have been identified for deployment in the next 3 months.

QUESTIONS SUBMITTED BY SENATOR PATTY MURRAY

Question. Gentlemen, each of you has a full time support entity within your organization. With the increase in usage of the Reserve component, do you feel you have the full time end strength to fulfill your obligations to each of your active duty components requirements? If you do not have the end strength numbers, what increase would each of you like to see if there was an acceleration plan for your projected future growth?

Answer. I do feel that Navy has the Full Time Support end strength required to fulfill obligations.

Since 2004 the Navy has conducted two extensive and comprehensive Flag Pole studies of the Reserve Component (RC) Full Time Support (FTS) community. These studies included all aspects of Selected Reserve (SELRES) training and administration as well as FTS community health and career progression. The studies also focused on ways to further optimize active-reserve integration (ARI) and maximize operational support.

During the second Flag Pole study, several management options were analyzed and the one chosen allowed each Warfare Enterprise (Air, Surface, Sub, etc.) to determine what percentage of their Total Force (AD, FTS, SELRES, CIV, and Contractor) would provide full-time support to the Reserve component. This was essential due to the significant operational differences between the various warfare com-

munities. In the end, senior leadership concluded that a rigid “one size fits all” approach was not the optimum solution for Navy. At the completion of the study, Warfare Enterprises implemented changes as part of their PR-09 and POM-10 budget submissions.

As the Navy continues to institutionalize its operational and strategic reserve, the training, administration and overall management of manpower requirements will be continually reevaluated by each of the Warfare Enterprises. The size of each component of the Navy’s Total Force (AD, FTS, SELRES, CIV, and Contractor) required to support the Reserve component will be adjusted as needed in the annual POM/PR process.

Question. Is there a need to find a way to extend TRICARE service to cover the “gray area” between the end of affiliation with the Reserves and the start of retirement benefits?

Answer. With changes to the frequency and duration of service for activated Guard and Reserve components since 1991, and recognizing the tremendous sacrifice of those members and their families, we need to carefully balance the benefit structure supporting both active and reserve components without adversely affecting our ability to attract, recruit and retain in both programs while at the same time recognizing potential healthcare implications.

Extending TRICARE benefits for the “gray area”, the period between retirement under official orders from the selected Guard or Reserve component after satisfactorily completing 20 or more years of service and eligible for retired pay at age 60 should strongly be considered. Currently, “gray area” reserve members may purchase the TRICARE Retiree Dental Program even before they draw retirement pay. A similar program could be shaped to provide healthcare benefits under the TRICARE Reserve Select Program, a premium-based health plan which requires a monthly premium and offers coverage similar to TRICARE Standard and Extra. This option should be carefully reviewed to ensure it has its desired effects on personnel programs as well as addressing potential access and monetary challenges associated with delivering the expanded healthcare benefit.

The implications of an individual going without healthcare coverage during the “gray period” are profound. During this period, routine healthcare preventive measures that should be incorporated may not be, and may result in undiagnosed, treatable disease(s). This failure to monitor age appropriate conditions could possibly lead to increased disease morbidity as well as increases in the severity of the disease(s) when there is delay in detection. An increase in undiagnosed diseases could result in cost increases for healthcare at age 60.

QUESTIONS SUBMITTED TO LIEUTENANT GENERAL JACK W. BERGMAN

QUESTION SUBMITTED BY SENATOR BYRON L. DORGAN

Question. With increased operational demands placed on the Reserve Component for the past several years, signs of stress and strain are showing. All Reserve Component services are facing increased challenges retaining experienced, mid-grade career servicemembers, precisely those eligible for retirement after having served 20 years of service. I am concerned we are not maintaining a balanced force, retaining enough of the very individuals who have gained the benefit of experience these past years of increased operations. I’m considering introducing legislation that would enhance retention of those experienced career servicemembers, providing an incentive to serve beyond 20 years, initial retirement eligibility, to continue to serve in the reserve component in exchange for lowering the age at which they will be eligible to receive retired pay. For example, if a member commits to serving 2 years beyond 20, the age for which they are eligible to receive retired pay would be lowered by 1 year. What is your opinion of this idea?

Answer. Although incentives designed to encourage continued service in the Reserve Component can be an important tool for maintaining a healthy force, they must be implemented carefully to ensure that second and third order effects do not manifest unintended consequences such as stagnating promotions or exceeding controlled grade strength limits. Therefore, while Marine Forces, Reserve (MARFORRES) is always interested in exploring new ideas to promote the overall readiness of the Reserve force, and consequently the Total Force, we are reluctant to take a firm stance one way or the other, absent details that can be subject to a thorough manpower analysis. However, as we strive to define and implement the Continuum of Service concept, any legislation or program that enhances the ability to lengthen the careers of highly performing Marines will be a distinct benefit.

QUESTIONS SUBMITTED BY SENATOR RICHARD J. DURBIN

Question. The fiscal year 2009 Omnibus contained the provision to help federal employees in the National Guard and Reserves avoid a loss of income when they are called to active duty.

What efforts will the Marine Forces Reserve undertake to quickly implement this new provision?

Answer. The Marine Corps is preparing information for dissemination to Reserve members who are slated to mobilize, or currently mobilized, to ensure all members who are civilian federal employees are notified of this provision. Additionally, the Marine Corps will publish administrative guidance on command and member responsibilities to ensure federal government agencies receive accurate information on the military compensation, and any income differential, of mobilized Reserve members.

Question. Can you provide the number of current Marine Forces Reserve members who are federal government employees?

Answer. The Marine Corps attempted to access this information through the Defense Manpower Data Center (DMDC). However, DMDC is unable to provide a macro-level report on the total number of Reserve members who are federal government employees, as the data entry fields in the Guard and Reserve Portal list employers individually. In September and October, the Department of Defense expects to receive reports from all agencies of the federal government on civilian federal employees who are Reservists, as part of initiatives pertaining to Tricare Reserve Select, and the Marine Corps will validate these reports in an effort to answer this question.

Question. Of that number, how many have served at least one tour in Operation Enduring Freedom or Operation Iraqi Freedom? How many are currently deployed?

Answer. Once the actions described in the above answer are complete the Marine Corps will be able to respond to this question.

QUESTIONS SUBMITTED BY SENATOR PATTY MURRAY

Question. Gentlemen, each of you has a full time support entity within your organization. With the increase in usage of the Reserve component, do you feel you have the full time end strength to fulfill your obligations to each of your active duty components requirements?

Answer. The Marine Corps deems the end strength of the Reserve Component is adequate. Our full time support program, called our Active Reserve (AR), has been under review as required by the NDAA of 2009. That review is not yet complete. If we require growth in the AR program, however, it will likely be limited and designed to address specific grades and specialties affected by the increased operational tempo for the Reserves.

Question. If you do not have the end strength numbers, what increase would each of you like to see if there was an acceleration plan for your projected future growth?

Answer. The analysis of the Marine Corps Active Reserve (AR) program (full-time support) is a part of the review of full-time support requirements identified in the response to Senator Murray's question concerning full-time support end strength. We cannot evaluate the AR program except in the context of the full-time support requirement. The Marine Corps expects to be able to address the need for changes to AR strengths and "composition" as we go through our review of full-time support requirements.

Question. Does the Marine Corps have a need to extend TRICARE service to cover the "gray area" between the end of affiliation with the Reserves and the start of retirement benefits?

Answer. If an additional TRICARE Retiree Medical Benefit can be offered that covers this "gray area" without raising the cost of existing programs for the Service or Reservists or otherwise detracting from coverage already available, the Marine Corps would be inclined to support such a program.

QUESTIONS SUBMITTED TO CHARLES E. STENNER, JR.

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

FORCE REALIGNMENT

Question. General Stenner, for several years now the Air Force Reserve has implemented force structure realignments as part of the Total Force Integration and base

closure initiatives. The resulting closures and mission realignments have hurt retention levels. At the same time, the Reserve now plans to grow its end strength by 7,000 airmen.

Do you think the Air Force Reserve will be able to recruit and retain these additional personnel given the instability of the ongoing realignments?

Answer. Yes. We have completed all of our programmed manpower realignments and are now stable and growing. The Air Force and Air Force Reserve (AFR) have identified additional mission requirements and the AFR needs to grow proportionately to the regular component to meet these requirements. Recruiting for the AFR is strong—having exceeded recruiting goals for 8 consecutive years. Nevertheless we are bringing on additional recruiters to ensure that we meet any additions to our end strength.

On the retention side, losses realized over the last 3 to 5 years were a direct result of programmed force structure changes and realignments. Now that this era is behind us, we are confident that we will be able to retain the appropriate number of personnel to stay within Department of Defense mandated end strength limits. Measures recently enacted by Congress such as expanded TRICARE Reserve Select, Reduced Eligibility Age for Retirement Pay, the Post 9/11 GI Bill, and authorized travel entitlements for certain Selected Reserve members who serve outside the normal commuting distance have generated much interest. We have undertaken great efforts to make our members aware of these benefits. We believe these benefits and our efforts to improve awareness will greatly improve our ability to retain our members as we go forward.

Question. General Stenner, with personnel and mission adjustments, the Air Force Reserve will have to train and retrain a large number of personnel.

Have you been provided the training slots and funding needed to meet your training requirements?

Answer. Ensuring the Air Force Reserve maintains individual and unit readiness standards to support all aspects of the Air Force's missions remains a top priority. The help we received from your Committee in moving funding into our training program has allowed us to keep pace with the increasing demands resulting from changing missions and demographics.

In terms of formal classroom training, we work closely with Headquarters Air Education and Training Command (AETC) in projecting and securing the appropriate number of quotas to provide our reservists with the required training to meet basic requirements. While there are limits to the number of class seats AETC has to offer, we have not had any notable issues obtaining quotas for our people in the past and do not anticipate any in the future.

While classroom training is vital, it is our "seasoning training program" that gives our members the hands-on training needed to become fully mission capable. When members return from formal school, they must still complete several requirements to become fully proficient in their assigned mission. The Air Force Reserve has implemented the "seasoning training program" to bring members back to their units in a paid status so that they can more quickly receive the required training needed to become fully mission capable in their specialty. This program has enabled us to more readily meet increased demands for reserve members needed to augment active duty to prosecute our national security objectives.

Due to the outstanding results we've experienced with this program, we would like to expand its reach and scope, but our limited funding and inability to tradeoff and reallocate dollars in the year of execution inhibits expansion.

The Air Force Reserve will continue pursue all the avenues necessary to ensure we are providing the best trained, combat ready force available to meet mission requirements.

QUESTIONS SUBMITTED BY SENATOR RICHARD J. DURBIN

FEDERAL EMPLOYEES IN THE NATIONAL GUARD AND RESERVES

Question. The fiscal year 2009 Omnibus contained the provision to help federal employees in the National Guard and Reserves avoid a loss of income when they are called to active duty.

What efforts will the Air Force Reserve undertake to quickly implement this new provision?

Answer. The provision is directed to the federal agencies rather than to the Reserve Components. Section 751 of the Omnibus Appropriations Act, 2009 (Public Law 111-8, March 11, 2009) amends Title 5, United States Code, Section 5538, to require federal agencies to pay a supplemental payment to eligible civilian employ-

ees who are absent from their civilian employment while on active duty in support of a contingency operation under specific paragraphs of Title 10 of the United States Code.

For each covered biweekly pay period, eligible civilian employees will receive a supplemental payment equal to the amount by which civilian basic pay exceeds (if at all) military pay and allowances allowable to the given period. Civilian employees are not eligible for this supplemental payment in pay periods during which they use any other form of paid leave from the civilian position.

Question. Can you provide the number of current Air Force Reserve members who are federal government employees? Of that number, how many have served at least one tour in Operation Enduring Freedom or Operation Iraqi Freedom? How many are currently deployed?

Answer. A total of 14,016 out of 66,871 Air Force Reservists in the Selected Reserve are DOD federal employees. A total of 8,729 of the 14,016 federal employees have been activated in support of Operations Enduring Freedom or Iraqi Freedom. Currently, 403 of the 14,016 federal employees are activated in support of a named contingency operation.

QUESTIONS SUBMITTED BY SENATOR PATTY MURRAY

TRICARE

Question. Is there a need to find a way to extend TRICARE service to cover the “gray area” between the end of affiliation with the Reserves and the start of retirement benefits?

Answer. Yes. Extending TRICARE service to cover the “gray area” between retirement from the reserves and the start of retirement health benefits would improve our ability to care for reserve members and their families, and could serve as an effective recruitment/retention tool.

Such a benefit directly addresses my concerns about caring for our people and recognizing the increased service of our reserve forces due to higher operations tempo and more frequent deployments: it provides “gray area” reservists—who might have difficulty securing or may otherwise not be able to secure health care coverage—the opportunity to purchase affordable health care coverage.

Congress recently dramatically improved TRICARE for Reserve component members to mitigate switching back and forth between civilian health plans and the military TRICARE system, by offering TRICARE Reserve Select as a full time option to our part-time members at a reduced cost. An unintended consequence of subscribing to this offering is the member could be without any health coverage upon retirement from the reserve. A newly retired reservist with ongoing personal or family health issues would have difficulty re-engaging in the civilian healthcare insurance market.

As a recruiting tool, this would be an added benefit for recruiting new members into the Reserve components. Increased civilian healthcare costs, increased co-payments, and employers eliminating plans make healthcare issues a topic of concern for individuals, families, and as a nation.

As a retention tool, TRICARE Reserve Select has provided an incentive for continued Reserve component participation. Continued service by our Reserve component members reduces training costs, retains experience, and strengthens our nation.

I am always concerned about the effects on our overall bottom line: such a benefit must be affordable over the long run. A benefit in which the “gray area” retiree pays 100 percent of the premium cost for TRICARE Reserve Select would minimize the impact to our bottom. Moreover, the cost differential between reduced premiums for those still in service and the full premiums for “gray area” retirees would also serve as an incentive to stay in service longer. Lastly, although the premiums would be greater to them, “gray area” retirees would have relatively affordable, continued healthcare coverage available to them.

This benefit would provide for the care of our people who have done so much for our nation.

RESERVE FULL TIME END STRENGTH

Question. Gentlemen, each of you has a full time support requirement with your organization.

With the increase in usage of the Reserve component, do you feel you have the full time strength to fulfill your obligations to each of your active duty components requirements?

Answer. The Air Force Reserve is first and foremost a strategic reserve. Our full time support is meant to provide trained and equipped Airmen to the active component. In that capacity, we have sufficient full time strength to meet our active duty component requirements. However, the strategic reserve is a Cold War paradigm that was designed for short term high intensity warfare. The conflicts in Iraq and Afghanistan are low intensity wars of unknown duration requiring the Reserve to continuously provide trained and ready Airmen. Consequently, this demand for Airmen requires that we send a portion of our full time support away from home station to support operations, thus reducing our ability to train and equip Airmen at home station. If the Air Force Reserve is to be used operationally, we will need more full time strength to support active component requirements.

Question. If you do not have the end strength numbers, what increase would each of you like to see if there was an acceleration plan for your projected future growth?

Answer. The Air Force Reserve's workforce is currently 80 percent traditional (part time) citizen Airmen. Our full time support program ensures these traditional Airmen are trained and ready to meet the requirements of a strategic reserve. For 18 years we've operated at higher operations tempo than during peacetime, yet we continued to program as if next year this operations tempo will subside and peacetime strategic reserve tempo will return. To manage our force and sufficiently meet requirements of this new steady state, an increase in full time support is needed. We know that certain careers fields like security forces and combat search and rescue are enduring higher than normal operations tempo and would greatly benefit from an increase in full time support end strength. Although we cannot determine an exact figure at this time, we will continue to analyze our data to establish the right level to ensure our traditional reservist continue to receive the proper training.

CHANGES IN RESERVE PERSONNEL POLICIES

Question. With increased operational demands placed on the Reserve component for the past several years, signs of stress and strain are showing. All Reserve component Services are facing increased challenges retaining experienced, mid-grade career service members, precisely those eligible for retirement after having served 20 years of service. I am concerned we are not maintaining a balanced force, retaining enough of the very individuals who have gained the benefit of experience these past years of increased operations. I'm considering introducing legislation that would enhance retention of those experienced career service members, providing an incentive to serve beyond 20 years, initial retirement eligibility, to continue to serve in the reserve component in exchange for lowering the age at which they will be eligible to receive retired pay. For example, if a member commits to serving 2 years beyond 20, the age for which they are eligible to receive retired pay would be lowered by 1 year.

What is your opinion of this idea?

Answer. This proposal would be a huge benefit to reserve members and anything that helps with recruiting and increased retention is most welcomed. However, we recently did some analysis to determine if reservist were leaving earlier after reaching retirement age than they have historically. The analysis determined that we have not seen significant increases through the era of Base Realignment and Closure, Total Force Integration or with the increased operations tempo. However, in recognition of the contributions our members are making to the nation's security, the fiscal year 2008 National Defense Authorization Act authorized a similar benefit for members who serve at least 90 aggregate days on most active duty and reserve tours. For each 90 aggregate days served per fiscal year, on most active duty and reserve tours, member's retirement will be reduced by 3 months up to age 50. This proposal would serve as additional recognition for those reservists that continue to serve beyond retirement age. A legitimate concern may be the potential impact this proposal will have on the Air Force's retirement account. Given that people are living longer now, we must be sure that we are able to sustain this initiative over the long run. Bottom line: the proposal would likely encourage members to continue to serve beyond retirement age and therefore positively impact retention.

SUBCOMMITTEE RECESS

Chairman INOUE. The Defense Subcommittee will meet next on Tuesday, April 22, at 10:30 a.m., at which time we will receive testimony from Secretary Michael Donley and General Norton Schwartz on the United States Air Force fiscal year 2010 budget request. Until then, we will stand in recess.

[Whereupon, at 11:59 a.m., Wednesday, March 25, the subcommittee was recessed, to reconvene at 10:30 a.m., Tuesday, April 22.]

**DEPARTMENT OF DEFENSE APPROPRIATIONS
FOR FISCAL YEAR 2010**

TUESDAY, MAY 12, 2009

U.S. SENATE,
SUBCOMMITTEE OF THE COMMITTEE ON APPROPRIATIONS,
Washington, DC.

The subcommittee met at 10:30 a.m., in room SD-192, Dirksen Senate Office Building, Hon. Daniel K. Inouye (chairman) presiding.

Present: Senators Inouye, Leahy, Cochran, and Bond.

DEPARTMENT OF DEFENSE
DEPARTMENT OF THE ARMY
OFFICE OF THE SECRETARY

STATEMENTS OF:

HON. PETE GEREN, SECRETARY OF THE ARMY
GENERAL GEORGE W. CASEY, JR., CHIEF OF STAFF

OPENING STATEMENT OF CHAIRMAN DANIEL K. INOUYE

Chairman INOUYE. This morning we welcome the Honorable Pete Geren, Secretary of the Army, and General George Casey, the Army's Chief of Staff.

Gentlemen, thank you for being with us today as the subcommittee reviews the Army's budget request for fiscal year 2010.

The Army's fiscal year budget request is \$142 billion, an increase of almost \$2 billion over last year's inactive budget excluding the funding appropriated to the Army in the fiscal year 2009 supplemental. The Army has also requested \$83.1 billion for overseas contingencies for fiscal year 2010.

As we review the request, we are mindful of the fact that in this era of persistent conflict, the Army and its soldiers remain a constant in any strategy to ensure our national security. The Army remains highly engaged in overseas contingency operations, while continuing to transform itself.

But fighting in today's security environment while continuing to rebuild and reset has stretched the service and the Army has to balance decisions among the strains of meeting the high demand of the forces maintaining a debt of forces needed to be prepared for other contingencies and managing the limited time between deployments.

At the end of the fiscal year, the active duty Army and the Reserve components will have reached its final end strength goals, and I wish to congratulate achieving this goal several years ahead of schedule, and I hope that these additional soldiers will help relieve the current strain on the force.

There's no question that the continuous hard pace of operations has taken a toll on both Army personnel and equipment, yet as we address current urgent needs, we cannot lose sight of the future.

The Secretary recently made it clear that the Department of Defense is not going to move forward into the future with a business-as-usual approach, and last month, Secretary Gates held a press conference announcing sweeping cuts and other major changes to the budget, including changing the ways the Pentagon buys weapons.

This decision was fueled by outrage over programs that exceed cost estimates, and often do not meet operational needs.

Secretary Gates also acknowledged that major structural changes are needed to place the Defense Department on a fiscally sustainable path, especially regarding personal accounts.

Facing this new fiscal environment, I think the Army must rethink its modernization approach to reflect an increased focus on cost, as well as a need to integrate lessons learned from ongoing operations. Procurement dollars, as you can imagine, will be tighter as the Army faces higher personnel costs.

The subcommittee expects that many of the hard decisions facing the Army will be reflected, both in the upcoming Quadrennial Defense Review (QDR), and overall modernization planning, and it is our hope that this morning's hearing will help answer some of these questions, and eliminate how the Army's fiscal year 2010 request addresses these challenges in a responsible manner.

Gentlemen, we sincerely appreciate your service to our Nation, and the dedication and sacrifice made daily by men and women in our Army. We could not be more grateful for what those who wear our Nation's uniform do for our country, each and every day.

And, as always, your full statements will be made part of the record, and I wish to turn to my vice chairman, Senator Cochran, at this time for his opening statement.

STATEMENT OF SENATOR THAD COCHRAN

Senator COCHRAN. Mr. Chairman, thank you for your leadership of this subcommittee, and in the Senate, generally. And we welcome our witnesses today to review the request for funding for the Department of the Army.

I first want to commend you for your leadership and your success in managing the resources of the United States Army, our men and women in uniform, and their families, who are performing services that are very important for the safety and security of our country and for stability in the world, and for that, we're very grateful.

We want to thank you, too, for the definition of your priorities, in terms of funding for programs and activities, procurement, resetting the force, all of the things that are under your responsibility, and we appreciate your giving us a statement and an outline of your thoughts on these subjects. It will be very helpful to us as we proceed to consider the budget request.

We welcome you to the subcommittee and look forward to your comments.

Chairman INOUE. I recognize Secretary Geren.

Secretary GEREN. Thank you, Mr. Chairman, Mr. Vice Chairman.

It's an honor for General Casey and me to appear before you to discuss our United States Army. An Army that's built on a partnership between soldiers and the Congress, it's a partnership that pre-dates the independence of our Nation.

We have provided the subcommittee the full posture statement, I ask that it be included in the record.

Chairman INOUE. Without objection.

[The statement follows:]

PREPARED STATEMENT OF THE HONORABLE PETE GEREN AND GENERAL GEORGE W. CASEY, JR.

2009 ARMY POSTURE STATEMENT—AMERICA'S ARMY: THE STRENGTH OF THE NATION

MAY 5, 2009.

Our Nation is in its eighth year of war, a war in which our Army—Active, Guard, and Reserve—is fully engaged. The Army has grown to more than 1 million Soldiers, with 710,000 currently serving on active duty and more than 255,000 deployed to nearly 80 countries worldwide. Our Soldiers and Army Civilians have performed magnificently, not only in Afghanistan and Iraq, but also in defense of the homeland and in support to civil authorities in responding to domestic emergencies.

Much of this success is due to our Noncommissioned Officers. This year, we specifically recognize their professionalism and commitment. To honor their sacrifices, celebrate their contributions, and enhance their professional development, we have designated 2009 as the "Year of the Army NCO." Our NCO Corps is the glue holding our Army together in these challenging times.

Today, we are fighting a global war against violent extremist movements that threaten our freedom. Violent extremist groups such as Al Qaeda, as well as Iran-backed factions, consider themselves at war with western democracies and even certain Muslim states. Looking ahead, we see an era of persistent conflict—protracted confrontation among state, non-state, and individual actors that are increasingly willing to use violence to achieve their political and ideological ends. In this era, the Army will continue to have a central role in providing full spectrum forces necessary to ensure our security.

The Army remains the best led, best trained, and best equipped Army in the world, but it also remains out of balance. The demand for our forces over the last several years has exceeded the sustainable supply. It has stretched our Soldiers and their Families and has limited our flexibility in meeting other contingencies. In 2007, our Army initiated a plan based on four imperatives: Sustain our Soldiers and Families; Prepare our forces for success in the current conflicts; Reset returning units to rebuild readiness; and Transform to meet the demands of the 21st Century. We have made progress in all of these and are on track to meet the two critical challenges we face: restoring balance and setting conditions for the future.

Our Army is the Strength of this Nation, and this strength comes from our values, our ethos, and our people—our Soldiers and the Families and Army Civilians who support them. We remain dedicated to improving their quality of life. We are committed to providing the best care and support to our wounded, ill, and injured Soldiers—along with their Families. And our commitment extends to the Families who have lost a Soldier in service to our Nation. We will never forget our moral obligation to them.

We would not be able to take these steps were it not for the support and resources we have received from the President, Secretary of Defense, Congress, and the American people. We are grateful. With challenging years ahead, the Soldiers, Families, and Civilians of the United States Army require the full level of support requested in this year's base budget and Overseas Contingency Operations funding request. Together, we will fight and win the wars in Afghanistan and Iraq, restore balance,

and transform to meet the evolving challenges of the 21st Century. Thank you for your support.

GEORGE W. CASEY, JR.
General, United States Army Chief of Staff.

PETE GEREN,
Secretary of the Army.

“As we consider the road that unfolds before us, we remember with humble gratitude those brave Americans who, at this very hour, patrol far-off deserts and distant mountains. They have something to tell us, just as the fallen heroes who lie in Arlington whisper through the ages. We honor them not only because they are guardians of our liberty, but because they embody the spirit of service; a willingness to find meaning in something greater than themselves. And yet, at this moment—a moment that will define a generation—it is precisely this spirit that must inhabit us all.”—President Barack Obama Inaugural Address, January 2009.

INTRODUCTION

Our combat-seasoned Army, although stressed by 7 years of war, is a resilient and professional force—the best in the world. The Army—Active, National Guard, and Army Reserve—continues to protect our Nation, defend our national interests and allies, and provide support to civil authorities in response to domestic emergencies.

The Army is in the midst of a long war, the third longest in our Nation's history and the longest ever fought by our All-Volunteer Force. More than 1 million of our country's men and women have deployed to combat; more than 4,500 have sacrificed their lives, and more than 31,000 have been wounded. Our Army continues to be the leader in this war, protecting our national interests while helping others to secure their freedom. After 7 years of continuous combat, our Army remains out of balance, straining our ability to sustain the All-Volunteer Force and maintain strategic depth. The stress on our force will not ease in 2009 as the demand on our forces will remain high. In 2008, the Army made significant progress to restore balance, but we still have several challenging years ahead to achieve this vital goal.

As we remain committed to our Nation's security and the challenge of restoring balance, we remember that the Army's most precious resources are our dedicated Soldiers, their Families, and the Army Civilians who support them. They are the strength of the Army—an Army that is the Strength of the Nation.

STRATEGIC CONTEXT

An Era of Persistent Conflict

The global security environment is more ambiguous and unpredictable than in the past. Many national security and intelligence experts share the Army's assessment that the next several decades will be characterized by persistent conflict—protracted confrontation among state, non-state, and individual actors that are increasingly willing to use violence to achieve their political and ideological ends. We live in a world where global terrorism and extremist ideologies, including extremist movements such as Al Qaeda, threaten our personal freedom and our national interests. We face adept and ruthless adversaries who exploit technological, informational, and cultural differences to call the disaffected to their cause. Future operations in this dynamic environment will likely span the spectrum of conflict from peacekeeping operations to counterinsurgency to major combat.

Global Trends

Several global trends are evident in this evolving security environment. Globalization has increased interdependence and prosperity in many parts of the world. It also has led to greater disparities in wealth which set conditions that can foster conflict. The current global recession will further increase the likelihood of social, political, and economic tensions.

Technology, which has enabled globalization and benefited people all over the world, also is exploited by extremists to manipulate perceptions, export terror, and recruit people who feel disenfranchised or threatened.

Population growth increases the likelihood of instability with the vast majority of growth occurring in urban areas of the poorest regions in the world. The limited resources in these areas make young, unemployed males especially vulnerable to antigovernment and radical ideologies. The inability of governments to meet the

challenges of rapid population growth fuels local and regional conflicts with potential global ramifications.

Increasing demand for resources, such as energy, water, and food, especially in developing economies, will increase competition and the likelihood of conflict. Climate change and natural disasters further strain already limited resources, increasing the potential for humanitarian crises and population migrations.

The proliferation of weapons of mass destruction (WMD) remains a vital concern. Growing access to technology increases the potential for highly disruptive or even catastrophic events involving nuclear, radiological, chemical, and biological weapons or materials. Many terrorist groups are actively seeking WMD. Failed or failing states, lacking the capacity or will to maintain territorial control, can provide safe havens for terrorist groups to plan and export operations, which could include the use of WMD.

These global trends, fueled by local, regional, and religious tensions, create a volatile security environment with increased potential for conflict. As these global trends contribute to an era of persistent conflict, the character of conflict in the 21st Century is changing.

The Evolving Character of Conflict

Although the fundamental nature of conflict is timeless, its ever-evolving character reflects the unique conditions of each era. Current global trends include a diverse range of complex operational challenges that alter the manner and timing of conflict emergence, change the attributes and processes of conflict, require new techniques of conflict resolution, and demand much greater integration of all elements of national power. The following specific characteristics of conflict in the 21st Century are especially important.

Diverse actors, especially non-state actors, frequently operate covertly or as proxies for states. They are not bound by internationally recognized norms of behavior, and they are resistant to traditional means of deterrence.

Hybrid threats are dynamic combinations of conventional, irregular, terrorist, and criminal capabilities. They make pursuit of singular approaches ineffective, necessitating innovative solutions that integrate new combinations of all elements of national power.

Conflicts are increasingly waged among the people instead of around the people. Foes seeking to mitigate our conventional advantages operate among the people to avoid detection, deter counterstrikes, and secure popular support or acquiescence. To secure lasting stability, the allegiance of indigenous populations becomes the very object of the conflict.

Conflicts are becoming more unpredictable. They arise suddenly, expand rapidly, and continue for uncertain durations in unanticipated, austere locations. They are expanding to areas historically outside the realm of conflict such as cyberspace and space. Our nation must be able to rapidly adapt its capabilities in order to respond to the increasingly unpredictable nature of conflict.

Indigenous governments and forces frequently lack the capability to resolve or prevent conflicts. Therefore, our Army must be able to work with these governments, to create favorable conditions for security and assist them in building their own military and civil capacity.

Interagency partnerships are essential to avoid and resolve conflicts that result from deeply rooted social, economic, and cultural conditions. Military forces alone cannot establish the conditions for lasting stability.

Images of conflicts spread rapidly across communication, social, and cyber networks by way of 24-hour global media and increased access to information through satellite and fiber-optic communications add to the complexity of conflict. Worldwide media coverage highlights the social, economic, and political consequences of local conflicts and increases potential for spillover, creating regional and global destabilizing effects.

Despite its evolving character, conflict continues to be primarily conducted on land; therefore, landpower—the ability to achieve decisive results on land—remains central to any national security strategy. Landpower secures the outcome of conflict through an integrated application of civil and military capabilities, even when landpower is not the decisive instrument. The Army, capable of full spectrum operations as part of the Joint Force, continues to transform itself to provide the prompt, sustainable, and dominant effects necessary to ensure our Nation's security in the 21st Century.

GLOBAL COMMITMENTS

In this era of persistent conflict, the Army remains essential to our Nation's security as a campaign capable, expeditionary force able to operate effectively with

Joint, interagency, and multinational partners across the full spectrum of conflict. Today, the Army has 243,000 Soldiers deployed in nearly 80 countries around the world, with 140,000 Soldiers in active combat theaters. To fulfill the requirements of today's missions, including defending the homeland and supporting civil authorities, the Army has over 710,000 Soldiers on active duty from all components. Additionally, 258,000 Army Civilians are performing critical missions in support of the Army. More than 4,100 of our Civilians and more than 33,000 U.S. contractors are forward-deployed, performing vital missions abroad.

The Army's primary focus continues to be combined counter-insurgency operations in Iraq and Afghanistan, while training each nation's indigenous forces and building their ability to establish peace and maintain stability. Our Army is also preparing ready and capable forces for other national security requirements, though at a reduced rate. These forces support combatant commanders in a wide variety of military missions across the entire spectrum of conflict. Examples of Army capabilities and recent or ongoing missions other than combat include:

- Responding to domestic incidents by organizing, training, and exercising brigade-sized Chemical, Biological, Radiological, Nuclear, and high yield Explosive Consequence Management Reaction Forces—the first in 2008, the second in 2009, and the third in 2010.

- Supporting the defense of South Korea, Japan, and many other friends, allies, and partners.

- Conducting peacekeeping operations in the Sinai Peninsula and the Balkans.

- Supporting the establishment of Africa Command, headquartered in Germany, and its Army component, U.S. Army Africa, headquartered in Italy.

- Providing military observers and staff officers to U.N. peacekeeping missions in Haiti, Iraq, Liberia, the Republic of Georgia, Israel, Egypt, Afghanistan, and Chad.

- Conducting multinational exercises that reflect our longstanding commitments to our allies and alliances.

- Supporting interagency and multinational partnerships with technical expertise, providing critical support after natural disasters.

- Continuing engagements with foreign militaries to build partnerships and preserve coalitions by training and advising their military forces.

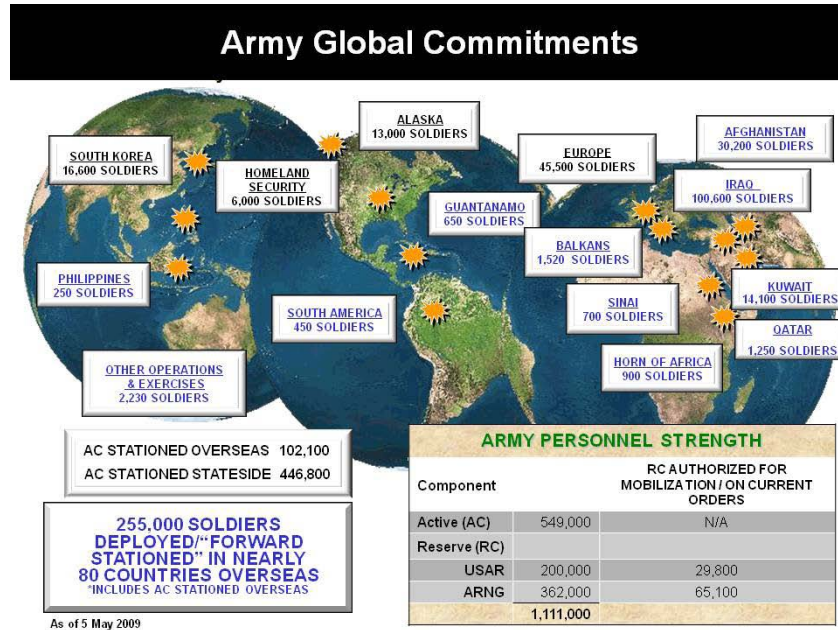
- Supporting civil authorities in responding to domestic emergencies.

- Participating, most notably by the Army National Guard, in securing our borders and conducting operations to counter the flow of illegal drugs.

- Supporting operations to protect against WMD and prevent their proliferation.

- Protecting and eliminating chemical munitions.

Current combat operations, combined with other significant demands placed on our forces, have stressed our Army, our Soldiers, and their Families. While we remain committed to providing properly manned, trained, and equipped forces to meet the diverse needs of our combatant commanders, we face two critical challenges.



TWO CRITICAL CHALLENGES

While fully supporting the demands of our Nation at war, our Army faces two major challenges—restoring balance to a force experiencing the cumulative effects of 7 years of war and setting conditions for the future to fulfill our strategic role as an integral part of the Joint Force.

The Army is out of balance. The current demand for our forces in Iraq and Afghanistan exceeds the sustainable supply and limits our ability to provide ready forces for other contingencies. Even as the demand for our forces in Iraq decreases, the mission in Afghanistan and other requirements will continue to place a high demand on our Army for years to come. Current operational requirements for forces and insufficient time between deployments require a focus on counterinsurgency training and equipping to the detriment of preparedness for the full range of military missions. Soldiers, Families, support systems, and equipment are stressed due to lengthy and repeated deployments. Overall, we are consuming readiness as fast as we can build it. These conditions must change. Institutional and operational risks are accumulating over time and must be reduced in the coming years.

While restoring balance, we must simultaneously set conditions for the future. Our Army's future readiness will require that we continue to modernize, adapt our institutions, and transform Soldier and leader development in order to sustain an expeditionary and campaign capable force for the rest of this Century.

Modernization efforts are essential to ensure technological superiority over a diverse array of potential adversaries. Our Army must adapt its institutions to more effectively and efficiently provide trained and ready forces for combatant commanders. We will continue to transform how we train Soldiers and how we develop agile and adaptive leaders who can overcome the challenges of full spectrum operations in complex and dynamic operating environments. We also must continue the transformation of our Reserve Components to an operational force to achieve the strategic depth necessary to successfully sustain operations in an era of persistent conflict.

Through the dedicated efforts of our Soldiers, their Families, and Army Civilians, combined with continued support from Congressional and national leadership, we are making substantial progress toward these goals. Our continued emphasis on the Army's four imperatives—Sustain, Prepare, Reset, and Transform—has focused our efforts. We recognize, however, that more remains to be done in order to restore balance and set conditions for the future.

*Restoring Balance: The Army's Four Imperatives**Sustain*

We must sustain the quality of our All-Volunteer Force. Through meaningful programs, the Army is committed to providing the quality of life deserved by those who serve our Nation. To sustain the force, we are focused on recruitment and retention; care of Soldiers, Families, and Civilians; care for our wounded Warriors; and support for the Families of our fallen Soldiers.

Recruit and Retain

Goal.—Recruit quality men and women through dynamic incentives. Retain quality Soldiers and Civilians in the force by providing improved quality of life and incentives.

Progress.—In 2008, nearly 300,000 men and women enlisted or reenlisted in our All-Volunteer Army. In addition, the Army created the Army Preparatory School to offer incoming recruits the opportunity to earn a GED in order to begin initial entry training. All Army components are exceeding the 90 percent Tier 1 Education Credential (high school diploma or above) standard for new recruits. In addition, our captain retention incentive program contributed to a nearly 90 percent retention rate for keeping experienced young officers in the Army.

Care of Soldiers, Families, and Civilians

Goal.—Improve the quality of life for Soldiers, Families, and Civilians through the implementation of the Soldier and Family Action Plan and the Army Family Covenant. Garner support of community groups and volunteers through execution of Army Community Covenants.

Progress.—The Army hired more than 1,000 new Family Readiness Support Assistants to provide additional support to Families with deployed Soldiers. We doubled the funding to Family programs and services in 2008. We began construction on 72 Child Development Centers and 11 new Youth Centers and fostered community partnerships by signing 80 Army Community Covenants. Our Army initiated the “Shoulder to Shoulder, No Soldier Stands Alone” program to increase suicide awareness and prevention.

The Army also committed to a 5-year, \$50 million study by the National Institute for Mental Health for practical interventions for mitigating suicides and enhancing Soldier resiliency. In addition, the Army implemented the Intervene, Act, Motivate (I A.M. Strong) Campaign with a goal of eliminating sexual harassment and sexual assault in the Army. To enhance the investigation and prosecution of criminal behavior, the Army's Criminal Investigation Command and Office of the Judge Advocate General have taken new measures to support victims, investigate crimes and hold offenders accountable. The Army also has provided better access to quality healthcare, enhanced dental readiness programs focused on Reserve Component Soldiers, improved Soldier and Family housing, increased access to child care, and increased educational opportunities for Soldiers, children, and spouses.

Warrior Care and Transition

Goal.—Provide world-class care for our wounded, ill, and injured Warriors through properly resourced Warrior Transition Units (WTUs), enabling these Soldiers to remain in our Army or transition to meaningful civilian employment consistent with their desires and abilities.

Progress.—The Army established 36 fully operational WTUs and 9 community-based healthcare organizations to help our wounded, ill, and injured Soldiers focus on their treatment, rehabilitation, and transition through in-patient and out-patient treatment. We initiated programs to better diagnose and treat Post-Traumatic Stress Disorder, Traumatic Brain Injury and other injuries through advanced medical research. We also have made investments in upgrading our clinics and hospitals including a \$1.4 billion investment in new hospitals at Forts Riley, Benning, and Hood.

Support Families of Fallen Comrades

Goal.—Assist the Families of our fallen comrades and honor the service of their Soldiers.

Progress.—The Army is developing and fielding Survivor Outreach Services, a multi-agency effort to care for the Families of our Soldiers who made the ultimate sacrifice. This program includes benefit specialists who serve as subject matter experts on benefits and entitlements, support coordinators who provide long-term advocacy, and financial counselors who assist in budget planning.

Prepare

We must prepare our force by readying Soldiers, units, and equipment to succeed in the current conflicts, especially in Iraq and Afghanistan. We continue to adapt institutional, collective, and individual training to enable Soldiers to succeed in combat and prevail against adaptive and intelligent adversaries. We are equally committed to ensuring Soldiers have the best available equipment to both protect themselves and maintain a technological advantage over our adversaries. To prepare our force, we continue to focus on growing the Army, training, equipping, and better supporting the Army Force Generation (ARFORGEN) process.

Grow the Army

Goal.—Accelerate the end strength growth of the Army so that by 2010 the Active Component has 547,400 Soldiers and the National Guard has 358,200 Soldiers. Grow the Army Reserve to 206,000 Soldiers by 2012 even as the Army Reserve works an initiative to accelerate that growth to 2010. Grow the Army's forces to 73 Brigade Combat Teams (BCTs) and approximately 227 Support Brigades with enabling combat support and combat service support structure by 2011. Simultaneously develop the additional facilities and infrastructure to station these forces.

Progress.—With national leadership support, our Army has achieved our manpower growth in all components during 2009. The Army grew 32 Modular Brigades in 2008 (7 Active Component Brigades and 25 Brigades in the Reserve Component). This growth in the force, combined with reduced operational deployments from 15 months to 12 months, eased some of the strain on Soldiers and Families.

Training

Goal.—Improve the Army's individual, operational, and institutional training for full spectrum operations. Develop the tools and technologies that enable more effective and efficient training through live, immersive, and adaptable venues that prepare Soldiers and leaders to excel in the complex and challenging operational environment.

Progress.—The Army improved training facilities at home stations and combat training centers, increasing realism in challenging irregular warfare scenarios. Army Mobile Training Teams offered career training to Soldiers at their home station, preventing them from having to move away for schooling and providing more time for them with their Families. Our Army continues to improve cultural and foreign language skills.

Equipment

Goal.—Provide Soldiers effective, sustainable, and timely equipment through fully integrated research and development, acquisition, and logistical sustainment. Continue modernization efforts such as the Rapid Fielding Initiative and the Rapid Equipping Force, using a robust test and evaluation process to ensure the effectiveness of fielded equipment.

Progress.—In 2008, the Army fielded more than 1 million items of equipment including over 7,000 Mine-Resistant, Ambush-Protected (MRAP) vehicles, providing Soldiers fighting in Iraq and Afghanistan the best equipment available.

Army Force Generation (ARFORGEN) Process

Goal.—Improve the ARFORGEN process to generate trained, ready, and cohesive units for combatant commanders on a rotational basis to meet current and future strategic demands. Achieve a degree of balance by reaching a ratio of 1 year deployed to 2 years at home station for Active Component units, and 1 year deployed to 4 years at home for Reserve Component units by 2011.

Progress.—Recent refinements in the ARFORGEN process have increased predictability for Soldiers and their Families. When combined with the announced drawdown in Iraq, this will substantially increase the time our Soldiers have at home.

Reset

In order to prepare Soldiers, their Families, and units for future deployments and contingencies, we must reset the force to rebuild the readiness that has been consumed in operations. Reset restores deployed units to a level of personnel and equipment readiness necessary for future missions. The Army is using a standard reset model and is continuing a reset pilot program to further improve the effectiveness and efficiency of the ARFORGEN process. To reset our force, we are revitalizing Soldiers and Families; repairing, replacing, and recapitalizing equipment; and retraining Soldiers.

Revitalize Soldiers and Families

Goal.—Increase the time our Soldiers and Families have together to reestablish and strengthen relationships following deployments.

Progress.—In the reset pilot program, units have no readiness requirements or Army-directed training during the reset period (6 months for the Active Component and 12 months for the Reserve Components). This period allows units to focus on Soldier professional and personal education, property accountability, and equipment maintenance, and also provides quality time for Soldiers and their Families.

Repair, Replace, and Recapitalize Equipment

Goal.—Fully implement an Army-wide program that replaces equipment that has been destroyed in combat and repairs or recapitalizes equipment that has been rapidly worn out due to harsh conditions and excessive use. As units return, the Army will reset equipment during the same reconstitution period we dedicate to Soldier and Family reintegration.

Progress.—The Army reset more than 125,000 pieces of equipment in 2008. The maintenance activities and capacity at Army depots increased to their highest levels in the past 35 years.

Retrain Soldiers, Leaders, and Units

Goal.—Provide our Soldiers with the critical specialty training and professional military education necessary to accomplish the full spectrum of missions required in today's strategic environment.

Progress.—The Army is executing a Training and Leader Development Strategy to prepare Soldiers and units for full spectrum operations. The Army is 60 percent complete in efforts to rebalance job skills required to meet the challenges of the 21st Century.

Reset Pilot Program

Goal.—Provide lessons learned that identify institutional improvements that standardize the reset process for both the Active and Reserve Components and determine timing, scope, and resource implications.

Progress.—In 2008, the Army initiated a 6-month pilot reset program for 13 units (8 Active Component and 5 Reserve Components). The Army has learned many significant lessons and is applying them to all redeploying units to allow units more time to accomplish reset objectives at their home stations.

Transform

We must transform our force to provide the combatant commanders dominant, strategically responsive forces capable of meeting diverse challenges across the entire spectrum of 21st Century conflict. To transform our force, we are adopting modular organizations, accelerating delivery of advanced technologies, operationalizing the Reserve Components, restationing our forces, and transforming leader development.

Modular Reorganization

Goal.—Reorganize the Active and Reserve Components into standardized modular organizations, thereby increasing the number of BCTs and support brigades to meet operational requirements and creating a more deployable, adaptable, and versatile force.

Progress.—In addition to the 32 newly activated modular brigades, the Army converted 14 brigades from a legacy structure to a modular structure in 2008 (5 Active Component and 9 Reserve Component Brigades). The Army has transformed 83 percent of our units to modular formations—the largest organizational change since World War II.

Advanced Technologies

Goal.—Modernize and transform the Army to remain a globally responsive force and ensure our Soldiers retain their technological edge for the current and future fights.

Progress.—The Army will accelerate delivery of advanced technologies to Infantry BCTs fighting in combat today through “Spin-outs” from our Future Combat Systems program. This aggressive fielding schedule, coupled with a tailored test and evaluation strategy, ensures Soldiers receive reliable, proven equipment that will give them a decisive advantage over any enemy.

Operationalize the Reserve Components

Goal.—Complete the transformation of the Reserve Components to an operational force by changing the way we train, equip, resource, and mobilize Reserve Component units by 2012.

Progress.—The Army continued efforts to systematically build and sustain readiness and to increase predictability of deployments for Soldiers, their Families, employers, and communities by integrating the ARFORGEN process.

Restationing Forces

Goal.—Restation forces and families around the globe based on the Department of Defense's (DOD) Global Defense Posture and Realignment initiatives, Base Realignment and Closure (BRAC) statutes, and the expansion of the Army directed by the President in January 2007.

Progress.—To date, in support of BRAC, our Army has obligated 95 percent of the \$8.5 billion received. Of more than 300 major construction projects in the BRAC program, 9 have been completed and another 139 awarded. The Army has also completed 77 National Environmental Policy Act actions, closed 1 active installation and 15 U.S. Army Reserve Centers, terminated 9 leases, and turned over 1,133 excess acres from BRAC 2005 properties. The Army is on track to complete BRAC by 2011.

Soldier and Leader Development

Goal.—Develop agile and adaptive military and Civilian leaders who can operate effectively in Joint, interagency, intergovernmental, and multinational environments.

Progress.—The Army published Field Manual (FM) 3-0, Operations, which includes a new operational concept for full spectrum operations where commanders simultaneously apply offensive, defensive, and stability operations to achieve decisive results. Additionally, the Army published FM 3-07, Stability Operations and FM 7-0, Training for Full Spectrum Operations and is finalizing FM 4-0, Sustainment. The doctrine reflected in these new manuals provides concepts and principles that will develop adaptive leaders to train and sustain our Soldiers in an era of persistent conflict.

SETTING CONDITIONS FOR THE FUTURE: SIX ESSENTIAL QUALITIES OF OUR ARMY

In an era of persistent conflict, our Army is the primary enabling and integrating element of landpower. The Army's transformation focuses on distinct qualities that land forces must possess to succeed in the evolving security environment. In order to face the security challenges ahead, the Army will continue to transform into a land force that is versatile, expeditionary, agile, lethal, sustainable, and interoperable.

Versatile forces are multipurpose and can accomplish a broad range of tasks, moving easily across the spectrum of conflict as the situation demands. Our versatility in military operations—made possible by full spectrum training, adaptable equipment, and scalable force packages—will enable us to defeat a wide range of unpredictable threats.

Our Army must remain an expeditionary force—organized, trained, and equipped to go anywhere in the world on short notice, against any adversary, to accomplish the assigned mission, including the ability to conduct forcible entry operations in remote, non-permissive environments. Working in concert with our force projection partners, the United States Transportation Command and sister services, we will enhance our expeditionary force projection and distribution capability to provide rapid, credible, and sustainable global response options for the Joint Force.

Agile forces adapt quickly to exploit opportunities in complex environments. Our Army is developing agile Soldiers and institutions that adapt and work effectively in such environments.

A core competency of land forces is to effectively, efficiently, and appropriately apply lethal force. The lethal nature of our forces enables our ability to deter, dissuade, and, when required, defeat our enemies. Because conflicts will increasingly take place among the people, the Army will continue to pursue technological and intelligence capabilities to provide lethal force with precision to minimize civilian casualties and collateral damage.

Our Army must be organized, trained, and equipped to ensure it is capable of sustainable operations for as long as necessary to achieve national objectives. In addition, we will continue to improve our ability to guarantee the logistical capacity to conduct long-term operations while presenting a minimal footprint to reduce exposure of support forces.

The extensive planning and organizing capabilities and experience of U.S. land forces are national assets. These capabilities are essential to preparing and assisting

interagency, multinational, and host nation partners to execute their roles in conflict prevention and resolution. Our force needs to be increasingly interoperable to effectively support and integrate the efforts of Joint, interagency, intergovernmental, multinational, and indigenous elements to achieve national goals.

As we look to the future, our Army is modernizing and transforming to build a force that exhibits these six essential qualities in order to meet the challenges of the security environment of the 21st Century. The Army's adoption of a modular, scalable brigade-based organization provides a broad range of capabilities that are inherently more versatile, adaptable, and able to conduct operations over extended periods.

Another critical transformation initiative to enhance the Army's capabilities is the modernization of our global information network capabilities through integration of the Global Network Enterprise Construct (GNEC). The GNEC will enable network warfighting capabilities, dramatically improve and protect the LandWarNet, improve both efficiency and effectiveness of the network, and ensure Army interoperability across DOD.

As part of our transformation, the Army is adapting as an institution principally in three areas: streamlining the Army Force Generation (ARFORGEN) process, implementing an enterprise approach, and establishing a more effective requirements process. A streamlined ARFORGEN process more efficiently mans, equips, and trains units to strengthen our expeditionary capability. The enterprise approach—a holistic method to improve the effectiveness and efficiency of the Army's policies and processes—will make our institutions more efficient and more responsive to the needs of the combatant commanders. An improved requirements process will provide more timely and flexible responses to meet the needs of our Soldiers. In transforming our training and leader development model, we produce more agile Soldiers and Civilians who are capable of operating in complex and volatile environments.

The Army's modernization efforts are specifically designed to enhance these six essential land force qualities by empowering Soldiers with the decisive advantage across the continuum of full spectrum operations. Modernization is providing our Soldiers and leaders with leading-edge technology and capabilities to fight the wars we are in today while simultaneously preparing for future complex, dynamic threats. The Army is improving capabilities in intelligence, surveillance, and reconnaissance; information sharing; and Soldier protection to give our Soldiers an unparalleled awareness of their operational environment, increased precision and lethality, and enhanced survivability.

The Army also is addressing the capability gaps in our current force by accelerating delivery of advanced technologies to Soldiers in Infantry BCTs. For example, more than 5,000 robots are currently in Iraq and Afghanistan, including an early version of the Small Unmanned Ground Vehicle (SUGV). Soldiers are using the SUGV prototype to clear caves and bunkers, search buildings, and defuse improvised explosive devices. In addition, an early version of the Class I Unmanned Aerial Vehicle (UAV) is currently supporting Soldiers in Iraq with reconnaissance, surveillance, and target acquisition. The Class I UAV operates in open, rolling, complex, and urban terrain and can take off and land vertically without a runway. It is part of the information network, providing real time information that increases Soldier agility and lethality while enhancing Soldier protection.

Overall, Army modernization efforts provide a technological edge for our Soldiers in today's fight and are essential to the Army's efforts to empower Soldiers with the land force qualities needed in the 21st Century.

STEWARDSHIP/INNOVATIONS

The Nation's Army remains committed to being the best possible steward of the resources provided by the American people through the Congress. We continue to develop and implement initiatives designed to conserve resources and to reduce waste and inefficiencies wherever possible.

The recent establishment of two organizations highlights the Army's commitment to improving efficiencies. In 2008, the Secretary of the Army established the Senior Energy Council to develop an Army Enterprise Energy Security Strategy. The Senior Energy Council is implementing a plan that reduces energy consumption and utilizes innovative technologies for alternative and renewable energy, including harvesting wind, solar and geothermal energy, while leveraging energy partnerships with private sector expertise. The Army is replacing 4,000 petroleum-fueled vehicles with electric vehicles. We also are underway in our 6-year biomass waste-to-fuel technology demonstrations at six of our installations.

As part of the Army's efforts in adapting institutions, we also established the Enterprise Task Force to optimize the ARFORGEN process for effectively and efficiently delivering trained and ready forces to the combatant commanders.

In addition, in order to increase logistical efficiencies and readiness, the Army is developing 360 Degree Logistics Readiness—an initiative that proactively synchronizes logistics support capability and unit readiness. This new approach will allow the Army to see, assess, and synchronize enterprise assets in support of our operational forces. The 360 Degree Logistics Readiness bridges the information system gaps between selected legacy logistics automation systems and the Single Army Logistics Enterprise. It will improve visibility, accountability, fidelity, and timeliness of information to facilitate better decisions at every managerial level.

Finally, the Army is committed to reforming our acquisition, procurement, and contracting processes to more efficiently and responsively meet the needs of our Soldiers. A streamlined requirements process based on reasonable requirements with adequately mature technology will produce a system with greater urgency and agility and guard against "requirements creep." The Army also will continue to grow its acquisition workforce and provide disciplined oversight to its acquisition programs.

ACCOMPLISHMENTS

The Army has been fully engaged over the past year. We remain focused on prevailing in Iraq and Afghanistan, while concurrently working to restore balance and transforming to set the conditions for success in the future. Despite the high global operational tempo and our continuing efforts to restore balance and prepare for future contingencies, we have accomplished much in the last year:

Army Accomplishments

Manned, trained, equipped, and deployed 15 combat brigades, 34 support brigades, and 369 military and police transition teams in support of Iraq and Afghanistan.

Deployed more than 293,000 Soldiers into or out of combat in Iraq and Afghanistan.

Repaired more than 100,000 pieces of Army equipment through the efforts at the Army's depot facilities.

Invested in the psychological health of the Army by investing over \$500 million in additional psychological health providers, new facilities, and world-class research.

Reduced the on-duty Soldier accident rate by 46 percent in 2008 through Soldier and leader emphasis on Army safety measures.

Reduced the Army's ground accidents by 50 percent and the Army's major aviation accidents by 38 percent in 2008 through leader application of the Army's Composite Risk Management model.

Implemented Family Covenants throughout the Army and committed more than \$1.5 billion to Army Family programs and services.

Improved on-post housing by privatizing more than 80,000 homes, building 17,000 homes, and renovating 13,000 homes since 2000 at 39 different installations through the Residential Communities Initiative.

Reduced energy consumption in Army facilities by 10.4 percent since 2003 through the implementation of the Army's energy strategy.

Won six Shingo Public Sector Awards for implementing best business practices.

Destroyed more than 2,100 tons of chemical agents, disposed of 70,000 tons of obsolete or unserviceable conventional ammunition, and removed 163,000 missiles or missile components from the Army's arsenal.

Fostered partnerships with allies by training more than 10,000 foreign students in stateside Army schools and by executing over \$14.5 billion in new foreign military sales to include \$6.2 billion in support of Iraq and Afghanistan.

Saved \$41 million by in-sourcing more than 900 core governmental functions to Army Civilians.

Improved Soldier quality of life by constructing or modernizing 29,000 barracks spaces.

AMERICA'S ARMY—THE STRENGTH OF THE NATION

The Army's All-Volunteer Force is a national treasure. Less than 1 percent of Americans wear the uniform of our Nation's military; they and their Families carry the lion's share of the burden of a Nation at war. Despite these burdens, our Soldiers continue to perform magnificently across the globe and at home, and their Families remain steadfast in their support. Our Civilians remain equally dedicated

to the Army's current and long-term success. They all deserve the best the Nation has to offer.

America's Army has always served the Nation by defending its national interests and providing support to civil authorities for domestic emergencies. Seven years of combat have taken a great toll on the Army, our Soldiers, and their Families. To meet the continuing challenges of an era of persistent conflict, our Army must restore balance and set the conditions for the future while sustaining our All-Volunteer Force. We must ensure our Soldiers have the best training, equipment, and leadership we can provide them. Our Army has made significant progress over the last year, but has several tough years ahead. With the support of Congress, the Army will continue to protect America's national security interests while we transform ourselves to meet the challenges of today and the future.

ADDENDUM A—INFORMATION PAPERS

360 Degree Logistics Readiness	ARNG Community Based Warrior Transition Units
Accelerate Army Growth	ARNG Critical Skills Retention Bonus
Active Component Reserve Component (ACRC) Rebalance	ARNG Education Support Center
Adaptive Logistics	ARNG Environmental Programs
Add-on Armor for Tactical Wheeled Vehicles	ARNG Every Soldier a Recruiter
Africa Command (AFRICOM)	ARNG Exportable Combat Training Capability
Armed Forces Recreation Centers	ARNG Family Assistance Centers
Army Asymmetric Warfare Office (AAWO)	ARNG Freedom Salute Campaign
Army Career and Alumni Program (ACAP)	ARNG GED Plus Program
Army Career Tracker (ACT) Program	ARNG Muscatatuck Army Urban Training Center
Army Civilian University (ACU)	ARNG Operational Support Airlift Agency
Army Community Service (ACS) Family Programs	ARNG Periodic Health Assessment (PHA)
Army Community Service (ACS) Family Readiness Programs	ARNG Post Deployment Health Reassessment (PDHRA)
Army Energy Plan (AEP)	ARNG Recruit Sustainment Program
Army Environmental Programs	ARNG Recruiting Assistance Program (G-RAP)
Army Evaluation Task Force (AETF)	ARNG Strong Bonds
Army Family Action Plan (AFAP)	ARNG Western Army Aviation Training Site (WAATS)
Army Force Generation (ARFORGEN)	Asymmetric Warfare Group
Army Geospatial Enterprise (AGE)	Base Realignment and Closure (BRAC) Program
Army Integrated Logistics Architecture (AILA)	Basic and Advanced NCO Courses
Army Leader Development Program (ALDP)	Basic Officer Leader Course (BOLC)
Army Modernization Strategy	Behavioral Health
Army Onesource	Better Opportunity for Single Soldiers (BOSS)
Army Physical Fitness Research Institute	Biometrics
Army Physical Readiness Training (FM 3-22.02)	Broad Career Groups
Army Preparatory School	Building Partnership Capacity Through Security Cooperation
Army Prepositioned Stocks (APS)	Campaign Capable Force
Army Reserve Employer Relations (ARER) Program	Capabilities Development for Rapid Transition (CDRT)
Army Reserve Voluntary Education Services	Career Intern Fellows Program
Army Reserve Voluntary Selective Continuation	CBRNE Consequence Management Reaction Force (CCMRF)
Army Spouse Employment Partnership (ASEP) Program	CENTCOM Rest and Recuperation (R&R) Leave Program
Army Strong	Changing the Culture
Army Suicide Prevention Program (ASPP)	Chemical Demilitarization Program
Army Values	Child and Youth Services School Support
Army Volunteer Program	Child Care Program
ARNG Active First Program	Civil Works
ARNG Agribusiness Development Team	Civilian Corps Creed
	Civilian Education System
	College of the American Soldier

Combat Casualty Care	Full Replacement Value (FRV) and Defense Property System (DPS)
Combat Training Center (CTC) Program	Full Spectrum Operations in Army Capstone Doctrine (FM 3-0)
Combating Weapons of Mass Destruction (WMD)	Funds Control Module
Commander's Appreciation and Campaign Design (CACD)	Future Force Integration Directorate
Common Levels of Support	General Fund Enterprise Business System
Common Logistics Operating Environment (CLOE)	Generating Force Support for Operations
Community Covenant	Global Force Posture
Comprehensive Soldier Fitness Program	Global Network Enterprise Construct (GNEC)
Concept Development and Experimentation	Helicopter, Black Hawk Utility Helicopter (UH-60)
Condition-Based Maintenance Plus (CBM+)	Helicopter, Chinook Heavy Lift Helicopter (CH-47)
Construction and Demolition Recycling Program	Helicopter, Lakota (UH-72)
Continuum of Service	Helicopter, Longbow Apache (AH-64D)
Contractor-Acquired Government Owned (CAGO) Equipment	Human Terrain System (HTS)
Cultural and Foreign Language Capabilities	HUMINT: Growing Army Human Intelligence (HUMINT) Capabilities
Cyber Operations	Information Doctrine
Defense Integrated Military Human Resources System (DIMHRS)	In-Sourcing
Defense Support to Civil Authorities (DSCA)	Installation Planning Board
Defense Support to Civil Authorities—Defense Coordinating Officer	Institutional Adaptation
Defense Support to Civil Authorities—Special Events	Institutional Training Under Centers of Excellence (COE)
Deployment Cycle Support	Intelligence Transformation
Depot Maintenance Initiatives	Interceptor Body Armor (IBA)
Digital Training Management System (DTMS)	Interpreter/Translator Program
Distributed Common Ground System—Army (DCGS-A)	Irregular Warfare Capabilities
Diversity	Joint Basing
Document and Media Exploitation (DOMEX)	Joint Knowledge Development and Distribution Capstone Program (JKDDC)
Enhanced Use Leasing	Joint Precision Airdrop System (JPADS)
Enlistment Incentives	Leader Development Assessment Course—Warrior Forge
Enlistment Incentives Program Enhancements	Lean Six Sigma: Continuous Process Improvement Initiative
Equal Opportunity and Prevention of Sexual Harassment (EO/POSH)	Lean Six Sigma: G-4 Initiative
Equipment Reset	Life Cycle Management Initiative
Equipping Enterprise and Reuse Conference	Live, Virtual, Constructive Integrated Training Environment
Equipping the Reserve Components	Manpower Personnel Integration Program (MANPRINT)
Exceptional Family Member Program (EFMP)	March 2 Success
Expanding Intelligence Training	Medical and Dental Readiness
Expeditionary Basing	Military Construction (MILCON) Program
Expeditionary Capabilities	Military Construction (MILCON) Transformation
Expeditionary Contracting	Military Family Life Consultants (MFLC) Program
Expeditionary Theater Opening	Military Intelligence Capacity
Family Advocacy Program (FAP)	Mine-Resistant, Ambush-Protected (MRAP) Vehicles
Family Covenant	Mobile Training Teams (MTT) for Warrior Leader Course (WLC)
Family Housing Program	Mobilization Tiger Team
Foreign Military Sales	Modular Force Conversion
FORSCOM Mission Support Elements (MSE)	Morale Welfare and Recreation (MWR)
Freedom Team Salute	Multinational Exercises
Freedrop Packaging Concept Project (FPCP)	Multi-Source Assessment and Feedback (MSAF) Program
	National Guard CBRNE Enhanced Response Force Package (CERFP)

National Guard Counterdrug Program	Science and Technology
National Guard Public Affairs Rapid Response Team (PARRT)	Sexual Harassment/Assault Response and Prevention (SHARP) Program
National Guard State Partnership Program	Single Army Logistics Enterprise (SALE)
National Guard Weapons of Mass Destruction Civil Support Teams (WMD-CSTs)	Soldier and Family Action Plan (SFAP)
National Guard Yellow Ribbon Program	Soldier and Family Assistance Center Program and Warrior in Transition Units
National Guard Youth Challenge	Soldier as a System
National Security Personnel System (NSPS)	Soldier's Creed
Next Generation Wireless Communications (NGWC)	Stability Operations (FM 3-07)
Officer Education System (OES)	Strong Bonds
Officer Education System—Warrant Officers	Structured Self Development
Officer Retention	Survivor Outreach Services
Pandemic Influenza Preparation	Sustainability
Partnership for Youth Success Programs (PaYS)	Sustainable Range Program
Persistent Air and Ground Surveillance to Counter IED	The Army Distributed Learning Program (TADLP)
Persistent Conflict	The Human Dimension: The Concept and Capabilities Development
Physical Disability Evaluation System (PDES)	Training Counter-IED Operations Integration Center (TCOIC)
Post Deployment Health Reassessment (PDHRA)	Training for Full Spectrum Operations (FM 7-0)
Power Projection Platform	Training Support System (TSS)
Privatization of Army Lodging	Transferability of GI Bill Benefits to Family Members
Property Accountability	Transforming the Reserve Components to an Operational Force
Rapid Equipping Force (REF)	Traumatic Brain Injury (TBI)
Rapid Fielding Initiative (RFI)	Unaccompanied Personnel Housing
Real-Estate Disposal	Unit Combined Arms Training Strategies
Red Team Education and Training	Unmanned Aircraft, Raven Small System
Redeployment Process Improvements	Unmanned Aircraft, Shadow System
Referral Bonus Pilot Program	Unmanned Aircraft, Sky Warrior System
Reset	Up-Armored High Mobility Multipurpose Wheeled Vehicle (HMMWV)
Residential Communities Initiative (RCI)	War Reserve Secondary Items
Restructuring Army Aviation	Warfighter's Forums (WFF)
Retained Issue OCIE	Warrior Ethos
Retention Program	Warrior in Transition
Retiree Pre-Tax Healthcare	Warrior Tasks and Battle Drills
Retirement Services	Warrior University
Retrograde	Western Hemisphere Institute for Security Cooperation (WHINSEC)
Risk Management	Wounded Warrior Program Youth Programs
Robotics	
Safety and Occupational Training	
Safety Center Online Tools and Initiatives	

ADDENDUM B—WEBSITES

Headquarters, Department of the Army and other Commands

This site has links for information regarding the Headquarters, Department of the Army (HQDA), Army Command Structure, Army Service Component Commands (ASCC), and Direct Reporting Units (DRU).

<http://www.army.mil/institution/organization/>

The Army Homepage

This site is the most visited military website in the world, averaging about 7 million visitors per month or approximately 250 hits per second. It provides news, features, imagery, and references.

<http://www.army.mil/>

The Army Modernization Strategy

http://www.g8.army.mil/G8site_redesign/modStrat.html

The Army Posture Statement

This site provides access to archived Army Posture Statements from 1997 to 2008.
<http://www.army.mil/aps>

*The Army Staff**Personnel: G-1*

<http://www.army1.army.mil/>

Intelligence: G-2

<http://www.dami.army.pentagon.mil/>

Operations, Plans, and Policy: G-3/5/7

<https://www.g357extranet.army.pentagon.mil>

Logistics: G-4

<http://www.hqda.army.mil/logweb/>

Programs: G-8

This site provides information on material integration and management.
<http://www.army.mil/institution/organization/unitsandcommands/dcs/g-8/>

Installation Management

This site provides information about policy formulation, strategy development, enterprise integration, program analysis and integration, requirements and resource determination, and best business practices for services, programs, and installation support to Soldiers, their Families, and Army Civilians.

<http://www.acsim.army.mil/>

*Army Commands (ACOMs)**Army Forces Command (FORSCOM)*

<http://www.forscom.army.mil/>

Army Training and Doctrine Command (TRADOC)

<http://www.tradoc.army.mil/>

Army Materiel Command (AMC)

<http://www.army.mil/institution/organization/unitsandcommands/commandstructure/amc/>

*Reserve Components**Army Reserve*

<http://www.armyreserve.army.mil>

Army National Guard

<http://www.arng.army.mil>

*Other informative websites**Army Wounded Warrior Program*

This site provides information on the Army's Wounded Warrior Program which provides support to severely wounded Soldiers and their Families.

<https://www.aw2.army.mil>

My ArmyLifeToo Web Portal

This site serves as an entry point to the Army Integrated Family Network and Army OneSource.

<http://www.myarmylifetoo.com>

ADDENDUM C—ACRONYMS

AC—Active Component
 ACOM—Army Command
 ACP—Army Campaign Plan
 AETF—Army Evaluation Task Force
 ARFORGEN—Army Force Generation
 AFRICOM—Africa Command
 AMAP—Army Medical Action Plan
 AMC—Army Materiel Command
 APS—Army Prepositioned Stocks
 AR—Army Regulation
 ARCIC—Army Capabilities Integration Center
 ARNG—Army National Guard

ASC—Army Sustainment Command
 ASCC—Army Service Component Command
 AWG—Asymmetric Warfare Group
 AWO—Asymmetric Warfare Office
 AW2—Army Wounded Warrior Program
 BCT—Brigade Combat Team
 BCTP—Battle Command Training Program
 BOLC—Basic Officer Leader Course
 BRAC—Base Realignment and Closure
 CBRN—Chemical, Biological, Radiological, and Nuclear
 CBRNE—Chemical, Biological, Radiological, Nuclear, and (High-Yield) Explosives
 CCDR—Combatant Commander
 CCMRF—CBRNE Consequence Management Reaction Force
 CES—Civilian Education System
 C4ISR—Command, Control, Communications, Computer, Intelligence, Surveillance and Reconnaissance
 CMETL—Core Mission Essential Task List
 CMTC—Combat Maneuver Training Center
 COCOM—Combatant Command
 COE—Center of Excellence; Common Operating Environment; Contemporary Operating Environment
 COIN—Counterinsurgency
 COTS—Commercial Off-The-Shelf
 CS—Combat Support
 CSS—Combat Service Support
 CT—Counter Terrorism
 CTC—Combat Training Center
 DA—Department of the Army
 DA PAM—Department of the Army Pamphlet
 DCGS-A—Distributed Common Ground System—Army
 DMDC—Defense Manpower Data Center
 DMETL—Directed Mission Essential Task List
 DoD—Department of Defense
 DOTMLPF—Doctrine, Organization, Training, Material, Leadership and Education, Personnel, and Facilities
 EBCT—Evaluation Brigade Combat Team
 EOD—Explosive Ordnance Disposal
 ES2—Every Soldier a Sensor
 ETF—Enterprise Task Force
 FCS—Future Combat Systems
 FM—Field Manual
 FORSCOM FY—Forces Command Fiscal Year
 GBIAD—Global Based Integrated Air Defense
 GCSS-A—Global Combat Service Support-Army
 GDPR—Global Defense Posture Realignment
 GNEC—Global Network Enterprise Construct
 HBCT HMMWV—Heavy Brigade Combat Team High Mobility Multipurpose Wheeled Vehicle
 HUMINT—Human Intelligence
 IBA—Improved Body Armor
 IBCT—Infantry Brigade Combat Team
 IED—Improvised Explosive Device
 ISR—Intelligence, Surveillance, and Reconnaissance
 IT—Information Technology
 JIEDDO—Joint Improvised Explosive Device Defeat Organization
 JIIM—Joint, Interagency, Intergovernmental, and Multinational
 JRTC—Joint Readiness Training Center
 JTF—Joint Task Force
 LMP—Logistics Modernization Program
 LSS—Lean Six Sigma
 MI—Military Intelligence
 METL—Mission Essential Task List
 MOUT—Military Operations in Urban Terrain
 MRAP—Mine-Resistant, Ambush-Protected
 MRE—Mission Readiness Exercise
 MRX—Mission Rehearsal Exercise
 MTOE—Modified Table of Organization and Equipment
 MTT—Mobile Training Teams

NBC—Nuclear, Biological, Chemical
 NEPA—National Environmental Protection Act
 NET—New Equipment Training
 NCO—Noncommissioned Officer
 NDAA—National Defense Authorization Act
 NDS—National Defense Strategy
 NLOS-C—Non Line of Sight-Cannon
 NMS—National Military Strategy
 NSPS—National Security Personnel System
 NSS—National Security Strategy
 NTC—National Training Center
 OCO—Overseas Contingency Operations
 OEF—Operation Enduring Freedom
 OIF—Operation Iraqi Freedom
 OPTEMPO—Operational Tempo
 O&M—Operations and Maintenance
 POM—Program Objective Memorandum
 PSYOP—Psychological Operations
 PTSD—Post-Traumatic Stress Disorder
 QDR—Quadrennial Defense Review
 QOL—Quality of Life
 RC—Reserve Components
 RCI—Residential Communities Initiative
 REF—Rapid Equipping Force
 RFI—Rapid Fielding Initiative
 SALE—Single Army Logistics Enterprise
 SBCT—Stryker Brigade Combat Team
 SFAP—Soldier and Family Action Plan
 SHARP—Sexual Harassment/Assault Response and Prevention (SHARP) Program
 SIGINT—Signal Intelligence
 SOF—Special Operations Forces
 SOS—Survivor Outreach Services
 TBI—Traumatic Brain Injury
 TDA—Table of Distribution and Allowances
 TRADOC—Training and Doctrine Command
 TTP—Tactics, Techniques, and Procedures
 UAH—Up-Armored HMMWV
 UAS—Unmanned Aircraft System
 UAV—Unmanned Aerial Vehicle
 UGV—Unmanned Ground Vehicle
 USAR—United States Army Reserve
 VBIED—Vehicle Borne Improvised Explosive Device
 WMD—Weapons of Mass Destruction
 WO—Warrant Officer
 WTBD—Warrior Tasks and Battle Drills
 WTU—Warrior Transition Units

Secretary GEREN. The President's budget for fiscal year 2010 is now before the Congress. It includes \$142 billion for the United States Army.

The Army budget is mostly about people, and the operations and maintenance (O&M) to support those people. Our personnel and O&M accounts make up two-thirds of the Army budget, reflecting General Abrams' axiom that people are not in the Army, people are the Army.

The Army is stretched by the demands of this long war, but it remains the best-led, best-trained, and best-equipped Army we have ever fielded, and this subcommittee's ongoing support has a lot to do with that, and we thank you for that.

Mr. Chairman, we've designated 2009 as the year of the non-commissioned officer (NCO), and I've asked that three non-commissioned officers join us today, and with the permission of the chairman, I'd like to introduce them to the subcommittee.

Chairman INOUE. Please do.

Secretary GEREN. We have Sergeant First Class, Chairman Wiles. He's a Platoon Sergeant from the 3d Infantry Old Guard. He deployed to Operation Iraqi Freedom/Operation Enduring Freedom (OIF/OEF). He's married with four children, he's from Louisburg, Tennessee. Appreciate his being here.

Sergeant Aron Aus, he's a light-wheel vehicle mechanic with the 3d Infantry Old Guard at Fort Meyer. He's been forward stationed for 15 months in Korea, and he's married with one child.

Sergeant Dulashti is a wounded warrior from Cincinnati, Ohio. He was with 82d Airborne Division, was assigned to their sniper platoon, graduated at the top of his class from AIT Infantry Sniper School, and he was deployed to Afghanistan with the 82d forward-deployed along the Pakistani border.

He was wounded during the recon and sniper mission, was caught in an ambush, and was shot through his left knee, right knee, and stomach. He is a distinguished soldier, he received a Purple Heart, Army Commendation Medal with a V-Device. Also has a combat infantry badge, and a parachutist badge.

I want to thank all three of these outstanding noncommissioned officers for joining us today. Thank you for your service.

General CASEY. I just want you to know, Mr. Chairman, that I feel a heck of a lot better with them sitting behind me than I usually do.

Secretary GEREN. As you know, at the front of every Army mission, here or overseas, you'll find a noncommissioned officer. NCOs lead the way in education, training, and discipline, and they share their strength of character with every soldier they lead, every officer they support, and every civilian with whom they serve.

Our NCOs are empowered and entrusted like no other NCOs in the world, and the most advanced armies in the world today are going to school on our model.

This year, the Year of the NCO, we're giving special recognition to them, and we're redoubling our commitment to enhance their professional development.

Mr. Chairman, as a former NCO, this year we honor you and all noncommissioned officers, past and present. Thank you for your service, and thank you for the men and women who are our non-commissioned officers, who are the glue that hold us together during these challenging times.

Currently, our Army has 710,000 soldiers serving on active duty, with 243,000 deployed in 80 countries around the world—140,000 are deployed to Iraq and Afghanistan, and additionally there are 250,000 Army civilians who are providing critical support to our soldiers around the world.

Our National Guard and our Reserves continue to shoulder a heavy burden for our Nation. Since 9/11, our Nation has activated over 400,000 reservists and guardsman in support of OIF and OEF.

Our Reserve component soldiers also have answered the call at home for domestic emergencies—hurricanes, floods, forest fires, and support along our borders.

Today, we truly are one Army—active, Guard, and Reserves, and our Guard and Reserves are transitioning from the strategic Reserve, to an operational force. And I would like to discuss some of the progress we've made in that regard.

Go back to 2001, and we spent about \$1 billion a year equipping the National Guard. We're now spending about \$4 billion a year, and that continues under this budget.

As a result, we anticipate that the last Huey helicopter, the venerable work horse of the Vietnam era, will leave Guard service by the end of this fiscal year. At that time, the Guard will have 40 light utility helicopters, and nearly 800 Blackhawk helicopters.

Over 8,000 new trucks have been provided to our Guard, the famous Deuce and a half truck is planned to disappear in fiscal year 2011. This hurricane season will be the first since 2004 in which the Guard will not have to borrow from the active component to meet its operational and equipment needs.

We've also made substantial progress in implementing the recommendations of the Commission on National Guard and Reserves. Of the 19 Army-led implementation plans, 14 are completed. Among them, ensuring that members are provided with a 2-year notice of mobilization, with orders at least 1 year out—major change, major improvement for our soldiers, and for the operation of our Reserve component.

Furthermore, although not an Army lead, we are supporting DOD improvements to increase transparency of RC-component equipment funding. Soldiers are our most valuable assets. The strength of our soldiers depends on the strength of Army families and as Admiral Mullen said recently, if we don't get the people part of our budget right, nothing else matters.

This Army budget, and this DOD budget has taken care of people as the top priority. From fiscal year 2007–2009, with your support, we have more than doubled funding for Army family programs. In this budget that we bring to you today, we include \$1.7 billion in the base budget for family programs.

In fiscal year 2009, we started a new program, we hired 279 military family-life consultants to work with our families on installations to work with the soldiers. Under this budget we will grow that to nearly 300. And we've provided full-time family support personnel, down to the battalion level, providing support and help to those volunteer spouses who carry so much of the load for deployments.

We've provided expanded childcare for families of deployed soldiers with 16 hours, per child, per month, at no cost, along with free recreational and instructional classes. In this budget, we sustain loss and SRM at levels that will ensure we continue to provide our families a quality of life equal to the quality of their service.

This budget continues improvement in the case of our wounded, ill, and injured soldiers. Your support has enabled us to add needed medical personnel, provide better healthcare for our wounded warriors and meet the needs of family members who are supporting their loved ones, and we've initiated programs to better diagnosis and treat the invisible wounds of war—post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI).

With your leadership, we are investing unprecedented amounts in brain injury research. This fiscal year 2010 budget will let us advance these initiatives, address personnel shortages, improve facilities, expand research, and work toward the long-term goal of providing seamless transition from the Department of Defense to

the Veterans Affairs for those soldiers who choose to return to private life.

With 7 plus years of war in an all-volunteer force, we are in uncharted waters for our soldiers and their families. Our soldiers and families are carrying a heavy burden for our Nation, and we are working to reduce the stress on our force, and on those families.

We are working to reverse the tragic rise in soldier suicides—it's a top priority throughout our Army, with the Vice Chief of Staff of our Army serving as the lead.

We've partnered with the National Institute of Mental Health on a 5-year, \$50 million groundbreaking study, to leverage their world-renowned expertise in suicide prevention in bringing that wisdom, that knowledge, and that experience into our Army.

We're educating all soldiers in new, innovative ways of suicide risk identification and reduction, including intervention and prevention.

Every NCO in this Army knows how to recognize the onset of heat stroke, and knows what to do about it. Our goal for suicide prevention is that every soldier in our Army be able to identify the signs of potential suicide, and know what to do about it.

We also have launched new initiatives to attack the problem of sexual assault and harassment, with our Sexual Harassment Response and Prevention Program, focusing on intervention and prevention. As we work to prevent sexual harassment and sexual assault, our goal also is to become the Nation's best in the investigation and prosecution of this heinous crime. Sexual assault and sexual harassment has no place in the United States Army.

We are hiring national experts, with a highly qualified expert authority that Congress has given us to bring their expertise into the United States Army, hiring top notch investigators, and training our prosecutors. We want to be the Nation's model for the prevention, investigation and prosecution of sexual assault crimes.

And whether the problem is PTSD, suicidal ideation, the trauma of sexual assault, or dealing with any emotional or mental health issue, we're working hard to remove the stigma that has caused some soldiers to decline help.

We also are improving our business processes, and have instituted major reforms for our contracting and acquisition processes, while continuing to provide world-class equipment and support to more than a quarter of a million soldiers scattered around the world.

We have set up a two-start contracting command and enhanced training and career opportunities for contracting officers. Last year, we thanked Congress for authorizing five new contracting general officers, help us build the bench that had been depleted over the last 20 years.

We're adding nearly 600 military, and over 1,000 civilians over the next 3 years for our contracting workforce, also reversing a trend that began in the early nineties of depleting the contracting workforce. We're turning away from contractors, and turning toward in-sourcing and hiring as civil service, and training those civil service.

Being a good steward is more than just money. Our goal, also, is to lead the Department of Defense and the entire Federal Gov-

ernment in protecting the environment and saving energy. And I'm pleased to report that the Army has won several awards in recognition of our environmental efforts.

The Army's energy security strategy reduces energy consumption and carbon dioxide emissions by using innovative technologies for alternative and renewable energy, including wind, solar, and geothermal.

At Fort Carson, we've recently completed a 2 megawatt solar project that covers 12 acres. We have solar projects now at 28 locations, and geothermal projects at many others. We are in the planning stages for a 500 megawatt solar farm at Fort Irwin in California, bigger than any solar project in the country today.

This year we've begun—and we'll complete it over the next 2 years—we are acquiring 4,000 electrical vehicles to use on installations. You can see some of those today at Fort Meyer; these 4,000 electric cars will cut the Army's fuel consumption by 11.5 million gallons, and reduce carbon dioxide emissions by 115,000 tons per year. And our plan is to invest over \$54 billion in green buildings by 2012, leading the Department in the investment in this new technology. It will help us save over 30 percent in energy consumption on our building program.

In theater, our investment of the filming of tents slashes the energy use at our FOBs and reduces the number of convoys taking fuel over dangerous routes to remote locations.

And I'm pleased to report that we are on track to finish the base realignment and closure (BRAC) by September 2011.

Mr. Chairman, in summary, we are a busy, stretched, and stressed Army, with soldiers, civilians and Army families doing the extraordinary as the ordinary every single day. Our Nation's finest young men and women are ready to respond to whatever our Nation's leaders demand, around the world, and here at home.

In 2008, in this time of war, nearly 300,000 men and women are reenlisted in our United States Army. They're volunteer soldiers and volunteer families. They're proud of what they do, and they're proud of who they are.

For the past 7½ years, we've watched soldiers go off to war, and watched their families stand with them, and watched our Congress stand alongside them every step of the way.

Mr. Chairman, and members of the subcommittee, thank you for your support of our soldiers and their families, and for the resources and support you provide them, every year. Thank you very much.

Chairman INOUE. I thank you very much, Mr. Secretary, for your very comprehensive report, and a very hopeful one.

May I now recognize General Casey?

ARMY POSTURE

General CASEY. Thank you, Mr. Chairman, Senator Cochran, Senator Bond. Great to have the opportunity here today to update you on the 2010 budget, and really, where we are as an Army.

And I'd like to give you a little progress report about what we've accomplished here over the last year, and then talk a little bit about the way ahead.

You may recall that last year when I talked to you, I said the Army was out of balance. I said that we were so weighed down by current commitments that we couldn't do the things we knew we needed to do to sustain this all-volunteer force for the long haul, and to restore a strategic flexibility, to prepare to do other things.

I can tell you that we have made progress in getting ourselves back in balance, but we are not out of the woods, yet.

In 2007, we developed a plan based on four imperatives, the four most important things we said we needed to do to put this Army in balance—sustain our soldiers and families, continue to prepare our soldiers for success in the current conflict, reset them effectively when they return, and continue to transform for an uncertain future. And I'd like to give you an update just on the—where we are on our six major objectives, here.

Our first objective was to finish the growth. And as you said in your opening statement, Mr. Chairman, we're actually doing a little better than that. We were originally scheduled to complete our growth in 2012, with the Secretary of Defense's support, we moved it forward to 2010, and as of this month, all of our components—active, Guard and Reserve—have met the end strength targets that they were originally to meet in 2012, and that's a big lift for us.

Now, we still have to put those people in units, and match them with the equipment and the training, and there's about 20,000 spaces to do that, but that's a very positive step forward, here.

A positive step forward from a couple of perspectives—one, it allows us to begin coming off of stop-loss this year. And the Reserves will begin coming off in August, the Guard in September, and the active force in 2010, and we will—what that means is we will begin deploying units without stop loss on those dates.

This has always been our goal, as we have built our modular organizations and put them on a rotational cycle, and we're on track to meet that goal by 2011.

Our second key objective was to increase the amount of time that our soldiers spend at home between deployments. And over the past 2 years, I have come to realize that this is the single-most important element of putting our forces back in balance.

And it's important from three perspectives: one, so that our soldiers have time to recover from these repeated combat deployments. Second, it gives them a more stable preparation time for their next mission. When they're home just for 12 months, they have to start going to the field shortly after they get back, and that doesn't give them the time that they need to recover.

And last, it gives them time to prepare to do other things, besides Iraq and Afghanistan. I will tell you that originally in 2007, I thought we would get not quite to 1 year out, 2 years back, by 2011. But the President's drawdown plan in Iraq, if it's executed according to plan—and I have no reason to doubt that it will be—we will get—we will do slightly better than that. And that's very important for us, because we must increase the time our soldiers spend at home if we are going to get ourselves back in balance.

The third thing, element of balance, Mr. Chairman, is we are moving away from our cold war formations, to formations that are far more relevant today. And in 2004 we began converting to modular organizations. We're 85 percent done. That's about 300 bri-

gades who will convert—have converted or will convert—between now and 2011.

We're also two-thirds of the way through re-balancing the force—taking soldiers who were in skills we needed more in the cold war, and putting them into skills more relevant today. That's about 150,000 people that will change jobs.

Let me give you an example—since 2004, we have stood down about 200 tank companies, artillery batteries, and air defense batteries, and we have stood up an equivalent number of military police companies, engineers, special forces, and civil affairs companies, the skills that you hear that we need every day.

So, put together, that's the largest organizational transformation of the Army since World War II and we have done it while we were deploying 150,000, or 140,000 over and back to Iraq and Afghanistan every year. A huge accomplishment for us.

Fourth, we're moving to put the whole Army on a rotational cycle much like the Navy and the Marine Corps have been on for years, and we believe that is the only way that we can one, field trained and ready forces regularly for our combat commanders, but two, to give our soldiers and families a predictable deployment tempo, and we're well on our way to being able to do that.

Fifth, as the Secretary mentioned, we're about halfway through our rebasing effort. With the base realignment and closure reposituring, modular conversions, and growth of the Army, we will actually restation about 380,000 soldiers, families, and civilians between now and the end of 2011. That's a huge accomplishment, but it is resulting in a great improvement in the quality of the facilities for our soldiers and families.

And our last objective, Chairman, is to restore strategic flexibility—the ability for our soldiers to quickly do other things. And again, that's a function of the time they spend at home, and what I've told our soldiers is, that if you're home for 18 months or less, stay focused on your current mission. If you're home for 18 months or more, begin rekindling the skills that may have atrophied during your time in Iraq and Afghanistan. And as we progressively have more time at home, we will progressively rekindle those skills.

So, to wrap up, we have made progress, but we are not out of the woods, yet. And the next 12 to 18 months are going to continue to be difficult for us, because we will actually increase the numbers of forces we've had deployed as we make the shift from Iraq to Afghanistan before the Iraq drawdown starts. So, we get through the next 12 to 18 months, Mr. Chairman, I think we'll be in fairly good shape.

Now, let me just say just a couple of words, if I might, about each of the imperatives and what this budget does for those imperatives.

First of all, sustaining our soldiers and families is, as the Secretary said, our first priority, and this is where the budget makes a difference. Housing, barracks, child care centers, youth care centers, warrior transition units, operational facilities, all of that is in there, and all of that is critical. We are continuing to work hard to deliver on our soldier-family action plan, and we have more than

\$1.7 billion in this budget for soldiers and families—that's about double what it was 2 years ago.

I can tell you, I've just finished—in the last 7 weeks—visiting five of our installations in the United States, visiting soldiers in Djibouti and Afghanistan. My feedback to you, Chairman, is the families continue to be the most stretched and stressed part of the force, which is why we're taking—paying so close attention to improving what we're doing for them.

On the prepare side, probably the most significant accomplishment in the last year is the fielding of about 10,000 mine-resistant, ambush-protected (MRAPs) to our soldiers in theater, and they have made a huge difference. And I talked to some of the crews in Afghanistan, and they said, "Well, sometimes it was harder to drive off-road," but anybody that had been hit by an improvised explosive device (IED) can survive, spoke glowingly of it, and so it's made a huge difference.

Third, on reset—we are putting the whole Army on a 6-month reset model. This is a work in progress, but the money that is in the base and the OCO budget, here, about \$11 million for reset is essential to our ability to continue to deploy our forces for combat in Iraq and Afghanistan.

Last, transforming. And you mentioned an era of persistent conflict, Mr. Chairman, I could not agree with you more. And I believe that to see that—for us, for our country—to succeed in an era of persistent conflict, I believe that we need land forces that can, one, prevail in a global counterinsurgency campaign; two, engage to help others to build the capacity to deny their country to terrorists; three, to provide support to civil authorities both at home and abroad; and four, deter and defeat hybrid threats and hostile state actors around the world. And we are building an Army to do that.

It's an Army that has a versatile mix of tailorable organizations, and that's organized on a rotational cycle, so we can provide a sustained flow of trained and ready forces to combatant commanders and against unexpected contingencies. The budget will help us continue on a path to building that force.

And Mr. Chairman, Secretary Geren mentioned the Year of the Non-Commissioned Officer. Thank you for your service as an Army noncommissioned officer and I recognize these three great non-commissioned officers here.

I'll close with a story about Staff Sergeant Christopher Wayers, who received the Distinguished Service Cross for actions in Baghdad in April 2007. He was riding on a Stryker vehicle in a patrol when a Bradley fighting vehicle in front of him struck an IED. The Bradley burst into flames. He realized that the crew was still inside, he left his Stryker, fought his way to the Bradley, dragged out the driver and one of the crewman back 100 yards to his Stryker, provided aid to them, when he realized there was still another soldier left in the vehicle.

Again, fighting his way across 100 yards of open space back to the Bradley vehicle, he went inside, the ammunition was cooking off, and he realized that the soldier inside was dead. He went back to his vehicle, got a body bag, went back and recovered the fallen soldier out of the vehicle. That's the kind of men and women that

you have in your Armed Forces today, and that's why our non-commissioned officers are the best in the world at what they do.

Mr. Chairman, Senators, thank you for your attention, and the Secretary and I look forward to handling your questions.

Chairman INOUE. I thank you very much, General.

And through you, we thank all of the men and women of the Army, and those three men there—thank you very much. We appreciate your service to our Nation.

GROW THE ARMY

General, in January 2007, a decision was made to build up to 48 active combat brigades. Recently, Secretary Gates announced that it will be stopped at 45. Now, will this have an impact on the Army? If so, what will it be?

General CASEY. Chairman, I would tell you that it will have a negligible impact on our ability to put ourselves back in balance by 2011. All of those brigades were scheduled to just start being built in 2011, and we actually had already had to slip two of their starts, one 6 months, and once a year. So, it will not have any kind of a significant impact on our plan to get ourselves back in balance.

It will also—not building those brigades—will actually have a positive impact on our ability to fill the rest of the units that we are building and deploying, with an increased level of manpower. Our manpower is probably our most—our personnel system is probably our most—stretch system. And we have a good number of soldiers who are unavailable to us to put in units, because they're already deployed on a transition team, or in headquarters. They're in a warrior transition unit, or running a warrior transition unit, or they have some type of nondeployable, disabling injury. And so, this helps us—gives us a little edge, here, to fill those forces.

And the last thing I'd tell you, Mr. Chairman, is that the Secretary of Defense has left the door open that if conditions don't abate as is our plan in Iraq, and he's left the door open for us to continue to grow those, if we still feel them necessary. So, I am comfortable with that decision.

Chairman INOUE. So, you're saying, then, it won't have an impact on dwell time, either?

General CASEY. The number of brigades—a month or two. On overall drill, overall dwell. So it is not, as I said, a significant impact on us.

Chairman INOUE. Thank you very much.

STRYKER

Secretary, in order to maintain the industrial base of the Stryker, we have to purchase 200 deployed. I notice that we're planning to do much less than that. Is there anything we can do?

Secretary GEREN. We are constantly weighing our needs for the Strykers and Stryker replacement. As far as examining the industrial base issue, it's not something that, at the Army level, we have focused on, and what I'd like to do is get back with you on that, if I could.

And I know the Office of the Secretary of Defense (OSD) has been focused on the industrial base issue for many of the manned ground vehicles, as well as many of the other systems, so to give

you a full answer as to the impact on the industrial base, I'd like to get back to you for the record, if I could, Mr. Chairman.

[The information follows:]

The contractor for the Stryker Family of Vehicles, General Dynamics Land Systems (GDLS), has stated that a yearly production of 240 Stryker vehicles is the minimum sustainment rate to maintain the production facilities at Anniston Army Depot, Alabama, and London, Ontario (Canada). At the time of the hearing, the projected fiscal year 2009 production was 82 Stryker vehicles. To mitigate the risk of not maintaining the minimum sustainment rate (MSR) in fiscal year 2009, the Army laid the groundwork for adjusting the fiscal year 2008 Stryker delivery schedule over a longer period of time to maintain the MSR while allowing the Army time to complete the Quadrennial Defense Review that will assess force structure and force mix. Subsequently, Congress has increased the Stryker program's fiscal year 2009 Overseas Contingency Operations (OCO) funding by \$200 million in addition to the original \$112 million request from the fiscal year 2009 OCO. An additional \$238 million became available as a result of vehicle contract definitization. Stryker vehicle procurement in fiscal year 2009 is now projected at 353 Stryker vehicles (271 Strykers above the original 82 projected).

Chairman INOUE. And do you have plans to continue getting something equivalent to the Stryker, if that base runs out?

Secretary GEREN. We expect to have the Strykers in our—as part of the inventory of our Army many years into the future. I've seen nothing that would project that we would be phasing them out.

We do have plans, we've got a partnership with the marines to come up with another joint vehicle. We're also looking at—as we develop the new manned ground vehicle, after we made the—after the Secretary made the decision to start the future combat system, manned ground vehicle system. So, we are looking at all of our—the future of all our vehicles, going forward—looking at them as they relate to each other, but I know the Stryker is certainly an important part of our future.

Chairman INOUE. Do we have any plans to acquire Stryker ambulances?

Secretary GEREN. At this point, our requirement for Stryker ambulances has been addressed. I know it's an issue that has been raised, and we're going to study it further, the House Appropriations Subcommittee on Defense has put additional ambulances, MEVs, in their appropriations bill, and we're going back and looking at our requirements in that regard. At the present time, we believed that the requirements that we had had been met with our budget, but that issue has been raised with Chairman Murtha's subcommittee, and we're going back and revisiting that issue.

Chairman INOUE. Thank you.

May I recognize the vice chairman?

Senator COCHRAN. Mr. Chairman, thank you.

HELICOPTER PILOTS

One of the priorities that has been announced by the Secretary of Defense for the Army would be to increase the number of helicopter units that are deployable and can be deployed to the theater where they're needed.

A recent article stated that there was a shortage of pilots—up to 300 personnel—to meet the needs for Army helicopter crews.

Mr. Secretary, we understand that there has been a new initiative begun, to recruit and train more helicopter personnel. Could

you give us a status report on how that is going, and what your outlook is?

Secretary GEREN. Well, this budget includes an additional \$500 million over the original proposed budget for 2010 to recruit and train helicopter pilots. Secretary Gates recently went to Fort Rucker and met with the leadership down there, and has tasked the Army to look at the infrastructure, look at our capabilities to support the training requirements.

We have helicopters in the inventory that are not being used to the maximum extent, and this additional \$500 million will allow us to bring additional trained pilots and crew into the Army, and allow us to better utilize those existing assets. But we are looking at what the future requires for development of that capability down at Fort Rucker, and are putting together a proposal to enhance the infrastructure and the resources down there.

Senator COCHRAN. How many total personnel will be needed to meet the shortfall of helicopter personnel? If we provide the \$500 million, as requested, when do you expect you'd be able to have the personnel trained and assigned to deployable units?

Secretary GEREN. I don't have the insight on—the Chief, if you could get—I'd like to get back to the record on that. I don't have the answer with me, but I'll certainly let you know. We're working to identify the resources that we'll need, the infrastructure that we'll need, and lay out a game plan for applying those funds.

[The information follows:]

HELICOPTER TRAINING

Currently, the Army trains an annual student load of 1,200 with 442 instructor personnel (includes 228 instructor pilots). We will increase student output in a phased approach over 2 to 4 years. In fiscal years 2010 and fiscal year 2011, the annual student load will increase to 1,375 with an increase of the instructor staff to 568 (includes 312 instructor pilots). Army will reach its training requirement of 1,498 between fiscal year 2012–14. Increasing from 1,375 to 1,498 is dependent on the delivery of additional aviation motion simulators. New simulators that are needed are three TH-67 Instrument Flight Trainers, one CH-47D Operator Flight Trainer, one Longbow Crew Trainer, and to convert three UH60A/L Instrument Flight Trainers to Operator Flight Trainers. Delivery and conversions of the above simulators are projected in fiscal year 2011–14. A total of 624 instructors (includes 334 instructor pilots) will be required to support the 1,498 sustained training requirement for fiscal year 2014 and beyond. Finally, the effect of increased trained pilot output will be evident immediately in fiscal year 2010, when deploying units in all three Army Components will start receiving a greater number of initial rotary wing trained pilots. The number of trained pilots will increase by 12.7 percent (1,375) in fiscal year 2010 and will increase by 20 percent between fiscal year 2012 and 14 (1,498) over the current fiscal year 2009 (1,200) output.

FIRE SCOUT UAS

Senator COCHRAN. Another program—deployment program and procurement—involves the unmanned aerial systems (UAS), a tactical, vertical takeoff capability, the Fire Scout unmanned aerial system is the description given of the unit to be built. How soon do you think an operational Fire Scout—will be able to be delivered to the Army for evaluation?

General CASEY. Senator, that Fire Scout is currently part of our—the spinout program of the future combat system—and it is moving forward in its development. I do not recall when the first

unit will be delivered to us for testing, but I would say, it's in the next 3 to 4 years.

[The information follows:]

Class IV Unmanned Aerial System, XM-157 (Fire Scout) will begin testing on April 29, 2011 under the current System Development and Demonstration program schedule.

ARMY END STRENGTH

Senator COCHRAN. General, I understand the Army is over the end strength by 1,500 personnel. Do you think the goal can be attained by the end of the fiscal year? Or, what is the outlook for dealing with that?

General CASEY. In this town, there's always good news and bad news, isn't it, Senator? The good news is, we've met our end strength targets early, the bad news is we have to pay for it for the rest of this year.

But I do believe, to answer your question, that we will be able to get down and meet our end strength targets at the end of this year.

Senator COCHRAN. That's good. Well, we wish you well, and we want to be sure that the bill that we recommend provides the funds that are needed to meet those goals.

Chairman INOUE. Thank you very much.

Senator Bond.

Senator BOND. Thank you very much, Mr. Chairman.

And welcome, Secretary Geren, General Casey. Thank you for being here today. Special thanks to Secretary Geren for your steadfast service on behalf of the Army. You've been a great champion for our Nation's most vital asset—our assets, our troops and their families, and a very capable Secretary. I particularly applaud your talking about fully resourcing the Guard, which is where we've made great progress—and it's been needed in the last few years.

The electric vehicles that you're talking about, we will be making some light-duty electric trucks and vans in Missouri that we hope will be competing for some of those—for some of that opportunity.

MANNED GROUND VEHICLES

General Casey, we look forward to working with you, and thank you for leading the Army. You referenced the future combat systems (FCS), of course, we all know it took a big hit, the manned ground vehicles. And what is the way forward the Army plans to do for bringing into the FCS system manned ground vehicles?

General CASEY. Thank you, Senator. And for giving me the opportunity to comment on that.

First of all, it's only the manned ground vehicle element of the FCS program that will be stopped. All of the other elements of it—the network and the spinouts—are not only going to go forward, but they will be fielded to all 73 brigade combat teams.

What we plan to do—there's a meeting going on this week—it's called the System of Systems Design Review. And when that is over we, with the Department of Defense, will issue an acquisition decision memorandum that will halt the future combat systems program as we know it today. And we will then work with the contractor to split out the manned ground vehicle from the other sys-

tems so that the—and attempt to do that in a way that does not slow the development and fielding of the spinout.

We have already begun and given direction to our training and doctrine command to build a development document for a new ground combat vehicle. And as we went through the discussions on this program with the Secretary of Defense, I could not convince him that we had sufficiently integrated the lessons from the current fight—

Senator BOND. That would be incorporating the v-shape to the MRAP, as well as the IEP protection on the sides? Is that—

General CASEY. Exactly, those kinds of systems.

And the good thing is, what we've gotten from the future combat system program, is we know the state of technology for those type of protective systems. I mean, we're at the limits of it, right now. And so, we will work to include both lessons from the current fight, and what we've learned from technology, and build a better vehicle. And build a better vehicle with the support of the Secretary and the Department of Defense, which I think will significantly help us move this forward.

We—our goal is to come forward after Labor Day—with a new concept, design for the new manned ground vehicle, so that we can move forward, and our attempt will be to get a new vehicle in 5 to 7 years, and so we don't stretch this process out, any longer than it is.

Secretary GEREN. Let me add one thing, if I might, Senator.

Senator BOND. Sure.

Secretary GEREN. Just so there's no misunderstanding on this one. The Secretary made the decision to terminate the manned ground vehicle, he included within that the non-line of sight cannon. It's actually a separate program under the authorization bill, but there's been some question about whether or not that was included in the Secretary's decision. He's made it clear that it covers the manned ground vehicles, and the non-line of sight cannon. So, just for the record, I wanted to—

ARMY NATIONAL GUARD END STRENGTH

Senator BOND. Mr. Secretary, turning to the Army National Guard, I'm concerned about some of the personnel readiness. The Guard has over 73,000 troops activated in support of OIF and OEF, and they had over 300,000 call-ups since 9/11.

And there's no question they're doing a tremendous job, whether it's fighting insurgency, assisting local Afghanis in agriculture development, but as the Army expands to 547 active duty, or whatever the number will be—I'm concerned that the Guard force will be stretched thin. The Guard has stated that the current operational environment requires a 371,000 soldier end strength. Does the Army have a—Guard have enough troops to fulfill its mission, both at home and abroad? With an end strength of the 358,000 outlined in the current budget?

Secretary GEREN. What the Secretary of Defense has directed us, the current end strength holds for active Guard and Reserve are set for this year, but he has left the door open to reconsider that issue, as we get into the future, if circumstances require additional end strength.

But, with the Guard, as the Guard has transformed from a strategic Reserve to an operational force, many of the changes that they have underway are allowing them to better utilize their—the resources and the personnel.

The Guard is going toward the R-4 Gen model, with the goal of 1 year deployed, 4 years at home. As you know, modularity, as well, with this additional equipping—we're doing a better job in the, frankly, with—much of this came from congressional leadership on the medical and dental readiness, so we've got a much higher percent today—almost double the medical-dental readiness that we had just 4 years ago.

So, the transformation that the Guard is going through, with extraordinary leadership that's coming out of these Guard officers and NCOs that have had the experience of these last 7 years, is they're transforming building a new Guard.

Is the end strength number exactly right? It is set for this year, and they're having to reduce the numbers to get to that end strength total by the end of the year—I'm confident that they will. But I—for the time being, we're set at that end strength. We're working to make sure that the personnel in the Guard is assigned to the right MOSs, has the proper training, and is properly equipped and is ready, from a medical standpoint.

So, I think we're where we need to be for the moment, and as the situation changes over the coming years, we'll see what the demand signal is, and have a better sense of whether that's the right number, long term.

ARMY NATIONAL GUARD EQUIPPING

Senator BOND. Mr. Secretary, I'll have several other questions for the record, but about—on the equipment issues, as you indicated, you've made great progress in the way you track equipment procurement and distribution. The current tracking procedures are very labor-intensive, but if the Army can institutionalize and automate them, the Army National Guard should have the full visibility of resources intended for it by Congress. But how would you suggest the Army increase the transparency in the allocation of equipment to the Army National Guard, in light of the emerging threats that require a host of contingencies, both at home and abroad?

Secretary GEREN. One of the most important initiatives from the Ponarous Commission, we're working with OSD on it, OSD is working across all of the services on this issue, coming up with a system and approach that will allow us to have the kind of transparency that we'll be able to track the procurement and follow the equipment to the Guard unit, and keep track of it there.

It's—as we've learned, as we've dug into it over the last 7 or 8 months, and it's easier said than done, but we're building systems to enable us to do that. It's partly a technical challenge, but partly just a commitment to get it done. It's an area that I think it really had suffered from some neglect over the years. There was not a commitment to ensure that we could track it.

Dr. Gates has made it a priority for all of the services, OSD really has the lead on it, but we're working with them to ensure that we accomplish that. It's a very high priority for us.

Senator BOND. Thank you very much, Mr. Secretary, General.
Thank you, Mr. Chairman.
Chairman INOUE. Thank you.

STRESS ON THE FORCE

Gentlemen, I'd like to submit my questions for the record, but I want one other question, Mr. Secretary, General.

In recent years, divorce and suicide rates have sharply increased, and the day before yesterday, five men were killed by a stressed out patient, I believe, stressed. This was at a stress clinic. Do you believe that the initiatives that we are taking to address these problems is sufficient, sir?

Secretary GEREN. Mr. Chairman, I think the initiatives that we have underway are steps in the right direction. But this is a very stressed force, and as General Casey noted, our families are perhaps the most stressed component of our all-volunteer force.

The investments that we're making are going to help better support families. Long term, I think the most important thing we can do is increase the dwell time, move it beyond the—currently 1 to—about 1.3 that it is today, and get to the R-4 Gen model of 1 year deployed to 2 years at home—ultimate goal, 3 years at home. I don't think there's any substitute for giving these soldiers and these families time together.

These investments we're making, we believe, will better support the families, but there's no substitute for the families being together—the family unit being together, and being able to support each other.

So, long term, the most important initiative is to get the demand in line with our ability to provide forces, and ensure that our soldiers have the time to be home, be with their families, regenerate, reconnect with their families.

You mentioned this, the tragedy of suicide. As we attempt to better understand suicides, we see in these suicides that we can determine the cause, it's the same issues that cause people to commit suicide on the outside.

Mostly, at the top of the list, it's problems with relationships—failed relationships—divorce, some type of failure of a very significant relationship, either with a husband and a wife, or a parent and a child.

And when you have the kind of separation that our soldiers are experiencing from their families, some soldiers on their third, fourth, and fifth deployment, it's obvious that that's going to put a relationship under strain. And in some cases, push a family to the breaking point.

So, we are investing—the Chief and I spend a lot of time listening to spouses, and talking to children, figuring out what we can do to help them. But long term, ultimately, there's no substitute for soldiers having time with their families. And the most important initiative in relieving the stress on this force is going to be get on this R-4 Gen model, and have the soldiers be able to spend more time at home.

Chairman INOUE. General.

General CASEY. Could I add to that, Mr. Chairman? Because you asked, are we doing enough.

COMPREHENSIVE SOLDIER FITNESS PROGRAM

We are putting the finishing touches on a program called the Comprehensive Soldier Fitness Program, and I expect to initiate it this summer. And the intent of that program is to raise the attention that we give to mental fitness, to the same level that we give to physical fitness. And to give all soldiers the skills they need to be resilient, and to succeed in combat.

Now, a lot of people think that everybody that goes to combat gets post-traumatic stress, and you know that's not true. In fact, the vast majority of the people that go to combat have a growth experience, because they're exposed to something very, very difficult, and they succeed.

And so we're trying to give the skills to all soldiers, so that more people have a growth experience when they go.

We, actually, this week have our first group of noncommissioned officers going to the University of Pennsylvania to become master resilience trainers, to get the skills they need to go back to their unit to help them develop effective programs.

Now, we're modeling that after a program we have for master fitness trainers—we have guys that can teach you how to do good pushups. This is going to be the same type of thing for mental fitness.

We're also developing a self-diagnostic test that can be taken—and will be taken—at various times during a soldier's career, and results will be reported to them. And it will give them an assessment of where they are in several areas, and then we'll connect them to several self-help modules, so that they can get the personal assistance there, in building their resilience.

And I look to roll both of those out here, probably in the fall. But we had to get beyond just being reactive. And so this program is designed to give our soldiers the skills that they need to enhance their performance across the board.

Chairman INOUE. Thank you very much.

Senator Leahy.

Senator LEAHY. Thank you, both.

General Casey, and Secretary Geren, so good to see you both. I know you both know the 86th Mountain Brigade, that's upward of 1,800 very proud citizen soldiers from the Vermont Army National Guard are going to begin a deployment, either end of this year or early next year, to Afghanistan. They're going to make up the bulk of Task Force Phoenix, to carry out the training of Afghan troops, and I've been glad to work with both of your offices to make sure the National Guard, and also the Army National Guard, to make sure they, the brigade has the equipment it needs, as well as the vehicle and body armor.

MINE-RESISTANT, AMBUSH PROTECTED VEHICLES

What I have been concerned about are the increased use of roadside bombs. I mean, not just—obviously not just for the Vermonters—but for all of our service people that are over there. The MRAP, which is the best protection against that has—requires paved roads, is fairly heavy—you know better than I—it doesn't work well in undeveloped Afghanistan.

I understand the overseas contingency operations, a portion of the budget includes a request pending for the so-called MRAP all-terrain vehicle (ATV). I talked with Secretary Gates about this, when he was here before this subcommittee. I sent him a personal note about it. Will that remain a priority? I would like very much to see that, get it into operation, I know we have testing, and so on, but can I just kind of raise that up into the level of you two gentlemen?

Secretary GEREN. Very high priority—the same type of priority emphasis that led to the very rapid development and fielding of the original MRAPs, once the decision was made to go forward—that same type of commitment is behind bringing the—this MRAP ATV, or some are calling it “MRAP Light,” but a lighter version that would be more suitable for the Afghani terrain. A top priority for the Department, I can assure you.

Senator LEAHY. General Casey.

General CASEY. I was just going to say, Senator, I was there about 10 days ago, and heard, basically, the same thing that you said about—that there are off-road challenges with some of the larger MRAPs. But, what the soldiers do, is when they go on patrol, they figure out where they're going, and then they tailor the mix of vehicles that they take with them for that mission, and they vary the mix of up-armored RVs and MRAPs, depending on where they're going. And so they're quite agile at doing that. But as the Secretary said, this lighter MRAP is, indeed, a priority, and we will continue to work that.

I will also tell you that we are working to integrate the MRAP into the design of all of our units. And, you know, those—the MRAPs have been procured by the supplemental budgets for the forces in the field. But we, I'm sure, like you believe that the improvised explosive device is going to be part of any battlefield that we deal with in our lifetime. And so those need to become an integral part of our force.

Senator LEAHY. And I would add, again, Secretary and General, that I don't raise this just out of a parochial concern for the 1,800 from Vermont, but for obviously, for everybody who is there. And for the flexibility that you might have in being able to train Afghans take over something.

And I realize, also, that as you say about planning where you're going, but of course we also have times when the deployment is on very, very short notice—there's been an ambush, there's been other things that you see probably too often in the reports from there.

ARMY NATIONAL GUARD END STRENGTH

And I also noticed, Mr. Secretary, the Army Guard has planned to get to 100 percent readiness, fully manned units, no more cross-leveling. When it deploys, it would not have to raid other units for people. To get that plan in place—which I think is a good plan—you have to ensure every unit in the Guard's force structure has all of the people it needs, the end strength of the National Guard to have to get to 371,000, I'm told, and a special holding account for those awaiting for training.

I understand the Army's approved the holding account, but not the formal increase in the size of the force. Am I correct on that?

Is that just being—is that just a monetary issue—or will we get to that?

General CASEY. Senator, we're working with them to reduce their training backlog of new recruits, because the challenge the Guard has is they recruit for a position, and until that soldier has been through basic training and advanced training, they're not qualified in their skills, so the unit cannot count them as a ready soldier, and we're working with them to reduce the backlog.

We have not increased the end strength beyond the 5—358,000 that was their target for fiscal year 2011.

Senator LEAHY. Will it be increased?

General CASEY. I do not—I don't see it. We're going to continue to work closely with the Guard on this, Senator, but I do not see an end strength increase for the Guard in the near future.

Senator LEAHY. I'm not quite sure how I see you doing this—how you get away from no more cross-leveling, and the rating.

General CASEY. We spoke—the Secretary and I both spoke in our opening statements about putting the Army on a rotational model—it's not just the active Army. It's also the Guard and Reserve. And our goal by 2011, is to have the Guard and Reserve on a 1 year out, 4 year back model.

And what happens is, their readiness—both personnel and equipment—improves as they get closer to deployment. And just as—this is the same model that we will use for the active force. And that is the method that we are using to decrease cross-leveling.

We're never going to get completely away from cross-leveling. But it's this rotational model that gives us much better flexibility to build capability.

So, in the first year, availability, they have every piece of equipment and all that the active force has, and they're manned for the mission. In the second year, they're manned at a little slightly lower level for their training, on the third year, slightly lower than that.

Senator LEAHY. And I'll close with this, on having the equipment, Senator Bond and I, we're co-chairs of the Guard Caucus, which both Members—both parties—belong to, here.

EQUIPPING

We've written to you on the question of more transparency of where equipment goes—we appropriate the money for it, and we kind of lose sight as it comes off the assembly line, where it goes. I would just kind of give you a heads up that you're going to, kind of, follow-up question on that, because I really would like to see more transparency—which is actually to your advantage. Because if you have the transparency, you also have the ability to have some flexibility.

If there's a concern here that it's not being done the way we want it, you're going to have these scriptures written into the appropriations law, which actually doesn't help you, and ultimately it doesn't help us.

Secretary GEREN. No, we're working—it's one of the most significant initiatives under the Punaro Commission, this transparency, and something we're working with OSD on, for the—all of the services Reserve component—this transparency has been a struggle for

us. We're working to put together a system so that we will be able to track that equipment. Dr. Gates has made it a high priority, we certainly, in the Army, embrace it. It's a very high priority, and we'll—and are working hard to develop the processes and procedures to enable us to do that.

And just the fact that it's become a very high priority for the Department—Congress, you all have made your intentions well-known in that regard. It may have taken us a little while to get the message, but we've gotten it, and we're working it very hard. We understand the importance of it to the Reserve component, we understand the importance of it for us as we try to manage all of our forces.

I'll mention one other initiative that is significant as far as reducing the amount of cross-leveling. For the Guard units that are deploying next summer, they already have their orders—I mean, summer 2010, not summer 2009. We are now giving notice of mobilization 2 years out, and actually orders 1 year out. So, this allows every Guard unit the opportunity to manage their force, and determine who's going to stay, and start filling the holes, 1 year plus out, and much better able to manage their force.

Senator LEAHY. Thank you.

Chairman INOUE. Thank you.

Senator Cochran.

ARMY HELICOPTER MODERNIZATION

Senator COCHRAN. Mr. Chairman, I have just one other question—there have been two efforts made to modernize the armed helicopter capability for the Army, and there have been problems in both instances. I wonder whether consideration can now be given to modifying an existing platform to provide these capabilities? We've suggested in a letter to the Secretary of Defense that be considered. What is the status of that situation, and is there an interest in moving forward to select some alternative that's workable and affordable?

Secretary GEREN. There is, Senator. In fact, after we went through the—worked through what happened with the armed reconnaissance helicopter, after the Nunn-McCurdy breach, and the decision to terminate the program, we went and studied what the—we felt our options were, and concluded that our best step would be to do a full analysis of all alternatives. And we're going to begin this summer, we're going to look at all options, including what's available in modifying commercial, off-the-shelf platforms.

So, we've got the aperture wide open—it's an analysis of all of the alternatives, and then we're going to move ahead, and produce the helicopter that serves the needs of our Army, but we're starting over, really, with a blank slate and looking at all of the options that are out there.

Chairman INOUE. General Casey, Secretary, I thank you very much on behalf of the subcommittee. We thank you for your testimony and your service to our Nation.

ADDITIONAL COMMITTEE QUESTIONS

And we'd like to thank the three gallant men sitting before us, here. Thank you for your service, Sergeants.

[The following questions were not asked at the hearing, but were submitted to the Department for response subsequent to the hearing:]

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

FUTURE COMBAT SYSTEM (FCS)

Question. Secretary Geren, the fiscal year 2010 defense budget drastically changes the Future Combat System, which has long been touted as the Army's modernization program. I believe this is the fourth major restructure to the FCS program since its inception. We have spent almost \$18 billion on FCS since 2003, including at least \$4.2 billion on efforts to develop a new class of manned ground vehicles that are now being terminated, and while we have started fielding some spin out technologies, they are not delivering the capabilities envisioned by the original FCS.

Tell us Mr. Secretary, what lessons have you learned from the FCS program history to ensure the Army is developing a program that addresses the needs of the warfighter?

Answer. Army challenges to modernization remain consistent in a complex operational environment against adaptive enemies. The Army is adapting using the hard won lessons learned over 7 years of war, which highlight the demand for greater versatility, lethality, and interoperability across the entire Army.

The Army is transitioning elements of the Future Combat Systems (FCS) (such as sensors, unmanned ground and aerial vehicles, and network development) to the new Brigade Combat Team (BCT) Modernization program in compliance with the anticipated Acquisition Decision Memorandum from the Milestone Decision Authority. This proposed transition completes a shift in the Army's modernization strategy—moving from equipping only 15 BCTs with all of the FCS equipment to holistic modernizing of all Army BCTs.

The Training and Doctrine Command established a task force to work over the course of the summer to develop an affordable, incremental BCT Modernization plan. They will reexamine force design, analyze and determine the appropriate mix of systems to field in capability packages, develop incremental network capability packages to support them, and refine requirements for a new ground combat vehicle. This work will be informed by views and perspectives from a broad spectrum of thought including individuals from think tanks, retired officers, currently serving officers and civilian leaders, senior non-commissioned officers, and program managers.

We have learned much from the FCS program in the past decade and appreciate the commitment of industry to provide our Soldiers the best available equipment. We will work closely with the Office of the Secretary of Defense, Congress and FCS contractors/subcontractors in the days ahead to capture what we have learned, to implement program change decisions, to maintain the momentum of the spin-outs, and to move forward expeditiously with a ground combat vehicle.

JOINT CARGO AIRCRAFT

Question. General Casey, the budget before the Congress proposes to restructure the Joint Cargo Aircraft program by fielding the aircraft only to the Air Force, and reducing the total program from 78 airplanes to 38. One of the major reasons for the Army's participation in the Joint Cargo Aircraft has been the need to provide airlift for the "last tactical mile" to support soldiers serving on the front lines.

Will the proposals to transfer the program to the Air Force or to reduce the number of aircraft have an impact on supporting our forward-deployed troops?

Answer. It is Air Force's intent that the transfer of JCA have no negative impact on the forward deployed Soldier. The Army and Air Force have partnered since July 2005 to shape complementary capability requirements for the Joint Cargo Aircraft (JCA) program. The Army requires the JCA to focus on responsive, direct support transportation of Time-Sensitive Mission-Critical (TS/MC) resupply and key personnel transport at the tactical level ("the last tactical mile"). The Army will continue to provide time-sensitive, mission-critical, direct support with a combination of contract air, Sherpas, and CH-47s until the USAF begins performing that mission in the summer of fiscal year 2010. To mitigate the reduced number of airframes procured, the Air Force is studying the feasibility of using other cargo aircraft to supplement the C-27J. A valid requirement remains with the Army for the replacement of the C-23B/B+ Sherpa Cargo Airplane as operational and sustainment costs are exceedingly high. The Army, Air Force, Joint Staff, and Office of the Secretary of Defense are working closely together to develop operational procedures and meas-

ures to meet the Army's mission needs and to determine the final procurement quantity of Joint Cargo Aircraft. This analysis will include the potential use of C-130s to meet a portion of the Army's requirement. If a determination is made to procure more JCAs, there is still time to do that.

QUESTIONS SUBMITTED BY SENATOR PATRICK J. LEAHY

INTEGRATED VEHICLE HEALTH MANAGEMENT SYSTEM (IVHMS)

Question. General Casey, I understand that the Integrated Vehicle Health Management System (IVHMS) is providing significant maintenance, safety, and operational benefits on the UH-60 fleet.

Could you highlight some of those benefits and cost savings?

Answer. The Integrated Vehicle Health Management System (IVHMS) provides early detection of impending aircraft component failures and eliminates guesswork when performing maintenance actions. The IVHMS also provides the ability to automate preventative and recurring maintenance checks. Through the automation of regular maintenance checks such as the 120-hour vibration check, the Army will potentially realize a savings in scheduled maintenance man-hours. The IVHMS also allows insight into the health of the aircraft, which is changing the way aviation maintenance operations are planned and conducted. For example during a recent deployment to Iraq, 22 IVHMS equipped UH-60 aircraft indicated a high engine temperature and/or an excessive speed condition. These conditions normally require engine replacement for analysis. Due to the IVHMS health monitoring abilities, 21 of the 22 UH-60 engine replacements were not required, avoiding \$9.7 million in unscheduled maintenance cost. It is anticipated that IVHMS, which is an enabler of Condition Based Maintenance, will allow the Army to avoid unnecessary component removal in the future due to data collected through health monitoring systems.

Question. Further, can you provide an update on the status of fully outfitting the UH-60 fleet with the IVHMS?

Answer. As of June 8, 2009, 542 Army H-60 aircraft are equipped with Integrated Vehicle Health and Usage Management System (IVHMS) in the field (including 98 UH-60Ms that are delivered from the factory with IVHMS installed). In addition, 344 IVHMS kits were funded and are on contract for installation on the legacy fleet of H-60A/Ls, for an IVHMS equipped total of 886 (542 + 344). Therefore, 46 percent of the 1,931 H-60 objective fleet either has IVHMS installed or is funded to be installed.

Question. Is current funding adequate to outfit all of the UH-60 aircraft currently scheduled to deploy to Iraq and Afghanistan so they continue to realize the benefits of IVHMS?

If not, how much is needed by the Army to do so?

Answer. For the fiscal year 2010-11 rotation being prepared currently, only 10 aircraft will not be equipped with IVHMS kits. The cost to procure and install 10 additional kits is estimated to be approximately \$2.9 million, subject to operational availability of individual aircraft as they near their deployment date.

QUESTION SUBMITTED BY SENATOR THAD COCHRAN

JOINT CARGO AIRCRAFT

Question. General Casey, the budget proposes transferring Joint Cargo Aircraft purchased by the Army and the mission associated with those aircraft to the Air Force. In the past, the Army has maintained that they must maintain a role in this program to fulfill a service-unique requirement to provide time sensitive, mission critical supplies such food, water, repair parts and ammunition directly to Army units? Do you support transferring this mission to the Air Force and do you see any change in requirements for the Department?

Answer. I support transferring this mission to the Air Force. The Air Force can and will support the end-to-end distribution of time sensitive, mission critical (TS/MC) equipment, personnel, and supplies to the forward deployed Army forces. There has been no change in this requirement. It is just a matter of which Service operates and maintains the aircraft to conduct the TS/MC mission. Currently, the Army and Air Force are determining the concepts of operations and employment and preparing the transfer of the Joint Cargo Aircraft (JCA) program from the Army to the Air Force.

QUESTIONS SUBMITTED BY SENATOR CHRISTOPHER S. BOND

INDIVIDUAL READY RESERVE FORCE

Question. My final question is about the Individual Ready Reserve Force, or IRR. General Casey and Secretary Geren, I know you both advocate for the movement away from calling on our IRR forces if we can prevent it. However, the realities abroad and within our armed forces present serious challenges—namely that we are fighting with men and woman who, at one point or another, believed they had completed their service obligation to their country.

Unfortunately, maintaining a robust IRR force is necessary to protect our country's interests. However, these call ups are designed for full-scale mobilization emergencies, not as manning solutions for today's multifaceted counter-insurgency. Grasping the complexities of today's battlefield is an exhaustive training process for our active duty ranks that takes months and even years.

How do you tell a 23 year old who has been out of the service for 2 years that he must re-learn the subtleties and nuances of the Afghan terrain and culture?

Now imagine he's married with two kids, maintaining a full-time job, and has never been to Afghanistan?

Answer. An IRR Soldier being called to active duty goes through a medical screening and participates in military occupational specialty refresher training, and in unit collective training. These measures reintegrate the Soldier into the force and prepare the Soldier for the upcoming deployment, just like any other Soldier who has been out of a theater of operations for any significant period of time. IRR Soldiers who have family care issues, medical issues, or other issues that would prevent them from being called to active duty in accordance with their orders, may request a delay or an exemption through the Army's Delay and Exemption Request Process. Historically, more than two-thirds of exemption requests and nearly nine-tenths of the delay requests have been approved.

Question. Clearly, many former war fighters find difficulty in summoning the requisite will, training, and discipline to carry out the full spectrum operations occurring today in Iraq and Afghanistan because they have fundamentally moved on. Many times, our deployed IRR soldiers only know how to pursue a strategy that does not center on winning, but purely how to survive, not lose, and get back home to a normal life again, before it was interrupted.

Are the odds of getting called up increasing among the IRR force?

Answer. The odds of an IRR Soldier being called to active duty depend more on his or her military occupational specialty (MOS) than on the overall population of Soldiers in the IRR. Soldiers with low-density/high-demand MOSs (e.g., Civil Affairs, Engineers, Signal Corps, and mechanics) have a higher probability of being mobilized than other IRR Soldiers.

Question. Do you believe that filling units with IRR soldiers is an effective manning solution for operations characterized by full-spectrum conflict and irregular warfare?

Answer. IRR Soldiers began their Army careers in an active status, whether it was with the Regular Army or the Reserves. They are experienced and trained Soldiers who either elect to stay in the Army past their Military Service Obligation (MSO), or are in the IRR completing their MSO. IRR Soldiers are called to active duty to fill unit vacancies in units that have been notified of their pending mobilization. Once they are assigned to a unit, IRR Soldiers are integrated into the unit and participate in their collective training prior to their deployment in theater.

QUESTION SUBMITTED BY SENATOR JUDD GREGG

THIRD GENERATION EXTENDED COLD WEATHER CLOTHING SYSTEM (GEN III ECWCS)

Question. I would like to commend the Army for its hard work and initiative in developing the Third Generation Extended Cold Weather Clothing System (GEN III ECWCS). I feel strongly that the system ensures the safety and health of our soldiers while bolstering mission readiness and combat capability. I understand that GEN III ECWCS has proven to be a combat advantage for our troops, but I remain concerned about the Army's present and future plans to fully field and fund the GEN III ECWCS.

What is the Army's requirement for GEN III ECWCS, and in the absence of supplemental funding, how does the Army plan to fund the deployment of GEN III in future years?

Answer. The Army requirement to provide its Soldiers effective protection from the environment without hindering their performance is documented in our Core

Soldier System Capability Production Document (CPD). The Third Generation Extended Cold Weather Clothing System (GEN III ECWCS) supports this requirement as a product improvement over previously fielded Soldier items. At this time, one set of GEN III ECWCS is fielded per deploying Soldier as part of our Rapid Fielding Initiative issue process. The Army's future requirement for GEN III ECWCS is currently being staffed as part of an update to the Core Soldier System CPD, and will likely be one set per Soldier.

Current GEN III ECWCS fielding is supported primarily with supplemental funding; however, there is limited sustainment funding for select layers as part of Army Clothing Bag and Central Issue Facility support. For future years the Army Staff is in the process of developing fielding and sustainment processes that will be integrated into the Equipping and Sustainment Program Objective Memorandum requests for fiscal years 2012 and beyond.

QUESTIONS SUBMITTED BY SENATOR ROBERT F. BENNETT

DUGWAY PROVING GROUND—U.S. ARMY UNMANNED AERIAL VEHICLE TESTING

Question. The Utah delegation was pleased to announce last week that Dugway Proving Ground in Utah's west desert has been chosen to integrate systems and conduct testing on the U.S. Army's Hunter, Shadow and Sky Warrior Unmanned Aerial Vehicles (UAVs).

The Army's decision to establish the Rapid Integration and Acceptance Center at Dugway could bring as many as several hundred good-paying jobs to Utah within 2 years and provide a welcome economic boost to the state. The center's primary missions will be to consolidate all acceptance testing of the Shadow, Hunter and Sky Warrior UAVs and to help the Army streamline the introduction of new UAV technology to combat units.

I consider the Utah Test and Training Range and Dugway Proving Grounds to be national assets and would welcome any plans for future expansion of the mission. It's clear in the budget materials that I have seen that the overall use of unmanned aerial systems (UAS) is increasing. In an unclassified setting could you tell me more about the U.S. Army's plans for expanding the use of UAS's and how we can support it?

Answer. Much of the Army UAS work at Dugway Proving Ground (DPG) will be related to acceptance test procedure (ATP) flights for the Shadow, Hunter and Extended Range Multi-Purpose (ERMP) aircraft. During ATP flights, the government formally accepts aircraft delivered by the prime contractors. Up to this point, these ATP flights have taken place at three separate locations. To streamline the ATP as well as other airframe integration activities, Program Manager (PM) UAS consolidated his assets and established a Rapid Integration Acceptance Center (RIAC) which is currently being moved to DPG.

Several other critical activities will take place at the RIAC. To better meet Warfighter needs, PM UAS will conduct rapid integration, flight assessment, and deployment of new UAS technologies from the RIAC into theater. At the RIAC, PM UAS will conduct rapid integration of new technologies to support not only Army priorities, but Marine Corps and Special Operations Command requirements (or other Service needs, as required). By consolidating all Army UAS aircraft and ancillary equipment at Dugway, we will have all the assets necessary in one place to accelerate and achieve true interoperability between aircraft, the Universal Ground Control Station (UGCS) and the One System Remote Video Terminal (OSRVT).

The RIAC infrastructure will allow a great opportunity to include academic experimentation. Many universities are working various technologies to include payloads, sense and avoid technologies, etc. However, they are limited as far as platform availability to validate these technologies. Having this capability at the RIAC will allow academia to bring the best of breed technologies to fruition for potential follow-on efforts and will provide better enabling technologies to the Warfighter.

The Army Reserve recently selected DPG to consolidate Reserve UAS units with PM UAS facilities. This will allow synergy for training, shared resources, etc. Additionally, the Utah National Guard (at a minimum), as well as other National Guard units across the United States, will be able to leverage the infrastructure being established for the RIAC, as well as the available airspace over DPG property.

As noted earlier, having all the assets necessary in one place allows the PM to accelerate and achieve true interoperability between the various aircraft and systems, the UGCS and OSRVT. Additionally, if the Army is truly to achieve the capability to have a universal operator, it is critical to be able to validate the technology and procedures in one location flying more than one type aircraft from one UGCS.

To truly establish a first-class facility, funds will be required to purchase hangars, office space and bonded storage. DPG has all the runway capability (near and long-term) and some temporary hangar capabilities for the near-term; however, with an influx of several systems and possibly more than 200 personnel, additional space is needed for office and hangar space over what DPG currently offers. The PM UAS staff is finalizing the facility requirements and expects to have a rough estimate of funds required in the next month.

The timeline for arrival of Shadow, Hunter and Warrior on site is staggered. Shadow is already on site at DPG for some engineering flights, to include the rewing effort and additional laser designator payload testing. Shadow ATP will be fully transitioned from Fort Huachuca by February 2010. Hunter will have its initial flight assets at DPG by late October, early November 2009, with additional test assets on site by February 2010. Warrior-A and Block-0 will also be on site around November 2009. The ERMP program will start arriving on site during 4th Quarter, fiscal year 2010 and is expected to be fully operational with its ATP process established by 1st Quarter, fiscal year 2011. Other RIAC efforts will be integrated into the schedule as they become available and approved/funded for integration and testing.

Critical to the entire success of the RIAC effort, along with other associated activities for the Army noted above, is the availability of the restricted airspace above DPG land property for the Army to fly with impunity. Recently, there have been concerns noted by the 388th Range Squadron at Hill Air Force Base (AFB) that they want to retain control of scheduling of the restricted airspace over DPG. However, with the changing mission at DPG for aircraft testing, mostly unmanned, it is imperative that the Army (DPG specifically) retain that priority for use and scheduling over its airspace. Any additional airspace needed in the Utah Test and Training Range area would be coordinated per standard procedures already in place with Hill AFB, to include long-range data link testing and weapons firing during certain flight profiles.

NATIONAL GUARD STATE PARTNERSHIP PROGRAM

Question. I'm sure you are both familiar with the National Guard State Partnership Program. The Utah National Guard has been very pleased with their experience to date in partnering with Morocco and I am pleased to report that things are going well.

I recently cosponsored S. 775, which would formalize the relationship at an institutional level if passed into law.

What can you tell me about the Army's view of this program, its effectiveness and impact on military-to-military relationships around the globe?

Answer. Senate Bill 775 would provide the National Guard with the clear, unambiguous authority needed to continue strengthening its State Partnership Program and, consequently, will ensure that the National Guard SPP continues its very effective contribution to our national security. While it does not call for any additional funds for the program, which operates with a modest budget of about \$8 million in fiscal year 2009 (drawn from both the Air Force and Army), it would codify the authority for the National Guard to continue expending funds for international activities under the SPP program, in support of our national security strategy.

The SPP plays a critical role in building capacities in strategic nations and regions throughout the world. SPP develops unique, sustainable, cooperative partnerships between individual U.S. States and Territories paired up with foreign partner countries. Today, SPP consists of 53 U.S. States and Territories partnered with 61 countries around the world.

The SPP builds partner capacity by allowing Army and Air Guardsmen to share both civilian and military experiences at the individual and unit levels. The focus of SPP remains to develop military to civilian contacts and activities that promote defense and security-related cooperation in critical areas such as emergency management and disaster response, border and port security, leadership and NCO development, medical capacities, economic security, natural resource protection, peace-keeping operations, counter trafficking, counter proliferation and counter and anti-terrorism. Additionally, SPP encourages Guardsmen to facilitate civilian, state, and local government relationships strengthen and develop broad spectrum civil security cooperation between our nation and the SPP partner.

The SPP supports military to military contacts and activities between the United States and those nations partnering with us in the SPP program. All SPP activities support the Combatant Commanders, as well as the individual mission plans of the U.S. Ambassadors.

The SPP can be measured by the support Combatant Commanders and U.S. missions around the world continue to give to the SPP, and the growing demands for SPP expansion to include more countries. The ambiguous regulatory authorities currently in place inhibit mission flexibility and resourcing necessary for the program to achieve its full potential. S. 775 will ensure that SPP can continue building strong, lasting bilateral relationships and support to key nations whose stability will in turn promote regional and, ultimately, global security.

CAMP WILLIAMS

Question. Camp Williams is one of the finest training sites in the country, offering a wide variety of training opportunities to soldiers. In addition to Utah Guard units, many regular Army, Army Reserve, Marine Corps and Air Force units utilize the facilities, both at Camp Williams and at the licensed facilities at Dugway Proving Ground. Camp Williams facilities are also used by the FBI, law enforcement agencies from across the state, and other state agencies for training and leadership conferences. It has also become a regular training area for many youth groups. To keep up with demand, the Camp is continually improving its facilities, both in the cantonment area and in its range areas.

Despite the high value the area offers for national security and law enforcement training, one of the growing issues its leadership must face is that of the expanding local communities physically encroaching the fence line and seeking to place legal restrictions on training and operations there due to issues such as noise complaints, hiking requests and spreading wildfires. These seemingly small issues have the possibility of incrementally disabling its mission that supports our national security. Will you discuss what Army efforts have been made to address encroachment issues in general and any efforts specific to Camp Williams?

Answer. Camp Williams and the National Guard Bureau (NGB) are responding to this issue through a variety of means. First, the Utah Army National Guard (UTARNG) applied for participation in the Joint Land Use Study (JLUS) program of the DOD Office of Economic Adjustment. Camp Williams made it through the nomination process, and on May 7, 2009, held a kick off meeting with a JLUS project manager from DOD.

Second, UTARNG regularly participates in the planning commission meetings of all communities in their vicinity. This helps them partner with the communities, develop relationships and a presence, and express their issues and concerns. NGB provided UTARNG with information on and examples of local ordinances and legislation that could protect their training mission from encroachment.

Third, we are developing an Army Compatible Use Buffer (ACUB) proposal. A group of installation and headquarters staff met with state and local government officials and potential partners to explain the ACUB program as a possible solution. There is considerable interest in the program from the local communities. The cost of property is extremely high adjacent to Camp Williams: a prior appraisal assessed an approximately 3,400-acre parcel at \$39 million. A concern is that the ACUB proposal would depend upon significant partner contributions as the program is currently not funded. Camp Williams is currently working on aligning willing partners and developing their proposal.

Finally, UTARNG is working with staff from the NGB to address unexploded ordnance on property along and beyond the northern boundary of the Camp Williams under the Military Munitions Response Program. As part of this effort, UTARNG will be conducting Public Safety Awareness training to educate the surrounding community about safety issues related to munitions releases that occurred in the past, beyond the facility boundaries. This effort should assist in raising community awareness of the Camp Williams' mission and the importance of maintaining a buffer around this valuable military facility.

SUBCOMMITTEE RECESS

Chairman INOUE. The subcommittee will reconvene on Thursday, May 14, at 10:30 in the morning. At that time we'll have a closed hearing to receive testimony on classified information.

And now, we'll stand in recess.

[Whereupon, at 11:38 a.m., Tuesday, May 12, the subcommittee was recessed, to reconvene subject to the call of the Chair.]

**DEPARTMENT OF DEFENSE APPROPRIATIONS
FOR FISCAL YEAR 2010**

TUESDAY, JUNE 2, 2009

U.S. SENATE,
SUBCOMMITTEE OF THE COMMITTEE ON APPROPRIATIONS,
Washington, DC.

The subcommittee met at 10:29 a.m., in room SD-192, Dirksen Senate Office Building, Hon. Daniel K. Inouye (chairman) presiding.

Present: Senators Inouye, Cochran, and Bond.

DEPARTMENT OF DEFENSE
DEPARTMENT OF THE NAVY

OFFICE OF THE SECRETARY

STATEMENT OF HON. RAYMOND MABUS, SECRETARY OF THE NAVY

OPENING STATEMENT OF CHAIRMAN DANIEL K. INOUYE

Chairman INOUYE. This morning the subcommittee meets to receive testimony on the fiscal year 2010 budget request from the Secretary of the Navy, the Honorable Raymond Mabus; the Chief of Naval Operations, Admiral Gary Roughead; and the Commandant of the Marine Corps, General James Conway. I'd like to welcome each of you and extend special greetings to the Secretary. This is your first appearance before us.

For fiscal year 2010, the President has requested \$156.4 billion for the Navy and the Marine Corps, plus an additional \$15.3 billion in supplemental wartime costs. Although the Secretary of Defense has proposed a number of terminations and delays in major weapons systems, relatively few of these decisions would have an immediate impact on the Navy or Marine Corps. In fact, the \$9 billion in growth in the Navy budget is 50 percent greater than the growth in the Army and the Air Force combined.

The budget supports many Department of Navy priorities, including truncating the DDG 1000 in favor of additional DDG 51 destroyers, continuing production and test of the Joint Strike Fighter (JSF), accelerating the production of Virginia class submarines next year, and completing the growth of the Marine Corps to 202,100 personnel.

Despite the growth in the budget, there is bound to be controversy over other investment decisions. Funds for shipbuilding are not sufficient to achieve our 313 ship Navy, our carrier fleet would be reduced to 10 by year 2040, and it will be very difficult

to purchase more littoral combat ships within the statutory cost cap.

While plans for sea basing and amphibious warfare are getting additional scrutiny, the Expeditionary Fighting Vehicle Program continues unchanged. Many have questioned the cancellation of the VH-71 Presidential helicopter and others are asking whether enough F-18s are being bought to close the strike fighter shortfall.

These are but some of the controversies before us this year. It is also clear that next year will be even more challenging, as the administration has warned that the 2011 budget will have additional spending constraints. Future decisions will be guided by the results of the Quadrennial Defense Review (QDR) and the Nuclear Posture Review (NPR) which are now under development. Yet there has already been a shift in balancing the demands of the current fight with the preparations for future threats. Today's fight involves supporting the surge in Afghanistan, managing the draw-down from Iraq, meeting irregular threats such as terrorism, drug smuggling, and piracy. Each of these missions require different capabilities, some of which have been funded in base budgets and others were loaded into supplemental appropriation requests.

For the first time, the administration has submitted both pieces of the DOD budget at the same time. This will give Congress a clearer view of what is needed to support our warfighters, and the subcommittee welcomes the testimony of our witnesses on these matters, in addition to their views on the fiscal year 2010 base budget request.

The full statements of each of the witnesses will be included in the record in total and I'd like to now turn to the vice chairman for any remarks he wishes to make.

STATEMENT OF SENATOR THAD COCHRAN

Senator COCHRAN. Mr. Chairman, I'm pleased to join you in welcoming this distinguished panel of witnesses to our subcommittee hearing to review the Department of the Navy's budget request.

Mr. Secretary, it is a special pleasure to welcome you in your new capacity as Secretary of the Navy. We look forward to working with you closely to respond to the challenges facing the Department of the Navy. As everyone knows, this new Secretary served as the Governor of our State of Mississippi with great distinction, and we appreciate his public service.

The Navy and Marine Corps team has been a very important part of our national security organization and throughout history they have performed their missions in a very impressive fashion, and continue to contribute to the safety and security of all Americans. We need to be sure we provide them with the funding needed to continue to carry out their missions in the way they have in the past.

The Department has performed with a high degree of professional distinction and we congratulate the individual members of the panel on the roles they have played and will continue to play in carrying out our national security responsibilities.

Thank you.

Chairman INOUE. Thank you very much.

Senator Bond, would you wish to say something?

STATEMENT OF SENATOR CHRISTOPHER S. BOND

Senator BOND. Thank you very much, Mr. Chairman. Yes, on this subject I do have a lot to say. But I appreciate your holding the hearing and I welcome good friends, the Secretary, the Admiral, and the General. This is very important. I will ask some questions and, Admiral Roughead, you know where I'm coming from. In the Navy Posture Review, you stated:

Navy and Marine Corps carrier-based F/A-18 aircraft are providing precision strike in support of the forces on the ground in Iraq and Afghanistan. The F/A-18E/F is the aviation backbone of our Navy's ability to project power ashore without bases that infringe on a foreign nation's sovereign territory. At the rate we are operating these aircraft, the number of our carrier-capable strike fighters will decrease between 2016 and 2020, which will affect our air wing capacity and effectiveness.

Admiral, I couldn't agree with you more, which is why I'm baffled and concerned and stunned about the budget recommendation to underfund the Super Hornet. The inventory of strike fighters currently falls short of the number that we have heard you say in the past is required to support fully the requirement of the Navy air wings and the Marine Corps air wings. In March of this year it was projected, if no action is taken, the Navy strike fighter shortfall will increase to 243 aircraft in the next decade.

But instead of dealing with that, we saw a recommendation for \$4.4 billion in the long delayed, overbudget, and so far unavailable F-35 Joint Strike Fighter, the JSF, which at best, as the cost continues to escalate past \$150 million, you could buy three F/A-18s for every one F-35 or JSF, save hundreds of millions of dollars, and get a multiyear which would bring the price down.

We have seen that in the past, that we can't afford to make these sacrifices and short fund the operations that we know are needed. So I will be asking questions about that, and I thank you, Mr. Chairman.

Chairman INOUE. I thank you, sir.

Now may I call upon the Secretary.

STATEMENT OF RAYMOND MABUS

Mr. MABUS. Mr. Chairman, my distinguished home State Senator, Senator Cochran, and members of the subcommittee: It's an honor to be here before you with Admiral Roughead and General Conway on behalf of our sailors, marines, civilians, and their families.

Two weeks ago, 2 weeks ago today, I assumed the responsibilities as Secretary of the Navy. In this very short period of time, it's been my privilege to gain first-hand insight into our Nation's exceptional Navy and Marine Corps. This naval force serves today around the world, providing a wide range of missions in support of our Nation's interests.

I'm here today to discuss with you, as the chairman pointed out, the fiscal year 2010 budget, the various missions of the Navy and Marine Corps, and some priorities of the Department. The Department's fiscal year 2010 budget reflects commitment to our people, shaping our force, providing adequate infrastructure, and sustaining and developing the right capabilities for the future. The ongoing Quadrennial Defense Review will also aid in shaping the Department's contribution to the national effort in the future.

As I have taken on these new duties, my first priority is to ensure that we take care of our people—sailors, marines, civilians, and their families. Thousands of brave marines and sailors are currently engaged in Iraq and Afghanistan. Thousands more carry out other hazardous duties around the globe. These inspirational Americans volunteered to serve and they are protecting us and our way of life with unwavering commitment. We must show them the same level of commitment when providing for their health and welfare and that of their families.

Last week I made a visit to the National Naval Medical Center in Bethesda and visited with our wounded. It was both a humbling and inspirational experience. It reinforced the enduring commitment we owe them in terms of treatment, transition, and support. Programs such as the Marine Corps Wounded Warrior Regiment, the Navy's Safe Harbor Program, advances in treatment of traumatic brain injuries, and programs that offer training and support in stress control must continue to be our priorities.

Today our sailors and marines are serving and responding to a wide variety of missions, from combat operations to humanitarian assistance and maritime interdiction. The Navy has 13,000 sailors ashore and 9,500 sailors at sea in Central Command's area of responsibility. More than 25,000 marines are deployed in Iraq and Afghanistan. Our civilian force is also heavily engaged in supporting these operational efforts.

We have to ensure that the Department of the Navy will continue to meet these missions while investing to provide the right naval force for future challenges.

Real acquisition reform too has to be a priority. The Department of the Navy has begun to implement the Weapons Systems Acquisition Reform Act and is ready to use this act and other tools to try to ensure that we get the right capabilities on time and at an affordable cost.

PREPARED STATEMENT

I look forward to working together with you in our shared commitment to our Nation and the marines, the sailors, the civilians, and their families. On behalf of all of them, thank you for your commitment and your support, and I look forward to your questions.

Senator DURBIN. Thank you very much, Mr. Secretary.
[The statement follows:]

PREPARED STATEMENT OF RAY MABUS

Chairman Inouye, Senator Cochran, and Members of the Committee, thank you for the opportunity to appear before you today as the 75th Secretary of the Navy. It is my great honor to serve with and represent the over 800,000 men and women of the United States Navy and Marine Corps—active, reserve, and civilian and their families. I am committed to ensuring that the Naval Force remains the preeminent sea power, ready to meet both current and future challenges.

I assumed my duties as Secretary of the Navy very recently. So please allow me to begin by expressing my gratitude to the members of the Senate for the trust that has been placed in me. I am humbled by and proud of the responsibility of representing the wonderful men and women of our Navy and Marine Corps.

Our enduring seapower has been essential to furthering America's interests worldwide. Its importance cannot be overstated, over 70 percent of the planet is covered by water, 80 percent of the world's inhabitants live near the oceans, and 90 percent of global commerce is transported by sea. By maintaining U.S. maritime

dominance, our Sailors and Marines promote security, stability, and trust around the world. Together, we provide a persistent forward presence, power projection abroad, and protection of the world's sea lanes. Our Sailors and Marines, in cooperation with our foreign partners and allies, continue to provide training, deliver humanitarian aid, disaster relief and other assistance throughout the globe.

Our naval forces are uniquely postured to deter aggression and prevent escalations. Should deterrence fail, we stand ready to fight America's wars and defeat our adversaries. In times of crisis, Navy and Marine Corps units are often already on the scene or the first U.S. assets to arrive in force. And they accomplish this all as a seaborne force with a minimum footprint.

To ensure and sustain an effective Navy and Marine Corps in an increasingly complex security environment, we must emphasize and promote a number of essential priorities.

First, we must ensure the proper care for our forces and their families. America's greatest military assets are the dedicated men and women who wear the uniform. Thousands of brave Sailors and Marines are currently engaged in Iraq and Afghanistan; thousands more carry out hazardous duties around the globe. Every one of these incredible Americans volunteered to serve, and they are protecting us and our way of life with unwavering commitment. As we drawdown in Iraq and increase our strength in Afghanistan, they once again stand ready to answer our Nation's call. We must show them the same level of commitment when providing for their health and welfare and that of their families.

Second, we must ensure that the Department of the Navy continues to meet our many missions of today, while preparing for the unknowable but inevitably complex challenges of tomorrow.

Third, we must continue to balance the Department of the Navy's programs, choosing to maintain or establish only those that are achievable, affordable, and responsive to our Nation's needs. We are committed to refining fiscal and budgetary discipline, tackling waste and cost overruns, and building our acquisition workforce. I look forward to working with you to make sure that the Department of the Navy does not shortchange our Sailors, Marines or our taxpayers.

TAKE CARE OF OUR SAILORS AND MARINES AND THEIR FAMILIES

The Department continues to shape the force to balance today's missions and to provide flexibility for the future. The Marine Corps has accomplished its goal of growing the force to 202,000 Marines. This will help to provide our Marines greater dwell time and will provide the opportunity to address other training and missions that have not been accomplished in our recent history. The Navy force has stabilized. Both the Navy and Marine Corps are meeting their recruiting goals both in numbers and quality. Our reserves continue to play a key role as part of the Total Force and our civilians are a bedrock providing support around the globe to our warfighters and to our naval capabilities. Together, we thank you for your support in sustaining the people who stand in our ranks—military and civilian.

We must support and strive to find ways to improve the initiatives that provide for their physical and mental welfare. The following programs exemplify some of the actions we are taking.

Wounded Warrior Medical Care

We as a Nation have no higher obligation than to care for our wounded heroes who have sacrificed so much to serve our Nation. We have a solemn duty to ensure that when our forces go into harm's way, there is an excellent, comprehensive and sustainable plan for the care of our wounded, ill, or injured. The budget request reflects the Department of the Navy's commitment to this highest priority, providing exceptional, individually tailored assistance to our wounded warriors, with a comprehensive approach designed to optimize their recovery, rehabilitation, and reintegration. The Navy Safe Harbor Program and the Marine Corps Wounded Warrior Regiment extend this assistance to the wounded, ill, and injured warriors and their families. The Navy Department is also collaborating with the Department of Defense (DOD) and the Department of Veterans Affairs (VA) to foster continuity of care across all systems and facilitate efficient and effective transitions.

Traumatic Brain Injury

Traumatic Brain Injury is the defining wound of Operation Iraqi Freedom. The National Naval Medical Center Bethesda has a new state-of-the-art Unit to treat Traumatic Brain Injury. I recently had the opportunity to visit this unit and was deeply impressed both by the staff and the facilities. This clinic provides unsurpassed inpatient care for polytrauma patients with TBI, serving all blast-exposed or head-injured casualties medically evacuated from theater. The medical professionals

are highly trained and actively manage symptomatic patients and evaluate complex cases to fashion appropriate, individual treatment and rehabilitation plans.

To increase TBI detection during deployments, the Department of the Navy has implemented a strategy of lowering the index of suspicion for TBI symptoms and improving screening, detection, and treatment coordination between line and medical leaders.

The Department of the Navy has also expanded TBI research. Navy Medical Research Command is using new techniques to identify transmissibility of blast-wave energy into the brain, focusing on the nexus between the blast-wave energy transmission and the resulting brain pathology.

Psychological Health

To address Post Traumatic Stress Disorder (PTSD) and other psychological conditions that effect more and more of our force, the Navy and the Marine Corps continue to improve their Operational Stress Control (OSC) programs. This comprehensive approach seeks to not only promote psychological resilience, but also a culture of psychological health among Sailors and Marines and their families. I am committed to removing any stigma associated with seeking help for mental health. To address this, the Bureau of Medicine and Surgery has established a centralized and comprehensive OSC program to indoctrinate psychological health-stigma reduction into the broader Navy-Marine Corps culture. This includes training and tools that line leadership can use from the newest accessions to flag and general officers. OSC is targeting perceptions within individuals and command leadership, as well as working to help care-givers overcome barriers to psychological health care.

Navy Medicine has established 17 Deployment Health Clinics as portals of care for service members, staffed with primary-care medical and psychological health providers who support early recognition and treatment of deployment-related psychological health issues within the primary care setting. These examples are not all inclusive. Thank you for your continued support of these programs that are so vital to the overall strength of the Department.

Housing and Child Care

The world's finest naval force deserves the world's finest family support programs, including community and health care services and access to quality, affordable child care. The budget request demonstrates a commitment to our Navy and Marine Corps families by investing in family programs, housing, and infrastructure.

MEETING THE MISSIONS OF TODAY

While naval forces are conducting combat and combat-support missions in Iraq and Afghanistan, the Navy and the Marine Corps also stand ready to answer our Nation's call across the full spectrum of military operations. Despite a high operational tempo, our naval forces remain resilient and motivated, and they are performing superbly around the globe. We will work to continue their proud tradition of readiness and to ensure that they are fully trained and equipped for their assigned missions.

Today our Marines and Sailors are undertaking a myriad of missions, from combat operations in the mountains of Afghanistan, to humanitarian assistance in Africa. The Navy has over 9,900 Individual Augmentees and more than 6,600 reservists deployed on the ground around the world in support of Overseas Contingency Operations. Nearly half of the combat air missions over Afghanistan are flown by naval air forces. There are 283 active ships in service—76 percent of these ships, including four aircraft carriers and two large-deck amphibious ships, are underway. Over 50 percent of our attack submarines are underway, with nearly forty percent of our submarine force on deployment.

More than 25,000 Marines are deployed in support of Operations IRAQI FREEDOM (OIF) and ENDURING FREEDOM (OEF). The large majority are in Iraq; however, the process has begun drawing down those forces and increasing the number of Marines in Afghanistan. Nearly 5,700 Marines are deployed to various regions throughout Afghanistan—either as part of the Special Purpose Marine Air Ground Task Force, Afghanistan, or in the 2d Marine Expeditionary Brigade, Marine Special Operations Companies, Embedded Training Teams, or Individual Augments.

One of the most significant readiness challenges facing the Navy and the Marine Corps is balancing their current obligations to overseas contingency operations with other anticipated readiness requirements. To address these concerns, the Department of the Navy is working to expand our engagements with other nations in order to meet our common challenges.

Fostering trust and cooperative relationships with foreign partners is critical to national security, but trust cannot be simply summoned in moments of crisis. It must be developed over time. To revitalize existing relationships and create new ones, we need to show long-term commitment.

Our Naval Forces contribute significantly to cooperative security operations through forward presence and sustained, routine engagement with foreign partners and allies. We are committed to sustaining this core capability of the Maritime Strategy and ask for your continued support.

Additionally, in order to meet our readiness challenges, the Department is working to develop greater energy independence and conservation ashore and afloat. Energy costs siphon resources away from vital areas. The potential for disruption and the possible vulnerability of energy supplies could threaten our ability to perform on the battlefield.

The Department of the Navy has made good progress in increasing energy efficiency, reducing energy consumption, and capitalizing on renewable energy sources. We are the Department of Defense lead for solar, geothermal, and ocean energy, and today, 17 percent of our total energy requirements are provided through alternative or renewable sources.

The Navy and Marine Corps can, and should, do more. As we continue to increase conservation and develop alternative energy options, the Department of the Navy can mitigate the impact of energy volatility, use energy as a strategic resource for operational advantage, and become a leader in environmental stewardship.

BUILDING AND BALANCING THE NAVAL FORCE OF THE FUTURE

The Department of the Navy will continue to meet America's current commitments worldwide, while simultaneously developing a force capable of meeting the challenges of the future. We will focus on irregular warfare and hybrid campaigns, while continuing those more conventional capabilities where our technology gives us a strategic advantage. The fiscal year 2010 budget request puts us on the path towards the goal of balancing near-term requirements with those of the next decade and beyond.

The budget request provides balanced support for deployed and non-deployed steaming days, associated flight hours, and related ship and aircraft maintenance. It works to bolster our naval forces' independence and flexibility by building on their unique ability to operate at great distance with long staying power. This budget would also fund the critical "eyes and ears" of our forces with increases to Intelligence, Reconnaissance, and Surveillance programs and Command, Control, Communications, Computers programs. The budget shows commitment to maintain key capabilities such as power projection, sea control, interdiction, deterrence, and humanitarian assistance.

In an effort to continue to shape our future contributions to the joint force and our country, I look forward to engaging in the Quadrennial Defense Review, which strives to define the best, most affordable collective military force to defend our national interests at home and abroad.

Changes to how equipment is acquired are essential to building our forces for the future. We are committed to pursuing acquisition reform and cost control measures and look forward to implementing Congressional acquisition reform, as well as working with you to continue to find ways to produce the best results out of our acquisition process.

Our Sailors and Marines are a superb fighting force which can be lethal or compassionate, patient or quick, as situations dictate. They are well-trained, proud warriors that continue to deserve the appreciation of a grateful Nation. As their new Secretary, I look forward to working together with you to continue to enhance a relationship built on trust and commitment to our Nation, and the Sailors, Marines, civilians and their families who sacrifice for its cause.

On behalf of the more than 800,000 dedicated men and women of the United States Navy and Marine Corps, I express our grateful appreciation to Congress for its continuing and unflagging support.

Senator DURBIN. May I call upon the Chief of Naval Operations, Admiral Roughead.

STATEMENT OF ADMIRAL GARY ROUGHEAD, CHIEF OF NAVAL OPERATIONS, DEPARTMENT OF THE NAVY

Admiral ROUGHEAD. Thank you, Mr. Chairman. Chairman Inouye, Senator Cochran, distinguished members of the sub-

committee: On behalf of the 600,000 sailors, Navy civilians, and their families, thank you for your continued support and for the opportunity and the honor to represent our Navy alongside Secretary Mabus and General Conway.

Today we have 40,000 sailors on station making a difference around the world. We are more versatile and agile than we have ever been, with approximately 13,000 sailors on the ground in Central Command, to include SEALs, explosive ordnance disposal technicians, Seebees, and many individual augmentees.

The 2010 budget balances the needs of those sailors around the world, our current operations, and the needs for our future fleet, in accordance with our maritime strategy. However, we are progressing at an adjusted pace. Our risk is moderate today, trending toward significant because of challenges posed by our fleet capacity, operational requirements, manpower, maintenance, and infrastructure costs. Our Navy is operating at its highest levels in recent years and, while we remain ready and capable, we are stretched in our ability to meet additional operational demands while balancing our obligation to our people and to building the future fleet.

We require additional capacity to meet combatant commander demands and to maintain our operational tempo. A fleet of at least 313 ships is needed, along with the capabilities that include more ballistic missile defense, irregular warfare, and open ocean anti-submarine warfare capabilities. These needs drove the decision to truncate the DDG 1000 and restart DDG 51 with its blue water anti-submarine warfare capability and integrated air and missile defense, and also to procure three littoral combat ships this year.

As I articulated last year, our Navy must have a stable shipbuilding program that provides the right capability and capacity while preserving our Nation's industrial base. The balance among capability, capacity, affordability, and executability in our procurement plans, however, is not optimal. I continue to focus on the control of requirements, integration of total ownership costs into our decisionmaking, maturing new ship designs before production, and pursuing proven designs, the use of common hull forms and components, and longer production runs to control costs as we build the future fleet.

To best maintain the ships we have, we've reinstated an engineering-based approach to maintenance for our surface ships through the surface ship life cycle management activity. Meanwhile, our board of inspection and survey teams will continue to use our internal INSURV process to conduct rigorous self-assessments on the condition of our ships and submarines.

All that we do is made possible by our dedicated sailors and Navy civilians. I am committed to providing the necessary resources and shaping our personnel policies to ensure our people and their families are properly supported. We are stabilizing our force this year by seeking authorization and funding for an end strength of 328,800 sailors, including overseas contingency operations funding for 4,400 individual augmentees who are in today's fight.

We continue to provide a continuum of care that governs all aspects of individual medical, physical, psychological, and family readiness to our returning warriors and sailors. In 2008 we added

170 care managers to our military treatment facilities and ambulatory care clinics for our 1,800 wounded warriors and their families. In addition, we continue to move mental health providers closer to the battlefield and are actively working against the stigma of post traumatic stress disorder (PTSD).

Achieving the right balance within and across my three priorities of the future fleet, current operations, and people is critical today and for the future. I ask Congress to fully support our 2010 budget and identified priorities.

PREPARED STATEMENT

Thank you for all you do and your continued support and commitment to our Navy. I look forward to your questions today. Thank you very much.

Chairman INOUE. Thank you, Admiral.
[The statement follows:]

PREPARED STATEMENT OF ADMIRAL GARY ROUGHEAD

Chairman Inouye, Senator Cochran, and members of the Committee, it is an honor to appear before you today representing the more than 600,000 Sailors and civilians of the U.S. Navy. We are making a difference around the world. We are globally deployed, persistently forward, and actively engaged. I greatly appreciate your continued support as our Navy defends our Nation and our national interests.

Last year, I came before you to lay out my priorities for our Navy, which were to build tomorrow's Navy, remain ready to fight today, and develop and support our Sailors, Navy civilians, and families. We made great progress on those priorities this past year. Sustaining our Navy's maritime dominance requires the right balance of capability and capacity for the challenges of today and those we are likely to face in the future. It demands our Navy remain agile and ready.

Our Maritime Strategy, issued by the Navy, Marine Corps, and Coast Guard over a year ago, continues to guide our efforts. The strategy recognizes the importance of naval partnerships, elevates the importance of preventing war to the ability to fight and win, and identifies six core capabilities: forward presence, deterrence, sea control, power projection, maritime security, and humanitarian assistance and disaster response (HA/DR). We have increased the breadth and depth of our global maritime partnerships. We have engaged, more than ever, in stability operations and theater security cooperation. Moreover, we are performing each of our six core capabilities as part of the joint force in Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF), and across the globe.

We continue to build tomorrow's Navy. As I articulated last year, our Navy needs a stable shipbuilding program that provides the right capability and capacity for our Fleet while preserving our Nation's industrial base. Since I came before you last year, 10 new ships have joined our Fleet. Among them, is U.S.S. *Freedom* (LCS 1), an important addition that addresses critical warfighting gaps. We have increased oversight and are working closely with industry to lower LCS costs and meet program milestones. I am pleased to announce we have awarded fixed price, incentive fee contracts for the third and fourth LCS ship. We are aggressively working to ensure LCS is a successful and affordable program. The introduction of U.S.S. *George W. Bush* (CVN 77) earlier this year also re-affirmed the strength and power of the American shipbuilder and our industrial base. I remain committed to a carrier force of 11 for the next three decades. In our drive to build the future Fleet, I continue to demand that we accurately articulate requirements and remain disciplined in our processes. As I testified last year, effective procurement requires affordable and realistic programs to deliver a balanced future Fleet.

We reached several key milestones in Navy aviation over the last year. Recently, the first P-8A Poseidon aircraft successfully completed its first flight. The P-8A will replace our aging P-3 Orion maritime patrol aircraft, which we have adapted to the fight we are in by providing critical Intelligence, Surveillance, and Reconnaissance capabilities to current operations in Iraq and Afghanistan. We also issued our first contract for the Broad Area Maritime Surveillance aircraft, which will provide capability to meet the challenges we are likely to face in the future. As I identified last year, we continue to expect a decrease in the number of our strike fighters between 2016 and 2020 which will affect the capacity and effectiveness of our carrier air

wings. The timely delivery of the F-35 Joint Strike Fighter is critical to meeting our strike fighter needs.

While we have been building our Navy for tomorrow, we have also been focused intensely on today's fight. Our Sailors are fully engaged on the ground, in the air, and at sea in support of operations in Iraq and Afghanistan. On the ground, our Navy has more than 13,000 active and reserve Sailors in Central Command supporting Navy, Joint Force, and Combatant Commander requirements. Navy Commanders are leading six of the 12 U.S.-led Provincial Reconstruction Teams in Afghanistan. Our elite teams of Navy SEALs are heavily engaged in combat operations. Navy Explosive Ordnance Disposal platoons are defusing Improvised Explosive Devices (IEDs) and landmines. Our SEABEE construction battalions are rebuilding schools and restoring critical infrastructure. Navy sealift is delivering the majority of heavy war equipment to Iraq, while Navy logisticians are ensuring materiel arrives on time. Our Navy doctors are providing medical assistance in the field and at forward operating bases. In addition, I am thankful for the support of Congress for Navy Individual Augmentees who are providing combat support and combat service support for Army and Marine Corps personnel in Iraq and Afghanistan. On the water, Navy Expeditionary Combat Command Riverine forces are working closely with the Iraqi Navy to safeguard Iraqi infrastructure and provide maritime security in key waterways. Navy forces are also intercepting smugglers and insurgents and protecting Iraqi and partner nation oil and gas infrastructure. We know the sea lanes must remain open for the transit of oil, the lifeblood of the Iraqi economy, and our ships and Sailors are making that happen.

Beyond the fight in Iraq and Afghanistan, however, we remain an expeditionary force, engaged around the world. As the dramatic capture of Maersk Alabama and subsequent rescue of Captain Richard Phillips demonstrated, we do not have the luxury to be otherwise. We are engaged in missions from the Horn of Africa, to the Caribbean and the Philippines. Our operations range from tracking attempted ballistic missile launches from North Korea, to interacting with international partners at sea, to providing medical and humanitarian assistance from the sea. Our Sailors continue to be ambassadors for our Nation. This past October marked the first visit ever of a U.S. nuclear-powered ship, U.S.S. *Theodore Roosevelt*, to South Africa, the first year Navy ships were engaged in operations on both the East and West Coasts of Africa, and the first visit ever of a U.S. CNO to South Africa. Additionally, my recent visit to China continued a dialogue with the PLA(N) that will enhance our military-to-military relationships. In total, we have more than 50,000 Sailors deployed and more than 10,500 in direct support of global Requests for Forces and Joint manning requirements.

My commitment to developing and supporting our Sailors and Navy civilians in their global operations endures. We have met overall officer and enlisted (active and reserve) recruiting goals for 2008 and are on track for success in 2009. We are also improving the diversity of our Navy through significant outreach and mentorship. We continue to provide, support, and encourage training and education for our warfighters in the form of Joint Professional Military Education, Language Regional Expertise and Cultural programs, and top-notch technical schoolhouses. In addition, to help our Sailors balance between their service to the Nation and their lives at home and with their families, we have expanded access to childcare, and improved housing for families and bachelors through Public Private Ventures (PPV). We also continue to address the physical and mental needs of our Wounded and Returning Warriors and their families, as well as the needs of all our Sailors who deploy. I appreciate the support of Congress for these incredible men and women.

My focus as CNO is to ensure we are properly balanced to answer the call now and in the decades to come. As I indicated last year, the balance among capability, capacity, affordability, and executability in our procurement plans is not optimal. This imbalance has increased our warfighting, personnel, and force structure risk in the future. Our risk is moderate today trending toward significant in the future because of challenges associated with Fleet capacity, increasing operational requirements, and growing manpower, maintenance, and infrastructure costs.

We remain a ready and capable Navy today, but the stress on our platforms and equipment is increasing. We can meet operational demands today but we are stretched in our ability to meet additional operational demands while taking care of our people, conducting essential platform maintenance to ensure our Fleet reaches its full service life, and modernizing and procuring the Navy for tomorrow. Our fiscal year 2010 budget aligns with the path our Maritime Strategy has set; however, we are progressing at an adjusted pace. Our budget increases our baseline funding, yet our Navy continues to rely on contingency funding to meet current operational requirements and remain the Nation's strategic reserve across the entire spectrum of conflict.

Achieving the right balance within and across my priorities will be critical as we meet the challenges of today and prepare for those of tomorrow. I request your full support of our fiscal year 2010 budget request and its associated capabilities, readiness, and personnel initiatives highlighted below.

BUILD TOMORROW'S NAVY

To support our Nation's global interests and responsibilities, our Navy must have the right balance of capability and capacity, across multiple regions of the world, to prevent and win in conflict today while providing a hedge against the challenges we are most likely to face tomorrow. You have provided us with a Fleet that possesses the capabilities Combatant Commanders demand. Our budget request for fiscal year 2010 increases the capacity of our Fleet to respond to those demands.

We are addressing our aviation capability and capacity by investing in both new and proven technologies. Our E/A-18G aircraft utilize the same airframe as the F/A-18F, which improves construction costs and efficiencies, but it is equipped for airborne electronic attack, rather than strike missions. The E/A-18G will complete operational testing this year and eventually replace our existing EA-6B Fleet. Our budget includes procurement and RDT&E funding for this aircraft and for our P-8A Multi-mission Maritime Aircraft, which will replace our aging P-3 Orion Fleet. In addition to manned aviation, our Navy is investing in unmanned aircraft, such as Firescout, which is more affordable, can be built in larger numbers, and can do the missions needed in the small wars and counterinsurgencies we are likely to face in the near to mid-term. We are also investing in the Broad Area Maritime Surveillance System (BAMS), which is the only unmanned aircraft that can provide long-range intelligence, surveillance, and reconnaissance in the maritime environment. Our aviation programs increased by more than \$4.2 billion from fiscal year 2009 to fiscal year 2010 to achieve the right balance of capability and capacity.

Our Navy's operational tempo over the past year reaffirms our need for a minimum of 313 ships. The mix of those ships has evolved in response to the changing security environment and our investments in fiscal year 2010 support growing Combatant Commander demands for ballistic missile defense, irregular warfare, and open ocean anti-submarine warfare. We are also addressing demands for high speed and intra-theater lift, as well as a variety of missions in the littoral. Specifically, our fiscal year 2010 budget funds eight ships: the 12th Virginia class submarine, three Littoral Combat Ships (LCS), two T-AKE Dry Cargo and Ammunition Ships, a second Joint High Speed Vessel (JHSV) for the Navy, and an advanced Arleigh Burke Class Destroyer that will restart the DDG 51 program. The budget also funds the balance of LPD 26 and DDG 1002 construction, and provides third-year funding for CVN 78.

American shipbuilding is not broken, but improvements are needed. Since becoming CNO, I have focused on our need to address and control procurement and total ownership costs. Shipbuilding costs have been increasing as a result of reductions in number of ships procured, overtime costs, and challenges associated with the introduction of new technologies and sophisticated systems. We are addressing these costs by maturing new ship designs to adequate levels before commencing production, and by pursuing common hull forms, common components, proven designs, and repeat builds of ships and aircraft to permit longer production runs and lower construction costs. Additionally, our shipbuilding plans incorporate open architecture for hardware and software systems and increasingly use system modularity. These initiatives reduce costs from inception to decommissioning and allow ease of modernization in response to evolving threats.

In 2008, we introduced a more comprehensive acquisition governance process to better link requirements and costs throughout the procurement process. I will work closely with the Secretary of the Navy to grow our acquisition workforce and enhance our ability to properly staff and manage our acquisition programs. I also enthusiastically support reviewing the overall acquisition and procurement processes to determine how the Services can best address costs and accountability.

A solid and viable industrial base is essential to national security and our future Navy, and is a significant contributor to economic prosperity. Shipbuilding alone is a capital investment that directly supports more than 97,000 American jobs and indirectly supports thousands more in almost every U.S. State. Similarly, aircraft manufacturing provides extraordinary and unique employment opportunities for American workers. Like the manufacturing base in other sectors of our economy, the shipbuilding and aircraft industries depend upon stable and predictable workloads to stabilize their workforce and maximize efficiencies. Level loading of ship and aircraft procurements helps retain critical skills and promotes a healthy U.S. shipbuilding and aircraft industrial base.

I seek your support for the following initiatives and programs:

Aircraft Carrier Force Structure

The Navy remains committed to a force of 11 carriers for the next three decades that can respond to national crises and provide options when access is not assured. Our carrier force provides the Nation the unique ability to overcome political and geographic barriers to access critical areas and project power ashore without the need for host nation ports or airfields.

The 11-carrier requirement is based on a combined need for world-wide presence requirements, surge availability, training and exercises, and maintenance. During the period between the planned 2012 inactivation of U.S.S. *Enterprise* (CVN 65) and the 2015 delivery of *Gerald R. Ford* (CVN 78), however, legislative relief is needed to temporarily reduce the operational carrier force to 10. Extending *Enterprise* beyond 2012 involves significant technical risk, challenges manpower and the industrial base, and requires expenditures in excess of \$2.8 billion with a minimal operational return on this significant investment. Extending *Enterprise* would result in only a minor gain in carrier operational availability and adversely impact carrier maintenance periods and operational availability of the force in the future. The temporary reduction to 10 carriers can be mitigated by adjustments to deployments and maintenance availabilities. I request your approval of this legislative proposal.

F/A-18 and Joint Strike Fighter (JSF)

Navy and Marine Corps carrier-based F/A-18 aircraft are providing precision strike in support of forces on the ground in Iraq and Afghanistan. The F/A-18 E/F is the aviation backbone of our Navy's ability to project power ashore without bases that infringe on a foreign nation's sovereign territory. At the rate we are operating these aircraft, the number of our carrier-capable strike fighters will decrease between 2016 and 2020, which will affect our air wing capacity and effectiveness. The F-35 Joint Strike Fighter (JSF) is essential to addressing the Navy's strike fighter needs. Stable funding of JSF will facilitate the on-time and within budget delivery of the aircraft to our Fleet. I also appreciate the support of Congress for our fiscal year 10 request that continues to fund F/A-18 E/F production while transitioning to JSF.

Littoral Combat Ship (LCS)

LCS is a fast, agile, and networked surface combatant with capabilities optimized to support naval and joint force operations in littoral regions. LCS fills warfighting gaps in support of maintaining dominance in the littorals and strategic choke points around the world. It will operate with focused-mission packages, which will include manned and unmanned vehicles, to execute a variety of missions, primarily anti-submarine warfare (ASW), anti-surface warfare (SUW), and mine countermeasures (MCM).

LCS' inherent characteristics of speed, agility, shallow draft, payload capacity, reconfigurable mission spaces, and air/water craft capabilities, combined with its core Command, Control, Communications, Computers and Intelligence, sensors, and weapons systems, make it an ideal platform for engaging in irregular warfare and maritime security operations, to include counter-piracy missions.

I am pleased to report that U.S.S. *Freedom* (LCS 1) is at sea and *Independence* (LCS 2) will deliver later this year. We have issued fixed-price incentive fee contracts for construction of the next two LCS ships based on a limited competition between the current LCS seaframe prime contractors.

The Navy is aggressively pursuing cost reduction measures to ensure delivery of future ships on a schedule that affordably paces evolving threats. We are applying lessons learned from the construction and test and evaluation periods of the current ships, and we are matching required capabilities to a review of warfighting requirements. I am committed to procuring 55 LCS, however legislative relief may be required regarding the LCS cost-cap until manufacturing efficiencies can be achieved. Our fiscal year 2010 budget includes funding for three additional LCS seaframes.

DDG 1000/DDG 51

Ballistic missile capability is rapidly proliferating and, since 1990, the pace of that proliferation has increased markedly. Non-state actors are also acquiring advanced weapons, as demonstrated in 2006 when Hezbollah launched a sophisticated anti-ship missile against an Israeli ship. In addition, while DDG 1000 has been optimized for littoral anti-submarine warfare, the number of capable submarines worldwide does not allow us to diminish our deep-water capabilities. The world has changed significantly since we began the march to DDG 1000 in the early 1990's and, today, Combatant Commander demands are for Ballistic Missile Defense, Integrated Air and Missile Defense, and Anti-Submarine Warfare.

To align our surface combatant investment strategy to meet these demands, we are truncating the DDG 1000 program at three ships and appropriately restarting the DDG 51 production line. The technologies resident in the DDG 51 provide extended range air defense now, and when coupled with open architecture initiatives, will best bridge the transition to the enhanced ballistic missile defense and integrated air and missile defense capability envisioned in the next generation cruiser. In our revised plan, we are addressing the changing security environment and the dynamic capability requirements of the Fleet, while providing maximum stability for the industrial base.

Our fiscal year 2010 budget requests \$1.084 billion to provide the balance of incremental funding for the third ship of the DDG 1000 class authorized in 2009. In addition, \$2.241 billion is requested to re-start the DDG 51 program. The SWAP II Memorandum of Agreement (MOA) will align construction responsibilities to ensure shipyard workload stability, stabilize and minimize cost risk for the DDG 1000 program, and efficiently re-start DDG 51 construction. Research, development, test and evaluation efforts for the DDG 1000 program, will continue in order to deliver the necessary technology to complete the DDG 1000 class ships and support the CVN 78 Class.

Ballistic Missile Defense

The increasing development and proliferation of ballistic missiles threatens our homeland, our allies, and our military operations. Current trends indicate adversary ballistic missile systems are becoming more flexible, mobile, survivable, reliable, accurate, and possess greater range. Threats posed by ballistic missile delivery are likely to increase and become more complex over the next decade.

Our Navy is on station today performing ballistic missile defense (BMD) as a core mission. Maritime BMD is a joint warfighting enabler. Aegis BMD contributes to homeland defense through long range surveillance and tracking and Aegis BMD ships can conduct organic midcourse engagements of short and medium range ballistic missiles in support of regional and theater defense. Our Navy and partner nation Aegis BMD capability, proven and deployed around the world, has an impressive record of success: 18 of 22 direct hits on target, of which 3 of 3 were successful engagements within the earth's endo-atmosphere.

Today, Navy Aegis BMD capability is currently installed on 18 ships: three guided missile cruisers and 15 guided missile destroyers. In response to an urgent Combatant Commander demand, the Defense Department budget requests \$200 million to fund conversion of six additional Aegis ships to provide BMD capability. Ultimately, our plan is to equip the entire Aegis Fleet with BMD capability, to provide Joint Commanders an in-stride BMD capability with regularly deploying surface combatants. While development and procurement funding is covered under the Missile Defense Agency budget, Navy has committed \$14.5 million in fiscal year 2010 for operations and sustainment of Aegis BMD systems and missiles that have transferred to the Navy.

Modernizing Cruisers and Destroyers

Our Cruiser and Destroyer modernization programs provide vital mid-life upgrades to the combat systems and hull, mechanical, and engineering systems. These upgrades complement our engineered ship life-cycle maintenance efforts, which are necessary to ensure our ships maintain their full service life. Combat systems upgrades, in particular, reduce technology risk for future surface combatants and provide a rapid and affordable capability insertion process. Maintaining the stability of the Cruiser and Destroyer modernization programs will be critical to our future Navy capability and capacity. Our fiscal year 2010 budget includes funds to modernize two Cruisers and two Destroyers.

Joint High Speed Vessel (JHSV)

Intra-theater lift is key to enabling the United States to rapidly project, maneuver, and sustain military forces in distant, anti-access or area-denial environments. The Joint High Speed Vessel (JHSV) program is an Army and Navy joint program to deliver a high-speed, shallow draft surface ship capable of rapid transport of medium payloads of cargo and personnel within a theater to austere ports without reliance on port infrastructure for load/offload. The detail design and lead ship construction contract was awarded to Austal USA on November 13, 2008, and includes contract options for nine additional ships for the Army and Navy. Delivery of the first vessel will be to the Army and is expected in 2011. Our fiscal year 2010 budget includes \$178 million for the construction of the Navy's second JHSV. Navy will oversee procurement of the second Army funded vessel.

LPD 17 Class Amphibious Warfare Ship

The LPD 17 Class of amphibious warfare ships represents the Navy's commitment to a modern expeditionary power projection Fleet that will enable our naval force to operate across the spectrum of warfare. The class will have a 40-year expected service life and serve as the replacement for four classes of older ships: the LKA, LST, LSD 36, and the LPD 4. San Antonio Class ships will play a key role in supporting ongoing overseas operations by forwardly deploying Marines and their equipment to respond to global crises. U.S.S. *Green Bay* (LPD 20) was commissioned in January 2009 and U.S.S. *New Orleans* (LPD 18) deployed the same month. New York (LPD 21) is planned to deliver this fall. LPDs 22–25 are in various stages of construction. Our fiscal year 2010 budget requests \$872 million for the balance of the funding for LPD 26, which was authorized in 2009. Further, we request \$185 million of advance procurement for LPD 27 to leverage production efficiencies of the existing LPD 17 class production line. Amphibious lift will have my highest attention as we address it in the ongoing Quadrennial Defense Review.

P-3 Orion and P-8 Multi-mission Maritime Aircraft

Your continued support of the P-3 and P-8A force remains essential. The legacy P-3 Orion, is providing critical intelligence, surveillance and reconnaissance (ISR) to the current fight and it is a key enabler in the execution of our Maritime Strategy. An airframe in very high demand, the P-3 supports the joint warfighter with time-critical ISR, contributes directly to our maritime domain awareness across the globe, and is our Nation's pre-eminent airborne deterrent to an increasing submarine threat. Thirty-nine P-3s were grounded in December 2007 due to airframe fatigue. I thank Congress for providing \$289.3 million to our Navy in the fiscal year 2008 Supplemental to fund the initial phase of the recovery program.

Boeing has resolved labor issues with their workforce and is implementing a recovery plan for the P-8A within fiscal resources that will restore the program schedule from delays caused by last year's strike.

The P-8A Poseidon will start to fill the P-3 capability in 2013. I am pleased to report the program reached a critical milestone this April when the first P-8A test aircraft successfully completed its first flight. I request your support of our fiscal year 2010 budget request for six P-8A aircraft.

E-2D Advanced Hawkeye

The E-2D Advanced Hawkeye aircraft replaces the E-2C Hawkeye aircraft. The aircraft's APY-9 radar is a two-generation leap in airborne surveillance radar capability, significantly improving detection and tracking of small targets in the overland and littoral environment when compared to the E-2C. The E-2D improves nearly every facet of tactical air operations, maintains open ocean capability, and adds overland and littoral surveillance to support Theater Air and Missile Defense capabilities against air threats in high clutter, electro-magnetic interference, and jamming environments. I ask Congress to support our fiscal year 2010 budget request for two E-2D Hawkeye aircraft.

Unmanned Aerial Systems

We are investing in unmanned systems to enhance our capacity to meet increasing global demands for Intelligence, Surveillance and Reconnaissance (ISR) capability. The Broad Area Maritime Surveillance (BAMS) UAS enhances situational awareness of the operational environment and shortens the sensor-to-shooter kill chain by providing persistent, multiple-sensor ISR to Fleet commanders and coalition and joint forces. Our fiscal year 2010 budget requests funding for continued research and development of BAMS. We are also requesting funding for the procurement of five MQ-8 Vertical Takeoff and Landing Tactical UAVs (VTUAV). The MQ-8 supports LCS core mission areas of ASW, Mine Warfare, and SUW. It can operate from all air-capable ships and carry modular mission payloads to provide day and night real time reconnaissance, surveillance and target acquisition capabilities. VTUAV began operational testing this March aboard U.S.S. *McInerney* (FFG 8).

MH-60R/S Multi-Mission Helicopter

The MH-60R multi-mission helicopter program will replace the surface combatant-based SH-60B and carrier-based SH-60F with a newly manufactured airframe and enhanced mission systems. The MH-60R provides forward-deployed capabilities, including Surface Warfare, and Anti-Submarine Warfare, to defeat area-denial strategies, which will enhance the ability of the joint force to project and sustain power. MH-60R deployed for the first time in January 2009 with the U.S.S. *John C. Stennis*. Our fiscal year 2010 budget requests funding to procure 24 MH-60R helicopters.

The MH-60S will support deployed forces with combat logistics, search and rescue, air ambulance, vertical replenishment, anti-surface warfare, airborne mine counter-measures, and naval special warfare mission areas. Our fiscal year 2010 budget requests funding to procure 18 MH-60S helicopters.

Virginia Class SSN

The Virginia Class submarine is a multi-mission submarine that dominates in the littorals and open oceans. Now in its 10th year of construction, the Virginia program is demonstrating that this critical undersea capability can be delivered affordably and on time. We have aggressively reduced construction costs of the Virginia Class to \$2 billion per submarine, as measured in fiscal year 2005 dollars, through construction performance improvements, redesign for affordability, and a multi-year procurement contract, which provides an assured build rate for shipyards and vendors and offers incentives for cost, schedule, and capital expenditure for facility improvements. Not only are these submarines coming in within budget and ahead of schedule, their performance is exceeding expectations and continues to improve with each ship delivered. I consider Virginia Class cost reduction efforts a model for all our ships, submarines, and aircraft.

SSBN

Our Navy supports the Nation's nuclear deterrence capability with a credible and survivable Fleet of 14 Ohio Class ballistic missile submarines (SSBN). Originally designed for a 30-year service life, this class will start retiring in 2027 after over 40 years of service life.

As long as we live in a world with nuclear weapons, the United States will need a reliable and survivable sea-based strategic deterrent. Our fiscal year 2010 budget requests research and development funds for the Ohio Class Replacement, to enable the start of construction of the first ship in fiscal year 2019. The United States will achieve significant program benefits by aligning our efforts with those of the United Kingdom's Vanguard SSBN replacement program. The United States and United Kingdom are finalizing a cost sharing agreement.

Foreign Military Sales

Our Navy also supports the development of partner capability and capacity through a robust Foreign Military Sales (FMS) program. FMS is an important aspect of security cooperation programs designed to improve interoperability, military-to-military relations, and global security. Navy uses the FMS program to help build partner nation maritime security capabilities through transfers of ships, weapon systems, communication equipment, and a variety of training programs. Sales and follow-on support opportunities may also result in production line efficiencies and economies of scale to help reduce USN costs. In the past year, Navy FMS has worked with over 147 nations and international organizations, coordinating 2 ship transfers and 25 ship transfer requests, providing military training to over 12,000 international military members, with total foreign military sales of roughly \$6.8 billion. Congressional support is key to the successful transfer of U.S. equipment to our partners. I thank you for your continued support in this area.

Next Generation Enterprise Network (NGEN)

To pace the complex and adaptive techniques of potential adversaries, we need survivable and persistent network communications that enable secure and robust means to command and control our assets, and to use, manage, and exploit the information they provide. These functions come together in cyberspace, a communication and warfighting domain that includes fiber optic cables on the ocean floor, wireless networks, satellite communications, computer systems, databases, Internet, and most importantly, properly trained cyber personnel to execute cyberspace effects. Cyberspace presents enormous challenges and unprecedented opportunities to shape and control the battlespace. Recent activities, such as the cyber attacks on Georgia and Estonia last year, highlight the complex and dynamic nature of cyber threats.

Our Navy has provided cyber capabilities to the joint force for more than 11 years and we continue to make security and operations in the cyberspace domain a warfighting priority. The challenge we face today is balancing our need to collect and share information with our need to protect against 21st century cyber threats. We are taking steps to effectively organize, man, train, and equip our Navy for cyber warfare, network operations, and information assurance. We are also working closely with Joint and interagency partners to develop offensive and defensive cyberspace capabilities, infrastructure, experience, and access, rather than developing independent, Navy-only capabilities.

As we move from the Navy-Marine Corps Intranet (NMCI) to the Next Generation Enterprise Network (NGEN), the sophistication, speed, and persistence of cyber

threats we observe today makes it imperative that we continually improve our network capabilities, improve our flexibility to adapt to changing environment, and maintain complete operational control of the network. NGEN Block 1 is the follow-on to the existing NMCI contract that expires 30 September 2010. It replaces the services currently provided by NMCI and takes advantage of lessons learned from that network. Future NGEN Blocks will upgrade services provided by NMCI and the OCONUS Navy Enterprise Network. NGEN will also integrate with shipboard and Marine Corps networks to form a globally integrated, Naval Network Environment to support network operations. NGEN will leverage the Global Information Grid (GIG) and, where possible, utilize DOD enterprise services. A comprehensive transition strategy is currently being developed to detail the approach for transition from NMCI to NGEN. I appreciate the support of Congress as we execute a Continuity of Services Contract to assist in this transition.

REMAIN READY TO FIGHT TODAY

Our Navy is operating at its highest levels in recent years. As I testified last year, even as our Nation shifts its focus from Iraq to Afghanistan, our Navy's posture, positioning, and frequency of deployment remain high. Combatant Commanders recognize the value of Navy forces to the current fight and to operations world-wide. We are meeting new needs for ballistic missile defense in Europe and the Pacific, counter-piracy and maritime security in Africa and South America, and humanitarian assistance in the Caribbean and Southeast Asia. Many of these demands started as one-time sourcing requests and have evolved into enduring requirements for Navy forces. As a result, we have experienced a significant difference between our budgeted and actual Fleet operations from year to year, as well as an increase in maintenance requirements for our Fleet as a result of its increased operational tempo.

We have been able to meet these requirements by relying on a combination of base budget and contingency funding and the continuous readiness of our force generated by the Fleet Response Plan (FRP). FRP allows us to provide continuous availability of Navy forces that are physically well-maintained, properly manned, and appropriately trained to deploy for ongoing and surge missions. Any future funding reductions or increased restrictions limit our Navy's ability to respond with as much flexibility to increased Combatant Commander demands world-wide.

Our bases and infrastructure enable our operational and combat readiness and are essential to the quality of life of our Sailors, Navy civilians, and their families. I appreciate greatly your enthusiastic support and confidence in the Navy through the inclusion of Navy projects in the American Reinvestment and Recovery Act. The funding provided through the Recovery Act addresses some of our most pressing needs for Child Development Centers, barracks, and energy improvements. Our projects are prioritized to make the greatest impact on mission requirements and quality of life. All of our Recovery Act projects meet Congress' intent to create jobs in the local economy and address critical requirements. These projects are being quickly and prudently executed to inject capital into local communities while improving mission readiness and quality of work and life for our Sailors and families.

I appreciate your support for the following initiatives:

Training Readiness

The proliferation of advanced, stealthy, nuclear and non-nuclear submarines, equipped with anti-ship weapons of increasing range and lethality, challenge our Navy's ability to guarantee the access and safety of joint forces. Effective Anti-Submarine Warfare (ASW) remains a remarkably and increasingly complex, high-risk warfare area that will require continued investment in research and development to counter the capabilities of current and future adversaries.

Active sonar systems, particularly medium frequency active (MFA) sonar, are key enablers of our ability to conduct effective ASW. MFA sonar is the Navy's most effective tool for locating and tracking submarines at distances that preclude effective attack on our ships. We must conduct extensive integrated training, to include the use of active sonar, which mirrors the intricate operating environment present in hostile waters, particularly the littorals. This is of the highest importance to our national security and the safety of our Sailors and Marines.

Over the past 5 years, Navy has expended significant effort and resources preparing comprehensive environmental planning documentation for our at sea training and combat certification activities. The Navy remains a world leader in marine mammal research, and we will continue our robust investment in this research in fiscal year 2010 and beyond. Through such efforts, and in full consultation and cooperation with our sister federal agencies, Navy has developed effective measures

that safely protect marine mammals and the ocean environment from adverse impacts of MFA sonar while not impeding vital naval training.

In overruling attempts to unduly restrain Navy's use of MFA sonar in Southern California training ranges, the Supreme Court cited President Teddy Roosevelt's quote "the only way in which a navy can ever be made efficient is by practice at sea, under all conditions which would have to be met if war existed." We can and do balance our responsibility to prepare naval forces for deployment and combat operations with our responsibility to be good stewards of the marine environment.

Depot Level Maintenance

Optimum employment of our depot level maintenance capability and capacity is essential to our ships and aircraft reaching their expected service life. Depot maintenance is critical to the safety of our Sailors and it reduces risk caused by extension of ships and aircraft past their engineered maintenance periodicity. Effective and timely depot level maintenance allows each ship and aircraft to reach its Expected Service Life, preserving our existing force structure and enabling us to achieve our required capacity.

I have taken steps to enhance the state of maintenance of our surface combatants. In addition to our rigorous self-assessment processes that identify maintenance and readiness issues before our ships and aircraft deploy, I directed the Commander, Naval Sea Systems Command to reinstate an engineered approach to surface combatant maintenance strategies and class maintenance plans with the goal of improving the overall condition of these ships. Our Surface Ship Life Cycle Maintenance Activity will provide the same type of planning to address surface ship maintenance as we currently have for carriers and submarines.

Consistent, long term agreements and stable workload in both the public and private sector are necessary for the efficient utilization of depots, and it is the most cost effective way to keep our ships and aircraft at the highest possible state of readiness. Consistent with my intent to drive our Navy to better articulate requirements and costs in all we do, we have rigorously updated the quantitative models we use to develop our maintenance budgets, increasing their overall fidelity. These initial editions of the revised maintenance plans have resulted in increased maintenance requirements and additional costs. Our combined fiscal year 2010 budget funds 96 percent of the projected depot ship maintenance requirements necessary to sustain our Navy's global presence. Our budget funds aviation depot maintenance at 100 percent for deployed squadrons and at 87 percent for aviation maintenance requirements overall. I request the support of Congress to fully support our baseline and contingency funding requests for our operations and maintenance to ensure the safety of our Sailors and the longevity of our existing ships and aircraft.

Shore Readiness

Our shore infrastructure enables our operational and combat readiness and is essential to the quality of life and quality of work for our Sailors, Navy civilians, and their families. For years, increased operational demand, rising manpower costs, and an aging Fleet have led our Navy to underfund shore readiness and, instead, invest in our people, afloat readiness, and future force structure. As a result, maintenance and recapitalization requirements have grown and the cost of ownership for our shore infrastructure has increased. At current investment levels, our future shore readiness, particularly recapitalization of our facilities infrastructure, is at risk.

In an effort to mitigate this risk in a constrained fiscal environment, we are executing a Shore Investment Strategy that uses informed, capabilities-based investment decisions to target our shore investments where they will have the greatest impact to our strategic and operational objectives. I appreciate the enthusiastic support and confidence of Congress in the Navy through the inclusion of Navy projects in the American Reinvestment and Recovery Act. Through the Recovery Act, you allowed our Navy to address some of our most pressing needs for Child Development Centers, barracks, dry dock repairs, and energy improvements. These Navy projects are located in 22 states and territories and fully support the President's objectives of rapid and pervasive stimulus efforts in local economies. I am committed to further improvements in our shore infrastructure but our Navy must balance this need against our priorities of sustaining force structure and manpower levels.

Energy

Our Navy is actively pursuing ways to reduce our energy consumption and improve energy efficiency in our operations and at our shore installations. Our emerging Navy Energy Strategy spans three key areas, afloat and on shore: (1) an energy security strategy to make certain of an adequate, reliable, and sustainable supply; (2) a robust investment strategy in alternative renewable sources of energy and en-

ergy conservation technologies; and (3) policy and doctrine changes that are aimed at changing behavior to reduce consumption.

I will be proposing goals to the Secretary of the Navy to increase energy independence in our shore installations, increase use of alternative fuels afloat and reduce tactical petroleum consumption, and to reduce our carbon footprint and green house gas emissions. We are leveraging available investment dollars and current technological advances to employ technology that reduces energy demand and increases our ability to use alternative and renewable forms of energy for shore facilities and in our logistics processes. This technology improves energy options for our Navy today and in the future. Our initial interactions with industry and academic institutions in public symposia over the past few months have generated an enthusiastic response to our emerging strategy.

United Nations Convention on the Law of the Sea

The Law of the Sea Convention codifies navigation and overflight rights and high seas freedoms that are essential for the global mobility of our armed forces. It directly supports our national security interests. Our current non-party status constrains efforts to develop enduring maritime partnerships, inhibits efforts to expand the Proliferation Security Initiative, and elevates the level of risk for our Sailors as they undertake operations to preserve navigation rights and freedoms, particularly in areas such as the Strait of Hormuz and Arabian Gulf, and the East and South China Seas. Accession to the Law of the Sea Convention remains a priority for our Navy.

DEVELOP AND SUPPORT OUR SAILORS AND NAVY CIVILIANS

Our talented and dedicated Sailors and Navy civilians are the critical component to the Navy's Maritime Strategy. I am committed to providing the necessary resources and shaping our personnel policies to ensure our people are personally and professionally supported in their service to our Nation.

Since 2003, the Navy's end strength has declined by approximately 10,000 per year aiming for a target of 322,000 Active Component (AC) and 66,700 Reserve Component (RC) Sailors. While end strength declined, we have increased operational availability through the Fleet Response Plan, supported new missions for the joint force, and introduced the Maritime Strategy. This increased demand includes maritime interdiction, riverine warfare, irregular and cyber warfare, humanitarian and disaster relief, an extended individual augmentee requirement in support of the joint force, and now, counter-piracy.

To meet increased demands, maintain required Fleet manning levels with minimal risk, and minimize stress on the force, we have transitioned from a posture of reducing end strength to one of stabilizing the force. We anticipate that we will finish this fiscal year within two percent above our authorized level.

The fiscal year 2010 budget request supports an active component end strength of 328,800. This includes 324,400 in the baseline budget to support Fleet requirements, as well as increased capacity to support the individual augmentee missions. The budget also supports the reversal of the Defense Health Program military-to-civilian conversions as directed by the Congress. The fiscal year 2010 budget also requests contingency funding for individual augmentees supporting the joint force in non-traditional Navy missions. To maintain Fleet readiness, support Combatant Commanders, and to minimize the stress on the force, our Navy must be appropriately resourced to support this operational demand.

I urge Congress to support the following manpower and personnel initiatives:

Recruiting and Retention

Navy has been successful in attracting, recruiting, and retaining a highly-skilled workforce this fiscal year. The fiscal year 2010 budget positions us to continue that success through fiscal year 2010. We expect to meet our overall officer and enlisted recruiting and retention goals, though we remain focused on critical skills sets, such as health professionals and nuclear operators.

As demand for a professional and technically-trained workforce increases in the private sector, Navy must remain competitive in the marketplace through monetary and non-monetary incentives. Within the health professions, Navy increased several special and incentive pays, and implemented others, targeting critical specialties, including clinical psychology, social work, physician assistant, and mental health nurse practitioners. We are also offering mobilization deferments for officers who immediately transition from active to reserve status. We have increased bonuses and other incentives for nuclear trained personnel to address an increasing demand for these highly-trained and specialized professionals in the private sector.

We continually assess our recruiting and retention initiatives, taking a targeted investment approach, to attract and retain high-performing Sailors. We appreciate Congressional support for the Post-9/11 GI Bill. Navy's goal is to maintain a balanced force, in which seniority, experience, and skills are matched to requirements.

Total Force Integration

Navy continues to invest in Navy Reserve recruiting, retention and training while achieving Total Force integration between active and reserve components. The Navy Reserve Force provides mission capable units and individuals to the Navy and Marine Corps team through a full range of operations. Navy's goal is to become a better aligned Total Force in keeping with Department of Defense and Department of the Navy strategic guidance, while providing fully integrated operational support to the Fleet. Navy continues to validate new mission requirements and an associated Reserve Force billet structure to meet future capability requirements. Navy has leveraged incentives to best recruit Sailors within the Total Force and is developing and improving programs and policies that promote a continuum of service through Navy Reserve affiliation upon separating from the active component. Navy is removing barriers to ease transition between active and reserve components and is developing flexible service options and levels of participation to meet individual Sailor ability to serve the Navy throughout a lifetime of service.

Sailor and Family Continuum of Care

Navy continues to provide support to Sailors and their families, through a "continuum of care" that covers all aspects of individual medical, physical, psychological, and family readiness. Through an integrated effort between Navy Medicine and Personnel headquarters activities and through the chain of command, our goal is reintegrating the individual Sailor with his or her command, family, and community.

Our Navy and Coast Guard recently signed a memorandum of agreement for the Coast Guard to share the services provided by the Navy Safe Harbor Program. The program is currently comprised of approximately 375 lifetime enrollees and 217 individuals receiving personally-tailored care management. It provides recovery coordination and advocacy for seriously wounded, ill, and injured Sailors and Coast Guardsmen, as well as a support network for their families. We have established a headquarters support element comprised of subject matter expert teams of non-medical care managers and recovery care coordinators, and Reserve surge support to supplement field teams in mass casualty situations.

We have also developed the Anchor Program, which leverages the volunteer services of Navy Reserve members and retirees who assist Sailors in reintegrating with family and community. Navy recently institutionalized our Operational Stress Control (OSC) Program which provides an array of initiatives designed to proactively promote psychological resilience and sustain a culture of psychological health among Sailors and their families. We are developing a formal curriculum which will be integrated into the career training continuum for all Sailors throughout their Navy careers.

Active and Reserve Wounded, Ill and Injured

Navy Medicine continues to assess the needs of wounded, ill and injured service members and their families. In 2008, Navy Medicine consolidated all wounded, ill and injured warrior healthcare support with the goal of offering comprehensive implementation guidance, the highest quality and most compassionate care to service members and their families. As of October 2008, 170 additional clinical care managers were assigned to military treatment facilities (MTFs) and ambulatory care clinics caring for approximately 1,800 OIF/OEF casualties. Over 150 clinical medical case managers at Navy MTFs advocate on behalf of wounded warriors and their family members by working directly with the multi-disciplinary medical team caring for the patient.

The Navy recognizes the unique medical and administrative challenges faced by our Reserve Wounded Sailors when they return from deployment, and we know their care cannot end at the Military Treatment Facility (MTF). In 2008, we established two Medical Hold Units responsible for managing all aspects of care for Reserve Sailors in a Medical Hold (MEDHOLD) status. Co-located with MTFs in Norfolk and San Diego, these units are led by Line Officers with Senior Medical Officers supporting for medical issues. Under their leadership, case managers serve as advocates who proactively handle each Sailor's individualized plan of care until all medical and non-medical issues are resolved. We have reduced the numbers of Sailors in the MEDHOLD process and the length of time required to resolve their cases. The RC MEDHOLD program has become the single, overarching program for providing prompt, appropriate care for our Reserve Wounded Sailors.

Traumatic Brain Injury (TBI)

TBI represents the defining wound of OIF/OEF due to the proliferation of improvised explosive devices (IED). The Department of the Navy has implemented a three-pronged strategy to increase detection of TBI throughout the deployment span, which includes mental health stigma reduction efforts, lowering the index of suspicion for TBI symptoms and improving seamless coordination of screening, detection and treatment among line and medical leaders. Navy Medicine continues to expand its efforts to identify, diagnosis and treat TBI. The traumatic stress and brain injury programs at National Naval Medical Center (NNMC) Bethesda, Naval Medical Center San Diego (NMCS), Naval Hospital (NH) Camp Pendleton, and NH Camp Lejeune are collaborating to identify and treat service members who have had blast exposure. Furthermore, Navy Medicine has partnered with the Line community to identify specific populations at risk for brain injury such as front line units, SEALs, and Navy Explosive Ordnance disposal units.

Psychological Health

The number of new cases of Post Traumatic Stress Disorder (PTSD) in the Navy has increased in the last year, from 1,618 in fiscal year 2007 to 1,788 in fiscal year 2008 and we have expanded our efforts to reach out to service members. We continue to move mental health providers closer to the battlefield and remain supportive of the Psychologist-at Sea program. Incentives for military mental health providers have also increased to ensure the right providers are available. We are actively working to reduce the stigma associated with seeking help for mental health. Our recently established Operational Stress Control (OSC) program implements training and tools that line leadership can use to address stigma. Since inception, OSC Awareness Training, which included mental health stigma reduction, has been provided to over 900 non-mental health care givers and 16,000 Sailors including over 1,395 at Navy's Command Leadership School and Senior Enlisted Academy.

Diversity

We have had great success in increasing our diversity outreach and improving diversity accessions in our ranks. We are committed to a Navy that reflects the diversity of the Nation in all specialties and ranks by 2037. Through our outreach efforts, we have observed an increase in NROTC applications and have increased diverse NROTC scholarship offers by 28 percent. The NROTC class of 2012 is the most diverse class in history and, with your help through nominations, the U.S. Naval Academy class of 2012 is the Academy's most diverse class in history. Our Navy is engaging diversity affinity groups such as the National Society of Black Engineers, Thurgood Marshall College Fund, Society of Hispanic Professional Engineers, American Indian Science and Engineering Society, Mexican American Engineering Society, and the Asian Pacific Islander American Scholarship Fund to increase awareness of the opportunities for service in the Navy. Our engagement includes Flag attendance, junior officer participation, recruiting assets such as the Blue Angels, direct Fleet interaction. We have also established Regional Outreach Coordinators in Atlanta, Chicago, Houston, Los Angeles, and Miami to build Navy awareness in diverse markets.

As we continue to meet the challenges of a new generation, the Navy is already being recognized for our efforts through receipt of the Work Life Legacy Award (Families and Work Institute), the Work Life Excellence Award (Working Mother Media), Most Admired Employer (U.S. Black Engineer and Hispanic Engineer Magazine), and Best Diversity Company (Diversity/Careers in Engineering and IT).

Life-Work Integration

Thank you for your support of our Navy's efforts to balance work and life for our Sailors and their families. You included two important life-work integration initiatives in the fiscal year 2009 National Defense Authorization Act (NDAA) in which our Sailors have consistently expressed strong interest. The NDAA authorized 10 days of paternity leave for a married, active duty Sailor whose wife gives birth to a child, establishing a benefit similar to that available for mothers who receive maternity leave and for parents who adopt a child. The NDAA also included a career intermission pilot program, allowing participating Sailors to leave active duty for up to three years to pursue personal and professional needs, while maintaining eligibility for certain medical, dental, commissary, travel and transportation benefits and a portion of basic pay. In addition to these new authorities, Navy is also exploring other life-work integration initiatives, such as flexible work schedules and telework in non-operational billets through use of available technologies such as Outlook Web Access for e-mail, Defense Connect Online, and Defense Knowledge Online for document storage and virtual meetings. The Virtual Command Pilot, im-

plemented within the Total Force Domain for an initial group of officers, will allow individuals to remain in their current geographic locations while working for parent commands located elsewhere within the United States.

Education

We recognize the importance both to the individual and to our mission of providing a life-long continuum of learning and development. Education remains a critical component of this continuum. The Navy's Professional Military Education Continuum, with an embedded Joint Professional Military Education (JPME) component, produces leaders skilled in maritime and joint planning. Additionally, we offer several college-focused incentives. Tuition assistance provides funds to individuals to pay for college while serving. The Navy College Fund provides money for college whenever the Sailor decides to end his or her Navy career. The Navy College Program Afloat College Education (NCPACE) provides educational opportunities for Sailors while deployed. Furthermore, officers are afforded the opportunity to pursue advanced education through the Naval Postgraduate School (NPS), NPS distance learning programs, the Naval War College, and several Navy fellowship programs. In addition, our Loan Repayment Program allows us to offer debt relief up to \$65,000 to recruits who enlist after already earning an advanced degree. The Advanced Education Voucher (AEV) program provides undergraduate and graduate off-duty education opportunities to selected senior enlisted personnel as they pursue Navy-relevant degrees. The Accelerate to Excellence (A2E) program, currently in the second year of a three-year pilot, combines two semesters of education completed while in the Delayed Entry Program, one semester of full-time education taken after boot camp, and college credit earned upon completion of "A" school to complete an Associates Degree. The Navy Credentialing Opportunities Online (COOL) program matches rate training and experience with civilian credentials, and funds the costs of credentialing and licensing exams. As of the end of March 2009, there have been more than 35 million visits to the COOL web site, with more than 13,000 certification exams funded and approximately 8,500 civilian certifications attained.

CONCLUSION

Despite the challenges we face, I remain optimistic about the future. The men and women, active and reserve, Sailor and civilian, of our Navy are extraordinarily capable, motivated, and dedicated to preserving our national security and prosperity. We are fully committed to the current fight and to ensuring continued U.S. global leadership in a cooperative world. We look forward to the upcoming Quadrennial Defense Review, which will address how we can best use our military forces to meet the complex and dynamic challenges our Nation faces today and will face in the future. We have seen more challenging times and emerged prosperous, secure, and free. I ask Congress to fully support our fiscal year 2010 budget and identified priorities. Thank you for your continued support and commitment to our Navy, and for all you do to make the U.S. Navy a force for good today and in the future.

Chairman INOUE. Now may I call upon the Commandant of the Marine Corps, General Conway.

STATEMENT OF GENERAL JAMES T. CONWAY, COMMANDANT, UNITED STATES MARINE CORPS, DEPARTMENT OF THE NAVY

General CONWAY. Mr. Chairman, Senator Cochran, Senator Bond: Thank you, sirs, for the opportunity to report to you on your Marine Corps. My pledge, as always, is to provide you with a candid and honest assessment, and I appear before you in that spirit today.

Our number one priority remains your marines in combat. Since testimony before your subcommittee last year, progress in the Anbar Province of Iraq continues to be significant. Indeed, our marines are in the early stages of the most long-awaited phase of operations, the reset of our equipment and the redeployment of the force. Having recently returned from a trip to theater, I'm pleased to report to you that the magnificent performance of our marines and sailors in al-Anbar continues across a whole spectrum of tasks and responsibilities.

In Afghanistan, we have substantially another story, as thus far in 2009 the Taliban have increased their activity. The 2d Marine Expeditionary Brigade, an air-ground task force numbering more than 10,000 marines and sailors, has just assumed responsibility for its battle space under Regional Command South. They're operating primarily in the Helmand Province, where 93 percent of the country's opium is harvested and where the Taliban have been most active.

We are maintaining an effort to get every marine to the fight and today more than 70 percent of your Marine Corps has done so. Yet our force remains resilient, in spite of an average deployment-to-dwell that is slightly better than one to one in most occupational specialties.

We believe retention is a great indicator of the morale of the force and the support of our families. By the halfway point of this fiscal year, we had already met our reenlistment goals for first term marines and for our career force.

Our growth in the active component by 27,000 marines has proceeded and 2½ years now ahead of schedule, with no change to our standards. We have reached the level of 202,100 marines and have found it necessary to throttle back our recruiting efforts. We attribute our accelerated growth to four factors: quality recruiting, exceptional retention levels, reduced attrition, and, not least, a great young generation of Americans who wish to serve their country in wartime.

Our Corps is deeply committed to the care and welfare of our wounded and their families. Our Wounded Warrior Regiment reflects this commitment. We seek through all phases of recovery to assist in the rehabilitation and transition of our wounded, injured or ill, and their families. I would also like to thank those of you on the subcommittee who have set aside your personal time to visit with our wounded warriors.

Secretary Gates seeks to create a balanced U.S. military through the efforts of the Quadrennial Defense Review. We have always believed that the Marine Corps has to be able to play both ways, to be a two-fisted fighter. Our equipment and major programs reflect our commitment to be flexible in the face of uncertainty. That is to say that 100 percent of United States Marine Corps (USMC) procurement can be employed either in a hybrid conflict or in major combat.

Moreover, we seek to remain good stewards of the resources provided by Congress through innovative adaptation of our equipment. The tilt rotor technology of the M-22 Osprey is indicative of this commitment. We are pleased to report that this airframe has continued to exceed our expectations through three successful combat deployments to Iraq and now a fourth aboard ship. Beginning this fall, there will be at least one Osprey squadron in Afghanistan for as long as we have marines deployed there.

The future posture of our Corps includes a realignment of marine forces in the Pacific. As part of the agreement between Tokyo and Washington, we are planning the movement of 8,000 marines off Okinawa to Guam. We support this move. However, we believe the development of training areas and ranges on Guam and the adjoining islands in the Marianas are key prerequisites for the realign-

ment of our forces. We are actively working within the Department of Defense to align USMC requirements with ongoing environmental assessments and political agreements.

Finally, on behalf of your Marine Corps I extend my gratitude for the support that we have received to date. Our great young patriots have performed magnificently and have written their own page in history. They know as they go into harm's way that their fellow Americans are behind them. On their behalf, I thank you for your enduring support. We pledge to spend wisely every dollar you generously provide in ways that contribute to the defense of this great land.

PREPARED STATEMENT

Thank you once again for the opportunity to report to you today and I look forward, sir, to your questions.

Chairman INOUE. Thank you very much, Commandant.

[The statement follows:]

PREPARED STATEMENT OF JAMES T. CONWAY

INTRODUCTION

Chairman Inouye, Senator Cochran, and distinguished Members of the Committee, my pledge to you remains the same—to always provide my forthright and honest assessment of your Marine Corps. The following pages detail my assessment of the current state of our Corps and my vision for its future.

First and foremost, on behalf of all Marines, I extend deep appreciation for your magnificent support of the Marine Corps and our families—especially those warriors currently engaged in Iraq and Afghanistan. Extremists started this war just over 25 years ago in Beirut, Lebanon. Since then, our country has been attacked and surprised repeatedly, at home and abroad, by murderers following an extreme and violent ideology. I am convinced, given the chance, they will continue to kill innocent Americans at every opportunity. Make no mistake, your Marines are honored and committed to stand between this great Nation and any enemy today and in the future. Whether through soft or hard power, we will continue to fight the enemy on their land, in their safe havens, or wherever they choose to hide.

A selfless generation, today's Marines have raised the bar in sacrifice and quality. They know they will repeatedly go into harm's way, and despite this, they have joined and reenlisted at exceptional rates. Exceeding both the Department of Defense and our own high school graduate standards, more than 96 percent of our enlistees in fiscal year 2008 had earned their high school diploma. Furthermore, based on a recent study from the Center for Naval Analyses, we are also retaining higher quality Marines.

The success in Al Anbar directly relates to the quality of our Marines. Several years ago, few would have thought that the conditions we see in Al Anbar today were possible, but rotation after rotation of Marines, Sailors, Soldiers, and Airmen practiced patience, perseverance, and trigger control until the Sunni leadership realized that we were not the enemy. Now, the vast majority of our actions in Al Anbar deal with political and economic issues—the Corps looks forward to successfully completing our part in this initial battle of the Long War.

However, our Marines are professionals and understand there is still much work to be done. As we increase our strength in Afghanistan, Marines and their families are resolved to answer their Nation's call. There are many challenges and hardships that lie ahead, but our Marines embrace the chance to make a difference. For that, we owe them the full resources required to complete the tasks ahead—to fight today's battles, prepare for tomorrow's challenges, and fulfill our commitment to our Marine families.

Our Marines and Sailors in combat remain my number one priority.—The resiliency of our Marines is absolutely amazing. Their performance this past year in Iraq and Afghanistan has been magnificent, and we could not be more proud of their willingness to serve our great Nation at such a critical time. Our concerns are with our families; they are the brittle part of the equation, yet through it all, they have continued to support their loved ones with the quiet strength for which we are so grateful.

To fulfill the Marine Corps' commitment to the defense of this Nation, and always mindful of the sacrifices of our Marines and their families that make it possible, our priorities will remain steadfast. These priorities will guide the Corps through the battles of today and the certain challenges and crises in our Nation's future. Our budget request is designed to support the following priorities:

- Right-size the Marine Corps for today's conflict and tomorrow's uncertainty
- Reset the force and prepare for the next contingency
- Modernize for tomorrow to be "the most ready when the Nation is least ready"
- Provide our Nation a naval force fully prepared for employment as a Marine Air Ground Task Force across the spectrum of conflict
- Take care of our Marines and their families
- Posture the Marine Corps for the future

Your support is critical as we continue to reset the force for today and adapt for tomorrow. As prudent stewards of the Nation's resources, we are committed to providing the American taxpayer the largest return on investment. The future is uncertain and invariably full of surprises, but continued support by Congress will ensure a balanced Marine Corps—increasingly agile and capable—ready to meet the needs of our Nation and a broadening set of missions. From humanitarian assistance to large-scale conventional operations, your Marines have never failed this great Nation, and thanks to your steadfast support, they never will.

OUR MARINES AND SAILORS IN COMBAT

Our Corps' most sacred resource is the individual Marine. It is imperative to the long-term success of the institution that we keep their well being as our number one priority. Over the past several years, sustained deployments in Iraq, Afghanistan, and across the globe have kept many Marines and Sailors in the operating forces deployed as much as they have been at home station. They have shouldered our Nation's burden and done so with amazing resiliency. Marines understand what is required of the Nation's elite warrior class—to stand up and be counted when the Nation needs them the most. For this, we owe them our unending gratitude.

Marines and their families know that their sacrifices are making a difference, that they are part of something much larger than themselves, and that their Nation stands behind them. Thanks to the continued support of Congress, your Marines will stay resolved to fight and defeat any foe today or in the future.

USMC Operational Commitments

The Marine Corps is fully engaged in a generational, multi-faceted Long War that cannot be won in one battle, in one country, or by one method. Our commitment to the Long War is characterized by campaigns in Iraq and Afghanistan as well as diverse and persistent engagements around the globe. As of 6 May 2009, there are more than 25,000 Marines deployed to the U.S. Central Command's Area of Responsibility in support of Operations IRAQI FREEDOM (OIF) and ENDURING FREEDOM (OEF). The vast majority are in Iraq; however, we are in the process of drawing down those forces and increasing the number of Marines in Afghanistan.

In Afghanistan, we face an enemy and operating environment that is different than that in Iraq. We are adapting accordingly. Nearly 5,700 Marines are deployed to various regions throughout Afghanistan—either as part of Special Purpose Marine Air Ground Task Force (SPMAGTF)—Afghanistan, 2d Marine Expeditionary Brigade, Marine Special Operations Companies, Embedded Training Teams, or Individual Augments and those numbers will grow substantially. The Embedded Training Teams live and work with the Afghan National Army and continue to increase the Afghan National Army's capabilities as they grow capacity. Other missions outside Afghanistan are primarily in the broader Middle East area, with nearly 2,800 Marines, to include the 13th Marine Expeditionary Unit.

While we recognize the heavy demand in Iraq and Afghanistan, the Marine Corps is very conscious of the need for deployed forces throughout the rest of the globe. As of 6 May 2009, there are roughly 2,800 Marines deployed in the U.S. Pacific Command's Area of Responsibility alone, to include the 31st Marine Expeditionary Unit and a 62-man detachment in the Philippines. More than 100 Marines are deployed in support of Combined Joint Task Force—Horn of Africa in Djibouti. Additionally, the Marine Corps has participated in more than 200 Theater Security Cooperation events, ranging from small mobile training teams to MAGTF exercises in Latin America, Africa, Eastern Europe, and the Pacific.

RIGHT-SIZE THE MARINE CORPS

The needs of a Nation at war demanded the growth of our active component by 27,000 Marines. We have had great success and will reach our goal of 202,000 Ma-

rines during fiscal year 2009—more than 2 years earlier than originally forecasted. Solid planning and your continued support will ensure we meet the training, infrastructure, and equipment requirements resulting from this growth. This growth will significantly improve the ability of your Corps to train to the full range of military operations. It will also increase our capacity to deploy forces in response to contingencies and to support security cooperation with our partners, ultimately reducing operational risk and posturing the Corps for continued success in the future.

Before we were funded to grow our force, we were forced into an almost singular focus on preparing units for future rotations and counterinsurgency operations. This narrowed focus and the intense deployment rate of many units weakened our ability to maintain traditional skills, such as amphibious operations, combined-arms maneuver, and mountain warfare. Congressionally-mandated to be “the most ready when the Nation is least ready,” this growth is an essential factor to improve our current deployment-to-dwell ratio and allow our Corps to maintain the sophisticated skills-sets required for today and the future.

In fiscal year 2008, we activated another infantry battalion and increased capacity in our artillery, reconnaissance, engineer, military police, civil affairs, intelligence, and multiple other key units that have seen a significantly high deployment tempo. With your continued support, we will continue to build capacity according to our planned growth.

Improving the deployment-to-dwell ratio for our operating forces will also reduce stress on our Marines and their families. Achieving our goal of a 1:2 deployment-to-dwell ratio for active duty and a 1:5 ratio for Reserves is crucial to the health of our force and our families during this Long War. Our peacetime goal for active duty remains a 1:3 deployment-to-dwell ratio.

Achieving and Sustaining a Marine Corps of 202,000

The Marine Corps grew by more than 12,000 Marines in fiscal year 2008 and is on pace to reach an active duty end strength of 202,000 by the end of fiscal year 2009—more than 2 years ahead of schedule. We attribute our accelerated growth to four factors: quality recruiting, exceptional retention levels, reduced attrition, and—not least—an incredible generation of young Americans who welcome the opportunity to fight for their country. Our standards remain high, and we are currently ahead of our fiscal year 2009 goal in first term enlistments and are on track with our career reenlistments. Attrition levels are projected to remain at or below fiscal year 2008 rates.

Recruiting

Recruiting is the strategic first step in making Marines and growing the Corps. With first-term enlistments accounting for more than 70 percent of our end strength increase, our recruiting efforts must not only focus on our overall growth, but also on attracting young men and women with the right character, commitment, and drive to become Marines.

We continue to exceed Department of Defense quality standards and recruit the best of America into our ranks. The Marine Corps achieved over 100 percent of the Active Component accession goal for both officer and enlisted in fiscal year 2008. We also achieved 100 percent of our Reserve component recruiting goals.

Retention

Retention is a vital complement to recruiting and an indicator of the resiliency of our force. In fiscal year 2008, the Marine Corps achieved an unprecedented number of reenlistments with both the First Term and Career Force. We established the most aggressive retention goals in our history, and our achievement was exceptional. Our 16,696 reenlistments equated to a first-term retention rate of almost 36 percent and a Career Marine retention rate of 77 percent. Through 17 March 2009:

- 7,453 first-term Marines reenlisted, meeting 101.6 percent of our goal. This represents the fastest attainment of a fiscal year first-term reenlistment goal in our history and equates to a retention rate of 31.4 percent retention rate; traditional reenlistments average 6,000 or a retention rate of 24 percent.

- 7,329 Marines who have completed at least two enlistment contracts chose to reenlist again. This number represents 98.2 percent of our goal of 7,464 reenlistments, and a 72.2 percent retention rate among the eligible population.

Our retention success may be attributed to several important enduring themes. First, Marines are motivated to “stay Marine” because they are doing what they signed up to do—fighting for and protecting our Nation. Second, they understand that the Marine Corps culture is one that rewards proven performance. Third, our reenlistment incentives are designed to retain top quality Marines with the most relevant skill sets. The continued support of Congress will ensure continued success.

The Marine Corps Reserve

Our Reserves continue to make essential contributions to our Total Force efforts in The Long War, particularly in Iraq and Afghanistan. As we accelerated our build to 202,000 Active Component Marines, we understood that we would take some risk in regards to obtaining our Reserve Component end strength of 39,600. During the 202,000 build-up, we adjusted our accession plans and encouraged our experienced and combat-tested Reserve Marines to transition back to active duty in support of these efforts. They responded in force, and as a result, we came in under our authorized Reserve Component end strength limit by 2,077. As a Total Force Marine Corps, we rely heavily upon the essential augmentation and reinforcement provided by our Reserve Marines. We believe our authorized end strength of 39,600 is appropriate and provides us with the Marines we require to support the force and to achieve our goal of a 1:5 deployment-to-dwell ratio. With the achievement of the 202,000 active duty force, we will refocus our recruiting and retention efforts to achieve our authorized Reserve Component end strength. The bonus and incentives provided by Congress, specifically the authorization to reimburse travel expenses to select members attending drill, will be key tools in helping us accomplish this goal.

Infrastructure

The Marine Corps remains on track with installation development in support of our personnel growth. With the continued support of Congress, we will ensure sufficient temporary facilities or other solutions are in place until permanent construction can be completed.

Military Construction: Bachelor Housing

Due to previous fiscal constraints, the Marine Corps has routinely focused on critical operational concerns, and therefore we have not built barracks. With your support, we have recently been able to expand our construction efforts and have established a program that will provide adequate bachelor housing for our entire force by 2014. Additional support is required for our fiscal year 2010 program to provide 3,000 new barracks spaces and meet our 2014 goal. We are also committed to funding the replacement of barracks' furnishings on a 7-year cycle as well as the repair and maintenance of existing barracks to improve the quality of life of our Marines.

We are constructing our barracks to a two-person room configuration and assigning our junior personnel (pay grades E1-E3) at two Marines per room. We are a young Service; the majority of our junior Marines are 18-21 years old, and assigning them at two per room helps assimilate them into the Marine Corps culture, while fostering camaraderie and building unit cohesion. As Marines progress to non-commissioned officer rank and take on the added responsibilities of corporal (E4) and sergeant (E5), our intent is to assign them one per room.

Public Private Venture (PPV) Housing

The Marine Corps supports the privatization of family housing. To date, the Public Private Venture (PPV) program has been a success story. We have benefited from the construction of quality homes and community support facilities, as well as the vast improvement in maintenance services. PPV has had a positive impact on the quality of life for our Marines and families. The feedback we have received has been overwhelmingly positive.

PPV has been integral to accommodating existing requirements and the additional family housing requirements associated with the growth of our force. By the end of fiscal year 2007, with the support of Congress, the Marine Corps privatized 96 percent of its worldwide family housing inventory. By the end of fiscal year 2010, we expect to complete our plan to privatize 97 percent of our existing worldwide family housing inventory.

We again thank the Congress for its generous support in this area. In fiscal years 2008 and 2009, you provided the funding to construct or acquire nearly 3,000 additional homes and two related Department of Defense Dependent Schools through this program; and by 2014, PPV will result in all of our families being able to vacate inadequate family housing.

RESET THE FORCE

Operations in Iraq and Afghanistan have placed an unprecedented demand on ground weapons systems, aviation assets, and support equipment. These assets have experienced accelerated wear and tear due to the harsh operating environments and have far exceeded the planned peacetime usage rates. Additionally, many equipment items have been destroyed or damaged beyond economical repair. High rates of degraded material condition require the Marine Corps to undergo significant equipment reset for our operational forces and our prepositioning programs. Reset will

involve all actions required to repair, replace, or modernize the equipment and weapons systems that will ensure the Nation's expeditionary force in readiness is well prepared for future missions. We appreciate the generous support of Congress to ensure that Marines have the equipment and maintenance resources they need to meet mission requirements. It is our pledge to be good stewards of the resources you so generously provide.

Reset Costs

Costs categorized as "reset" meet one of the following criteria: maintenance and supply activities that restore and enhance combat capability to unit and prepositioned equipment; replace or repair equipment destroyed, damaged, stressed, or worn out beyond economic repair; or enhance capabilities, where applicable, with the most up-to-date technology.

Congressional support has been outstanding. Thus far, you have provided more than \$12 billion toward reset. We thank you for this funding; it will help ensure that Marines have the equipment they need to properly train for and conduct combat operations.

Equipment Readiness

Sustained operations have subjected our equipment to more than a lifetime's worth of wear and tear stemming from mileage, operating hours, and harsh environmental conditions. The additional weight associated with armor plating further exacerbates the challenge of maintaining high equipment readiness. Current Marine Corps policy dictates that as forces rotate in and out of theater, their equipment remains in place. This policy action was accompanied by an increased maintenance presence in theater and has paid great dividends as our deployed ground force readiness remains above 90 percent. While we have witnessed a decrease in supply readiness rates for home station units, the delivery of supplemental procurements is beginning to bear fruit and we expect our readiness rates in supply to rise steadily.

Aviation Equipment and Readiness

Marine Corps Aviation supports our Marines in combat today while continuing to plan for crisis and contingency operations of tomorrow. Our legacy aircraft are aging, and we face the challenge of maintaining current airframes that have been subjected to heavy use in harsh, austere environments while we transition to new aircraft. Our aircraft have been flying at rates well above those for which they were designed; however, despite the challenge of operating in two theaters, our maintenance and support personnel have sustained a 74.5 percent aviation mission-capable rate for all Marine aircraft over the past 12 months. We must continue to overuse these aging airplanes in harsh environments as we transition forces from Iraq to Afghanistan.

To maintain sufficient numbers of aircraft in squadrons deployed overseas, our non-deployed squadrons have taken significant cuts in available aircraft and parts. Reset and supplemental funding have partially alleviated this strain, but we need steady funding for our legacy airframes as age, attrition, and wartime losses take their toll on our aircraft inventory.

Prepositioning Programs

Comprised of three Maritime Prepositioning Ships Squadrons (MPSRON) and other strategic reserves, the Marine Corps' prepositioning programs are a critical part of our ability to respond to current and future contingency operations and mitigate risk for the Nation. Each MPSRON, when married with a fly in echelon, provides the equipment and sustainment of a 17,000-man Marine Expeditionary Brigade for employment across the full range of military operations. Withdrawal of equipment from our strategic programs has been a key element in supporting combat operations, growth of the Marine Corps, and other operational priorities. Generous support from the Congress has enabled long-term equipment solutions, and as a result, shortfalls within our strategic programs will be reset as equipment becomes available from industry.

Maritime Prepositioning Squadrons (MPSRON)

Our MPSRONs will be reset with the most capable equipment possible, and we have begun loading them with capabilities that support lower spectrum operations while still maintaining the ability to generate Marine Expeditionary Brigades capable of conducting major combat operations. The MPSRONs are currently rotating through Maritime Prepositioning Force Maintenance Cycle-9. MPSRON-1 completed MPF Maintenance Cycle-9 in September 2008 and is currently at 86 percent of its full equipment set. As I addressed in my 2008 report, equipment from MPSRON-1 was required to outfit new units standing up in fiscal year 2007 and fiscal year

2008 as part of our end strength increase to 202,000. MPSRON-1 is expected to be fully reset at the completion of its next maintenance cycle in 2011.

MPSRON-2 is currently undergoing its rotation through MPF Maintenance Cycle-9. Equipment from MPSRON-2 was offloaded to support Operation IRAQI FREEDOM and much of that equipment remains committed to forward operations today. With projected deliveries from industry, MPSRON-2 will complete MPF Maintenance Cycle-9 in June 2009 with approximately 90 percent of its planned equipment set. Our intent is to finish the reset of MPSRON-2 when it completes MPF Maintenance Cycle-10 in fiscal year 2012. MPSRON-3 was reset to 100 percent of its equipment set during MPF Maintenance Cycle-8 in March 2007 and remains fully capable.

We are currently in the process of replacing the aging, leased vessels in the Maritime Prepositioning Force with newer, larger, and more flexible government owned ships from the Military Sealift Command fleet. Two decades of equipment growth and recent armor initiatives have strained the capability and capacity of our present fleet—that was designed to lift a Naval Force developed in the early 1980s. As we reset MPF, these changes are necessary to ensure we incorporate hard fought lessons from recent combat operations.

Five of the original 13, leased Maritime Prepositioning Ships will be returned to Military Sealift Command by July 2009. In their place, we are integrating 3 of Military Sealift Command's 19 large, medium-speed, roll-on/roll-off ships (LMSR), a fuel tanker and a container ship into the MPF Program. One LMSR was integrated in September 2008 and two more are planned for January 2010 and January 2011. The fuel tanker and container ship will be incorporated in June 2009. These vessels will significantly expand MPF's capacity and flexibility and will allow us to reset and optimize to meet current and emerging requirements. When paired with our amphibious ships and landing craft, the LMSRs provide us with platforms from which we can develop advanced seabasing doctrine and tactics, techniques, and procedures for utilization by the Maritime Prepositioning Force (Future) program.

Marine Corps Prepositioning Program: Norway

The Marine Corps Prepositioning Program—Norway (MCPN) was also used to source equipment in support of current operations in both Operations Iraqi and Enduring Freedom and to provide humanitarian assistance in Georgia. The Marine Corps continues to reset MCPN in accordance with our operational priorities while also exploring other locations for geographic prepositioning that will enable combat and theater security cooperation operations in support of forward deployed Naval Forces.

MODERNIZE FOR TOMORROW

Surprise is inevitable; however, its potentially disastrous effects can be mitigated by a well-trained, well-equipped, and disciplined force—always prepared for the crises that will arise. To that end and taking into account the changing security environment and hard lessons learned from 7 years of combat, the Marine Corps recently completed an initial review of its Operating Forces' ground equipment requirements. Recognizing that our unit Tables of Equipment (T/E) did not reflect the challenges and realities of the 21st century battlefield, the Corps adopted new T/Es for our operating units. This review was synchronized with our modernization plans and programs, and provided for enhanced mobility, lethality, sustainment, and command and control across the MAGTF. They reflect the capabilities required not only for the Corps' current mission, but for its future employment across the range of military operations, against a variety of threats, and in diverse terrain and conditions. The MAGTF T/E review is an integral part of the critical work being done to reset, reconstitute, and revitalize the Marine Corps.

Additionally, we recently published the Marine Corps Vision and Strategy 2025, which guides our development efforts over the next two decades. Programs such as the Expeditionary Fighting Vehicle and the Joint Strike Fighter are critical to our future preparedness. Congressionally-mandated to be "the most ready when the Nation is least ready," your multi-capable Corps will be where the Nation needs us, when the Nation needs us, and will prevail over whatever challenge we face.

Urgent Needs Process

The Marine Corps Urgent Needs Process synchronizes abbreviated requirements, resourcing, and acquisition processes in order to distribute mission-critical warfighting capabilities on accelerated timelines. Operating forces use the Urgent Universal Need Statement to identify mission-critical capability gaps and request interim warfighting solutions to these gaps. Subject to statutes and regulations, the abbreviated process is optimized for speed and involves a certain degree of risk with

regard to doctrine, organization, training, materiel, leadership and education, personnel, and facilities integration and sustainment, along with other deliberate process considerations. A Web-based system expedites processing; enables stakeholder visibility and collaboration from submission through resolution; and automates staff action, documentation, and approval. This Web-based system is one of a series of process improvements that, reduced average time from receipt through Marine Requirements Oversight Council decision from 142 days (December 2005 through October 2006) to 85 days (November 2006 through October 2008).

Enhancing Individual Survivability

We are providing Marines the latest in Personal Protection Equipment (PPE)—such as the Scalable Plate Carrier, Modular Tactical Vest, Lightweight Helmet, and Flame Resistant Organizational Gear (FROG). The Scalable Plate Carrier features a smaller area of coverage to reduce weight, bulk, and heat load for operations at higher elevations like those encountered in Afghanistan. Coupled with the Modular Tactical Vest, the Scalable Plate Carrier provides commanders options to address various mission/threat requirements. Both vests use Enhanced Small Arms Protective Inserts (E-SAPI) and Side SAPI plates and provide the best protection available against a wide variety of small arms threats—including 7.62 mm ammunition.

The current Lightweight Helmet provides a high degree of protection against fragmentation threats and 9 mm bullets, and we continue to challenge industry to develop a lightweight helmet that will stop the 7.62 mm round. The lifesaving ensemble of Flame-Resistant Organizational Gear (FROG) clothing items help to mitigate potential heat and flame injuries to our Marines from improvised explosive devices.

We are also upgrading our Counter Radio-controlled Electronic Warfare (CREW) systems to meet evolving threats. Our Explosive Ordnance Disposal (EOD) equipment has been reconfigured and modernized to be used with CREW systems and has provided EOD technicians the capability of remotely disabling IEDs.

Marine Aviation Plan

The fiscal year 2009 Marine Aviation Plan provides the way ahead for Marine Aviation through fiscal year 2018, with the ultimate long-range goal of fielding an all-short-takeoff/vertical landing aviation force by 2025. We will continue to transition from our 12 legacy aircraft models to six new airframes and expand from 64 to 69 flying squadrons while adding 565 officers and more than 4,400 enlisted Marines.

Joint Strike Fighter (JSF)

The F-35 Lightning II, Joint Strike Fighter, will provide the Marine Corps with an affordable, stealthy, high performance, multi-role jet aircraft to operate in the expeditionary campaigns of the future. The JSF acquisition program was developed using the concept of cost as an independent variable (CAIV), which demands affordability, aggressive management, and preservation of the warfighting requirement. The F-35B's cutting edge technology and STOVL design offer greater safety, reliability, and lethality than today's tactical aircraft.

This aircraft will be the centerpiece of Marine Aviation. Our program of record is to procure 420 aircraft (F-35B, STOVL). Our first flight of the STOVL variant was conducted in the summer of 2008, and the manufacture of the first 19 test aircraft is well under way, with assembly times better than planned. We will reach initial operational capability in 2012, with a standing squadron ready to deploy.

MV-22 Osprey

The MV-22 is the vanguard of revolutionary assault support capability and is currently replacing our aged CH-46E aircraft. In September 2005, the MV-22 Defense Acquisition Board approved Full Rate Production, and MV-22 Initial Operational Capability was declared on 1 June 2007, with a planned transition of two CH-46E squadrons per year thereafter. We have 90 operational aircraft, a quarter of our planned total of 360. These airframes are based at Marine Corps Air Station New River, North Carolina; and Patuxent River, Maryland. Recently, we welcomed back our third MV-22 squadron from combat. By the end of fiscal year 2009, we will have one MV-22 Fleet Replacement Training Squadron, one test squadron, and six tactical VMM squadrons.

The MV-22 program uses a block strategy in its procurement. Block A aircraft are training aircraft and Block B are operational aircraft. Block C aircraft are operational aircraft with mission enhancements that will be procured in fiscal year 2010 and delivered in fiscal year 2012.

Teaming with Special Operations Command, we are currently on contract with BAE systems for the integration and fielding of a 7.62mm, all aspect, crew served, belly mounted weapon system that will provide an enhanced defensive suppressive

fire capability. Pending successful developmental and operational testing we expect to begin fielding limited numbers of this system later in 2009.

This aircraft, which can fly higher, faster, farther, and longer than the CH-46, provides dramatically improved support to the MAGTF and our Marines in combat. On deployments, the MV-22 is delivering Marines to and from the battlefield faster, ultimately saving lives with its speed and range. Operating from Al Asad, the MV-22 can cover the entire country of Iraq. The Marine Corps asked for a transformational assault support aircraft—and Congress answered.

KC-130J Hercules

The KC-130J Hercules is the workhorse of Marine aviation, providing state-of-the-art, multi-mission capabilities; tactical aerial refueling; and fixed-wing assault support. KC-130Js have been deployed in support of Operations IRAQI FREEDOM and ENDURING FREEDOM and are in heavy use around the world.

The success of the aerial-refuelable MV-22 in combat is tied to the KC-130J, its primary refueler. The forced retirement of the legacy KC-130F/R aircraft due to corrosion, fatigue life, and parts obsolescence requires an accelerated procurement of the KC-130J. In addition, the Marine Corps will replace its 28 reserve component KC-130T aircraft with KC-130Js, simplifying the force to one Type/Model/Series. The Marine Corps is continuing to plan for a total of 79 aircraft, of which 34 have been delivered.

In response to urgent requests from Marines currently engaged in combat in Afghanistan, additional capabilities are being rapidly fielded utilizing existing platforms and proven systems to enhance intelligence, surveillance, and reconnaissance (ISR) as well as fire support capability. The ISR/Weapon Mission Kit being developed for use onboard the KC-130J will enable the MAGTF commander to take advantage of the Hercules' extended endurance to provide persistent over-watch of ground units in a low-threat environment. A targeting sensor coupled with a 30mm cannon, Hellfire missiles, and/or standoff precision guided munitions will provide ISR coverage with a sting. Additionally, this added capability will not restrict or limit the refueling capability of the KC-130J. The USMC is rapidly pursuing fielding of the first two kits to support operations in Afghanistan in 2009.

H-1 Upgrade

The H-1 Upgrade Program (UH-1Y/AH-1Z) resolves existing operational UH-1N power margin and AH-1W aircrew workload issues while significantly enhancing the tactical capability, operational effectiveness, and sustainability of our attack and utility helicopter fleet. Our Vietnam-era UH-1N Hueys are reaching the end of their useful life. Due to airframe and engine fatigue, Hueys routinely take off at their maximum gross weight with no margin for error. Rapidly fielding the UH-1Y remains a Marine Corps aviation priority and was the driving force behind the decision to focus on UH-1Y fielding ahead of the AH-1Z. Three UH-1Ys deployed aboard ship with a Marine Expeditionary Unit in January of 2009.

Twenty production H-1 aircraft (14 Yankee and 6 Zulu) have been delivered. Operation and Evaluation Phase II commenced in February 2008, and as expected, showcased the strengths of the upgraded aircraft. Full rate production of the UH-1Y was approved during the fourth quarter fiscal year 2008 at the Defense Acquisition Board (DAB) with additional Low Rate Initial Production (LRIP) aircraft approved to support the scheduled fleet introduction of the AH-1Z in the first quarter of fiscal year 2011.

CH-53K

The CH-53K is a critical ship-to-objective maneuver and seabasing enabler; it will replace our CH-53E, which has been fulfilling our heavy lift requirements for over 20 years. The CH-53K will be able to transport 27,000 pounds externally to a range of 110 nautical miles, more than doubling the CH-53E lift capability under similar environmental conditions while maintaining the same shipboard footprint. Maintainability and reliability enhancements of the CH-53K will significantly decrease recurring operating costs and will radically improve aircraft efficiency and operational effectiveness over the current CH-53E. Additionally, survivability and force protection enhancements will dramatically increase protection for aircrew and passengers; thereby broadening the depth and breadth of heavy lift operational support to the joint task force commander. Initial Operational Capability for the CH-53K is scheduled for fiscal year 2015. Until then, we will upgrade and maintain our inventory of CH-53Es to provide heavy lift capability in support of our warfighters.

Unmanned Aerial Systems (UAS)

When fully fielded, the Corps' Unmanned Aerial Systems will be networked through a robust and interoperable command and control system that provides com-

manders an enhanced capability applicable across the spectrum of military operations. Revolutionary systems, such as those built into the Joint Strike Fighter, will mesh with these UAS to give a complete, integrated picture of the battlefield to ground commanders.

Our Marine Expeditionary Forces have transitioned our Unmanned Aerial Vehicle Squadrons (VMU) to the RQ-7B Shadow; reorganized the squadrons' force structure to support detachment-based flexibility (operating three systems versus one for each squadron); and are preparing to stand up our fourth active component VMU squadron. The addition of a fourth VMU squadron is critical to sustaining operations by decreasing our deployment-to-dwell ratio—currently at 1:1—to a sustainable 1:2 ratio. This rapid transition and reorganization, begun in January 2007, will be complete by the middle of fiscal year 2010.

In Iraq and Afghanistan, the Marine Corps is currently using an ISR Services contract to provide Scan Eagle systems to our forces, but we anticipate fielding Small Tactical UAS (STUAS), a combined Marine Corps and Navy program, in fiscal year 2011 to fill that void at the regiment and Marine Expeditionary Unit (MEU) level. In support of battalion-and-below operations, the Marine Corps is transitioning from the Dragon Eye to the joint Raven-B program.

Airborne Electronic Attack (AEA)

The EA-6B remains the premier electronic warfare platform within the Department of Defense. The Marine Corps is fully committed to the Prowler. While the Prowler continues to maintain a high deployment tempo, supporting operations against new and diverse irregular warfare threats, ongoing structural improvements and the planned Improved Capabilities III upgrades will enable us to extend the aircraft's service life through 2018.

Beyond the Prowler, the future of electronic warfare for the Marine Corps will be comprised of a networked system-of-systems. The constituent components of this network include the F-35B Joint Strike Fighter, Unmanned Aerial Systems, Intelligence, Surveillance, and Reconnaissance pods and payloads, the Next Generation Jammer (NGJ), and ground systems already fielded or under development. Our future vision is to use the entire array of electronic warfare capabilities accessible as part of the distributed electronic warfare network. This critical and important distinction promises to make Marine Corps electronic warfare capabilities accessible, available, and applicable to all MAGTF and joint force commanders.

Ground Tactical Mobility Strategy

The Army and Marine Corps are leading the Services in developing the right tactical wheeled vehicle fleets for the joint force. Through a combination of resetting and replacing current systems and developing several new vehicles, our work will provide the joint force with vehicles of appropriate expeditionary mobility, protection level, payload, transportability, and sustainability. As we develop new vehicles, it is imperative that our ground tactical vehicles provide adequate protection while still being sized appropriately for an expeditionary force.

Expeditionary Fighting Vehicle (EFV)

The EFV is the cornerstone of the Nation's forcible entry capability and the Marine Corps is in a period of critical risk until the EFV is fielded. Based on current and future threats, amphibious operations must be conducted from over the horizon and at least 25 nautical miles at sea. The EFV is the sole sea-based, surface oriented vehicle that can project combat power from the assault echelon over the horizon to the objective. EFVs are specifically suited to maneuver operations from the sea and sustained operations ashore. It will replace the aging Assault Amphibious Vehicle, which has been in service since 1972. Complementary to our modernized fleet of tactical vehicles, the EFV's amphibious mobility, day and night lethality, enhanced force protection capabilities, and robust communications will substantially improve joint force capabilities.

During the program's Nunn-McCurdy restructure in June 2007, the EFV was certified to Congress as essential to National security. EFV System Development and Demonstration was extended 4½ years to allow for design reliability. The EFV program successfully released a Critical Design Review in the first quarter of fiscal year 2009 during a capstone event that assessed the EFV design as mature with a predicted reliability estimate of 61 hours mean time between operational mission failures greatly exceeding the exit criteria of 43.5 hours. These improvements will be demonstrated during the Developmental Test and Operational Test phases starting second quarter fiscal year 2010 on the seven new EFV prototypes currently being manufactured at the Joint Services Manufacturing Center in Lima, Ohio. The Low Rate Initial Production decision is programmed for fiscal year 2012. The cur-

rent acquisition objective is to produce 573 EFVs. Initial Operational Capability is scheduled for 2015 and Full Operational Capability is scheduled for 2025.

Mine Resistant Ambush Protected (MRAP) Vehicles

The Marine Corps is executing this joint urgent requirement to provide as many highly survivable vehicles to theater as quickly as possible. In November 2008, the Joint Requirements Oversight Council established a new 16,238-vehicle requirement for all Services and SOCOM. The current Marine Corps requirement of 2,627 vehicles supports our in-theater operations and home station training and was satisfied in June 2008. We are currently developing modifications that will provide for greater off-road mobility and utility in an Afghan environment in those vehicles that have been procured.

Vehicle Armoring

The evolving threat environment requires proactive management of tactical wheeled vehicle programs in order to provide Marine warfighters with the most well protected, safest vehicles possible given technological limitations. Force protection has always been a priority for the Marine Corps. We have fielded a Medium Tactical Vehicle Replacement (MTVR) Armor System for the MTVR; Fragmentation Armor Kits for the High Mobility Multipurpose Wheeled Vehicles (HMMWV); Marine Armor Kits (MAK) armor for the Logistics Vehicle System (LVS); and the Mine Resistant Ambush Protected (MRAP) vehicles. We have developed increased force protection upgrades to the MTVR Armor System, safety upgrades for the HMMWVs, and are developing improved armor for the Logistics Vehicle System. We will continue to work with the Science & Technology community and with our sister Services to develop and apply technology as required to address force protection. Congressional support for our force protection efforts has been overwhelming, and we ask that Congress continue their life-saving support in the coming years.

Marine Air Ground Task Force (MAGTF) Fires

In 2007, we initiated "The MAGTF Fires Study." This study examined the current organic fire support of the MAGTF to determine the adequacy, integration, and modernization requirements for ground, aviation, and naval surface fires. The study concluded that the MAGTF/Amphibious Task Force did not possess an adequate capability to engage moving armored targets and to achieve a volume of fires in all weather conditions around the clock. This deficiency is especially acute during Joint Forcible Entry Operations. We are currently conducting a study with the Navy to analyze alternatives for meeting our need for naval surface fires during this phase. Additionally, we performed a supplemental historical study using Operation IRAQI FREEDOM data to examine MAGTF Fires across the range of military operations. These studies reconfirmed the requirement for a mix of air, naval surface, and ground-based fires as well as the development of the Triad of Ground Indirect Fires.

Triad of Ground Indirect Fires

The Triad of Ground Indirect Fires provides for complementary, discriminating, and non-discriminating fires that facilitate maneuver during combat operations. The Triad requires three distinct systems to address varying range and volume requirements. Offering improved capabilities and mobility, the M777 is a medium-caliber artillery piece that is currently replacing the heavy and aged M198 Howitzer. The High Mobility Artillery Rocket System is an extended range, ground-based rocket capability that provides precision and volume fires. The Expeditionary Fire Support System (EFSS) is a towed 120mm mortar. It will be the principal indirect fire support system for heli-borne and tilt rotor-borne forces executing Ship-to-Objective Maneuver. When paired with an Internally Transportable Vehicle, the EFSS can be transported aboard MV-22 Osprey and CH-53E aircraft. EFSS-equipped units will have immediately responsive, organic indirect fires at ranges beyond those of current infantry battalion mortars. Initial operational capability is planned in 2009 with full operational capability expected for fiscal year 2012.

Naval Surface Fire Support

In the last year, the Naval Services have focused on reinvigorating our strategy for building naval surface fire support capable of engaging targets at ranges consistent with our Ship-to-Objective Maneuver concept. In March 2008, the Extended Range Guided Munition development effort, which was designed to provide naval gunfire at ranges up to 53 nautical miles, was cancelled due to numerous technical and design flaws. The DDG 1000 program, which provides for an Advanced Gun System firing the Long Range Land Attack Projectile 70 nautical miles as well as for the Dual Band RADAR counter-fire detection capability, was truncated as priorities shifted to countering an emerging ballistic missile threat. As a result, the Ma-

rine Corps and Navy are committed to re-evaluating methods for providing required naval fires.

Aviation Fires

Marine aviation is a critical part of the MAGTF fires capability. The Joint Strike Fighter will upgrade missile and bomb delivery, combining a fifth-generation pilot-aircraft interface, a 360-degree view of the battlefield, and a new generation of more lethal air-delivered ordnance coming online through 2025. Systems, such as Strikelink, will mesh forward air controllers with pilots and infantry officers at all levels. Laser and global positioning systems will provide terminal phase precision to less-accurate legacy bombs, missiles and rockets, providing more-lethal, all-weather aviation fires.

Infantry Weapons

We are also developing infantry weapons systems based on our combat experience and supporting studies. These systems not only support the current fight, but also posture Marines to respond across the full spectrum of war. Our goals include increased lethality and combat effectiveness, reduced weight, improved modularity, and integration with other combat equipment. The Marine Corps and Army are co-leading a joint Service capabilities analysis in support of future developments.

The M16A4 and the M4 carbine are collectively referred to as the Modular Service Weapon. While both weapons have proven effective and reliable in combat operations, we must continually seek ways of improving the weapons with which we equip our warriors. With that in mind, we are re-evaluating current capabilities and determining priorities for a possible future service rifle and pistol.

We are in the process of acquiring the Infantry Automatic Rifle, which is shorter and lighter than the M249 Squad Automatic Weapon and will enable the automatic rifleman to keep pace with the fire team while retaining the capability to deliver accurate and sustained automatic fire in all tactical environments. The Infantry Automatic Rifle will increase the lethality of our rifle squads while reducing logistical burden.

The Marine Corps is also upgrading its aging Shoulder-launched Multipurpose Assault Weapon (SMAW) with a lighter launcher and enhanced targeting and fire control. In concert with this, we are developing a "fire from enclosure" rocket that will enable Marines to fire the SMAW from within a confined space.

Non-lethal Weapons

Our joint forces will continue to operate in complex security environments where unintended casualties and infrastructure damage will work against our strategic goals. Therefore, our warfighters must have the capability to respond using both lethal and non-lethal force. As the Executive Agent for the Department of Defense Non-Lethal Weapons Program, the Marine Corps oversees and supports joint Service operational requirements for non-lethal weapons and their development to meet identified capability gaps. Our efforts extend across the globe, as reflected by the Department of Defense's engagement with the North Atlantic Treaty Organization in identifying emerging non-lethal capabilities. Directed-energy technology is proving to hold much promise for the development of longer-range, more effective non-lethal weapons. Non-lethal weapon applications will provide new options for engaging personnel, combating small boat threats, and stopping vehicles, and are critical to our success against today's hybrid threats.

Command and Control

The Marine Corps' Command and Control Harmonization Strategy articulates our goal of delivering seamless support to Marines. We are taking the best of emerging technologies to build an integrated set of capabilities that includes the Common Aviation Command and Control System (CAC2S), Joint Tactical Radio System, Very Small Aperture Terminal, the Combat Operations Center (COC), Joint Tactical COP Workstation, and Blue Force tracking system.

Combat Operations Center (COC)

By 2010, the MAGTF Combat Operations Center capability will integrate air and ground tactical situations into one common picture. The COC program has a current Authorized Acquisition Objective of 260 systems, of which 242 are COCs supporting regimental/group-size and battalion/squadron-size operating forces. As of 1 May 2009, 22 COCs have been deployed overseas in support of units participating in Operation IRAQI FREEDOM; 16 COCs are deployed in support of Operation ENDURING FREEDOM. COC systems will eventually support the warfighter from the Marine Expeditionary Force-level to the company-level and below.

Marine Corps Enterprise Network (MCEN)

The Marine Corps Enterprise Network (MCEN) enables the Marine Corps' warfighters and business domains to interface with joint forces, combatant commands, and the other Services on our classified and unclassified networks.

To meet the growing demands for a modern, networked force, the Marine Corps, as part of a Department of Navy-led effort, is transitioning its Non-Secure Internet Protocol Routing Network (NIPRNET) from the contract owned and contract operated Navy-Marine Corps Intranet (NMCI) to a government owned and government operated Next Generation Enterprise Network (NGEN). This transition will provide the Marine Corps unclassified networks increased security, control, and flexibility.

The Marine Corps continues to invest in the expansion and enhancement of our Secret Internet Protocol Routing Network (SIPRNET) to ensure a highly secure and trusted classified network that meets our operational and intelligence requirements.

The Marine Corps has enhanced its security posture with a defense-in-depth strategy to respond to cyber threats while maintaining network accessibility and responsiveness. This layered approach, aligned with Department of Defense standards, provides the Marine Corps networks that support our warfighting and business operations while protecting the personal information of our Marines, Sailors, and their families.

Intelligence, Surveillance, and Reconnaissance (ISR)

We continue to improve the quality, timeliness, and availability of actionable intelligence through implementation of the Marine Corps Intelligence, Surveillance, and Reconnaissance Enterprise (MCISR-E). This approach incorporates Marine Corps ISR capabilities into a flexible framework that enables us to collect, analyze, and rapidly exchange information necessary to facilitate increased operational tempo and effectiveness. Through development of the Distributed Common Ground System—Marine Corps (DCGS-MC), the enterprise will employ fully integrated systems architecture compliant with joint standards. This will allow our units to take advantage of joint, national, interagency, and coalition resources and capabilities, while making our intelligence and combat information available to the same. MCISR-E will integrate data from our ground and aerial sensors as well as from non-traditional intelligence assets, such as from battlefield video surveillance systems, Joint Strike Fighter sensors, and unit combat reports. This will enhance multi-discipline collection and all-source analytic collaboration. Additionally, MCISR-E will improve interoperability with our command and control systems and facilitate operational reach-back to the Marine Corps Intelligence Activity and other organizations.

Recent growth in intelligence personnel permitted us to establish company-level intelligence cells, equipped with the tools and training to enable every Marine to be an intelligence collector and consumer. This capability has improved small unit combat reporting and enhanced operational effectiveness at all levels. Collectively, these efforts provide an adaptive enterprise that supports Marine Air-Ground Task Force intelligence requirements across the full range of military operations.

Improved Total Life Cycle Management

To assure effective warfighting capabilities, we are improving the Total Life Cycle Management of ground equipment and weapons systems. Overall mission readiness will be enhanced through the integration of the Total Life Cycle Management value stream with clear aligned roles, responsibilities, and relationships that maximize the visibility, supportability, availability, and accountability of ground equipment and weapons systems.

This will be accomplished through the integration of activities across the life cycle of procuring, fielding, sustaining, and disposing of weapon systems and equipment. Some of the expected benefits include:

- “Cradle to grave” material life cycle management capability
- Clearly defined roles and responsibilities for life cycle management across the enterprise
- Availability of reliable fact-based information for decision making
- Full cost visibility
- Full asset visibility
- Standardized processes and performance metrics across the enterprise
- Improved internal management controls

Water and Energy Conservation

The Marine Corps believes in good stewardship of water and energy resources aboard our installations. In April 2009, we published our Facilities Energy & Water Management Campaign Plan, which includes the steps we are taking to reduce

greenhouse gas emissions and our dependence on foreign oil. In our day-to-day operations and long-term programs, we intend to reduce the rate of energy use in existing facilities, increase energy efficiency in new construction and renovations, expand the use of renewable resources, reduce usage rates of water on our installations, and improve the security and reliability of energy and water systems.

A NAVAL FORCE, FOR EMPLOYMENT AS A MAGTF

Your Corps provides the Nation a multi-capable naval force that operates across the full range of military operations. The Navy, Marine Corps, and Coast Guard will soon publish the Naval Operations Concept 2009 (NOC 09). This publication describes how, when, and possibly where U.S. naval forces will prevent conflict—and/or prevail in war—as part of a maritime strategy. In this era of strategic uncertainty, forward deployed naval forces are routinely positioned to support our national interests. The ability to overcome diplomatic, geographic, and anti-access impediments anywhere on the globe is a capability unique to naval forces. Our strategies and concepts address the following requirements: The ability to maintain open and secure sea lines of communication for this maritime nation; the ability to maneuver over and project power from the sea; the ability to work with partner nations and allies to conduct humanitarian relief or non-combatant evacuation operations; and the ability to conduct sustained littoral operations along any coastline in the world. These strategies and concepts highlight the value of naval forces to the Nation and emphasize the value of our Marine Corps-Navy team.

Seabasing

The ability to operate independently from the sea is a core capability of the Navy and Marine Corps. Seabasing is our vision of future joint operations from the sea. Seabasing is the establishment of a port, an airfield, and a replenishment capability at sea through the physical coupling and interconnecting of ships beyond the missile range of the enemy. We believe sea-based logistics, sea-based fire support, and the use of the ocean as a medium for tactical and operational movement will permit our expeditionary forces to move directly from their ships to the objectives—on the shoreline or far inland. From that base at sea—with no footprint ashore—we will be able to conduct the full range of operations, from forcible entry to disaster relief or humanitarian assistance.

Forcible Entry

Naval forces afford the Nation's only sustainable forcible entry capability. Two Marine Expeditionary Brigades (MEBs) constitute the assault echelon of a sea-based Marine Expeditionary Force. Each MEB assault echelon requires 17 amphibious warfare ships—resulting in an overall ship requirement of 34 operationally available amphibious warfare ships. In order to meet a 34-ship availability rate based on a Chief of Naval Operations approved maintenance factor of 10 percent (not available for deployment), this calls for an inventory of 38 amphibious ships. This amphibious fleet must be composed of not less than 11 amphibious assault ships (LHA/LHD), 11 amphibious transport dock ships (LPD-17 class), and 12 dock landing ships (LSD), with 4 additional amphibious ships, which could be either LPDs or LSDs. This arrangement accepts a degree of risk but is feasible if the assault echelons can be rapidly reinforced by the Maritime Prepositioning Force (future). The Navy and Marine Corps agreed to this requirement for 38 amphibious warfare ships.

LPD-17

The recent deployment of the first of the San Antonio-class amphibious warfare ship demonstrates the Navy's commitment to a modern expeditionary power projection fleet that will enable our naval force to operate across the spectrum of conflict. It is imperative that, at a minimum, 11 of these ships be built to support the 2.0 MEB assault echelon amphibious lift requirement. Procurement of the 10th and 11th LPD remains one of our highest priorities. The Marine Corps recognizes and appreciates the support Congress has provided in meeting the requirement for 11 LPD-17 ships.

To assist the Navy in transitioning to an optimum number and types of common hull forms, the LPD-17 remains the leading candidate for replacing the dock landing ships (LSD). Constructing new amphibious ships based on the incremental refinement of common hull forms will greatly enhance our ability to meet evolving MAGTF lift requirements. Critical to this strategy is the development of a ship-building schedule that will provide a smooth transition from legacy ship decommissioning to new ship delivery, minimizing operational risk while driving costs down.

Today and in the future, LPD-17 class ships will play a key role by forward deploying Marines and their equipment to execute global commitments throughout all phases of engagement. The ship's flexible, open-architecture design will facilitate expanded force coverage and decrease reaction times of forward deployed Marine Expeditionary Units. It will also offer the capacity to maintain a robust surface assault and rapid off-load capability in support of combatant commander forward presence and warfighting requirements.

LHA(R)/LH(X)

A holistic amphibious shipbuilding strategy must ensure that our future warfighting capabilities from the sea are fully optimized for both vertical and surface maneuver capabilities. The MV-22 and Joint Strike Fighter, combined with CH-53 K and the UH-1 Y/Z, will provide an unparalleled warfighting capacity for the combatant commanders. Two Amphibious Assault (Replacement) (LHA(R)) ships with enhanced aviation capabilities will replace two of the retiring Amphibious Assault (LHA) class ships and join the eight LHD class amphibious assault ships. The LHA(R) design traded surface warfare capabilities to provide enhanced aviation hangar and maintenance spaces to support aviation maintenance, increase jet fuel storage and aviation ordnance magazines, and increase aviation sortie generation rates.

Operational lessons learned and changes in future operational concepts have caused changes in MAGTF equipment size and weight and have reinforced the requirement for amphibious ships with flexible surface interface capabilities. The Marine Corps remains committed to meeting the long-standing requirement for simultaneous vertical and surface maneuver capabilities from the seabase. Toward that end, follow-on big deck amphibious ship construction to replace LHAs will incorporate surface interface capabilities while retaining significant aviation enhancements of the LHA Replacement ship.

Maritime Prepositioning Force (Future)

The Maritime Prepositioning Force (Future) (MPF(F)) is a key Seabasing enabler and will build on the success of the legacy Maritime Prepositioning Force program. MPF(F) will provide support to a wide range of military operations, from humanitarian assistance to major combat operations, with improved capabilities such as at-sea arrival and assembly; selective offload of mission sets; persistent, long-term, sea-based sustainment; and at-sea reconstitution. The squadron is designed to provide combatant commanders a highly flexible operational and logistics support capability to meet widely varied expeditionary missions ranging from reinforcing and supporting the assault echelon during Joint Forcible Entry Operations to conducting independent operations throughout the remaining range of military operations. The squadron will preposition a single MEB's critical equipment and sustainment capability for delivery from the sea base without the need for established infrastructure ashore.

The Acting Secretary of the Navy, the Chief of Naval Operations, and the Commandant of the Marine Corps approved MPF(F) squadron capabilities and ship composition in May 2005, as documented in the MPF(F) Report to Congress on 6 June 2005. Those required capabilities and ship composition remain fully valid today in meeting the full range of combatant commander mission requirements. The MPF(F) squadron is designed to be comprised of three aviation-capable ships, three modified Large Medium-Speed Roll-on/roll-off ships (LMSR), three Dry Cargo/Ammunition (T-AKE) supply ships, three Mobile Landing Platforms, and two legacy dense-packed (T-AK) ships.

MPF(F) Aviation Capable Ships: "An Airfield Afloat"

MPF(F) aviation-capable ships are the key Seabasing enablers that set it apart from legacy prepositioning programs. These ships are multifaceted enablers that are vital to the projection of forces from the seabase, offering a new level of operational flexibility and reach. MPF(F) aviation capable ships contain the MEB's command and control nodes as well as medical capabilities, vehicle stowage, and berthing for the MEB. They serve as a base for rotary wing/tilt-rotor aircraft, thus supporting the vertical employment of forces to objectives up to 110 nautical miles from the sea base as well as surface reinforcement via the LHD well deck. These ships allow for the stowage, operation, arming, control, and maintenance of aircraft in the seabase, which directly allows for the vertical and surface employment, projection, and sustainment of forces ashore.

Without these ships, the MPF(F) squadron would have to compensate for the necessary operational capabilities and lift capacities, increasing the number of ships, modifying the remaining platforms in the squadron, and/or accepting significant ad-

ditional operational risk in areas such as vertical maneuver, command and control, and medical.

Mobile Landing Platform (MLP): "A Pier in the Ocean"

The Mobile Landing Platform (MLP) is perhaps the most flexible platform in the MPF(F) squadron. MLP will provide at-sea vehicle, equipment, and personnel transfer capabilities from the Large Medium Speed Roll-on/Roll-off ship (LMSR) to air-cushioned landing craft via the MLP's vehicle transfer system currently under development. The MLP also provides organizational and intermediate maintenance that enables the surface employment of combat ready forces from over the horizon. In short, the MLP is a highly flexible, multi-purpose intermodal capability that will be a key interface between wide varieties of seabased platforms. Instead of ships and lighters going to a terminal on shore, they will conduct at-sea transfers of combat-ready personnel, vehicles, and equipment to and from the MPF(F).

Beyond its critical role within the MPF(F) squadron, the MLP also serves as the crucial joint interface platform with other Services and coalition partners. The MLP will possess an enhanced container-handling capability, allowing it to transfer containerized sustainment from military and commercial ships to forces ashore.

Dry Cargo/Ammunition Ship (T-AKE): "A Warehouse Afloat"

The Dry Cargo/Ammunition Ship (T-AKE) is a selectively off-loadable, afloat warehouse ship that is designed to carry dry, frozen, and chilled cargo, ammunition, and limited cargo fuel. It is a versatile supply platform with robust underway replenishment capabilities for both dry and wet cargo that can re-supply other ships in the squadron and ground forces as required. Key holds are reconfigurable for additional flexibility. It has a day/night capable flight deck. The squadron's three T-AKEs will have sufficient dry cargo and ammunition capacities to provide persistent sustainment to the Marine Expeditionary Brigade operating ashore. The cargo fuel—in excess of a million gallons—will greatly contribute to sustaining the forces ashore. These ships can support the dry cargo and compatible ammunition requirements of joint forces and are the same ship class as the Combat Logistics Force T-AKE ships.

Large Medium-Speed Roll-on / Roll-off (LMSR) Ship: "Assembly at Sea"

A Large Medium Speed Roll on/Roll off ship (LMSR) platform will preposition MEB assets and will enable at-sea arrival and assembly operations and selective off-load operations. Expansive vehicle decks and converted cargo holds will provide sufficient capacity to stow the MEB's vehicles, equipment, and supplies in an accessible configuration. This, combined with selective offload via the MLP's vehicle transfer system, will permit at-sea arrival and assembly operations within the ship. The LMSR will have sufficient berthing for assembly and integration of MEB personnel and associated vehicles and equipment. LMSR modifications will include two aviation operating spots, underway replenishment equipment, a controlled assembly area, and ordnance magazines and elevators. Specific modifications, such as the side port hatch design and inclusion of anti-roll tanks, will facilitate employing the MLP's vehicle transfer system with the MPF(F) LMSR during seabased operations. The LMSR will also have dedicated maintenance areas capable of supporting organizational intermediate maintenance activities for all ground combat equipment.

OUR MARINES AND FAMILIES

While our deployed Marines never question the need or ability to live in an expeditionary environment and harsh climates, they have reasonable expectations that their living quarters at home station will be clean and comfortable. Those who are married want their families to enjoy quality housing, schools, and family support. It is a moral responsibility for us to support them in these key areas. A quality of life survey we conducted in late 2007 reflected that despite the current high operational tempo, Marines and spouses were satisfied with the support they receive from the Marine Corps. Marines make an enduring commitment to the Corps when they earn the title Marine. In turn, the Corps will continue its commitment to Marines and their families. We extend our sincere appreciation for Congress' commitment to this Nation's wounded warriors and their direction for the establishment of Centers of Excellence within the Department of Defense that address Traumatic Brain Injury, Post-traumatic Stress Disorder, eye injuries, hearing loss, and a joint Department of Defense/Department of Veterans Affairs Center addressing loss of limbs.

Family Readiness Programs

Last year, we initiated a multi-year plan of action to put our family support programs on a wartime footing. We listened to our families and heard their concerns. We saw that our commanders needed additional resources, and we identified underfunded programs operating largely on the strength and perseverance of hard-working staff and volunteers.

To address the above concerns, we have established full-time Family Readiness Officer billets in more than 400 units and have also acted to expand the depth and breadth of our family readiness training programs. The Family Readiness Officer is supported in this mission by the Marine Corps Community Services Program. For the families communication with their deployed Marines is their number one quality of life requirement. With the Family Readiness Officer serving as the focal point, we have used information technology tools to expand the communication between Marines and their families.

These initiatives and others demonstrate the commitment of the Marine Corps to our families and underscore the significance of family readiness to mission readiness. We thank Congress for the supplemental funding during fiscal years 2008 and 2009 that enabled initial start-up. Beginning in fiscal year 2010, the funding required to maintain these critical programs will be part of our baseline budget.

Casualty Assistance

Our casualty assistance program is committed to ensuring that families of our fallen Marines are treated with the utmost compassion, dignity, and honor. We have taken steps to correct the unacceptable deficiencies in our casualty reporting process that were identified in congressional hearings and subsequent internal reviews.

Marine Corps commands now report the initiation, status, and findings of casualty investigations to the Headquarters Casualty Section in Quantico, which has the responsibility to ensure the next of kin receive timely notification of these investigations from their assigned Casualty Assistance Calls Officer.

The Headquarters Casualty Section is a 24-hour-per-day operation manned by Marines trained in casualty reporting, notification, and casualty assistance procedures. These Marines have also taken on the additional responsibility of notifying the next of kin of wounded, injured, and ill Marines.

In October 2008, we implemented a mandatory training program for Casualty Assistance Calls Officers that includes a Web-based capability to expand the reach of the course. This training covers notification procedures, benefits and entitlements, mortuary affairs, and grief and bereavement issues. We will continue to monitor the effectiveness of these changes and make adjustments where warranted.

Wounded Warrior Regiment

The Marine Corps is very proud of the positive and meaningful impact that the Wounded Warrior Regiment is having on wounded, ill, and injured Marines, Sailors, and their families. Just over 18 months ago, we instituted a comprehensive and integrated approach to Wounded Warrior care and unified it under one command. The establishment of the Wounded Warrior Regiment reflects our deep commitment to the welfare of our wounded, ill, and injured, and their families throughout all phases of recovery. Our single process provides active duty, reserve, and separated Marines with non-medical case management, benefit information and assistance, resources and referrals, and transition support. The nerve center of our Wounded Warrior Regiment is our Wounded Warrior Operations Center—where no Marine is turned away.

The Regiment strives to ensure programs and processes adequately meet the needs of our wounded, ill, and injured and that they remain flexible to preclude a one-size-fits-all approach to that care. For example, we have transferred auditing authority for pay and entitlements from the Defense Finance and Accounting Service in Cleveland directly to the Wounded Warrior Regiment, where there is a comprehensive awareness of each wounded Marine's individual situation. We have also designed and implemented a Marine Corps Wounded, Ill, and Injured Tracking System to maintain accountability and case management for the Marine Corps Comprehensive Recovery Plan. To ensure effective family advocacy, we have added Family Readiness Officers at the Regiment and our two battalions to support the families of our wounded, ill, and injured Marines.

While the Marine Corps is aggressively attacking the stigma and lack of information that sometimes prevents Marines from asking for help, we are also proactively reaching out to those Marines and Marine veterans who may need assistance. Our Sergeant Merlin German Wounded Warrior Call Center not only receives calls from active duty and former Marines, but also conducts important outreach calls. In the past year, the Marine Corps added Battalion contact cells that make periodic out-

reach to Marines who have returned to duty in order to ensure their recovery needs are being addressed and that they receive information on any new benefits. The Call centers between them have made over 40,000 calls to those Marines injured since September 2001 to assess how they are doing and offer our assistance.

To enhance reintegration, our Job Transition Cell, manned by Marines and representatives of the Departments of Labor and Veterans Affairs, has been proactively reaching out to identify and coordinate with employers and job training programs to help our wounded warriors obtain positions in which they are most likely to succeed and enjoy promising careers. One example is our collaboration with the U.S. House of Representatives to establish their Wounded Warrior Fellowship Program for hiring disabled veterans to work in congressional offices.

The Marine Corps also recognizes that the needs of our wounded, ill, and injured Marines and their families are constantly evolving. We must ensure our wounded Marines and their families are equipped for success in today's environment and in the future.

As we continue to improve the care and management of our Nation's wounded, the Marine Corps is grateful to have the support of Congress. In addition to the support provided in the fiscal year 2009 National Defense Authorization Act, I would like to thank you for your personal visits to our Wounded Warriors in the hospital wards where they are recovering and on the bases where they live. The Marine Corps looks forward to continuing to work with Congress in ensuring that our wounded, ill, and injured Marines receive the best care, resources, and opportunities possible.

Traumatic Brain Injury (TBI)

With 2,700 new cases of Marines with TBI entered into the Department of Defense and Veteran's Brain Injury Center (DVBIC) in calendar year 2008, we continue to see TBI as a significant challenge that we are confronting. Many of these new cases represent older injuries that are just now being diagnosed, and our expectation is that, with the institution of the Automated Neuropsychological Assessment Metrics (ANAM) for all Marines, we will discover mild Traumatic Brain Injuries more promptly post-deployment. While the Marine Corps is providing leadership and resources to deal with this problem, we cannot solve all the issues on our own.

The Marine Corps continues to work closely with Military Medicine, notably DOD's Center of Excellence for Psychological Health and Traumatic Brain Injury, to advance our understanding of TBI and improve care for all Marines. We are grateful for your continued support in this area.

Psychological Health Care

Marine Corps commanders are fully engaged in promoting the psychological health of our Marines, Sailors, and family members. The message to our Marines is to look out for each other and to know that it is okay to get help. While culture change is hard to measure, we feel that the efforts we have made to reduce the stigma of combat stress are working.

The Marine Corps Combat and Operational Stress Control Program encompasses a set of policies, training, and tools to enable leaders, individuals, and families to prepare for and manage the stress of operational deployment cycles. Our training emphasizes ways in which to recognize stress reactions, injuries, and illnesses early and manage them more effectively within operational units. Our assessments of stress responses and outcomes are rated on a continuum: unaffected; temporarily or mildly affected; more severely impaired but likely to recover; or persistently distressed or disabled. Combat stress deserves the same attention and care as any physical wound of war, and our leaders receive extensive training on how to establish an environment where it is okay to ask for help.

To assist leaders with prevention, rapid identification, and early treatment of combat operational stress, we are expanding our program of embedding mental health professionals in operational units—the Operational Stress Control and Readiness (OSCAR) program—to provide direct support to all active and reserve ground combat elements. This will be achieved over the next 3 years through realignment of existing Navy structure supporting the operating forces, and increases in Navy mental health provider inventory. Our ultimate intent is to expand OSCAR to all elements of the Marine Air-Ground Task Force. In the interim, OSCAR teams are filled to the extent possible on an ad hoc basis with assets from Navy Medicine.

Exceptional Family Member Program (EFMP)

Last year, I reported on our intent to establish a continuum of care for our EFMP families. We are actively helping more than 6,000 families in the Exceptional Family Member Program gain access to medical, educational, and financial care services that may be limited or restricted at certain duty stations. We have assigned case

managers to all of our enrolled EFMP families, obtained the help of the Bureau of Medicine and Surgery and TRICARE to resolve health care concerns at several bases, and directed legal counsel to advise the EFMP and our families on State and Federal entitlements and processes. Additionally, we are developing assignment policies that will further facilitate the continuum of care.

While no family should have to endure interruptions in care, gaining access to services can be most challenging to families who have Autism Spectrum Disorder (ASD). We sincerely appreciate the support of Congress for our ASD families and others who are entitled to the TRICARE Extended Care Health Option (ECHO) program. For fiscal year 2009, you have increased the monthly reimbursement rate for Applied Behavioral Analysis (ABA)—a specific therapy that our Marine families value.

However, there is still more to do. While appropriate TRICARE reimbursement rates are important, the highly specialized services these families require are not always available. We are evaluating how we can partner with other organizations to increase the availability of these specialized services in areas where resources are currently lacking.

Water Contamination at Camp Lejeune

Past water contamination at Camp Lejeune has been, and continues to be, a very important issue for the Marine Corps. Using good science, our goal is to determine whether past exposure to the contaminated water at Camp Lejeune resulted in any adverse health effects for our Marines, their families, or our civilian workers.

The Marine Corps continues to support the Agency for Toxic Substances and Disease Registry (ATSDR) in their health study, which is estimated to be completed in late 2009. With the help of Congress, the National Academy of Sciences is assisting us in developing a way ahead on this difficult issue.

The Marine Corps continues to make progress notifying former residents and workers. We have established a call center and registry where the public can provide contact information so that we can notify them when these health studies are complete.

Our outreach efforts include a range of communication venues to include letters to individuals located from Department of Defense databases, paid print and broadcast advertising, publications in military magazines, press releases, and a fully staffed call center. As of 22 March 2009, we have had 131,000 total registrations and mailed more than 200,000 direct notifications.

Sexual Assault Prevention and Response

Sexual assault is a crime, and we take every reported incident very seriously. The impact on its victims and the corrosive effect on unit and individual readiness are matters of great concern. A recent Government Accountability Office study reported several shortcomings in our program. To address these findings, we are refreshing our training program and assessing the requirement to hire full-time Sexual Assault Prevention and Response Program coordinators at installations with large troop populations. We have trained more than 3,200 victim advocates to provide assistance upon the request. All Marines receive sexual assault prevention and awareness training upon entry and are required to receive refresher training at least annually. We have also incorporated sexual assault prevention into officer and noncommissioned officer professional development courses and key senior leader conferences and working groups. At the request of our field commanders, we have also increased the number of Marine Corps judge advocates who attend specialized training on prosecution of these crimes and have assembled a mobile training team to teach our prosecutors how to better manage these cases.

Suicide Prevention

With 42 Marine suicides in 2008, we experienced our highest suicide rate since the start of Operation Enduring Freedom and Operation Iraqi Freedom. The number of confirmed Marine suicides has increased from 25 in Calendar Year 2006, to 33 in 2007, to 42 in 2008. Through March 2009, we have 8 presumed suicides this year, which place us on a trajectory for 32 this calendar year. Our numbers are disturbing; we will not accept them, or stand idle while our Marines and families suffer.

Our studies have found that regardless of duty station, deployment, or duty status, the primary stressors associated with Marine suicides are problems in romantic relationships, physical health, work-related issues such as poor performance and job dissatisfaction, and pending legal or administrative action. This is consistent with other Services and civilian findings. Multiple stressors are usually present in suicide.

In November 2008, we reviewed our suicide awareness and prevention program and directed the development of a leadership training program targeted at non-commissioned officers. As in combat, we will rely upon our corporals and sergeants to chart the course and apply their leadership skills to the challenge at hand. This program includes high-impact, engaging videos, and a Web-ready resource library to provide additional tools for identifying their Marines who appear at risk for suicide. Further, during March 2009, we required all of our commanders to conduct suicide prevention training for 100 percent of the Marines under their charge. This training educated Marines on the current situation in our Corps; it taught them how to identify the warning signs; it reinforced their responsibility as leaders; and it informed them of the resources available locally for support.

The Marine Corps will continue to pursue initiatives to prevent suicides, to include reevaluating existing programs designed to reduce the stressors most correlated with suicidal behavior; developing and distributing new prevention programs; and refreshing and expanding training materials.

Child Development Programs

To ensure Children, Youth, and Teen Programs continue to transition to meet the needs of our families, a Functionality Assessment was conducted in June 2008 to identify program improvements, such as the development of staffing models to improve service delivery, as well as recommendations to explore and re-define services to meet the unique and changing needs of Marines and their families living both on and off our installations. In addition, the Marine Corps has expanded partnerships to provide long- and short-term support for geographically dispersed Marines. We can now provide 16 hours of reimbursed respite care per month for families with a deployed Marine. We are expanding our care capacity in many ways, including extended hours as well as through partnerships with Resource and Referral agencies, off-base family childcare, and Child Development Home spaces.

We are currently providing 11,757 childcare spaces and meeting 63.6 percent of the calculated total need. It is important to note that the Marine Corps has initiated rigorous data collection and analysis improvements. As a result, it will be necessary to correct the 2007 annual summary due to identified reporting errors. Our reported rate of 71 percent of potential need last year is more accurately stated as 59.1 percent. We are not satisfied with our progress to date, and have planned for 10 Child Development Center Military Construction projects in Program Years 2008 through 2013. Two of those projects were executed in fiscal year 2008, and one is approved for fiscal year 2009. These approved projects will provide an additional 915 spaces.

We also are considering additional modular Child Development Centers, subject to more detailed planning and availability of funds. Planned MILCON and modular centers would add approximately 2,600 spaces, and although our need is expanding, based on our current calculations, this expansion would bring us much closer to the Department of Defense goal. Continued Congressional support will help us provide these needed facilities. As the needs of our families change, our program is committed to grow and adapt to meet these developments.

School Liaison Program

The education of more than 51,000 school-age children of Marine parents has been identified as a readiness and retention issue of great concern. Our Marine children, who are often as mobile as their military parent, face additional stress and challenges associated with frequent moves between schools with differing educational systems and standards. Exacerbating this is the varying degree of satisfaction Marines and their spouses have with the quality and sufficiency of local education systems. The Marine Corps is addressing this issue by establishing national, regional, and installation level School Liaison capability. The School Liaison will help parents and commanders interact with local schools, districts, and State governments to help resolve educational issues. The increased family readiness funding has allowed us to establish a School Liaison position at each Marine Corps installation. Complementing our local effort, the Marine Corps is working with the Department of Defense to establish an "Education Compact" with States to enable reciprocal acceptance of entrance, subject, testing, and graduation requirements. The Education Compact has been enacted in North Carolina and Arizona, and is under varying stages of consideration in the other States with Marine Corps installations.

POSTURE THE MARINE CORPS FOR THE FUTURE

As we prepare for an unpredictable future, we must continue to assess the potential future security environments and the challenges of tomorrow's battlefields. Our solid belief is that a forward deployed expeditionary force, consistently engaged and postured for rapid response, is as critical for national security in the future as it

is today. The Marine Corps, with its inherent advantages as an expeditionary force, can be rapidly employed in key areas of the globe despite challenges to U.S. access. Our sea-based posture will allow us to continue conducting security cooperation activities with a variety of allies and partners around the world to mitigate sources of discontent and deter conflict. We must increase our capacity to conduct security cooperation operations without compromising our ability to engage in a major regional conflict.

Realignment in the Pacific: Defense Policy Review Initiative (DPRI)

The Defense Policy Review Initiative was established in 2002 by the United States and Japan as a means to review each nation's security and defense issues. One of the key outcomes of this process was an agreement to move approximately 8,000 Marines from Okinawa to Guam. The movement of these forces will address encroachment issues facing Marines on Okinawa. Moreover, the relocation will afford new opportunities to engage with our partners in Asia, conduct multilateral training on American soil, and be better positioned to support a broad range of contingencies that may confront the region. Furthermore, the political agreements brokered by the Office of the Secretary of Defense provide for a long term presence of Marines on Okinawa as well as substantial financial support by the Government of Japan.

As can be expected with an effort of this scale and complexity, there are a number of challenges. Developing training areas and ranges on Guam and the Commonwealth of Northern Mariana Islands is a key pre-requisite for moving Marine forces to Guam. We also seek a contiguous base design on Guam where housing, operations, and quality of life facilities can be collocated. This will reduce the road traffic on Guam and provide for a better security posture. We have also found that collocated facilities—where Marines live and work—tend to be used more often, and serve to unify the military community.

We continue to work within the Department of Defense to align our training and installation requirements with ongoing environmental assessments and political agreements. Planned and executed properly, this relocation to Guam will result in Marine forces that are combat ready, forward postured, and value-added to U.S. interests in the Pacific for the next 50 years.

Security Cooperation MAGTF

The Security Cooperation Marine Air Ground Task Force (SC MAGTF) provides geographic combatant commanders with a security cooperation capability for employment in remote, austere locations across the globe. SC MAGTFs will be organized based upon the specific requirements of each training event or operation they are requested to support and will enhance the combatant commander's ability to alleviate the conditions that cause instability to proliferate.

Training and Education

Our training and education systems, from recruit training to top-level Professional Military Education schools, rigorously instill in our Marines the physical and mental toughness and intellectual agility required to successfully operate in today's and tomorrow's complex environments. Marine Corps forces are organized, trained, equipped, and deployed with the expectation of operating under inhospitable conditions against committed and competent foes. Our forces are heavy enough to sustain major combat operations against conventional and hybrid threats but light enough to facilitate rapid deployment. Capability enhancements across the board are supported by a vigorous application of lessons learned from current operations.

Operation ENDURING FREEDOM Pre-deployment Training Program

The Afghanistan Pre-deployment Training Plan provides well-trained individuals and units that are prepared to operate in the austere and challenging environment of Afghanistan. While similar to the current Iraq Pre-Deployment Training Program, the Afghanistan Pre-deployment Training Program emphasizes the inherent capability of the MAGTF to conduct combined arms operations within a joint, multinational, and interagency framework. The capstone event of the Afghanistan Pre-Deployment Training Program incorporates all elements of the MAGTF.

Combined Arms Training, Large Scale Exercises, and Amphibious Operations

Our training programs must prepare Marines to support current commitments and maintain MAGTF proficiency in core warfighting capabilities. We are developing a program of nested training exercises that focus on interagency and coalition operations to support the current fight and prepare the Marine Corps for the Long War.

The Combined Arms Exercise-Next is a service-level, live-fire training exercise that develops the core capability of combined arms maneuver from the individual Marine to the regimental-sized unit level. This exercise focuses on the integration of functions within and between the MAGTF elements. The MAGTF Large Scale Exercise is a service-level training exercise that develops the MAGTF's capability to conduct amphibious power projection and sustained operations ashore in a joint and inter-agency environment.

Amphibious operations are a hallmark of the Marine Corps. Through a combination of amphibious-focused professional military education, classroom training, and naval exercises, we will ensure MAGTFs are capable of fulfilling Maritime Strategy amphibious requirements, combatant commanders' operational plans, and future national security requirements.

Training and Simulation Systems

Cost-effective training requires a combination of live, virtual, and constructive training to attain the requisite level of combat readiness. We have leveraged technologies and simulations to augment, support, and create training environments for Marines to train at the individual, squad, and platoon levels. Virtual and constructive simulations support the pre-deployment training continuum, while live training systems create a training environment that replicates battlefield effects and conditions. Our long-range effort for infantry skills simulation training is the Squad Immersive Training Environment. This provides realistic training for our infantry squads. Over the past year, we have increased our efficiency and provided greater training opportunities for the individual Marine up to the MAGTF and joint level to satisfy Title 10 and joint training readiness standards.

Training Range Modernization—Twentynine Palms Land Expansion

Our facilities at Twentynine Palms are critical to the pre-deployment training of our deploying Marine units. These facilities support the integration of fires and maneuver of new and emerging weapons systems, which cannot be accomplished within current boundaries of other Marine Corps bases. The Corps believes that to meet obligations to the Nation's defense, we must conduct live-fire and maneuver exercises at the Marine Expeditionary Brigade level.

The Marine Corps' Mission Capable Ranges Initiative guides Marine Corps range planning and investment. A key to this initiative is the proposed expansion of the Marine Air-Ground Task Force Training Command's range complex at Marine Corps Base Twentynine Palms, California. This 507,000-acre installation, established in the 1950s, requires expansion to meet today's training requirements. We have begun the National Environmental Policy Act-required environmental studies to guide decisions during the acquisition process, and we expect acquisition to commence in 2012.

Core Values and Ethics

In an effort to improve values-based training and address the difficult ethical dilemmas faced by Marines, the John A. Lejeune Leadership Institute implemented several initiatives and publications to strengthen core values training. Publications include the Leadership, Ethics, and Law of War Discussion Guide. These guides offer 15 contemporary case studies with suggested topics for discussion group leaders. We have also published a primer on the Law of War and Escalation of Force, a discussion aid on moral development, and Issues of Battlefield Ethics and Leadership—a series of brief, fictionalized case studies to develop Small Unit Leaders. These are used in our schools, beginning with recruit training at boot camp and continuing into MOS training and PME schools.

Two video versions of case studies were created to sharpen the focus of our semi-annual Commandant's Commanders' Program on the commander's role in setting a climate of positive battlefield ethics, accountability, and responsibility. In addition, the John A. Lejeune Leadership Institute held the first Russell Leadership Conference since 2002 with 230 first-line leaders from across the Corps. The conference broadened and reinforced our leaders' understanding of the role they fill as ethical decision-makers, mentors, and critical thinkers.

Marine Corps University

The Marine Corps University established a Middle East Institute in 2007 to research, publish, and promote regional awareness. A highly successful Iran Conference clearly demonstrated the utility of the institute. The new Marine Corps University Press was a successful step in our outreach program that includes publishing a professional journal. These initiatives were all part of Marine Corps University's health assessment and are an integral part of the University Strategic Plan.

CONCLUSION

Marines take extreme pride in the comment attributed to journalist Richard Harding Davis, "The Marines have landed, and the situation is well in hand." Our history has repeatedly validated that statement. Our training and organization ensures our fellow Americans that they should never doubt the outcome when her Marines are sent to do the Nation's work. Our confidence comes from the selfless sacrifices we witness every day by courageous young Marines. They responded magnificently after 9/11—took the fight to the Taliban and Al Qaeda, conducted a lightening-fast offensive campaign in Iraq, and turned the tide in the volatile Al Anbar province. Now, we are ready to get back to the fight in Afghanistan—or wherever else our Nation calls.

Your Marine Corps is grateful for your support and the support of the American people. Our great young patriots have performed magnificently and written their own page in history. They have proven their courage in combat. Their resiliency, dedication, and sense of self-sacrifice are a tribute to this great Nation. They go into harm's way knowing their country is behind them. On their behalf, I thank you for your enduring support. We pledge to be good stewards of the resources you most generously provide and remain committed to the defense of this great land. Thank you again for the opportunity to report to you today.

SHIP COUNT

Chairman INOUE. Mr. Secretary, the events of recent days have been of much concern to many of us. For example, in North Korea there's a lot of saber-rattling and a lot of promise-breaking. We've had tests notwithstanding our complaints and our sanctions. They seem to ignore everything and continue on, and now testing a missile that has a capability of reaching Alaska.

On the other side of the world in Iran, similar rattling goes on. Notwithstanding the United Nations, notwithstanding the pleas of Europeans and Americans and such, the Iranians seem to move merrily along with their testing.

Taking these and events such as piracy into consideration, do you believe that we have enough ships to do the job? I ask this because I've been on this subcommittee long enough to recall that it wasn't too long ago when the goal was 600. Then it became 500-something, came down to 400. Now it's 313 and I believe we have about 280.

What are your thoughts, Mr. Secretary, as you come in just 2 weeks old? I'd like to hear your thoughts.

Mr. MABUS. Thank you, Mr. Chairman. As you just pointed out, the number 313 came out of the last Quadrennial Defense Review and that number was supported by the CNO at the time, who is now Chairman of the Joint Chiefs, Admiral Mullen. It's supported by Admiral Roughead, the current CNO, who put it in his statement.

You're correct in that we have about 284 ships today in the active fleet. We do need a fleet of 313 ships, and it points out the need to take some strong steps in acquisition reform. If we continue to build ever more exotic, ever more expensive, but ever fewer numbers of ships, we simply won't have the numbers that we need. At some point, even though these ships are far more capable than the ships in the 600 ship Navy, for example, the individual capabilities—you can't put two ships at the same place, at the same time.

So if we're going to have a forward deployed Navy, which I believe we should, if we're going to have a Navy which can respond to whatever crises or whatever events it needs to respond to, then

we have an obligation to make sure that we get enough ships into this fleet and to do so to bring down the cost of these ships, to make the schedule stay on time, and to make sure that we have sufficient ships to meet any eventuality that we may face.

Chairman INOUE. Admiral Roughead, do you have any additional comments to make?

Admiral ROUGHEAD. Yes, sir. As you know, Mr. Chairman, I've maintained for some time that 313 is the floor with regard to fleet capacity. But I would also submit that this budget that is before you really begins to address the direction where we have to go. The truncation of the DDG 1000, which we began some months ago, and the restart of the DDG 51 line, which has terrific ballistic missile defense capability, and we're seeing those types of missiles being tested by Korea, by Iran, and they proliferate globally, that is exactly the direction where we have to go.

The three littoral combat ships that we have in the budget are able to operate with our high-end forces, but I would submit they're ideally suited to the maritime security missions that we see in the counter-piracy operations.

So our budget really does begin to take us there. The start of the Joint High Speed Vessel line is also important to us and to the combatant commanders so that we can get at some of these challenges.

But I would also say that in order to get to the 313, it's not just about the acquisition that's represented in this budget, but it's also in our ability to take the ships that we have today and allow them to achieve their full service life, because most of the ships that we have in service today will be in service in 2020. So maintaining that force is also equally important.

SHIPYARDS

Chairman INOUE. Mr. Secretary, another question. In order to maintain these ships, do you believe that our depots, our shipyards, are up to par and prepared?

Mr. MABUS. Yes, sir, I do. I think they will continue to be as long as we work with them to ensure a stable industrial base, to make sure that we have a trained, skilled workforce in place, by making sure that our shipbuilding requirements are made known to them, that they are able to invest in the equipment and the people that we will need, and to give them the stability that they need to provide this incredibly vital service.

Chairman INOUE. Admiral, have you got any thoughts on that?

Admiral ROUGHEAD. As I mentioned, Senator, I think the maintenance of our fleet is what also allows us to achieve the 313 level. The public shipyards that we have that are so much a part of maintaining our very high-end forces, our nuclear submarines and our aircraft carriers, absolutely key. Then the involvement of the private sector that we call on throughout the country is extraordinarily important and allows us to achieve that force level and readiness that's so important to the Navy today.

MARINE CORPS FORCE SIZE

Chairman INOUE. Commandant, at this moment South Korean troops are on alert. The alert status for that peninsula is four, I

believe, just one less than the top. Taking those things in consideration, do you believe that the projected number in our force is sufficient?

General CONWAY. Yes, sir, I do. There are plans that we can't talk about in an open hearing that would provide for our ability to respond to an additional major contingency, such as Korea would represent. Although there is a level of risk associated with our ability to I think conduct and complete those war plans, we think that our forces that are present today would be able to do that. There would be issues, sir. We have equipment that would have to be moved all over the globe in order to be able to satisfy those demands. The force structure would not be as organic as we would like. There would have to be a level of ad hoc conglomeration of forces, if you will. But in the end I am convinced we would prevail.

Chairman INOUE. I thank you, sir.

Senator Cochran.

Senator COCHRAN. Thank you, Mr. Chairman.

SECNAV NAVAL OFFICER EXPERIENCE

Mr. Secretary, we are grateful that you are a person who's had experience personally in the Navy and now assuming responsibilities as Secretary of the Navy. I wonder what experiences you've had as a naval officer do you think will be important to you in carrying out your responsibilities as Secretary?

Mr. MABUS. Well, Senator, I do think that time that I spent in the Navy was some of the most profound times that I've spent in my life. The Navy has changed a lot in the nearly 40 years since I was a surface warfare officer on board the U.S.S. *Little Rock*, and it's changed almost totally for the better. The training level, the caliber of recruits that are coming into the Navy, into our forces, the education that they are getting once in, the commitment that they have to the Navy and to the country, the deployment tempo, which is much higher and more flexible than when I was in, allowing us to get ships to places faster and better equipped. The thing the CNO talked about, about maintaining our fleet, has improved so dramatically since that time.

But I think the thing that my experience in the Navy—I hope I brought with me, is the importance of the sailors, that it doesn't matter in the end how capable our equipment is if our sailors cannot match that equipment. In today's Navy, I'm happy to say that I think we have as fine a trained force as the world has ever seen.

Senator COCHRAN. Thank you. I think that's an eloquent and important assessment for all of us to understand. I think the leadership we have in the military today is so much more sophisticated and impressive in terms of intellectual and educational fitness for these hugely important jobs. I think we're very fortunate to have the benefit of that kind of leadership in the Navy and the Marine Corps and at the civilian posts that are important to the management of these important assets.

JOINT COMMAND SHIP REPLACEMENT

General Conway, I notice the Department of the Navy is looking at the LPD 17 amphibious ships and the T-AKE dry cargo ship hull forms for joint command ship replacement responsibilities. What in

your opinion are the key factors in determining which hull form is suitable, and do you believe that survivability is a critical factor?

General CONWAY. Sir, we have examined it and made recommendations to the CNO and ultimately to the Secretary of the Navy on the value associated with a consistent hull form, both for purposes of the research and development (R&D) associated with what would otherwise be new hull forms and with regard to the sustainability and the maintenance factors that exist with a single hull form.

We have been a proponent of maintaining the LPD 17 form throughout the near term with regard to additional command and control ships. We think that that would be beneficial for the shipyards. We think it would be beneficial for the ultimate product that's produced there, and we think it would help to provide for the numbers of amphibious ships that we need both for forcible entry—and it was interesting that the chairman's question referenced at least two areas where forcible entry could be necessary—but also for purposes of day to day requirements that we see on the part of our combatant commanders.

Interestingly, the numbers come together to be about the same for both of those types of requirements. It will be discussed in the Quadrennial Defense Review and we see it I think as our collective mission to make sure that there's a clear understanding that amphibs are not just high-end capability. They have very much a role in the low-end scheme of things on a day to day basis in support of combatant commanders.

Senator COCHRAN. Thank you.

CNO PRIOR EXPERIENCE

Admiral Roughead, we first met down at Pascagoula, Mississippi, when you were assuming command of one of the new ships being built there at Ingalls. What personal experiences did you have as a result of that responsibility that have shaped your views about shipbuilding and the efficiencies and the importance of taking advantage of new technologies in helping ensure that we can protect our naval interests around the world?

Admiral ROUGHEAD. Yes, sir. Thank you, sir. I would say the first thing that I took away was that the strength and the viability of our Navy depends on the American shipbuilder. No one builds ships as capable or as tough as the American shipbuilder. That was my first take away and I have not lost that sentiment ever since that time.

I would also say that it's important that we get production runs as consistent and as long running as we can, that we should look at every opportunity to take advantage of designed hull forms and adapt them to other uses, as you mentioned with regard to command ships. Command ships have to be survivable. We have to make sure that they have the capacity for the type of function that will be performed on them and that they also can be modified at the least cost to fulfill those missions.

But I think it's extremely important that we get as much commonality as we can in our fleet. It reduces operating costs. It will reduce maintenance costs and logistics costs, and I believe we need to continue down that path.

NAVY RESERVE

Senator COCHRAN. I had the pleasure of spending several years as a Reserve officer following active duty in the Navy. I enjoyed the opportunities of going back to Newport, Rhode Island, for example and being on the staff of the faculty at Officer Candidate School, continuing to be involved. Do you still have a strong reserve program utilizing the experience and talents of former active duty officers in the reserve activities? Is that a wise investment? What is your impression of the Navy Reserve mission today and how it complements the active duty forces?

Admiral ROUGHEAD. Senator, we are one force today. The integration of our active component and our Reserve component is as close as it has ever been. In fact, most of the individual augmentees that have gone into the Central Command area of operation over the past 8 years are Reserve sailors and officers.

We cannot be the Navy we are today without our Reserve component. The way that they move into our active force after having served in an active capacity is absolutely seamless. The importance that we place on our Reserve programs is extremely high, and the Navy that the Secretary was referring to as being as professional and as competent and as agile as it is today is a function of that active-Reserve integration that has taken place.

Senator COCHRAN [presiding]. Senator Bond.

Senator BOND. Thank you very much, Senator Cochran.

To the Commandant, congratulations on the excellent job that you have done in al-Anbar. We had a CODEL over there in May 2007 and saw not only were they clearing the area, but the hold and build, which is the new wave of the smart power use of our military, was working so well. That is a great credit to the leadership up and down the line, as well as to the marines who did it. It is a great story that has convinced many people, as they now see how it resolves.

Mr. Secretary and Admiral, again I congratulate you on the support you're providing to the sailors, the SEALs, and the marines in the field, and particularly for what you're doing to the wounded warriors. I've had some opportunities, not by planning, but to spend some time at Bethesda, and I have visited the wounded warriors there and seen the great care. This is truly outstanding. Your reference to dealing with the PTSD and the traumatic brain injury (TBI), which is so important, is something we're going to have to continue to address because it really sneaked up on us.

JOINT STRIKE FIGHTER

But I need to go back to the point I made in my opening statement, cutting production of the one effective carrier-based aircraft, the F/A-18 that we have, from 45 to 30, and only 9 of those are going to be combat aircraft. The rest are Growlers. Right now the Joint Strike Fighter is behind schedule, way over budget. It's only 2 percent flight tested. Under your most optimistic circumstances, what kind of contribution can the JSF make to that shortfall on the carrier decks in 2016 through 2020, Admiral?

Admiral ROUGHEAD. Senator, we have just in this budget put in the money for the first carrier variants of JSF. JSF is extraor-

dinarily important to where we are going with naval aviation, because we can never in my opinion have all of one type of an airplane on our carrier deck. There should always be a generational movement taking place, so that in the event there's a problem in any particular airframe or type of airplane we don't ground an entire wing. So we have to get to JSF.

We are the last service to take delivery of JSF and that begins in 2015. As we looked at our 2010 budget, what we did with what I'll call the 18 line—that includes both the Growler and the E's and F's—was to put in the budget what we needed for electronic attack and then also, as we balanced across our programs, to put in place the nine E's and F's, because, as you know, in the Quadrennial Defense Review all of the services that fly tactical aviation are going to be conducting the review. We will look at where we are collectively and where we must go in order to continue to provide the capability and capacity in our air wings.

That may be through life extension programs, but that's what we're going to examine in the QDR.

Senator BOND. Well, very respectfully, Admiral, you are deciding to cut that, cut off the E and F production, before you have even proven that this JSF, called by some the "Joint Strike Failure." If you read the Government Accountability Office (GAO) reports, it's been so far behind schedule, it's been over production costs, and it is now only 2 percent flight tested, and you haven't even thought about seeing whether it can land on an aircraft carrier.

To me it looks like you've made a bad bet if you have not proven something that can take its place and you're cutting it off. To me, the first rule of digging is if you dig yourself into a hole, stop digging, because this is a bad decision, made a number of years previously, to put all of the production of the JSF into one company. Unfortunately, that line is not producing.

I cannot believe that you can ignore reality and say, until we know that we have a follow-on plane, we ought to keep the plane that is working. As I recall, there was a requirement in the law that you produce by March 1 of this year a report on the costs and benefits of a multiyear procurement of the F/A-18. You can get at least three for what one JSF would cost you.

When is that report coming out? And is anybody looking seriously at the need to keep something until and unless the JSF can land on a carrier?

Admiral ROUGHEAD. What we have done, Senator, with the 18 line, to include both the Growler and the E's and F's, is that we in the 2010 budget have more than what is the sustaining rate for that 18 production line. So as we go into the QDR we have not stopped in 2010 the 18s. We still are working on that second multiyear that allows the production to continue. When we get into the QDR discussions on tactical air wings, I believe that we will be making the decisions we have to make while we've preserved the manufacturing of the F-18s.

INDUSTRIAL BASE

Senator BOND. Well, as a final question for the Secretary, I certainly appreciate your speaking about the need to protect the defense industrial base, because if we go down the same path that

our fine ally Great Britain has gone, their industrial base was allowed to atrophy, so they can no longer build aircraft and they're struggling to build ships. We are—unless somebody rethinks the tragic decision that was made to go with only one tac air producer, unless that decision is made in the QDR, we're going to find ourselves in a real hole.

Why is it acceptable in your view to have only one production line for a tac air fighter, a tac airplane?

Mr. MABUS. Senator, I will echo what the CNO just said in terms of making sure that the E and F production line in the fiscal year 2010 budget is at a level that can sustain that production and sustain that workforce and sustain that industrial base through fiscal year 2010 as we go through the Quadrennial Defense Review to see what our tactical air requirements are, just as the CNO has pointed out.

So I think that you do have that capacity maintained through the industrial base and through the trained workforce by this purchase of F-18s, both the Growlers and the E and F's.

Senator BOND. Well, thank you, Mr. Secretary. I hope in the QDR there's some realism that strikes and that you do take a look at the costs. We'd still like to see that report due March 1 of this year on the 18, because you can't continue to make good sound investments unless and until you prove that you do have an alternative. I hope you will take that into serious consideration.

Mr. Chairman, I've filibustered long enough and I'll let you take on. Thank you.

Senator INOUE [presiding]. You did a good job.

Mr. Secretary, there's a vote on, so that's why we're moving in and out.

GUAM

Commandant, by the year 2014 your 8,000 marines and 9,000 dependents are supposed to be out of Okinawa into Guam. However, we're concerned with the relocation of Futenma. Apparently the prefectural government is against the location. Is the time 2014 going to be kept or do we have to extend that?

General CONWAY. Sir, we hope so. At this point the Futenma replacement facility, which the Japanese are at least on schedule to build for us off Camp Schwab, which is near the middle of the island, is very much a keystone to the 2014 date. There are some preliminary efforts that are underway, but if you have seen that space—and I think you have—it will require a tremendous amount of fill into the sea, into some fairly deep water in the sea, at some I think fairly significant expense to the Japanese Government. So we watch and encourage their efforts very closely, because again that sort of kicks off the game for other things that will take place associated with the move.

So I think that will be the primary determinant as to whether or not we're able to maintain the 2014 date.

Chairman INOUE. The estimated costs of movement, if I recall, was about \$10 billion. Now it's been estimated to go up to \$15 billion; is that correct?

General CONWAY. Sir, I haven't seen the \$15 billion figure. In the initial negotiations with the Japanese Government it was on the

order of about \$6 billion plus for the Japanese Government and \$4 billion plus for the United States Government. Our independent estimates, if you will, for all of the required training, infrastructure, family, quality of life issues associated with that move, would put it closer to about \$12 billion from our perspective.

We have floated those figures past the folks in the Office of the Secretary of Defense. They are taking them under advisement. We're looking at how the Department of the Navy might be able to afford that kind of money in the out-years. The discussion I think is on table as to whether or not that ought to be a corporate bill for the Department of Defense as opposed to a Navy-Marine Corps bill.

But we think that the cost estimates are significantly greater than initially estimated, but I have not heard a figure of \$15 billion to date.

Chairman INOUE. Do you believe Guam is a better place than Okinawa for your troops?

General CONWAY. Sir, Guam has advantages for us. It is U.S. soil, and to the degree that we have a level of certainty in terms of U.S. forces' presence in the Pacific for 50, 75 years assurance, I think it is very positive in that regard. In some ways it moves us farther away from some critical engagements, but in some ways it puts us closer to some other engagements in the South Pacific Basin.

So we support the move and we're at this point trying to make sure that it does happen along the time line that's been suggested and that the training requirements associated with putting 8,000 marines in Guam are necessarily taken care of in advance of the move. So we're engaging, sir, but at least at this point we're trying not to spend a lot of money until such time as, again, we see that Futenma replacement facility start to give us relief and move out of Futenma.

PIRACY

Chairman INOUE. Admiral, one thing that very few of us anticipated was piracy, and now it's a new job description for you. How are we coping with pirates?

Admiral ROUGHEAD. Yes, sir. We've kind of come full circle since our origins as a Navy, and I give great credit to our sailors who are performing the counter-piracy mission. The rescue that they performed on *Maersk Alabama* and the return of Captain Phillips I think speaks volumes about the value and the quality of training and the contributions that are made every day by our sailors in that part of the world.

I'm pleased that since the May 7 there have been no successful piracy actions in the area around Somalia. I also believe that our counter-piracy effort has drawn navies of the world more closely together in a meaningful way than ever before. Not only do we have the North Atlantic Treaty Organization (NATO) that is contributing, the European Union is contributing, but we have Indian ships, Chinese ships, Malaysian ships, and Turkish ships. In fact, the commander of Task Force 151, our counter-piracy task force, is a Turkish admiral.

So it has really brought the focus in. That said, the real solution to piracy, as we saw in Southeast Asia, is a solution that must include the maritime dimension, to be sure, what we're doing today, but piracy will not be eradicated unless there is the ability to provide for some governance ashore, for legal action to be taken against those who commit piracy and those who finance piracy. So there must be a two-pronged approach: the maritime piece that we're doing today; but there must be an effort to get some form of lawful behavior ashore in Somalia and to go after where the networks are operating from.

Chairman INOUE. Is Somalia cooperating?

Admiral ROUGHEAD. Somalia in my opinion, Senator, right now does not have the capacity or the capability to cooperate. The lack of governance there is going to be a problem for some time.

Chairman INOUE. Mr. Secretary, do you have any final thoughts? Because I'd like to submit all of my questions for your perusal and response.

Mr. MABUS. I look forward to getting those questions, Mr. Chairman. My final thought is just to once again express our deep appreciation to you and to this subcommittee for the support that you have given our sailors and our marines over the years and that you continue to give to them and to their families as they go in harm's way for all of us.

Thank you.

ADDITIONAL COMMITTEE QUESTIONS

Chairman INOUE. I thank you very much, Mr. Secretary. Thank you very much, Admiral Roughead. Thank you very much, General Conway.

[The following questions were not asked at the hearing, but were submitted to the Department for response subject to the hearing:]

QUESTIONS SUBMITTED TO RAY MABUS

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

VH-71 SUSTAINMENT OF AIRCRAFT

Question. Secretary Mabus, the Department's plan for presidential helicopters, in the absence of the VH-71 program, is not well understood. In particular, the choice to pay substantial termination costs and not field any of the Increment 1 helicopters has been questioned.

Two weeks ago, the cost of terminating the VH-71 contract was estimated to be \$555 million. Critics could say that figure is more than the cost of finishing testing on the five existing Increment 1 helicopters. This, on the surface, appears problematic.

Unfortunately, the budget submission does not shed any light on how much the decisions made today will cost the taxpayer in the future. Secretary Mabus, what further information can you share with the Subcommittee to inform our decisions on whether the termination of the VH-71 is the right course? Could you provide Congress the detailed budget estimates of the impact of the decisions proposed by the Department?

Answer. On January 28, 2009, the Secretary of the Navy notified Congress that the cost growth in the VH-71 Presidential Helicopter program had breached the critical Nunn-McCurdy threshold. As a result of this, as well as the subsequent review of the program in building the President's fiscal year 2010 budget submission, the decision was made to cancel the VH-71 program.

The President's fiscal year 2010 budget requests funding to extend the service lives of the VH-3D and VH-60N. In total, the service life extension is currently estimated to cost about \$500 million over the life of the program. The cost of termi-

nating the VH-71 prime contract is being developed by the VH-71 prime contractor and will be negotiated with the contracting officer over the coming year. This total is significantly less than the amount that would have been needed to complete development of Increment 1, procure additional Increment 1 aircraft and logistics support, and develop configuration improvements required for long term operation. Accordingly, the contracting officer has prudently implemented the cancellation decision by issuing a notice of termination.

Because there remains the need to replace the current fleet of Presidential helicopters, the Navy is preparing a plan to develop options for a Presidential helicopter replacement program. The President's fiscal year 2010 budget requests \$30 million for efforts associated with the new program. Part of that plan will include evaluation of technologies developed under the VH-71 program to identify potential benefit to other programs.

VH-71 IMPACT OF DECISIONS

Question. With cancellation of the VH-71 program, how is Navy addressing sustainment for the existing aircraft? Are sufficient funds in the fiscal year 2010 budget to invest in the reliability of the current systems?

Answer. The Navy received RDT&E funding in fiscal year 2009 to conduct a Service Life Assessment on both the VH-3D and VH-60N. The President's fiscal year 2010 budget requests funding to extend the service lives of the VH-3D and VH-60N. As submitted, the Department of the Navy's budget supports the requirements of the VH-3D and VH-60N for fiscal year 2010.

STRIKE FIGHTER SHORTFALL

Question. Secretary Mabus, a recent Congressional Research Service report states that the Department of the Navy is facing a shortage of strike fighters that peaks at 243 aircraft in 2018. This is almost double the 125 aircraft shortfall projected at this time last year. The report says that shortages will begin this year and continue through 2025. What is your plan to address this problem and what are the risks involved with the plan?

Answer. The Department has four primary avenues for addressing its strike fighter inventory requirements within current force structure and force scheduling requirements. These include:

- Maintaining wholeness of the JSF program: 2012 F-35B Initial Operating Capability (IOC), 2015 F-35C IOC with targeted procurement ramp to 50 aircraft per year;
- Service life extension of F/A-18A-D Hornets from 8,600 flight hours to 10,000 flight hours service life;
- Continued sustainment of legacy aircraft; and
- Further procurement of F/A-18E/F Super Hornet.

The challenge that Navy leadership is undertaking during the Quadrennial Defense Review and upcoming budget year, is to determine the necessary balance of these options in terms of force requirements as they become evident over this summer's review.

Question. Secretary Mabus, it would appear that buying more of the lower cost aircraft is a way to mitigate the risks of the shortfall. Why is the Navy reducing procurement of F/A-18s now?

Answer. The Navy presently has the necessary tactical strike fighter aircraft—F/A-18A/C and F/A 18E/F—to properly resource its force structure requirements in support of its current Maritime Strategy and Fleet Response Plan (FRP) scheduling for 10 carrier air wings (CVW) of 44 strike fighters each and one unit deployment program (UDP) F/A-18C squadron in support of DoN TACAIR Integration (TAI).

Fiscal year 2010, represented in PB10, reflects a reduction of nine F/A-18E/F from PB09 fiscal year 2010 planning. While this is a present reduction in F/A-18E/F procurement for a single year, there is no immediate detrimental affect to the Navy's near-term (out to 2013) strike fighter inventory with this decision. PB10 represents balanced funding that meets DOD's requirements.

Continued procurement of F/A-18E/F is one of four areas that Navy—and DON as a whole—will continue to assess through this summer's Quadrennial Defense Review (QDR) and into the following year's budget submission. The DON has four inter-related avenues for addressing its strike fighter inventory requirements to meet current force structure requirements:

- Maintaining wholeness of the JSF program: 2012F-35 Initial Operating Capability (IOC), 2015 F-35C IOC with targeted procurement ramp to 50 aircraft per year;

- Service life extension of F/A-18A-D Hornets from 8,600 flight hours to 10,000 flight hours service life;
- Continued sustainment of legacy aircraft;
- Further procurement of F/A-18E/F Super Hornet.

The challenge that Navy leadership is undertaking during the QDR and upcoming budget year, is to determine the necessary balance of these options in terms of force requirements as they become evident over this summer's review.

NUCLEAR AIRCRAFT CARRIER MOVE TO MAYPORT, FLORIDA

Question. Secretary Mabus, in January, the Navy formally endorsed plans to relocate a nuclear-powered aircraft carrier to Florida's Mayport Naval Station. This announcement came after a lengthy process of studying the benefits and risks of dispersing East Coast carriers. Please share with the Committee how this decision supports the Navy's mission and our national security interests.

Answer. Secretary Gates decided that the larger issue of whether Mayport will be upgraded to enable it to serve as a homeport for CVNs should be objectively evaluated during the Department's Quadrennial Defense Review (QDR). We believe that the QDR will provide the best forum to assess the costs and benefits associated with a strategic move of this scale.

Strategic dispersal and CVN homeporting are important and complicated issues that deserve serious consideration. The Secretary and I are committed to arriving at decisions that are in the best interests of the nation, the Department, and the U.S. Navy.

Question. Secretary Mabus, some argue that relocating a nuclear-powered aircraft carrier is cost-prohibitive, especially since the infrastructure already exists in Norfolk. How much did the cost of this relocation weigh into deliberations of whether or not to move an aircraft carrier to Mayport Naval Station?

Answer. Secretary Gates recently testified that he is troubled by the idea of having only one port capable of providing maintenance support for East Coast CVNs. Any large magnitude event, a Katrina-like hurricane, a terrorist attack, or an accident that blocks the Norfolk shipping channel, could have the effect of rendering East Coast carrier operations ineffective. Therefore, Secretary Gates has taken the prudent step of seeking funding for the dredging of the Mayport channel within the fiscal year 2010 budget to provide an alternative port to dock East Coast carriers in the event of a disaster.

QUESTIONS SUBMITTED BY SENATOR KAY BAILEY HUTCHISON

NAVAL AVIATION TRAINING IN SOUTH TEXAS

Question. Aviation training performed in South Texas is important for our Navy and for the local community. Are there any plans to upgrade these squadrons?

Answer. The six training squadrons based in South Texas are undergoing numerous upgrades.

Training Squadrons Twenty One and Twenty Two at NAS Kingsville.—VT-21 and VT-22 will receive the last five production T-45C aircraft from Boeing this year while their inventory of T-45A aircraft is being upgraded to the T-45C configuration as part of the Required Avionics Modernization Program (RAMP). 15 T-45A aircraft have been upgraded to the T-45C with 56 aircraft remaining to be completed by mid 2014 at the rate of 12 per year. The Navy has submitted a Request for Proposal (RFP) for accelerating RAMP production to 18 aircraft per year in order to complete the transition by early 2013.

T-45 simulators are also being upgraded to the T-45C digital cockpit configuration. A new Jet Engine Test Cell facility (P-278; \$12.675 million) is currently under construction at NAS Kingsville.

Training Squadrons Twenty Seven and Twenty Eight at NAS Corpus Christi.—VT-27 and VT-28 will transition from the T-34C primary trainer to the T-6B starting in March 2012. The transition will begin with the delivery of two simulators in March 2012 with three additional simulators to be delivered over the following 2 years. The T-6B aircraft will be delivered starting in July 2012 at a rate of three to four aircraft per month finishing by August 2015 with a total of 110 T-6Bs. A new Trainer Facility (P-353; \$14.290 million) is currently under construction at NAS Corpus.

Training Squadrons Thirty One and Thirty Five at NAS Corpus Christi.—VT-31 and VT-35 are transitioning multi-engine pilot training to the upgraded T-44C. 20 T-44A aircraft have been upgraded to the T-44C configuration with 34 aircraft re-

maining to be completed by mid 2013 at the rate of nine per year. Four T-44 simulators are also being upgraded to the T-44C digital cockpit configuration.

Question. What is the plan for equitable sustainment funding for South Texas?

Answer. The sustainment requirement for the Navy is determined by the Facility Sustainment Model (FSM) according to OSD policy. The model determines the equitable distribution to installations based on the total Navy inventory. Commander Navy Region Southeast (CNRSE) received ~\$13 million for fiscal year 2009 in support of NAS Corpus Christi and NAS Kingsville sustainment efforts.

Additionally, the following special projects were approved for execution in South Texas.

Fiscal year 2009 Approved CNRSE SRM Projects (\$K) NAS Kingsville RM 002-05 Repair Runway 13L and 31L \$6,100.

Fiscal year 2009 Approved CNRSE ARRA Projects (\$K) NAS Corpus Christi RM004-04 Repair Various Taxiways \$3,283.

T-6 OPERATIONAL FACILITIES

Question. Currently, there are funds in the base budget for "operational facilities for T-6. I have been advised that these funds will be used for the acquisition of an Outlying Landing Field (OLF) called Goliad at NAS Kingsville, Texas. What is the timeline for this acquisition?

Answer. The Navy is considering acquisition of the Goliad County Industrial Airpark (GCIA) to support training requirements of the T-6 Joint Primary Aircraft Training System that is scheduled to arrive at NAS Corpus Christi in July 2012. MILCON P437 (\$19.764 million) would provide funds for acquiring the GCIA (1,136 acres) and constructing supporting facilities. An Environmental Assessment is currently underway and is scheduled for completion in September 2009. Assuming a subsequent Finding of No Significant Impact, appraisal and title work will begin and is projected to be complete by October 31, 2009. Negotiations and land acquisition would then occur between November 2009 and February 2010. Award of the construction contract for supporting facilities at Goliad is anticipated in June 2010, with completion in June 2012 to support the July arrival of the T-6 aircraft.

Goliad County Industrial Airpark (GCIA) is approximately 77 miles north of Naval Air Station (NAS) Kingsville and 66 miles north-northwest of NAS Corpus Christi.

AVIATION SUPPORT NAS FORT WORTH

Question. What is the plan to provide aircraft and support to the units at the Naval Air Station at Fort Worth?

Answer. There are currently seven Navy Reserve aircraft assigned to units at NAS JRB Fort Worth (3 C-40s, 3 C-9s, and 1 C-12). This number of aircraft represents the planned inventory for permanent Navy Reserve aircraft at that base.

Two Navy construction projects are underway on the base. The first project is part of the Base Closure and Realignment (BRAC) legislation in 2005 that moved a Navy Air Forces Reserve squadron to Fort Worth from NAS Atlanta, Georgia. This project will upgrade a hangar to provide additional space necessary to protect the aircraft that completed the BRAC move. The second project, the construction of a maintenance facility that will support Navy, Marine Corps, and Texas Air National Guard aircraft, is 99 percent complete. A third project, designed to upgrade a hangar that Navy Reserve units share with other services, is approved and pending contract award.

STRIKE FIGHTER SHORTFALL

Question. There is common knowledge in the Navy that there will be a significant fighter shortfall in the future if the Joint Strike Fighter program isn't kept on track or accelerated. What would the impact be on the Navy and Marine Corps if procurement was reduced or slowed? If the decisions are made to procure a second engine for the Joint Strike Fighter, will this result in delays in overall production or result in reductions in other programs?

Answer. One of the primary avenues for addressing strike fighter inventory requirements within current force structure and force scheduling requirements is maintaining wholeness of the JSF program (2012 F-35B IOC, 2015 F-35 IOC with PB10 procurement ramp to 50 aircraft per year for a DON total procurement of 680 JSF). It is foundational to Naval Aviation's future force structure and a central assumption in current strike fighter inventory predictions. Delaying or reducing DON JSF procurement would exacerbate Naval Aviation's predicted strike fighter trend.

The Department has not funded the JSF alternate engine effort in the fiscal year 2010 President's budget. The various studies that have been done by the OSD

CAIG, GAO, and IDA are mixed in terms of the likelihood the Department would ever recover such an investment. While there are many intangible benefits associated with competition and a second source engine, the Department continues to maintain that the benefits do not outweigh the significant investment to develop, procure, and maintain two JSF engines.

The cost impact of procuring F-136 across the FYDP is estimated at \$4.7 billion (DOD).

QUESTION SUBMITTED BY SENATOR ROBERT F. BENNETT

DEMANDS OF IRREGULAR WARFARE

Question. I am intrigued by the growing significance that “irregular warfare” and so-called “hybrid campaigns” play in our national defense strategy. In your prepared remarks, you mentioned the need to achieve balanced growth through a focus on these new elements, as well as continuing to promote more conventional capabilities. How specifically do you plan to focus the Navy on the future demands imposed by Irregular Warfare? Given what I imagine to be the ever-evolving nature of these challenges, how effectively is the Navy changing and developing its strategies to meet these threats? In what ways can Congress help support the Navy in addressing future concerns?

Answer. As demonstrated by past and ongoing efforts in the irregular arena, the Navy is uniquely equipped and postured to have an enduring effect in this complex security environment. Today, the Navy provides one-half of the combat air sorties in Iraq and Afghanistan, protecting our ground troops in an irregular fight. The Navy is building partner capacity and sustainable regional maritime security force capability as shown in the ongoing Africa Partnership Station initiative. The goal of these efforts is to help countries at risk become net contributors to maritime security and good governance as part of a whole-of-government approach to diminish and counter violent extremism and other Irregular Warfare threats. We continue to evaluate opportunities in this environment, orient our force, and develop new means for applying the general purpose forces to meet irregular challenges.

Two prime examples are the Littoral Combat Ship (LCS) and the Joint High-Speed Vessel (JHSV). LCS’s inherent speed, agility, shallow draft, payload capacity, reconfigurable mission spaces, and air/water craft capabilities, combined with its core Command, Control, Communications, Computers and Intelligence, sensors, and weapons systems, make it an ideal platform for Irregular Warfare and maritime security operations, to include counter-piracy missions. JHSV also has some of the same characteristics as LCS (i.e. speed, agility, shallow draft, payload capacity, reconfigurable mission spaces, and air/water craft capabilities). JHSV is built to commercial American Bureau of Shipping (ABS) standards with minor military modification. The vessel can be operated with a core crew of civilian mariners as a non-combatant. It is less robust than LCS in terms of C⁴I system, sensors, and weapons systems (.50 cal only). Its ability to offload Army and Marine Corps equipment and personnel in austere or degraded ports can contribute to Irregular Warfare operations.

Consistent with the “Cooperative Strategy for 21st Century Seapower”, the Navy is at the front end of aligning its organizations and processes to be more adaptive across a broad range of challenges. In conjunction with DOD Directive (3000.07), tasking the Services to increase their proficiency in Irregular Warfare, and lessons learned through operations, the Navy is developing its vision and an operational concept for becoming a fundamental enabler to whole of government efforts to confront irregular challenges through balanced diplomacy, development, and defense.

As the Navy continues to refine the capabilities and capacities to address irregular challenges, Congress can advocate for the Navy’s employment in preventive maritime security and remain responsive to resource requirements that expand the Navy’s ability to address future concerns. The Navy remains postured to deter near-peer competitors, but with 70 percent of the world’s population living within 100 miles of the coast, irregular challenges will grow in the maritime domain and the Navy’s role in Irregular Warfare will be pivotal to addressing those challenges. As the Navy expands its aperture for Irregular Warfare, continued funding will be needed to equip our sailors with the training, resources, and equipment they need to carry out Irregular Warfare missions.

QUESTIONS SUBMITTED TO ADMIRAL GARY ROUGHEAD

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUYE

FUTURE OF TESTING AT PMRF

Question. The Missile Defense Agency (MDA) together with the Navy has conducted Aegis Ballistic Missile Defense (BMD) tests at the Pacific Missile Range Facility (PMRF) for years. However, the future of that testing at PMRF is in jeopardy since MDA plans to move both Aegis and Terminal High Altitude Area Defense (THAAD) tests to the Reagan Test Site in Kwajalein, which will be expensive and cause delays in the test program.

What are the costs associated with moving Aegis ballistic missile defense tests out of the Pacific Missile Range Facility to the Reagan Test Site in Kwajalein? How will the delay in testing caused by moving to Kwajalein impact the Aegis BMD program?

Answer. The Navy has not yet assessed the impact to the program or costs associated with moving Aegis BMD tests to the Reagan site; however, I anticipate there will be increased logistics and support costs for Aegis ships operating in the vicinity of Kwajalein for BMD tests.

While some MDA Aegis BMD tests may require support from the Reagan Test Site or the Kodiak Launch Center because the tests require more complex, longer-range targets, the future MDA flight test program will continue to leverage the significant capabilities of PMRF. The communications architecture, data collection assets, logistics infrastructure, and ability to draw on an experienced and technically superb cadre of test planning and execution professionals have and continue to enable Aegis BMD to conduct a progressively more robust and realistic flight test program since 1995.

Question. What is the MDA's rationale for moving the Aegis BMD and THAAD tests out of PMRF?

Answer. Certain tests, such as the upcoming Aegis BMD-THAAD Flight Test Mission (FTM-15), may be moved to the Reagan Test Site in Kwajalein where MDA can conduct increasingly complex tests with longer-range targets, and higher engagement altitudes and velocities. Debris patterns from tests such as these produce larger debris patterns than previous Aegis BMD tests. If conducted at PMRF, these tests could result in debris that impacts the Hawaiian Islands in violation of the 1998 PMRF Enhanced Capability Environmental Impact Statement.

While MDA may require the use of the Reagan site to conduct BMD tests in certain threat-realistic regimes, MDA will continue to use PMRF for BMD and THAAD testing. Test plans indicate the majority of Aegis BMD testing will take place at PMRF and MDA will conduct more tests at PMRF than any other test range.

Question. What do the Navy and MDA need to do in order to continue Aegis and THAAD tests, including the future long range tests, at PMRF?

Answer. According to developed test plans, Aegis and THAAD testing at PMRF will continue and MDA will conduct more tests at PMRF than any other test range. However, selected future tests with longer-range targets, and higher engagement altitudes and velocities may result in debris patterns that could impact the Hawaiian Islands. These tests will be considered for the Reagan Test Site.

Question. What are the potential environmental hazards and risks for the Hawaiian Islands if the Navy and MDA continued to do more complex testing at PMRF?

Answer. More complex testing at PMRF may result in debris falling on the Hawaiian Islands. PMRF has consistently interpreted the 1998 PMRF Enhanced Capability Environmental Impact Statement (EIS), as allowing "no debris on island." Further EIS analysis of potential environmental impacts and safety risk analysis will be required to determine the feasibility of more complex tests.

SHIP DEPOT MAINTENANCE

Question. Admiral Roughead, on May 14, 2009, the Committee received a letter responding to an authorization requirement certifying that the Navy has fully funded the 2010 requirements for ship steaming days and projected depot maintenance for ships and aircraft.

Less than a week after that letter was sent, on May 19, the Committee received the Navy's fiscal year 2010 Unfunded Programs List. The only items on that list are depot maintenance for aircraft and ships in the amount of \$395 million. Please explain how there are unfunded requirements for depot maintenance if the Committee has a letter certifying that sufficient funding has been requested to meet mission requirements in fiscal year 2010.

Answer. The fiscal year 2010 Department of the Navy Assessment of Ship Steaming Days, Ship Depot Maintenance and Air Depot Maintenance Workload delivered

with the May 14, 2009 letter to the Committee reported that ship depot maintenance was funded to 96 percent of the requirement, accepting some risk in deferred ship maintenance. It also reported that aircraft depot maintenance was funded at 100 percent for deployed squadrons, 97 percent for non-deployed squadrons, and 67 percent for engine maintenance. The Navy's fiscal year 2010 Unfunded Programs List is consistent with this report. Funding levels for maintenance represent the best balance of risk across the entire Navy program. The Navy remains committed to funding ship and aviation depot maintenance accounts within acceptable risk levels and meeting expected service life for our platforms.

Question. Admiral Roughead, what kind of actions is the Navy undertaking to reduce the reliance on supplemental funding for ship and aircraft depot maintenance?

Answer. The Navy is committed to accurately programming and budgeting costs into our baseline budget and reducing our reliance on supplemental funding. To that end, we continue to refine our performance models to better predict future maintenance requirements and operating costs for ships and aircraft. These performance models undergo a rigorous review process and are validated by an independent assessor. In addition to modeling, our Fleet Maintenance Board of Directors (FMBOD) provide additional oversight of the requirements definition phase for ship depot maintenance to ensure that hull-unique requirements are factored into our baseline. The Navy does not budget for unanticipated maintenance requirements; we address these emergent requirements in the year of execution.

AEGIS BALLISTIC MISSILE DEFENSE

Question. Admiral Roughead, in last year's testimony before this Committee, you told us that it was the appropriate time to consider migrating the "fielding wedge" of Aegis ballistic missile defense from the Missile Defense Agency to the Navy. Can you elaborate on what the "fielding wedge" entails and the status of that migration?

Answer. The "fielding wedge" is the common term MDA had used for the Department of Defense-wide account that provided funding for fielding Ballistic Missile Defense System assets, such as SM-3 missiles and additional Aegis BMD installations. Currently, procurement of SM-3 missiles is an MDA program and funds in the "fielding wedge" have been allocated to MDA.

When the SM-3 procurement program is transitioned to the Navy in the future, it may be appropriate for SM-3 procurement funding to migrate to the Navy.

The SM-3 missile used for exo-atmospheric (in space) intercepts is launched from our Aegis BMD capable cruisers and destroyers. Over the last 5 years MDA and the Navy developed and installed this capability in 3 cruisers and 15 destroyers for a total of 18 ships. In the fall of 2008, due to an increasing demand for BMD capable ships, MDA and the Navy collaborated in co-funding the installation of Aegis BMD capability in three additional East Coast Aegis ships in 2009 and 2010, increasing the Aegis BMD fleet to 21 ships. In the President's budget for fiscal year 2010, the Department added \$200 million across the FYDP to install the Aegis BMD capability on six additional Aegis ships.

SURFACE COMBATANTS

Question. Admiral Roughead, last year this committee supported continued funding for the DDG 1000 program and provided \$200 million in advance procurement funding to restart the DDG 51 program. We understand that the Navy has made decisions on how to proceed with these programs and has reached an agreement with shipyards on a construction plan. Would you explain the agreement and explain how this approach will benefit the Navy?

Answer. After extensive discussions with General Dynamics Corporation Bath Iron Works (BIW) and Northrop Grumman Shipbuilding (NGSB), the Navy will build all three DDG 1000 Class ships at BIW and the first three DDG 51 Class ships under the restarted program at NGSB. This agreement will ensure workload stability at both shipyards, leverage learning, stabilize and minimize cost risk for the DDG 1000 program, efficiently re-start DDG 51 construction, facilitate performance improvement opportunities at both shipyards, and maintain two sources of supply for future Navy surface combatant shipbuilding programs.

This plan most affordably meets the requirements for surface combatants, commences the transition to improved missile defense capability in new construction, and provides significant stability for the industrial base.

Question. Admiral Roughead, will the DDG 1000 be the precursor to the future cruiser?

Answer. Future surface combatant requirements are being studied. Capabilities and technologies inherent in both the DDG 51 class and DDG 1000 class will inform

this study and help us better approach future combatant requirements definition and designs.

Question. Admiral Roughead, how do you plan to employ the three DDG 1000s once they are delivered to the Navy?

Answer. The three DDG 1000 ships will be employed globally as U.S. Navy Fleet assets in traditional destroyer roles, as well as integral members of joint and combined expeditionary forces. The DDG 1000 will provide forward presence, deterrence, and support to ground forces through all-weather precision gun fire and inland strikes and littoral anti-submarine warfare.

ADVANCE SEAL DELIVERY SYSTEM

Question. Last November, the Advanced SEAL Delivery System suffered a catastrophic fire which brought into question whether a repair was feasible. It now appears that the ASDS could be repaired, although the repair could take several years and cost several hundreds of millions of dollars.

Admiral Roughead, do you have firm estimates on what it would take to repair the ASDS? Has Special Operations Command and the Navy developed a proposal for how to pay that bill?

Answer. The current ASDS repair estimate is approximately \$250 million. The program cost estimates have been reviewed by cost engineers and are considered reasonable for the anticipated repairs, however, the Naval Sea Systems Command Program Office will continue to refine the cost estimate. USSOCOM is pursuing various options to obtain funding to effect the repairs.

Question. Admiral Roughead, SOCOM is planning to build a new ASDS-like submarine, with research and development funds requested in this budget. Do you believe there is an urgent case to repair the ASDS, considering that a new capability is expected to be available soon after the ASDS repairs would be completed?

Answer. The estimated repair timeline would return ASDS to service in fiscal year 2012. The acquisition plan for the Joint Multi-Mission Submersible has the first vehicle achieving Initial Operational Capability in fiscal year 2016. SOCOM has validated numerous missions for this capability in the near term. Failure to repair ASDS-1 would result a capability gap for four years and, therefore, delay such missions.

AMPHIBIOUS SHIPS

Question. Admiral Roughead, what is the current status of the seabasing concept?

Answer. Seabasing concept supports our Maritime Strategy. Seabasing enables operational commanders to project capabilities ashore whether access is opposed, infrastructure (air and sea ports) are non-existent, or a large footprint ashore is politically undesirable.

In recent years we have expanded upon the seabasing concept. Examples of seabasing include: U.S. Fifth Fleet's Combined Task Force 151 counter-piracy operations, U.S. Pacific Fleet's Pacific Partnership humanitarian civic assistance missions, Naval Forces Africa's/Naval Forces Europe's Africa Partnership Station initiative to improve maritime safety and security in West and Central Africa, U.S. Fourth Fleet's Continuing Promise humanitarian civic assistance operation in U.S. Southern Command's area of responsibility, the 2006 non-combatant evacuation operation from Lebanon, the 2005 Pakistan earthquake response, and the 2005 Asian tsunami response.

The ongoing Seabasing Capabilities Based Assessment (CBA) will identify and prioritize capability gaps and propose solutions that could enhance our ability to meet future requirements.

AMPHIBIOUS LIFT REQUIREMENT

Question. Admiral Roughead, would you comment on the 38 ship amphibious lift requirement, and the future requirements for seabasing?

Answer. In the January 2009 Report to Congress on Naval Amphibious Force Structure, the Commandant of the Marine Corps and I reaffirmed that 38 amphibious ships are required to lift the assault echelon of 2.0 Marine Expeditionary Brigades (MEBs). We agreed to sustain, resources permitting, an amphibious force of about 33 total amphibious ships in the assault echelon, evenly balanced at 11 aviation capable ships, 11 LPD-17 class ships, and 11 LSD 41 class ships. The 33 ship force accepts risk in the arrival of combat support and combat service support elements of the MEB but has been judged to be adequate in meeting the needs of all parties within the limits of today's fiscal realities.

The Navy and Marine Corps continuously evaluate amphibious lift capabilities to meet current and projected requirements. In addition to our internal reviews, the

Quadrennial Defense Review is assessing future amphibious force structure requirements.

Seabasing concept supports our Maritime Strategy. Seabasing enables operational commanders to project capabilities ashore whether access is opposed, infrastructure (air and sea ports) are non-existent, or a large footprint ashore is politically undesirable.

In recent years we have expanded upon the seabasing concept. Examples of seabasing include: U.S. Fifth Fleet's Combined Task Force 151 counter-piracy operations, U.S. Pacific Fleet's Pacific Partnership humanitarian civic assistance missions, Naval Forces Africa's/Naval Forces Europe's Africa Partnership Station initiative to improve maritime safety and security in West and Central Africa, U.S. Fourth Fleet's Continuing Promise humanitarian civic assistance operation in U.S. Southern Command's area of responsibility, the 2006 non-combatant evacuation operation from Lebanon, the 2005 Pakistan earthquake response, and the 2005 Asian tsunami response.

The ongoing Seabasing Capabilities Based Assessment (CBA) will identify and prioritize capability gaps and propose solutions that could enhance our ability to meet future requirements.

NEXT GENERATION BALLISTIC SUBMARINE

Question. The President announced in April a new series of nuclear arms control efforts, including negotiations on an arms reduction treaty with Russia and a goal to eventually retire our nuclear arsenal. But the budget request includes \$387 million to begin development of the next generation ballistic missile submarine, which would go into production approximately 10 years from now.

Admiral Roughead, given these new arms control initiatives and the upcoming Nuclear Posture Review, why is this the appropriate time to begin developing a new platform for our strategic arsenal?

Answer. The President has reaffirmed the need to maintain a strong strategic deterrent for the foreseeable future. To ensure there is no gap in strategic coverage when the OHIO class SSBNs begin to retire in 2027, we need to start concept and system definition for the OHIO class replacement in fiscal year 2010. Starting this work now is consistent with the 20-year timeline used to develop, build, and test the existing OHIO class submarines. There are key technical and schedule drivers that require the fiscal year 2010 start so design and technology can mature to support a fiscal year 2019 ship construction schedule. Additionally, we will achieve significant program benefits by aligning our efforts with those of the United Kingdom as they move forward with their SSBN replacement program.

Question. Admiral Roughead, there are significant concerns about the cost of a new ballistic missile submarine. Some are saying that it could cost as much as an aircraft carrier. Is there a target cost for this new submarine to allow it to fit into our long-term shipbuilding plan?

Answer. No cost target has been established for the SSBN replacement. The Navy is currently conducting an Analysis of Alternatives (AoA) and will develop an estimated Shipbuilding and Conversion, Navy (SCN) cost for the new ballistic submarine after the completion of the AoA in early 2010.

LONG-TERM PLAN FOR END STRENGTH

Question. Admiral Roughead, this year the Navy decided to halt its personnel reductions, believing the current plan cut too deep. The Navy now plans to reach an end strength of 328,800 in fiscal year 2010. What is the long term plan for the Navy's end strength?

Answer. The Navy fiscal year 2010 budget requests baseline end strength of 324,400 plus Overseas Contingency Operations (OCO) funding to support temporary augmentation requirements of up to 4,400 additional personnel. Navy manpower requirements are determined by the Navy's force structure, assigned missions, and job related tasks; therefore, Navy's long-term plan for end strength will be shaped by decisions from the Quadrennial Defense Review regarding these factors. With QDR guidance, Navy will review job tasks and processes, identify manpower and training requirements to support new missions or cease work that may no longer be required, and recommend improvements to training and distribution processes. Navy is committed to size, shape, and stabilize the force to fit current and future manpower requirements to meet future threats.

CONSIDERATIONS TO RESOURCE ADDITIONAL PERSONNEL

Question. Admiral, what tradeoffs is the Navy considering to be able to resource these additional personnel?

Answer. The President's budget submitted to the Congress provides the necessary funding for the Navy's requested baseline end strength requirements. Navy has requested Overseas Contingency Operations (OCO) funding to support temporary augmentation requirements of up to 4,400 in fiscal year 2010.

QUESTIONS SUBMITTED BY SENATOR THAD COCHRAN

COMMON HULL FORMS

Question. Admiral Roughead, you are on record as being a strong advocate for the use of common hull forms to permit longer production runs to help reduce shipbuilding costs. As you have said in the past, "We can no longer design a different ship for every different mission that we have." We must plan and build ships more efficiently, and I agree with your commonality approach as one means to make headway in this area.

With this in mind, do you see any utility in using the LPD-17 hull as the future replacement for joint command ships and dock landing ships?

Answer. In general, the Navy's long range vision for shipbuilding includes reducing the types and models of ships in the Fleet, maximizing the reuse of ship designs and components, and building ship variants that leverage existing production lines. Regarding the LPD-17 hull, we are currently considering this hull, along with the existing T-AKE hull in an Analysis of Alternatives for the replacement of our two existing LCC ships.

FIRE SCOUT UNMANNED AERIAL VEHICLE

Question. Admiral Roughead, the Fire Scout unmanned aerial vehicle is being developed for deployment aboard Littoral Combat Ships. I have been informed the Navy has been testing the Fire Scout at-sea aboard frigates and plans to deploy the system aboard the U.S.S. *McInerney* this fall. Could you update the committee on how testing is progressing and what operational impact deployment of the system will have for the Navy?

Answer. The Fire Scout is successfully completing developmental testing and is on track to deploy in the fall of 2009 on-board the U.S.S. *McInerney*. Three productive ship test periods aboard the U.S.S. *McInerney* have been completed. Systems testing of the Vertical Takeoff and Landing Tactical Unmanned Aerial Vehicle (VTUAV) Command and Control, Data Links, landing sub-system, flight deck procedures, and Ground Control Station were performed during the February 2009 at sea period. Dynamic Interface testing was completed in the April 2009 and May 2009 at sea periods, clearing an operationally acceptable flight envelope.

During the U.S.S. *McInerney* deployment, the Fire Scout will enhance the ship's war fighting capability by using its sensors and persistence to increase battle space awareness. Specifically, during drug interdiction operations, the Fire Scout can use its speed and electro-optical/infra-red (EO/IR) sensor to maintain visual contact on high speed trafficking boats and provide evidence suitable for prosecution.

FIRE SCOUT UAV BENEFITS

Question. Admiral Roughead, do you believe there are benefits to deploying Fire Scout aboard all air-capable ships?

Answer. Fire Scout has capabilities that are applicable to all air-capable ships. Presently, the requirement and funding support integration on the LCS class and one frigate deployment in support of Fire Scout Initial Operational Test and Evaluation. Future plans for Fire Scout to be deployed on additional ships will be guided by the operational value, other Navy priorities and our budget.

LITTORAL COMBAT SHIP

Question. Admiral Roughead, the original cost estimate for the Littoral Combat Ship was \$220 million per ship. The Navy's fiscal year 2010 budget request includes the procurement of three Littoral Combat Ships funded at a congressionally mandated cost cap of \$460 million per ship. However, current estimates are that the fiscal year 2010 ships will cost about \$100 million more per ship than you have requested. How does the Navy intend to execute the fiscal year 2010 Littoral Combat Ship request given this shortfall?

Answer. Navy is actively engaged with industry to implement cost reductions with the intent to procure the fiscal year 2010 ships within the \$460 million cost cap. We have formalized a cost reduction effort that primarily targets cost drivers in design, Navy specifications, and program management costs. Until manufacturing effi-

ciencies can be achieved for the follow on ships Navy may require some legislative relief regarding the fiscal year 2010 LCS cost-cap.

JOINT HIGH SPEED VESSEL (JHSV)

Question. Admiral Roughead, the Administration's budget proposal requests two Joint High Speed Vessels, one funded by the Navy and one funded by the Army. Would you describe to the committee the Department's procurement plans for these vessels? In addition, please explain the capability strengths and weaknesses of the Joint High Speed Vessel and the sea state limitations?

Answer. The current requirement for the Joint High Speed Vessel (JHSV) program is 20 ships: 15 ships to be operated by the Navy and 5 ships to be operated by the Army. The Detail Design and Construction contract for the first vessel, funded in fiscal year 2008 for the Army, was awarded to Austal USA on November 13, 2008. Funding for the second and third ships (one Navy and one Army) was provided in the fiscal year 2009 Defense Appropriations Act. Funding for fourth and fifth ships (one Navy and one Army) is included in the fiscal year 2010 budget request. Delivery of the first Army JHSV is expected in 2011. Delivery of the first Navy ship is expected in 2012.

JHSV will be a high-speed, shallow-draft surface ship that will be able to rapidly transport medium payloads of cargo and personnel in-theater, reconfigure and rear-range loads when missions change and access to port facilities that are too austere or shallow for other larger auxiliary ships. JHSV, while performing a variety of lift and support missions, will be a non-combatant ship that will operate in permissive environments or in higher threat environments under the protection of combatant vessels and other Joint forces. JHSV is a commercial-design and does not require the development of any new technology. JHSV is being built to American Bureau of Shipping (ABS) High Speed Naval Craft Code. It has no combat system capability.

JHSV capabilities include:

- High speed transits of 35 knots.
- Open architecture and rapid reconfigurability for Command, Control, Communications, Computers, and Intelligence (C⁴I).
- High payload fraction and large, rapidly reconfigurable, payload volume.
- Shallow 13-foot draft.
- Support for helicopter operations; and at-sea replenishment of fuel and cargo extended range transits of greater than 3,000 nm in up to Sea State 3.

QUESTION SUBMITTED BY SENATOR ROBERT F. BENNETT

F/A-18 E/F'S RETIRE AND JSF SHORTFALL

Question. Admiral Roughead, considering the numerous challenges currently facing the Navy, I am impressed by the variety of tasks that you undertake, particularly the sizable portion of missions flown by Navy airmen over Afghanistan. I am concerned by the drop in the number of airframes that will be available to the Navy due to battle-worn F/A-18 E/F's having to be retired sooner than anticipated. While I understand the fundamental role that the new F-35 Joint Strike Fighter (JSF) will play in addressing this shortfall, how do you plan to maintain the Navy's ability to carry out its air operations should the JSF program become significantly delayed? What actions are currently being taken to address this problem? How can the Congress assist you in meeting this responsibility?

Answer. The Navy is experiencing a decrease in strike fighter capacity due to the continued high pace of operating our older F/A-18 A-D aircraft. The timely delivery of the Joint Strike Fighter is critical to our ability to meet operational demands for expeditionary strike and maintain a mix of strike fighter aircraft on our carrier decks.

Until JSF reaches initial operating capability in 2015, we are managing our existing strike fighter inventory by extending service life of our F/A-18A-D Hornets beyond their originally-designed 6,000-hour service life to 8,000 flight hours. There is also the potential to extend the service lives of some of our A-D Hornets further, to 10,000 hours.

The Quadrennial Defense Review (QDR) will review TACAIR requirements across all the Services to include the required number of carrier-capable strike fighters our nation needs. Navy will then do a cost-benefit analysis to determine the best option for buying additional life in our strike fighter inventory: through service life extensions of existing aircraft, through procurement of new aircraft, or through a combination of these two options. The fiscal year 2010 budget contains appropriate

funding to continue development and procurement of JSF and buy an adequate number of F/A-18 aircraft to keep that production line open until QDR completes its review.

QUESTIONS SUBMITTED TO GENERAL JOHN T. CONWAY

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

MARINE CORPS END STRENGTH

Question. General Conway, as the Army and Marine Corps complete their planned end strength growth, there has been discussion about whether the Army should continue to grow to sustain the current operational tempo. Has the Marine Corps undertaken a similar analysis? Do you think the Marine Corps has reached an end strength that is large enough to sustain operations and relieve the strain on the force?

General, what does the increased commitment to Afghanistan mean for the end strength of the Marine Corps? How will this affect the Marine Corps ability to sustain its current commitments?

Answer. The Marine Corps has undertaken similar analysis by conducting the Uncompensated Review Board (URB) for the last 2 years. The URB conducts an annual review and validation of the Marine Corps' capabilities to assess new active duty uncompensated force structure requirements and prioritize these adjustments against my approved force structure plan. If analysis supports, the URB will recommend that the end strength of the Marine Corps be increased. Following the URB, a standing DOTMLPF (Doctrine, Organization, Training, Materiel, Leadership and Education, Personnel and Facilities) Working Group is overseeing the implementation and synchronization of this plan. This working group consists of a cross section of my staff and the Marine Forces Commanders.

The Marine Corps has reached an end strength that is large enough to sustain operations and relieve the strain on the force. I continue to stress that the growth to 202,000 active-duty Marines will enable the Corps to meet current and future challenges in an increasingly demanding operational environment. Growth to 202,000 gives the Marine Corps the capacity to deploy forces in response to contingencies and to support security cooperation efforts with our partners across all theaters. Our forces are multi-capable, transitioning seamlessly from fighting conventional and hybrid threats to promoting stability and mitigating conditions that lead to conflict. By building to 202,000, we improve training, upgrade readiness, and enhance the quality of life for all our Marines and their families by allowing them more recovery time between deployments.

MARINE CORPS SUICIDE AND DIVORCE RATES

Question. General Conway, the Marine Corps' suicide and divorce rate have risen sharply this past year. It appears that the strain of frequent deployments is beginning to show in the emotional health of our Marines. What more can the Marine Corps do to support Marines and their families?

General, the Marine Corps what additional support could the Committee provide to help alleviate the strain on the force?

Answer. There is no question that continued OPTEMPO puts stress on the force, not just for deploying Marines, but for those who remain behind and face increased workloads. There were year on year increases for 2008 in suicide incidents and divorces.

Health of the Force.—Marine Corps commanders are fully engaged in promoting the psychological health of our Marines, Sailors, and family members. To enable leaders, individuals, and families to prepare for and manage the stress of operational deployment cycles, the Combat and Operational Stress Control (COSC) Program provides a set of policies, training, and tools to prepare for the upcoming deployment, recognize stress reactions early and manage them more effectively within operational units. Marine leaders are assisted by mental health professionals, chaplains, and COSC regional training coordinators in the operating forces, to detect stress problems in warfighters as early as possible, and are provided the resources to effectively manage these stress problems in theater or at home base. Resources are also provided for the family members left behind to provide support, communications, and information flow.

This training is being incorporated in formal Professional Military Education schools for both officer and enlisted Marines, such as the Expeditionary Warfare School and the Staff Non-commissioned Officer Advanced Course. We have staffed

full-time COSC training coordinators at each of our Marine Expeditionary Force headquarters.

To assist with prevention, rapid identification, and effective treatment of combat operational stress, we are expanding the Operational Stress Control and Readiness (OSCAR) Program—our program of embedding mental health professionals in operational units—to directly support all active and reserve ground combat elements. This year, we begin placing mental health professionals organic to the active Divisions and Marine Forces Reserve. By fiscal year 2011, full OSCAR teams will be fielded to the Infantry Regiment level. OSCAR will eventually be expanded to all deployed elements of the Marine Air-Ground Task Force.

Our Marine Operational Stress Training (MOST) program was developed with Tri-Marine Expeditionary Force (TRI MEF) Commanders based on the USMC COSC stress continuum model, now adopted by OSD. Our program supports the full deployment cycle by focusing on Leaders, Marines and families from pre-deployment through post-deployment, providing information on what's to come, what to look for, and what to do when stress reactions appear. COSC concepts have also been incorporated in family readiness training.

Suicide.—We are taking proactive action to address the issue of suicide. The Sergeant Major hand-selected a senior enlisted Marine leader to add unique insight to our efforts in suicide prevention, and the Assistant Commandant (ACMC), through the Executive Safety Board, is directing a series of initiatives which are currently in accelerated development:

—*Training.*—Since 90 percent of suicides have tended to occur in the ranks of E1–E5 Marines, a half-day, high impact, relevant workshop has been designed to reach the NCO/FMF Sailor community and facilitate their work with junior enlisted Marines. This training is expected to be ready by this summer. In March, I directed that an all-hands training on suicide prevention be conducted throughout the Corps.

—*Leadership Suicide Prevention Video Messages.*—All O6 and higher commanding officers have been directed to produce videos focusing on leadership and suicide prevention to set the tone for stigma reduction and an imperative of prevention.

—*Integration of Suicide Prevention and the Marine Corps Martial Arts Program (MCMAP).*—A prevention message was incorporated in the MCMAP program in a manner appropriate and engaging to reach all Marines.

—*Relationship Distress Hotline.*—Relationship problems, both romantic and marital, remain the number one associated stressor related to suicidal behavior. Suicide is complex and while this is not the only problem, it is the most common. A hotline by phone, email and live internet chat that is marketed specifically to assist with relationship distress and questions may reduce risk of suicide related behaviors that result from this type of stress. In the interim, we have partnered with The Outreach Call Center of the Defense Center of Excellence on Psychological Health and Traumatic Brain Injury, and Military OneSource to strategically market their relationship building resources to Marines and family members.

We will continue to aggressively pursue suicide prevention initiatives; reevaluate existing programs designed to reduce the stressors most correlated with suicidal behavior; develop and distribute new prevention programs; and refresh and expand training materials.

Divorce.—Relationship problems leading to distress may result from difficulties in communication, parenting, sexual intimacy, finances or immaturity. The average age of married enlisted Marines is 27 and the average age of Marine Corps spouses is 28, the youngest of all the four military services. Coupling this young age with the demands of a military lifestyle can result in significant challenges for Marine couples.

The Marine Corps takes a proactive stance in supporting healthy marital relationships. Most leaders are keenly aware of how relationships can impact mission readiness. When Marines are confident that their relationships are in good standing and their spouses are supported, they are able to focus on the mission at hand.

Leaders encourage participation in such marital support programs as:

—*Marriage Enrichment Workshops.*—The chaplain and Marine Corps Family Team Building offer this workshop which is built on the very successful Personal Relationship Enhancement Program (PREP). This program focuses on skill building in a fun and relaxed environment.

—*Face to Face Counseling Support.*—Services of MCCS One Source supplement the existing support system for Marines and their families by providing assistance 24 hours a day, 7 days a week via toll free telephone and Internet access. In addition, MCCS One Source supports geographically dispersed Marines and their families (recruiters, Inspector and Instructor staffs, and mobilized reserv-

ists) who do not have traditional services available. Military OneSource provides counseling support, 24/7, 7 days a week, for anyone seeking to learn more about building a strong relationship that lasts. One Source can provide assistance through referrals to military and community resources, online articles, newsletters, and workshops, prepaid booklets and audio recordings.

—*Couples Counseling.*—The Counseling Center at Marine and Family Services provides individual, marriage, and family counseling as needed. Services are intended to be solution-focused on well-defined problem areas amenable to brief intervention and rehabilitation, such as adult adjustment issues, crisis intervention, academic and occupational problems, parent-child communication, grief and loss issues, and nonviolent marital problems. Licensed clinical providers assist clients to identify and clarify the nature and extent of problems based on an initial assessment, and to develop a collaborative plan for solving problems; and

—*Spouse Support.*—These programs are aimed at reducing the social isolation many young spouses experience and help to establish more realistic expectations of what marriage in the Marine Corps is all about. Some of these programs include:

—*L.I.N.K.S.*—A Marine Corps Family Team Building program that offers an orientation to the Marine lifestyle for all spouses. The orientation includes spouse-to-spouse mentorship and small group discussion, and provides a positive, supportive environment for spouses of all ages to learn to manage the demands of Marine Corps life and to work together as team;

—*Key Volunteer Network*—This program is an integral part of the commander's official family readiness program and is the primary communication link between the Commanding Officer and unit families for the enhancement of mission readiness. The Network supports families on the home front when Marines are deployed. Not only does the Network provide information on local programs and services but also provides support through unit based activities;

—*Spouse Learning Series.*—One-day seminar provided by MCCA and hosted by Marine Corps Family Team Building to equip spouses with techniques and skills that help to develop leadership skills.

AMPHIBIOUS SHIPS

Question. General Conway, the ability to operate independently from the sea is a core capability of the Navy and the Marine Corps. The Marine Corps is developing new tactical vehicles and aviation systems for future warfighting capability. Are you concerned about these systems making the Marine Corps is too heavy, and that our amphibious lift capability may be inadequate to allow the Marine Corps to continue to operate as units from ships?

Answer. Yes, I'm concerned that we are getting heavier. As a result of our current operations in Iraq and Afghanistan, much of the equipment we have has gotten heavier because of our efforts to provide more protection for our Marines and Sailors. This increased weight, coupled with increased dimensions, affects how we are able to embark on amphibious ships as well as prepositioning ships and other strategic sealift platforms and how we tactically move ashore. Our requirement for square foot vehicle stowage on Assault Echelon amphibious ships has grown, along with the weight of the vehicles; consequently, we are working to find the right balance between protection and transportability for our future forces. Further, we are examining how tactical movement ashore (assault) times have been affected because of weight for the vertical landing and by both weight and vehicle square for surface landings.

MINE RESISTANT ALL TERRAIN VEHICLES FOR AFGHANISTAN

Question. General Conway, Mine Resistant Ambush Protected Vehicles, referred to as "MRAPs" in short, have saved thousands of lives in Iraq. To address the complex terrain in Afghanistan, the Department will purchase a lighter version of the MRAP vehicle, known as the "M-ATV". But we are hearing that the Marine Corps is opting to upgrade its MRAPs instead of purchasing the lighter M-ATV for troops deploying to Afghanistan. Can you tell us the advantages of this strategy?

Answer. We are upgrading current Mine Resistant Ambush Protected (MRAPs) vehicles with a modified independent suspension system that is being used on the highly reliable Medium Tactical Vehicle Replacement (MTVR) vehicles. This will significantly increase the vehicles' off road mobility while retaining crew survivability. The MRAP All Terrain Vehicle (M-ATV) will be used to complement the other tactical vehicles that are already in the theater of operations. We anticipate awarding M-ATV contracts by the end of June 2009.

Question. General Conway, can you assure the Committee that upgraded MRAPs will provide the same level of force protection for our troops as the newer, lighter M-ATVs?

Answer. Yes. Survivability is always a priority in our ongoing spiral development efforts. All MRAPs undergo rigorous testing and evaluation to ensure the greatest survivability capabilities are available to our forces to meet the warfighters' requirements.

Question. General Conway, the original MRAP program was managed through the Marine Corps. The M-ATV program is being managed through the Army. What caused this transition and how is it affecting the Program Office's ability to move forward on the program?

Answer. The MRAP program continues to be managed by the Marine Corps. The Office of the Secretary of Defense (OSD) determined the M-ATV is within the MRAP family of vehicles. MRAP Joint Program Office (JPO) personnel are leveraging the resources of the U.S. Army Tank-automotive and Armaments Command (TACOM) Contracting Center to conduct the competitive acquisition and award the contract.

MARINE CORPS MOVE FROM OKINAWA TO GUAM

Question. General Conway, the original plan to move Marines from Okinawa to Guam included moving 8,000 and 9,000 dependants. Are those numbers still accurate or has the size of the move been reexamined.

Answer. The relocation of Marine units to Guam alleviates growing encroachment issues on Okinawa and creates a long-term, enduring force posture in the Pacific. The Agreed Implementation Plans (AIPs) calls for approximately 8,000 Marines to relocate to Guam and approximately 10,000 Marines to remain on Okinawa.

Many things have changed since the planning and development of the 2006 Roadmap and associated AIPs. These changes have forced planners to re-evaluate what is the proper force lay down in the Pacific, specifically the appropriate array of MAGTF units to properly support the PACOM commander's operational requirements. While the Marine Corps is executing strictly toward the AIP force laydown, it looks forward to opportunities that may re-examine the force posture, such as the Quadrennial Defense Review and the Deputy Secretary of Defense Guam Oversight.

QUESTIONS SUBMITTED BY SENATOR THAD COCHRAN

AMPHIBIOUS SHIP REQUIREMENTS

Question. General Conway, based on current major contingency plans what is the requirement for amphibious ships, and how can these plans be conducted with the current number of amphibious ships?

Answer. The Marine Corps' contribution to the Nation's forcible entry requirement is a single, simultaneously-employed two Marine Expeditionary Brigade (MEB) assault capability—as part of a seabased Marine Expeditionary Force (MEF). Although not a part of the MEF Assault Echelon (AE), a third reinforcing MEB is required and will be provided through MPF(F) shipping. Each MEB AE requires seventeen amphibious warfare ships—resulting in an overall ship requirement for thirty-four amphibious warfare ships. To make thirty-four operationally available amphibious ships based on a CNO approved maintenance factor of 10 percent, four additional ships are required for an inventory of thirty-eight amphibious ships which also covers our forward presence requirement. The Navy and Marine Corps have agreed to this requirement in a January 7, 2009 letter to members of the House Appropriations Committee which also states that: "Understanding this requirement, and in light of the fiscal constraints with which the Navy is faced, the Department of the Navy will sustain a minimum of 33 total amphibious ships in the assault echelon. This 33 ship force accepts risk in the arrival of combat support and combat service support elements of the MEB, but has been adjudged to be adequate in meeting the needs of the naval service within today's fiscal limitations."

Again, this arrangement accepts some degree of risk but is feasible with the assault echelons being rapidly reinforced by Maritime Prepositioning Force Future (MPF-F).

Question. General Conway, what is the current readiness status of amphibious ships particularly with crew manning and material readiness?

Answer. This question is more appropriately aimed at the CNO and his staff to answer the details; however, I will say that amphibious class ships are among the ships with the highest Operational tempo (OPTEMPO) in the Surface Fleet.

Question. General Conway, how does the move of Marines from Okinawa to Guam change or shape the requirement for amphibious ships either in their homeport lay down and/or numbers?

Answer. The Pacific realignment will result in a disaggregation of III MEF forces on Okinawa, Guam, and Hawaii. This disaggregation creates inherent challenges in sustaining MAGTF core competencies and rapidly responding to contingencies in the theater. The realignment highlights the need for increased theater mobility, which is provided by a combination of tactical airlift, high-speed vessels, amphibious ships, black-bottom shipping (MSC), and strategic airlift. The quantity and mix of theater mobility assets, some of which may be sourced globally, will be reviewed as the force laydown, training requirements, Theater Security Cooperation plans, and OPLANS are refined as we progress with Pacific realignment planning. Currently, amphibious shipping is home stationed in Sasebo, Japan, and Honolulu, Hawaii, to support Marines on Okinawa and Hawaii, and could be used to support Marines on Guam with additional transit time. A review of amphibious shipping support for Marine forces based on Guam has not been initiated as key issues, such as force laydown and training, are still being studied within the Quadrennial Defense Review.

Question. General Conway, does the Army or Special Operations Command have any requirement for amphibious ships? If not, why not? And if yes, how are their requirements factored into the overall program?

Answer. According to our research, the U.S. Army and USSOCOM currently have no requirement for amphibious ships. The U.S. Marine Corps provides the nation's "forcible entry from the sea," it is our core competency.

Question. General Conway, we have seen amphibious ships used for non-traditional functions such as disaster relief and humanitarian assistance. What other missions or requirements exist for amphibious ships; could they be used for, mine counter measure ships, Afloat Forward Staging Bases for Special Operations Forces, Theater Security Cooperation Platforms, and Marine Air-Ground Task Force. Would these missions or requirements change the overall requirement for amphibious ships?

Answer. Broadly stated, there are three competing demands for amphibious ships. The first two, maintaining persistent forward presence and episodically aggregating sufficient numbers to deliver the assault echelon in a joint forcible entry operation, are both tied to lifting Marine air-ground task forces. The third demand is tied to key joint enablers.

—*Forward Presence.*—Amphibious forces in general, and Amphibious Ready Groups with embarked Marine Expeditionary Units (ARG/MEU) in particular, have proven themselves invaluable for regional deterrence and crisis response. In recent years amphibious ships have also demonstrated their utility for missions such as security cooperation and civil support to include humanitarian assistance and disaster relief. They allow the United States to discretely interact with partner nations without the unintended consequences often generated by a large footprint ashore in politically sensitive areas. As a result, in this era of declining overseas access the geographic combatant commanders' (GCC) have an increased demand for forward-postured amphibious forces. The cumulative GCC demand for forward-postured amphibious forces can be met with an inventory of 38 ships.

—*Assault Echelon.*—An amphibious inventory of 38 ships will also support Marine Corps forcible entry requirements. The assault echelon of a Marine Expeditionary Force can be accommodated on 34 ships. Our challenge is one of aggregating those 34 ships from an inventory of 38. Essentially, that means we can have no more than four ships—10 percent of the inventory—in maintenance at any one time and that the United States is willing to sail the remaining 34 ships away from all other global commitments.

—*Joint Enablers.*—Extant operation plans and recent experience prove the need for amphibious ships specifically dedicated to support Special Operations Forces (SOF) and Mine Countermeasure (MCM) forces. Inasmuch as SOF and MCM support are critical enablers for forcible entry, these requirements must be supported either by the acquisition of additional amphibious ships—over and above the 38 needed to satisfy Marine Corps forward presence/assault echelon requirements—or the provision of other suitable platforms.

MEDEVAC MISSION SUPPORT IN AFGHANISTAN

Question. General Conway, the issue of providing timely medical care for our service members in combat is of great concern to us all. A major contributor to being able to providing timely care is associated with having full medical evacuation capabilities in Theater. Have you seen any improvement in lowering the response time

in Afghanistan for medical evacuations? If so, do these efforts meet your expectations for providing support to the additional personnel being stationed in Afghanistan and what other improvements are planned to support the medical needs of additional ground forces?

Answer. I am very pleased with the procedures initiated by CENTCOM to monitor the Secretary of Defense's directed 60-minute MEDEVAC standard. We have to give the newly arriving forces time on the ground to become Fully Operational Capable (FOC) before improvements can be measured. When the units are declared FOC and start conducting missions, CENTCOM will analyze their progress and conduct reassessments on capabilities including MEDEVAC. I am of the belief that the initial medical and MEDEVAC forces requested by USFOR-A and CENTCOM as well as the additional Forward Surgical Teams and MEDEVAC recommended by the Joint Staff and approved by the Secretary of Defense are capable of providing care to the additional force structure and will meet the directed 60-minute MEDEVAC standard. The standard is measured from "point of injury" to "surgical intervention."

MARINE CORPS CARGO UNMANNED AIR SYSTEMS (UAS)

Question. General Conway, I have been informed that the Marine Corps is interested in an unmanned aerial system for cargo operations for troop resupply in Afghanistan and that you hope to have this capability by February of next year. Could you please discuss the Marine Corps' immediate need for this unmanned air cargo system in Afghanistan? We would also like to hear more about the requirements and potential solutions for this capability.

Answer. The objective of the Marine Corps Warfighting Lab's (MCWL) effort is to find a technology capable of removing, in whole or in part, the need to move supplies to Forward Operating Bases (FOBs) by ground transportation. The focus is "getting trucks off the road" as soon as possible in Afghanistan to reduce the vulnerability of supply lines. In general, the capability need is for an unmanned air vehicle to be able to deliver 10,000–20,000 pounds of cargo in a 24 hour period to a round-trip distance of 150 nautical miles and hover in ground effect/hover out of ground effect (HIGE/HOGE) at 12,000 feet density altitude (DA) but fly at 15,000 feet DA with a full cargo load.

In the next 6 months we hope to demonstrate currently available technologies that may be operationally relevant. We will then transition the successful technologies to the appropriate acquisition command immediately thereafter for future operational deployment. The Naval Research Enterprise is also investigating longer term technology candidates for future capabilities.

MCWL is currently in the process of conducting a source selection to select vendor(s) capable of demonstrating the capability of providing an immediate cargo unmanned aerial systems. For the demonstration, a single airframe must deliver at least 2,500 lbs of cargo in a 6 hour period to a location 75NM from the starting point (which is a representation of 10,000 lbs in a 24 hour period with a round-trip distance of 150 nautical miles), Beyond Line Of Sight (BLOS) from origination. The System shall be able to terminally control the vehicle from a destination location which is BLOS from the launch location with a remote controller. Terminal control will consist of the following options at the destination location: Deliver at programmed location, abort delivery, and return to launch location with original load. The smallest element in a cargo package shall be equivalent to at least a standard wood pallet (48 by 40 in. Stack ~ 67 in.) of cubic volume.

It is anticipated that a contract(s) will be awarded on or about 17 July 2009.

JOINT HIGH SPEED VESSEL (JHSV)

Question. General Conway, given the sea state limitations of the Joint High Speed Vessel, what is the impact or potential impact on Marine operations and training.

Answer. According to the JHSV Capability Development Document, it is designed for a speed of 35 knots in a sea state 3 (SS3) carrying the threshold payload of 600 short tons. The high speed of the vessel allows it to maneuver and change course to mitigate forecasted higher sea conditions allowing it to maintain the mission profile. The HSV-2 Swift supported humanitarian assistance operations in Beirut, Lebanon in 2006 as part of a record breaking 2-year deployment period (2005–2007) in which *Swift* successfully completed various missions in support of EUCOM, CENTCOM, PACOM, and SOUTHCOM. Further, the *WestPac Express* continues to provide critical intra-theater sealift support to III MEF, so there is no impact on our operations and training.

QUESTION SUBMITTED BY SENATOR ROBERT F. BENNETT

V-22

Question. General Conway, in your efforts to “modernize for tomorrow,” I am interested in the progress being made on a tactical vehicle that readily fits inside the V-22. What is the status of identifying and procuring an effective vehicle that meets Marine requirements? What assistance can Congress provide to ensure that our V-22 transported assault forces have the mobility that they need to carry out their mission?

Answer. The Internally Transported Vehicle (ITV) is a family of vehicles developed and procured by the Marine Corps to provide a deployed Marine Air Ground Task Force (MAGTF) with a ground vehicle that is internally transportable in the MV-22 and CV-22 tilt-rotor aircraft, CH-53, and MH-47 aircraft. The vehicle serves primarily as a high mobility weapons-capable platform to support a variety of operations (reconnaissance, raids, etc.) and to provide ground units greater mobility, thereby enhancing their mission performance and survivability. The ITV was judged Operationally Effective and Operationally Suitable during Operational Testing in early 2008, and met all Key Performance Parameters and critical requirements. Full Rate Production (FRP) for the Light Strike Variant (LSV) of the ITV was granted by the Milestone Decision Authority (MDA) on July 10, 2008.

To date a total of 21 LSVs have been fielded to the following east coast units; MarSoc (10), 2nd Marines (6), and 1/10 (5). Currently another 15 LSVs are being fielded to 1/9. New Equipment Training with 1/9 will be completed on June 25, at which point Initial Operational Capability (IOC) will have been achieved for the ITV (LSV). IOC is achieved when, “one Infantry Battalion assigned to a MEU is fully equipped with the ITV, the assigned mechanics and operators have received initial training, and sufficient repair parts are in place to support operations,” as defined by the vehicle’s requirement document. Fielding will begin to I MEF units in late September/early October with the exact date being determined at the upcoming I MEF Fielding Conference.

The goal of the fielding effort for the first year is to establish a foundation in the operating forces to be able to support East and West Coast MEU deployments, the MarSoc requirement, and 1st and 2nd Recon Battalion’s operational requirements. Fielding of LSVs will then continue to III MEF units. At this point the program is on track to purchase and field about 80–100 vehicles per year. Our current requirement (Approved Acquisition Allowance–AAO) is 729 vehicles.

I ask for your continued support for all current and future funding requests that allow us to field this vehicle to our active and reserve units as quickly as possible.

SUBCOMMITTEE RECESS

Chairman INOUE. The subcommittee will stand in recess until Thursday, June 4, and at that time we’ll hear from the Secretary of the Air Force and the Chief of Staff of the Air Force on the fiscal year 2010 budget request. With that, thank you very much.

[Whereupon, at 11:25 a.m., Tuesday, June 2, the subcommittee was recessed, to reconvene at 10:30 a.m., Thursday, June 4.]

**DEPARTMENT OF DEFENSE APPROPRIATIONS
FOR FISCAL YEAR 2010**

THURSDAY, JUNE 4, 2009

U.S. SENATE,
SUBCOMMITTEE OF THE COMMITTEE ON APPROPRIATIONS,
Washington, DC.

The subcommittee met at 10:30 a.m., in room SD-138, Dirksen Senate Office Building, Hon. Daniel K. Inouye (chairman) presiding.

Present: Senators Inouye, Dorgan, Murray, Cochran, Bond, Shelby, and Bennett.

DEPARTMENT OF DEFENSE
DEPARTMENT OF THE AIR FORCE
OFFICE OF THE SECRETARY

STATEMENTS OF:

HON. MICHAEL B. DONLEY, SECRETARY OF THE AIR FORCE
GENERAL NORTON A. SCHWARTZ, CHIEF OF STAFF, UNITED STATES AIR FORCE

OPENING STATEMENT OF CHAIRMAN DANIEL K. INOUYE

Chairman INOUYE. This morning, the subcommittee convenes to hear testimony from the Air Force on its budget request for fiscal year 2010, and I am pleased to welcome the Secretary of the Air Force, the Honorable Michael Donley, and the Chief of Staff of the Air Force, General Norton Schwartz.

Gentlemen, welcome. And I realize this is your first time here, but I can assure you that we are looking forward to working with you in the coming years because we believe that the Air Force is a very important part not just of the defense community, but of the United States.

So let me begin by commending you both for the measures taken to strengthen stewardship of the Air Force's nuclear arsenal. The fiscal year 2010 budget includes several key improvements, including an increase in personnel for the nuclear mission and the establishment of the Global Strike Command. Your leadership has been essential, and we look forward to continued progress.

For fiscal year 2010, the Air Force is requesting \$160.5 billion in the base budget and \$16 billion in the overseas contingency operations budget. This budget submission is notable in a number of ways.

First, it funds a more robust active duty end strength level of 331,000 personnel rather than continuing the drawdown that we have witnessed up until now. It is important to stabilize the Air Force manpower levels, especially now when mission demands are increasing.

More personnel will help to meet the needs of irregular warfare, aerial surveillance support, cyberspace and acquisition excellence, and in restoring the nuclear enterprise. The subcommittee will be interested in how the Air Force plans to allocate personnel across these critical missions.

It is noteworthy that this budget supports the continued emphasis on irregular warfare and building up the intelligence, surveillance, and reconnaissance assets needed in today's fight. It will increase the Predator and the Reaper unmanned aerial vehicle (UAV) coverage to 43 combat air patrols. The budget also supports the training and operation of the MC-12 Liberty ISR aircraft. The Air Force has made great strides in improving its posture in this mission area.

Third, this budget reflects the hard and controversial decisions that the Department is making on future investments. In this request, the F-22 Raptor, the C-17 airlifter, and the transformational communications satellite programs are terminated. The joint cargo aircraft program is reduced from 78 to 38 aircraft and is no longer a joint program with the Army.

The request restructures the combat air forces and retires 249 fighter aircraft. The subcommittee will be interested in understanding both the risks and benefits of these choices.

Gentlemen, I remain concerned about the aging aircraft fleet, especially the tanker fleet. The average aircraft age is now over 24 years. The average age of the KC-135 fleet is close to 50 years. The tanker aircraft must be replaced, and I have several questions on this program and many others today.

And I look forward to hearing your testimony this morning. Your full statements will be made part of the record, but first, I would like to turn it over to the vice chairman of this subcommittee, Senator Cochran of Mississippi, for any opening remarks he may wish to make.

STATEMENT OF SENATOR THAD COCHRAN

Senator COCHRAN. Mr. Chairman, it is a pleasure to work with you on this important subcommittee and to join you in welcoming our distinguished witnesses before the subcommittee today.

The Air Force is playing a unique and important role in the defense of our Nation. We respect all of you who are involved in that. We thank you for your dedicated service and bringing to the challenge the expertise and results of the training and experience you have had in the defense of our Nation.

The aircraft and forces of the Air Force have been protecting our Nation's interests in a very remarkable and praiseworthy way. We especially appreciate the dangers that are faced in Iraq, Afghanistan, and other areas around the world where the Air Force is playing a very important and active role in helping ensure that our Nation's policies succeed in those areas.

We look forward to hearing your testimony to help us determine how best to allocate the resources that are available to this subcommittee for the Air Force in carrying out your missions.

Thank you very much.

Chairman INOUE. Thank you very much.

Senator Bond.

STATEMENT OF SENATOR CHRISTOPHER S. BOND

Senator BOND. Thank you very much, Mr. Chairman.

And I join with the chairman in congratulating you on the good work you are doing to restore the reliability and assurance of our Nation's nuclear mission, and we welcome Secretary Donley. We thank both of you for your distinguished service.

Gentlemen, as you know, we have had discussions about concerns over the tactical fighter's air shortfalls and, as the chair mentioned, 24 years age on the Air Force fleet. Last year, before the Airland Subcommittee of SASC, the Air Force testified it was facing a shortfall of 800 plus aircraft Air Force wide. And the Air National Guard testified that over the next 8 to 9 years, Air Guard is facing a fighter shortfall that will result in 80 percent of the aircraft used to defend the skies of the United States, the Air Sovereignty Alert mission, being retired.

And it is clear from what the Government Accountability Office (GAO) has told us that accelerating the Joint Strike Fighter (JSF) will not prevent the fighter gap. In March of this year, GAO concluded it would cost \$33 billion to accelerate the JSF program and said, "Accelerating procurement in a cost reimbursement contract environment, where uncertainties in contract performance do not permit costs to be estimated with sufficient accuracy to use any type of fixed-price contract, places very significant financial risk on the Government."

My view, now is not the time to be placing significant financial risk on the Government, and it is never time to place the country at a security risk. But it is my view that is what the present budget is proposing.

I know a lot of people will talk about the Quadrennial Defense Review (QDR), but as in years past, we have seen that. We have got the T-shirt. I know that it will be an attempt to justify the budget reductions by saying we don't need as many fighters. It is a massive budget drill. But none of that analysis—I will review that when it comes out—will be available in time for this budget session.

So I remain convinced and we will discuss whether it is time to rethink the plan. JSF is too big to fail. So we are not going to let it go, but is it time to look at an 85 percent solution at one-half to two-thirds of the cost, giving the Air Force the proven platforms that will bridge us to the time, if and when, the JSF can complete its mission?

Thank you, Mr. Chairman.

Chairman INOUE. Thank you.

Senator Shelby.

STATEMENT OF SENATOR RICHARD C. SHELBY

Senator SHELBY. And I just want to say welcome to Secretary Donley and General Schwartz, and I look forward to their testimony. And of course, I have some questions, especially, as the chairman mentioned, in dealing with the tanker competition. And also, Mr. Secretary, with the UAVs and so forth. We will get into that after your testimony.

Thank you.

Chairman INOUE. Mr. Secretary?

SUMMARY STATEMENT OF HON. MICHAEL B. DONLEY

Mr. DONLEY. Thank you, Mr. Chairman, Senator Cochran, members of the subcommittee.

It is, indeed, a privilege to be with you today to testify on the fiscal year 2010 budget and Air Force's future plans.

It has been almost a year since General Schwartz and I took on these roles, and I will tell you that it has been both a pleasure and a privilege to work with General Schwartz in this effort. He has been an outstanding partner and wingman in our work together over the last year.

In recent months, Secretary Gates and Admiral Mullen led a constructive dialogue about necessary changes in our national defense priorities and areas of emphasis. Our discussions emphasized taking care of our most important asset, which is our people; rebalancing our capabilities to fight and win the current and most likely conflicts in front of us, while also hedging against other risks and contingencies; and reforming how and what we buy.

We have contributed our analysis and judgment to these discussions throughout. With OSD and our sister services and inter-agency partners, we have undertaken several strategic reviews of the Air Force in the last year.

AIR FORCE STRATEGIC PRIORITIES

Last fall, we refined the Air Force mission statement, articulated our five strategic priorities, and refined the core functions of the Air Force to more clearly articulate our role in the defense and national security establishment. We also made progress in areas that required focused attention in the near term, such as strengthening the Air Force's nuclear enterprise, preparing to stand up our cyber numbered air force, articulating our strategy for irregular warfare and counterinsurgency operations, consolidating our approach in the Air Force for global partnerships, and advancing stewardship of our energy program.

Our reviews were guided by the concept of strategic balance, which has several meanings for us. As Secretary Gates and Admiral Mullen have described, balance means prevailing in today's fight while also being able to respond across the spectrum of conflict to emerging hybrid threats.

Balance also means allocating investment across our 12 diverse, but complementary core functions, and balance also means organizing training and equipping across the Air Force components—active, Guard, Reserve, and our civilian workforce as well.

AIR FORCE PERSONNEL

Our budget proposal recognizes that our people are the heart and soul of America's Air Force, and without them, our organizations and equipment would simply grind to a halt. In fiscal year 2010, we are reversing previously planned reductions in Air Force active duty end strength with commensurate adjustments in the Reserve components as well. We will also grow our civilian cadre, with focused attention on the acquisition workforce.

At the same time, we will continue to reshape our skill sets, with particular emphasis on stressed career fields and missions that need our attention now, such as intelligence, surveillance, and reconnaissance (ISR); acquisition; maintenance; cyber operations; and nuclear matters.

For fiscal year 2010, we are also driving more balance into our force structure. In theater, the demand for ISR and special operations capabilities continues to increase. So we will increase unmanned aerial system combat air patrols, as the chairman mentioned, from 34 today to 43 by the end of fiscal year 2010, as well as increase our special operations forces end strength by about 550 personnel.

AIR FORCE COMBAT CAPABILITY

We also took a broader strategic look at the total combat Air Force capability, and there is a general view in the Department's leadership that the United States has enough tactical air capability. With that in mind, we determined that this was a prudent opportunity to accelerate the retirement of older aircraft, as we have done in this budget.

As a result, we will reshape the portfolio of the fighter force by retiring about 250 of our oldest tactical fighters. We will complete the production of the F-22 fighter at 187 aircraft and continue our planned modernization of the F-22 going forward. And we are readying another fifth generation fighter, the F-35 Joint Strike Fighter, to become the workhorse of our new fighter fleet in the future.

We will ensure balance for joint airlift needs by completing the C-17 production, subject to continued congressional action in that area, continuing to modernize our C-5s, reinitiating the C-130J production line, and transitioning the C-27J program office from the Army to the Air Force.

In particular, the Department made a judgment that the 316 strategic airlift tails in the program of record is adequate to meet our needs. We also conducted a business case analysis that identified alternatives to improve our current strategic airlift fleet at less cost than simply buying more C-17s. We know that is an issue with Congress, and we look forward to further discussions with you on that subject.

Our plan is to enhance the stability and remove risk in our military satellite communications (SATCOM) programs by extending our advanced extremely high frequency (AEHF) and wideband global SATCOM (WGS) inventories and continuing our partnerships with commercial providers.

While AEHF does not give us all the capabilities projected for the transformational satellite (TSAT) program, additional AEHF and WGS satellites provide additional SATCOM capability until we can gain confidence about the affordability and the requirements for TSAT-like capabilities in the future.

AIR FORCE ACQUISITION

We have also placed additional emphasis on Air Force acquisition. We recently published an acquisition improvement plan to focus our efforts in several key areas. First, revitalizing the Air Force acquisition workforce. Second, improving our requirements generation process. Third, instilling more budget and financial discipline in our work. Fourth, improving Air Force major system source selections in the Air Force. And last, establishing clear lines of authority and accountability within our acquisition organizations.

We will continue to work on these issues going forward with Secretary Gates and Dr. Carter.

Over the coming months, we will, of course, participate in several major reviews underway in the Department—the QDR, the nuclear and space posture reviews. And from these analyses, we will better understand the needs, the requirements, and available technologies for long-range strike, as well as our requirements and potential joint solutions for personnel recovery.

PREPARED STATEMENT

Mr. Chairman, stewardship of the United States Air Force is a responsibility that we take very seriously, and we know this subcommittee does as well. We thank you for your support for our airmen and for our national security in general, and we look forward to the continued support of this subcommittee and working with you in the future.

Thank you.

Chairman INOUE. I thank you very much, Mr. Secretary.

[The statement follows:]

PREPARED STATEMENT OF THE HONORABLE MICHAEL B. DONLEY AND GENERAL NORTON A. SCHWARTZ

The 2009 Air Force Posture Statement articulates our vision of an Air Force ready to fulfill the commitments of today and face the challenges of tomorrow through strong stewardship, continued precision and reliability, and dedication to persistent Global Vigilance, Reach and Power for the Nation.

INTRODUCTION

Today, the United States faces a spectrum of challenges to our national security and global interests. As an integral member of the Joint team, America's Air Force provides the critical capabilities of Global Vigilance, Global Reach, and Global Power. The U.S. Air Force is "All In" today's Joint fight. At the same time, our investments in new capabilities will ensure we are ready for tomorrow's challenges. The mission of the U.S. Air Force is to "fly, fight, and win . . . in air, space and cyberspace"—as an integral member of the Joint team that ensures our Nation's freedom and security.

A BALANCED APPROACH

Today's uncertain international security environment requires a balance-driven approach to prevail in today's operations, and prepare for tomorrow's challenges by identifying and investing in new capabilities and force structure. This balanced ap-

proach postures the Air Force to provide an array of capabilities to Combatant Commanders across the spectrum of conflict—from building partnership capacity to ensuring the readiness of strategic deterrence forces.

AIR FORCE CORE FUNCTIONS

Our Air Force's foremost responsibility is to organize, train, and equip Airmen to meet the needs of our national leadership and Combatant Commanders. Our fiscal year 2010 budget proposal reflects a commitment to the 12 Air Force Core Functions, which provide the framework for investment and training.

Air Force Core Functions

Nuclear Deterrence Operations	Special Operations
Air Superiority	Global Integrated ISR
Space Superiority	Command and Control
Cyberspace Superiority	Personnel Recovery
Global Precision Attack	Building Partnerships
Rapid Global Mobility	Agile Combat Support

The Air Force fiscal year 2010 budget proposal reflects a commitment to our Core Functions that will be informed by numerous reviews of the overall defense-planning construct. Through the Quadrennial Defense Review (QDR), the Nuclear Posture Review (NPR), the Space Posture Review (SPR) and internal mid-term reviews, we will continue to sharpen and institutionalize our Core Functions. These capabilities, combined with the extraordinary commitment and dedication of our Airmen, provide our Nation with truly exceptional air, space, and cyber power.

NUCLEAR DETERRENCE OPERATIONS

For more than 60 years, the Air Force has proudly served as stewards of a large portion of our Nation's nuclear arsenal. We operate, maintain and secure these nuclear forces to deter potential adversaries and to prevail if deterrence fails. Recent incidents and assessments have highlighted performance shortfalls, and we are diligently working to ensure the safety, security, and reliability demanded for this vital capability.

Our fiscal year 2010 budget proposal addresses many of the recommendations provided by the various assessments of the Air Force nuclear enterprise. Our overall investment in nuclear deterrence operations in fiscal year 2010 is \$4.9 billion, which includes increasing nuclear related personnel by 2,500 and adding a fourth B-52 squadron. The fiscal year 2010 budget proposal places additional emphasis on nuclear weapons security, committing \$72 million to strengthen the physical integrity of our Weapon Storage Areas.

Through a back-to-basics approach, the Air Force is re-emphasizing accountability, compliance, and precision in the nuclear enterprise. We are reorganizing our nuclear forces in a manner that reduces fragmentation of authority and establishes clear chains of supervision for nuclear sustainment, surety and operations. These changes include: (1) consolidating all nuclear sustainment matters under the Air Force Nuclear Weapons Center; (2) establishing a new Air Staff nuclear directorate responsible for policy oversight and integration of our nuclear enterprise activities; and (3) standing up Air Force Global Strike Command, which is already operating in a provisional status at an interim location. Global Strike Command will consolidate Air Force Intercontinental Ballistic Missiles and nuclear-capable bombers under a single command, and is on track to activate later this year.

AIR SUPERIORITY AND GLOBAL PRECISION ATTACK

Air Superiority and Global Precision Attack remain the foundations of our ability to deliver Global Power. In fiscal year 2010, we are investing \$21 billion into these Core Functions.

New and unprecedented challenges to our Nation's Air Superiority continue to emerge, and threaten to remove the technological advantage enjoyed by our Air Force. Our adversaries continue to invest in highly capable surface-to-air missile technology, which threatens even our most advanced combat aircraft. Likewise, emerging adversaries may now pose a significant air threat by leveraging inexpensive technology to modify existing airframes with improved radars, sensors, jammers, and weapons.

To meet these challenges and assure freedom of movement for the Joint team, the Air Force continues to invest in weapons and platforms for Global Precision Attack. The Joint Air Surface Standoff Missile—Extended Range, will enable our aircrews to attack targets precisely while negating or avoiding surface threats. Similarly, the

Laser Joint Direct Attack Munition will enhance our capability to strike moving or static targets efficiently and precisely.

The F-22 and F-35 are key components of the Air Force's future Air Superiority and Global Precision Attack Core Functions. Given their low-observable characteristics and ability to fuse information from multiple sensors—key components of their 5th Generation designs—these aircraft are far more survivable and lethal than our current 4th Generation force. While the F-35 is optimal for Global Precision Attack, it also serves as a complementary capability to the F-22, which is optimal for Air Superiority. Together, they form the backbone of a fighter force that will ensure the United States maintains a decisive edge in an increasingly lethal threat environment. We support the current investment strategy that ends F-22 production at 187 aircraft. The Air Force will invest \$4.1 billion in fiscal year 2010 to procure 10 F-35s as part of the Department of Defense's strategy to ramp up production. By accelerating the procurement ramp, we can lower unit procurement costs while also making the platform more cost competitive for our Coalition partners.

Our fiscal year 2010 budget proposal accelerates the integration of our Guard and Reserve components into new and emerging mission sets, including unmanned aerial systems, F-22 and F-35 missions. By considering Air National Guard and Air Force Reserve Command for inclusion in emerging mission areas and basing strategies, we capitalize on the experience and unique skill sets that our Air Reserve Components contribute to the Total Force.

We are also modernizing our existing bomber force to increase its effectiveness and survivability against emerging threats, while meeting the requirements of today's Joint Force Commanders. We have fielded a state-of-the-art infrared, electro-optical targeting pod on the B-1 to provide an additional, persistent sensor on the battlefield to self-target weapons, or provide real-time streaming video to ground forces. We are also modernizing our B-2 fleet by improving the radar, integrating the Link-16 data link and adding extremely high frequency satellite communication capabilities for nuclear command and control. In addition, investments in low observable maintenance improvements will decrease sustainment costs and reduce aircraft downtime. In accordance with the Secretary of Defense's budget guidance, we will not pursue the development of the Next Generation Bomber until we have a better understanding of the requirements, technologies, and concept of operations for this capability—all of which are expected to be addressed in the QDR.

Restructuring Our Combat Air Forces

This year, the Department of Defense provided guidance for the military to eliminate excessive overmatch in our tactical fighter force and consider alternatives in our capabilities. Acting on this guidance, the Air Force examined emerging, advanced threats and then analyzed our Combat Air Forces' capabilities against them. Our intent was to ensure the proper mix of platforms that meet requirements while minimizing excess inventory and deriving the most capability from our limited resources.

After a comprehensive review of alternatives, the Air Force saw an opportunity to reshape our aging fighter force via an accelerated retirement of our oldest legacy fighters. The review weighed the benefits of retiring aircraft nearing their expected service life, against near-term risk. The analysis also considered the "game-changing" capabilities of low observable platforms like the B-2, F-22, and F-35 that possess the ability to access areas defended by advanced surface-to-air missile systems.

Once the size and scope of the reduction was determined, the Air Force presented its implementation plan to the Combatant Commanders, Joint Staff and the Office of the Secretary of Defense. Accelerating the retirement of roughly 250 legacy F-15s, F-16s, and A-10s enables us to redistribute over \$3.5 billion in the next 6 years to modernize our Combat Air Forces into a smaller, but more capable force—one that is balanced across our Active and Reserve Components and meets our commitments at home and abroad. This restructuring also facilitates the movement of approximately 4,000 manpower positions that will be realigned to support growth in priority missions such as manned and unmanned aerial surveillance systems, ISR support, and the nuclear enterprise.

Our current fleet of legacy and 5th Generation aircraft represent our readiness to fulfill today's commitments, while our fiscal year 2010 budget proposal invests in a future force mix to meet tomorrow's challenges.

RAPID GLOBAL MOBILITY

Global Reach ensures our Joint team can deploy, maneuver and sustain large forces on a global scale. In Iraq and Afghanistan, Air Force air mobility assets are central to sustaining the Joint and Coalition team. On any given day, Air Force C-5s deliver life-saving Mine Resistant Ambush Protected vehicles into theater; C-17s

airdrop critical supplies to forward-based ground forces via the revolutionary GPS-aided Joint Precision Airdrop System; and C-130s provide tactical airlift to move theater-based personnel and equipment. Highly skilled aeromedical transport teams swiftly evacuate combat casualties, ensuring our wounded warriors receive the best possible medical care. And Air Force air refueling aircraft continue to play a vital, daily role in extending the range and persistence of almost all other aircraft of the Joint force. The fiscal year 2010 budget proposal reflects our commitment to sustaining and modernizing these critical national capabilities.

Replacing the aging KC-135 fleet remains the Air Force's top acquisition priority. The fiscal year 2010 budget proposal supports the release of a request for proposal in summer 2009 with a contract award early in fiscal year 2010.

The fiscal year 2010 budget proposal continues efforts for modernization and includes funding to begin the shut down of the C-17 production with a fleet of 205 aircraft. Modernization of our C-5 fleet continues through the Avionics Modernization Program and Reliability Enhancement and Re-engining Programs, and during fiscal year 2010 we will continue recapitalizing our intra-theater airlift capability by re-initiating the C-130J production line following one year procurement gap and procuring three C-130J aircraft for \$394 million.

The Air Force will also begin procuring C-27J in fiscal year 2010 to provide mission-critical/time-sensitive airlift in direct support of our Joint partners. The fiscal year 2010 budget proposal procures 8 C-27Js, as the first step toward a total procurement of 38 C-27Js. The Air Force continues to work closely with the U.S. Army to accept full management of the Joint Cargo Aircraft (JCA) program and the direct support airlift mission.

SPECIAL OPERATIONS

Air Force special operations capabilities are playing an increasingly vital role in supporting U.S. Special Operations Command (USSOCOM) and geographical Combatant Commanders. We are also responding to significant growth in the requirements for Irregular Warfare (IW) capabilities with major investments in special operations airlift, close air support and Intelligence, Surveillance and Reconnaissance (ISR).

Our fiscal year 2010 budget proposal reflects the Air Force's commitment to special operations capabilities, and includes \$862.6 million for the procurement of 4 MC-130Js and 5 CV-22s. AFSOC will expand its special operations ISR force structure by activating a squadron of MQ-9 Reapers, in addition to the already operational MQ-1 Predator squadron. Additionally, we are recapitalizing our MC-130E/P fleet with newer, more capable MC-130Js for low-level air refueling, infiltration, exfiltration and resupply of special operations forces. At the same time, we will convert 8 MC-130Ws to AC-130 gunships, and procure additional CV-22s.

GLOBAL INTEGRATED ISR

Operations in Iraq and Afghanistan have highlighted the increasing need for timely, fused data from all available sources. To meet this need, we are greatly expanding our airborne ISR force structure of manned and unmanned ISR assets. In fiscal year 2009, we will field the MC-12W to provide increased full-motion video and signals intelligence. Additionally, our fiscal year 2010 budget proposal continues major investments in unmanned aircraft, transitioning from the MQ-1 Predator to the MQ-9 Reaper, with \$489 million for 24 additional MQ-9s to increase our total UAS combat air patrols from 34 CAPs today to our goal of 50 CAPs by the end of fiscal year 2011. We are also investing \$84 million to integrate the Wide Area Airborne Surveillance (WAAS) onto existing and new MQ-9s, providing 12 times the number of streaming video spots per aircraft. Our fiscal year 2010 budget proposal also contains funding for five RQ-4 Global Hawk UAVs, which provide persistent ISR from high-altitude orbits. We are also balancing our ISR personnel requirements by re-examining our training programs for intelligence professionals, creating new duty specialty codes, and establishing trial programs to develop ISR operators.

COMMAND AND CONTROL

The Air Force has established Air and Space Operations Centers (AOCs) aligned with each geographical Combatant Commander to integrate air, space, cyber, and missile defense capabilities into Joint operations. We have also improved our Tactical Air Control System (TACS) to account for increasingly distributed air-ground operations in Iraq and Afghanistan. Our restructured Air Liaison Officer program offers these Airmen a viable career path. We are also training additional terminal air controllers and equipping them with increasingly capable, portable and flexible air strike control systems like Remote Operated Video Receiver (ROVER) version 5.

SPACE SUPERIORITY

America's ability to operate effectively across the spectrum of conflict rests heavily on our space capabilities. Recognizing this importance, our fiscal year 2010 budget proposal includes \$4.4 billion for procurement of space and related support systems.

The Joint force depends upon space capabilities provided by the Air Force, which fall into five key areas: Early Warning; Space Situational Awareness; Military Satellite Communications; Positioning, Navigation and Timing; and Weather capabilities. We will field several new satellites, including the Global Positioning System Block IIF, Advanced Extremely High Frequency (AEHF), Space Based Surveillance System (SBSS), and the Space Based Infrared System—Geostationary (SBIRS-Geo)—recapitalization programs that are important to both the United States and its Allies. The fiscal year 2010 budget proposal discontinues the Transformational Satellite (TSAT) program and supports procurement of additional AEHF and Wideband Global SATCOM (WGS) satellites.

CYBERSPACE SUPERIORITY

Operating within the cyber domain has become an increasingly critical requirement for our networked force. In order to develop and institutionalize cyberspace capabilities, and to better integrate them into the Joint cyberspace structure, we are consolidating many Air Force cyberspace operations into a new 24th Air Force under Air Force Space Command. The Air Force is firmly committed to developing the necessary capabilities to defend the cyber domain, and our fiscal year 2010 budget proposal includes \$2.3 billion to grow this important Core Function.

PERSONNEL RECOVERY

Personnel Recovery (PR) remains an imperative, fulfilling our promise to never leave an American behind. Air Force PR forces are fully engaged in Iraq and Afghanistan, accomplishing crucial missions that include command and control, intelligence, CSAR, convoy support, hostage recovery, and reintegration.

The fiscal year 2010 budget proposal terminates the current CSAR-X program to allow for additional discussion on platform requirements and quantities across the Joint force. We will continue to sustain our HH-60 helicopter fleet, while exploring Joint solutions to ensure sufficient PR capabilities in the coming years. We are continuing to extend our current capabilities by recapitalizing our HC-130P/N fleet with newer, more capable HC-130Js to provide low-level air refueling, infiltration, exfiltration, and resupply of CSAR forces. In fiscal year 2010, we will invest \$605 million to procure an additional five HC-130Js.

BUILDING PARTNERSHIPS

The Air Force continues to seek opportunities to develop our partnerships around the world, and to enhance our long-term capabilities through security cooperation. For example, in the Central Command AOR, deployed Airmen are working with our Afghan and Iraqi partners to build a new Afghan National Army Air Corps and the Iraqi Air Force. We are also working to further partnerships with more established allies, with programs like the Joint Strike Fighter, where our allies have committed \$4.5 billion in research and development funding. Australia's commitment to fund a communications satellite in the WGS constellation is another example of the value and synergy of lasting partnerships.

In the recently released Global Partnership Strategy, we outlined a path to cultivate these key partnerships, nurturing the global relations, fortifying our geographic access, safety and security around the world. The strategy seeks to develop partners who are able to defend their respective territories while ensuring the interoperability and integration necessary for Coalition operations.

AGILE COMBAT SUPPORT

Underpinning the work of all Air Force Core Functions are the capabilities included in Agile Combat Support. As part of our fiscal year 2010 budget proposal initiatives, Agile Combat Support accounts for efforts affecting our entire Air Force, from the development and training of our Airmen to revitalizing our processes in the acquisition enterprise. Agile Combat Support reflects a large portion of the Air Force budget proposal, totaling approximately \$42 billion.

Developing and Caring for Airmen and Their Families

The Air Force remains committed to recruiting and retaining the world's highest quality force, while meeting the needs of their families. Our fiscal year 2010 budget proposal enables us to recruit, train, educate, and retain the right number and mix

of personnel, and to provide Quality of Service worthy of our Airmen's commitment to serve in the Armed Forces of the United States and supports an end strength of 331,700 active duty personnel.

Sharpening Our Skills

Our fiscal year 2010 budget proposal enables us to train Airmen to fulfill both our Core Functions and the Combatant Commander's requirements. These changes span the vast array of skill sets, from improving language and cultural instruction to accelerated training for network operators. In fiscal year 2010, we will also enhance foundational training received by all enlisted personnel entering the Air Force by constructing a \$32 million state-of-the-art training facility at Lackland Air Force Base.

Quality of Service

The Air Force leadership is committed not only to the quality of life of our Airmen and families, but also to their Quality of Service—ensuring each Airman is able to perform consistently meaningful work and make a daily impact on the Air Force mission.

We also understand the burdens placed on the families of our Airmen. To meet the needs of our Airmen and their families, our fiscal year 2010 budget proposal funds a range of needed Quality of Life initiatives, including expanded legal assistance, advanced educational opportunities and new family housing. For example, our fiscal year 2010 budget proposal invests \$20 million to build two new Child Development Centers, as well as \$66 million to improve and modernize military family housing overseas. The Air Force is also continuing to execute its Family Housing Master Plan, which synchronizes the military construction, operations and maintenance, and privatization efforts necessary to improve our family housing. By fiscal year 2010, we will have all the funds necessary to award the privatization and MILCON projects needed to eliminate all of our inadequate homes, both in the United States and abroad—with all projects scheduled to be completed by fiscal year 2015. To this end, we are on track to award contracts to privatize 100 percent of Military Family Housing in the CONUS, Hawaii, Alaska, and Guam by the end of fiscal year 2010. For Airmen concerned about foreclosure, we provide assistance at the Airmen and Family Readiness Center at each Air Force installation. Additionally, we are working with the Department of Defense as it expands the Homeowners Assistance Program to wounded warriors/civilians, surviving spouses, and eligible military members affected by permanent changes of station.

Shaping the Force

America's Air Force draws its strength from its outstanding Airmen, with over 660,000 members of our Regular, Reserve, Guard, and Civilian personnel dedicated to the mission of the Air Force. In accordance with the Secretary of Defense's guidance, we will halt active duty manpower reductions at 331,700 for fiscal year 2010. We will also make commensurate adjustments in the Reserve Components, with 69,500 Airmen in the Air Force Reserve and 106,700 Airmen in the Air National Guard. We will also grow our Civilian cadre to 179,152, which includes 4,200 contractor-to-civilian conversions.

Retaining quality Airmen with critical skill sets remains a top priority. For fiscal year 2010, we have proposed \$641.4 million for retention bonuses and recruiting, which includes a \$88.3 million increase for recruiting and retaining health professionals. In addition, we will retrain Airmen to fill undermanned career fields to balance and shape our force in accordance with emerging requirements. Further efforts to shape our force will also include diversity initiatives designed to leverage the unique qualities of all Airmen to achieve mission excellence.

Warrior Care

As part of our commitment to Airmen, we, in collaboration with the rest of the Department of Defense, are strengthening our focus on wounded warrior care. The importance of ensuring that our wounded warriors receive the service and support they need throughout the recovery process cannot be overstated. Through specific budget proposal items, such as increased funding to bolster the size of our Recovery Care Coordinators cadre, our wounded care programs will continue to provide our Airmen the best medical and professional support possible.

Other advances in wounded warrior care are also underway including work with Interagency and local partners to create the necessary support networks to ensure success in continued military service or in the transition to civilian life. We are also reinforcing our commitment to our Air Force wounded warrior families through support programs specifically designed to help allay their burdens and honor their sacrifices.

Recapturing Acquisition Excellence

To most effectively meet the demands of our warfighters, the Air Force has made Recapturing Acquisition Excellence a top priority. We recognize the profound importance of this capability, which enables us to acquire and recapitalize platforms that provide Global Vigilance, Reach, and Power. As stewards of the taxpayer's resources, the Air Force will solidify an Acquisition system that delivers the right capabilities to the warfighter in the field—on-time and within budget.

To accomplish this we have published an Acquisition Improvement Plan (AIP) that outlines the steps we will take to improve Air Force Acquisition, informed by a series of internal and external reviews. This plan focuses on five initiatives that: revitalize the Air Force acquisition workforce; improve the requirements generation process; instill budget and financial discipline; improve Air Force major systems source selection; and establish clear lines of authority and accountability within acquisition organizations.

Through this plan, the Air Force will focus on better developing our acquisition workforce to ensure that it is appropriately sized to perform essential, inherently governmental functions and flexible enough to meet continuously evolving demands. We will also work to develop requirements that meet the users' needs while, at the same time, ensuring that they can be incorporated into effective acquisition strategies that maximize competition and allow for a fair and open source selection process.

Our reviews also emphasized that establishing adequate and stable budgets continues to be critical for program success. Therefore, the AIP emphasizes realistic budgeting based on comprehensive program cost estimates. Once budget baselines are established, achieving program stability and cost control will be given the same priority as technical performance and schedule.

We also found some weaknesses in our procedures for large system acquisition source selections and shortages in the skill sets required to conduct major source selections. So we are going back to the basics; building processes to ensure that our personnel have the experience and training required to conduct source selections and, where necessary, revising our processes and policies and increasing our use of multi-functional independent review teams (MIRTs). We are also reassessing our Program Executive Officer (PEO) and wing/group/squadron organizations to determine if they are properly structured, and identifying specific actions that could be taken to improve them.

READINESS AND RESOURCING

In the past year, we have continued to see stresses on our Air Force, both in our people and in our platforms. The Air force has conducted nearly 61,000 sorties in Operation Iraqi Freedom and over 37,000 sorties supporting Operation Enduring Freedom, delivering over 2 million passengers and 700,000 tons of cargo. In doing so, Airmen averaged nearly 265 sorties per day. Tens of thousands of America's Airmen are deployed to locations across the globe, including 63 locations in the Middle East. To support the efforts of our Airmen and provide for the recruiting and retention of the highest quality Air Force, our fiscal year 2010 budget proposal includes \$28.6 billion in Military Personnel funding. It provides for an across the board 2.9 percent pay increase, a Basic Allowance for Housing increase of 5.6 percent—resulting in zero out-of-pocket housing expenses for our Airmen—and a Basic Allowance for Subsistence increase of 5 percent. Additionally it halts the end strength draw-down which allows for rebalancing of the total force to cover new and emerging missions and stabilizes the active component end strength at 331,700; Reserve Component end strength at 69,500 Airmen and Air National Guard end strength at 106,700 Airmen. It also funds recruiting and retention bonuses targeted at critical wartime skills, including key specialties such as command and control, public affairs, contracting, pararescue, security forces, civil engineering, explosive ordnance disposal, and special investigations.

This high operations tempo requires focused attention on readiness. We use aircraft availability as our enterprise-level metric for monitoring fleet health, and the fiscal year 2010 budget proposal provides \$43.4 billion in Operations and Maintenance funding, a \$1.3 billion increase over our fiscal year 2009 appropriation, to mitigate the stresses of continuous combat operations on our aircraft. The fiscal year 2010 Operations and Maintenance appropriation funds pay and benefits for 179,000 civilian personnel, including 4,200 contractor to civilian conversions, an increase of 200 civilian acquisition professionals and a 2 percent pay raise. It fully funds 1.4 million flying hours, produces 1,200 pilots and sustains over 5,400 aircraft while accelerating the retirement of roughly 250 aged aircraft, producing a smaller, more capable fighting force.

Our aging air and space fleet requires focused attention. For example, we have grounded our F-15, F-16, A-10, C-130, and T-6 fleets for limited periods during the past 2 years. The skill and determination of our maintainers have ensured that we return aircraft to service as quickly as possible, but 2 percent of the fleet remains grounded and many aircraft fly restricted profiles. To ensure stable aircraft availability and mission capable rates, we continue to integrate Fleet Viability Boards into our normal life-cycle sustainment processes and strengthen centralized asset management.

Additionally, in fiscal year 2010 O&M funds will be used to rebuild the nuclear infrastructure by fortifying operations, developing people and sustaining 76 B-52s for global strike capability. The AF is also increasing MQ-1 and MQ-9 ISR capability to 43 unmanned Command Air Patrols. The O&M budget request honors the AF commitment to our Airmen and their families by increasing child care availability and special programs for children of deployed parents, providing for both legal assistance and advanced educational opportunities. Dollars are also committed to dormitory initiatives, unaccompanied housing, active Warfighter/Family Support Centers and Fitness Centers while still providing for the operating expenses of 83 major installations including two space lift ranges.

Our \$19.4 billion fiscal year 2010 Budget proposal for Research, Development, Test and Evaluation (RDT&E) is an increase of \$600 million from fiscal year 2009. This request funds requirements for next generation weapons and platforms by maturing technologies essential to equipping our Nation to defeat near-term and forecasted threats. We continue to develop and invest in future systems such as the KC-X Tanker program, F-35 Joint Strike Fighter, and the next enhancement of the Global Positioning System. Science and technology efforts advance propulsion, space-based airborne and ground sensors, directed energy, and command and control for both air and space. Modernizing our current fleet initiatives will provide upgrades to legacy fighters, bombers, strategic radar, and mobility requirements. Systems and technologies designed to improve space situational awareness are also critical elements of this Budget Request. Additionally we are rebalancing the portfolio towards procurement of proven and multi-role platforms.

We are committed to supporting today's warfighter while building tomorrow's weapon systems capability. The fiscal year 2010 procurement budget request provides \$21.7 billion to deliver immediate and future capabilities through investments made across four specific procurement appropriations: aircraft, missiles, ammunition, and other. The fiscal year 2010 Budget Request supports the Irregular Warfare Mission by increasing ISR platforms while modifying the existing fleet, provides joint warfighter support funding and balances investment in advanced aircraft platforms and legacy aircraft modifications. These funds will allow for the acquisition and modification of manned and unmanned aircraft, missiles, munitions, vehicles, electronic and telecommunications equipment, satellites and launch vehicles, and support equipment.

Funding critical infrastructure projects while meeting the needs of the Air Family are critical to our mission. The \$2.4 billion budget request for military construction, military family housing and base realignment and closure supports a \$300 million increase in military construction from fiscal year 2009. Projects will be focused on supporting the rebalance of AF and DOD priorities. Additionally the budget request continues our emphasis on providing quality housing for Airmen and their families. Finally, the AF is on target to deliver 17 BRAC 2005 projects on time while continuing the environmental clean-up of legacy BRAC locations.

To ensure proper stewardship of our resourcing, we have designated a Deputy, Chief Management Officer (DCMO) in line with the Department of Defense Strategic Management Plan. The DCMO is responsible for continuing our momentum in refining internal processes for reducing workloads or eliminating unnecessary work. Through a culture of continuous improvement, we are further improving warfighter effectiveness through integrated processes and systems, process improvement, and technology investments aligned with our priorities.

SUMMARY

We believe the Air Force's total proposed fiscal year 2010 budget of \$160.5 billion—which includes \$115.6 billion for Air Force managed programs, \$28.9 billion in other funded programs such as the National Foreign Intelligence, Special Operation Forces, and the Defense Health Programs, and \$16 billion in Overseas Contingency Operations provides the balance necessary to ensure support of today's commitments, while posturing the Air Force for success against tomorrow's challenges.

Chairman INOUE. Now may I call upon General Schwartz?

SUMMARY STATEMENT OF GENERAL NORTON A. SCHWARTZ

General SCHWARTZ. Mr. Chairman, Senator Cochran, and other members of the subcommittee, I am proud to be here with Secretary Donley, representing your Air Force.

AIR FORCE CORE VALUES

The United States Air Force is committed to effective stewardship of the resources the American people place in our trust, a commitment founded on our core values of integrity first, service before self, and excellence in all we do. Guided by our core values, American airmen are all-in, working courageously every day with precision and reliability.

I recently had a chance to take a trip and visit with some of our airmen performing at several locations around the world, and they are providing game-changing capabilities for the combatant commanders in the air and on the ground.

Last year, American airmen conducted 61,000 sorties in Operation Iraqi Freedom (OIF), some 37,000 sorties in Operation Enduring Freedom (OEF), and that is about 265 sorties a day. Airmen also serve in convoys and in coalition operations centers and deliver 2 million passengers and some 700,000 tons of cargo in the United States Central Command (USCENTCOM) area of responsibility.

And dedicated airmen directly support USCENTCOM operations from right here in the United States by providing command and control of unmanned aerial systems, while our nuclear operations professionals support the umbrella of deterrence for the Nation and our allies across the globe. And our space professionals are providing truly amazing capabilities, ranging from early warning to precise global positioning navigation and timing.

BALANCING AIR FORCE PRIORITIES TO MEET CHALLENGES

Through Secretary Donley's guidance and his leadership, we have set the course to provide even greater capabilities for America and to balance our priorities across and to meet the spectrum of challenges. The top priority is to reinvigorate the nuclear enterprise as outlined in our nuclear roadmap.

We are fielding capabilities that allow us to innovate partnerships with joint and coalition teammates to win today's fight by expanding intelligence, surveillance, and reconnaissance with the procurement of 24 MQ-9 Reaper unmanned aerial systems.

And at the same time, we will continue to support our most precious asset, our people. We are focused on providing programs that develop and care for our airmen and their families with world-class quality of service and honor our commitments that we all have made to our wounded warriors.

Part of ensuring support for our airmen means providing the tools they need to do their jobs effectively. Therefore, we are modernizing our air and space inventories, organizations, and training with the right, if difficult, choices.

In addition to the programs that Secretary Donley just mentioned, we are committed to providing a robust air refueling capability. We also intend to increase efficiency by retiring aging air-

craft, and we will complete production of the F-22 at 187 aircraft and the C-17 at 205 aircraft, subject to congressional approval.

In recent testimony, Admiral Mullen stated that we are what we buy. Following his lead, we intend to maintain stewardship of America's resources for our warfighters in the field and our taxpayers at home by recapturing acquisition excellence and fielding the right capabilities for our Nation on time and within budget.

Mr. Chairman, with our core values guiding us, the Air Force will continue to provide the best military advice and stewardship, delivering global vigilance, reach, and power for America.

Thank you for your continued support of the United States Air Force, and particularly for our airmen and their families.

Sir, I look forward to your questions.

Chairman INOUE. I thank you very much.

As both of you are well aware, this subcommittee has been deeply involved in recent weeks in what we call the supplemental appropriations process. It seems likely that this week, we will close the shop and sign the bill. And hopefully, we will have this matter sent to the White House.

In all likelihood, this measure will include eight additional C-17s. It will have five additional C-130s and several other items. But I will leave those matters up to my colleagues who are experts in this area. But I would like to touch upon other items that may not be touched upon by my colleagues.

IRREGULAR WARFARE

Secretary Gates has been speaking of irregular warfare as being just as important as traditional warfare. And in your proposal, you have requested funds to build this capability to carry out your mission in this irregular warfare.

For the record, because many of my colleagues who are not on this subcommittee may not be familiar with what irregular warfare is all about, can you tell us what it is? And second, how you hope to build up the capability to involve yourself in this? General?

General SCHWARTZ. Mr. Chairman, irregular warfare is—I would describe it as something different than the traditional confrontation of major maneuver units on the battlefield.

It is a distributed battle. It involves high concentrations of civilian populations. It involves having to exert governance and control in the battlespace in a way that might not typically be the case in more conventional employment of our forces. And significantly, I think it requires a level of precision that perhaps is, again, not as needed in sort of traditional force-on-force engagements.

Now our basic approach to this is, again, not just for the Air Force, but rather recognition that this kind of employment requires a joint team that is very well integrated and can employ forces across the spectrum.

So that includes, for us, things all the way from lift and transportation to strike, very precision strike, and just as importantly as intelligence, surveillance, and reconnaissance capability because that is—intelligence is a key factor in success in this domain. And likewise, a whole range of skills that are required to build partner capacity.

So, for example, while the traditional aspect of training others depend on aircrew skills, it is much, much broader than that now and includes how do you run an airfield? How do you operate a safety shop? How do you maintain a runway? How do you maintain a budget?

These are things that are necessary for nascent air forces to achieve a capability to serve their nations well and effectively. And typically, they are not as sophisticated as we are and certainly don't have the benefit of the resources that you all put at our disposal.

And so, it means in terms of equipage perhaps having things that allow us to train others on that is something that they might be able to employ. It is not so sophisticated it can't be maintained or so sophisticated that perhaps it is beyond the natural ability of a growing, maturing Air Force.

I guess I would finally conclude, sir, by indicating that this is an area that requires skills that, as I was growing up, were not sufficiently appreciated—language and the capacity to interact with other cultures and appreciate that how we sit, how we present ourselves, how we interact with elders matters a lot in terms of our ultimate success. That is how I would capture it for you, sir.

Chairman INOUE. Mr. Secretary, do you have anything to add to that?

EFFECTIVE USE OF FORCES ACROSS THE SPECTRUM OF CONFLICT

Mr. DONLEY. I think the chief has captured it very well. I would also add I think, as we have approached our role in helping to train the emerging Afghan and Iraqi air forces, we are learning some good lessons along the way.

I think the Secretary's challenge to us is not just to improve our irregular warfare (IW) capability in specialized areas that we are all familiar with in the special operations forces (SOF). And we have additional resources put against our SOF forces, additional investments that are well understood by the subcommittee. The CV-22 is coming online, MC-130s. These kinds of capabilities will continue to be improved.

But what the Secretary is asking us to do is to think about how to use our general purpose forces more effectively in the irregular warfare part of the conflict spectrum. He has not asked us to fundamentally overhaul the capabilities of the United States Air Force or the other services, which are required to meet the full range of potential contingencies across the conflict spectrum, all the way from irregular, all the way up through high-intensity operations. And of course, we have the nuclear deterrent mission as well in the Air Force.

He is asking us to figure out ways to use the bulk of our forces, which are deployed across this conflict spectrum, figure out ways to be able to tailor those capabilities more effectively for IW work. So, as the chief has, I think, laid out pretty well, our issues are focused on how do we use our education and training system and our support for other nations to build up their capabilities more effectively?

And we are seeing that come through in a couple of different areas. One is, for example, the JCA, the C-27, which our Depart-

ment has been working on. That mission, as you know, is transferring from the Army to the Air Force.

But a light mobility aircraft such as this is of interest and is of use potentially to partners like Iraq and Afghanistan that may or may not have a C-130 kind of capability. Or if they do, it will be fairly circumscribed. They certainly won't be in the C-17 business, for example.

So we think having a capability like this in the United States Air Force makes us better teachers for potential partners who are not going to be buying JSFs or C-17s, the high-end capabilities that we will produce. So we see that in mobility, in the C-27. We see it also in the intelligence, surveillance, and reconnaissance (ISR) platforms, in the MC-12 capability that we are building that might, in the future, have some applicability.

That small, twin-engine airframe has applicability for partners who cannot afford and will not be in the unmanned aerial systems business and will not have thousands of personnel in their intelligence, surveillance, and reconnaissance systems. But, yes, they may be able to operate that MC-12-like capability going forward to give them an ISR capability.

TRAINING AIRCRAFT

And the third area is in our trainers, which, consistent with past practice, are often able to evolve from a training aircraft to a light attack aircraft, and there are different options for how to do this.

So certainly in our T-6 trainer programs, there are opportunities going forward to make T-6 and/or Super Tucano or propeller-driven airplanes of this class into light attack aircraft that could be utilized by partners again who are not going to be able to and do not have a need to operate at that higher end of the conflict spectrum. They can't afford to do that.

So having these capabilities inside our force structure we think will help us be better teachers and better partners and help us build up the security capabilities of partners facing counterterrorist operations, counterinsurgency operations whom we have an interest in building up to be not only better partners for us internationally, but to be good regional partners and able to take care of their own neighborhoods.

I apologize for the lengthy answer, but this is a good question.

24TH AIR FORCE MISSION

Chairman INOUE. Well, the Secretary said, it is just as important as traditional warfare. Your 24th Air Force is going to be a focal point for cyber warfare. Can you tell us what you have in mind to carry out this mission, Mr. Secretary?

Mr. DONLEY. Well, sir, I will let the chief discuss it in more detail, but in general, we have information operation wings and network warfare wings and network operations capabilities that are responsible for taking care of Air Force networks, for defending them against cyber threats, which are growing and are at increasing risk. And so, we are growing this capability in the Air Force.

We made a decision last fall to put those capabilities under a numbered Air Force, which is our operational level inside the Air Force, to more effectively manage and oversee this work.

Chairman INOUE. General?

General SCHWARTZ. Mr. Chairman, just to emphasize, the thrust here is on two basic themes within what really is emerging as a contested domain. And that is, one, as the Secretary mentioned, to defend ourselves, to defend our nets because, increasingly, these networks are not just administrative conveniences, but they are, in fact, the way that we bring the integration of the magnitude of all of our capabilities to bear and command and control them in real time.

So defending our nets is vital to our combat capability, and that is a major function for the 24th Air Force. As well, there are more offensive kinds of capabilities here. For example, one can envision that it might be prudent to disable an integrated air defense array that we might want to penetrate by use of cyber rather than kinetic means, or some mix of the two. And advancing our capabilities in this regard will also be within the portfolio of the 24th Air Force.

I would conclude, sir, by indicating that, as you know, the President announced a cyber initiative last week. As part of that, there will likely be an organizational realignment within the Department of Defense. And the 24th will be the Air Force contribution to that larger enterprise for the entire Department.

Chairman INOUE. Thank you.

Senator Cochran.

AIR FORCE NONTRADITIONAL SUPPORT TO ARMY AND COALITION
FORCES

Senator COCHRAN. Mr. Chairman, thank you.

General Schwartz, I understand that the Air Force has established as one of its top priorities greater support for the Army and coalition forces overseas in nontraditional Air Force missions on the ground. Could you give us some examples of this activity and the impact that that may be having in terms of your overall end strength?

Is it going to require you to reorganize or ask for more authority from the Congress to continue to carry out this mission?

General SCHWARTZ. Sir, the proposal, which is embedded within this fiscal year 2010 program proposal at 331,700 active duty end strength, is where we need to be, and I don't see us climbing much higher than that, if at all.

With regard to the so-called nontraditional tasks, our sense is and the leadership of our Air Force acknowledges, recognizes the country is at war, and that there are needs at this time that need to be fulfilled. They are requirements that the joint team needs to have accomplished.

And if your Air Force can do this, if we can make a contribution, that is what we are going to do. We will do whatever is required, wherever it is needed, for however long it is needed, provided that our youngsters are properly trained. That is our obligation.

And so, sir, we have folks that are doing convoy duty in Iraq. I visited with some at Arifjan a couple of months ago, and believe me, these folks do not see what they are doing as peripheral or not worthy. They know very well how important the work they are doing is.

And that is true whether it is medics or transportation folks or security forces operating outside the fence, whatever the discipline. It is needed. It is part of the joint effort, and our Air Force is proud to do it, sir.

Senator COCHRAN. Well, I compliment you for the initiative and showing flexibility of responding to something that is clearly needed and in our national interest. And we hope we will be able to provide the resources that you need to carry out these important activities.

HIRING OF GOVERNMENT CIVILIANS TO REPLACE CONTRACTORS

Secretary Donley, I understand the Air Force intends to reduce its reliance on contracted workers by hiring several thousand Government civilians to replace contractors. Has the Air Force identified what positions or functions it intends to resource from within your organization, and what savings, if any, do you anticipate through this initiative?

Mr. DONLEY. Sir, this is a DOD wide initiative, and a very important one. I believe there is a strong consensus in the Department and I believe also here in Congress that the reliance of the Department on contractors to do some work that was previously done within the Government has probably run its course, and the pendulum is starting to swing back the other way.

We are much more sensitized at this point to the need to bring back into the organic Government capability some of those functions that have been contracted out. And our target for fiscal year 2010, as I recall it, is about 4,000 of these conversions.

Almost about 2,000, about one-half of that is targeted for us on our acquisition workforce and growing our acquisition workforce in some critical areas that need reinforcement—contracting, systems engineering, and cost estimating. These are examples of capabilities we plan to beef up by relying less on contractor support and bringing those capabilities in-house.

Senator COCHRAN. As you know, we have a very large training facility on the Mississippi gulf coast at Keesler Air Force Base and very proud of the role that they have played over the years in our national defense. They are currently hosting the 81st Training Wing. I think it is the largest technical training unit and is a so-called “center of excellence” for computer and electronics training.

Anyway, I am going to put in the record some facts and figures that I understand are currently reflected in the hiring and the activities there. But they are being tasked now with developing infrastructure capacity to potentially host a new mission, the undergraduate cyber training mission for the Air Force.

COMMUNICATIONS AND ELECTRONICS CENTER OF EXCELLENCE

I wonder, General, if you have taken a role in this or have any information that you can give us about this possibility of a new center of excellence for electronics and computer-related training at Keesler?

General SCHWARTZ. Sir, as you know, Keesler Air Force Base has been for decades the center of excellence for training our entry-level communications and electronics specialists. And a natural extension of that could very well be the training of the workforce that

24th Air Force will employ in this increasingly digital and cyber era.

That decision has not been formally taken where that element will go, but clearly, Keesler Air Force Base is a very strong candidate, and we will have a range of courses from entry level on the cyber side to, obviously, what we call 5 and 7 level courses, increasingly more demanding courses, so that our people have the breadth and background required to do this work.

That is an important piece of the 24th, too. My focus naturally was on operations, but you have to make sure that the workforce has the skills necessary to do this. And that is the task that we are focused on, sir.

Senator COCHRAN. Well, thank you very much. And thank you for your excellent leadership in the roles that you have. We appreciate it.

Chairman INOUE. Thank you.

Senator Bond.

NEXT GENERATION FIGHTER AIRCRAFT

Senator BOND. Thank you very much, Mr. Chairman.

As I mentioned earlier, General Schwartz, I have some very real concerns about the intermediate term plans and, to be honest, what I see as a lack of intermediate plans.

I said that right now we have available proven platforms that have about an 85 percent solution. They are not fifth generation, but they are 4.8, 4.9, and you, yourself, mentioned the ability of externalities to enable some of those fourth generations to do things that one would have expected we could only achieve with the fifth generation. We won't go into that here, but we have discussed that previously.

And so, I am asking if you and the Secretary would be willing to take a look at the outstanding shortfall in the Air National Guard and the Air Sovereignty Alert mission, as well as the other needs in the Air Force? To determine whether there are fourth-plus generations of planes that will be needed that are affordable and that will be available unless and until the JSF or the F-35 is able to get online, which, at this point, having only completed, as I understand, 2 percent of its flight tests, may be some time.

General SCHWARTZ. Senator, as we have exchanged in the past, there is nothing off the table. I certainly am willing to revisit the formula and our positions that we have developed, as new information comes in. It would be foolish to do otherwise. And in fact, we met as recently as yesterday on this issue with Lieutenant General Harry (Bud) Wyatt from the Air National Guard and others.

Senator BOND. I understand. I am well aware of that, well aware of those discussions. I am not going to bring out the chart or anything like that because I know the discussions.

General SCHWARTZ. Right. Yes, sir. But I think that is what I would like to do, it is still my view that the high confidence path for us is to make the leap to the F-35. That is—it will populate the preponderance of our force as we go forward.

And the vital thing here is that in order for the F-35 to do the work that is required not just for us, but for the Marine Corps, for the Navy, and importantly, international partners, the F-35 needs

to be produced at rates which will help us manage our fleet aging issue that you mentioned, not less than 80 and probably higher, maybe as high as 110 a year.

And the other not insignificant benefit is to keep the average unit cost down for F-35 so that it can compete internationally.

Senator BOND. As we know, it is already—our international partners have already made the decision. The other broader question that needs to be considered is the aircraft industrial base.

Earlier this week, Secretary Mabus said they need to maintain a competitive shipbuilding base. Right now, we know we have gone from five or six primary aircraft producers down to two. And this budget annihilates one of those two. If this budget were carried out, we would be down to one.

And quite frankly, I ask you to look at the performance, the timeliness, the performance and the cost to see whether you would be comfortable going down to one, and I think there is a very good argument not to go down to one. And I just ask you to look at that.

General SCHWARTZ. You have my commitment to do so, sir.

NEXT-GENERATION BOMBER

Senator BOND. Next-generation bomber is part of that. Actually, the next-generation bomber and the sixth generation fighter have to be competed. They have to bring in these others, and the next-generation bomber was designed to force our adversaries to invest in their own defensive weapons.

Current bombers are having increasing access challenges. The warfighters analysis of alternatives completed in 2006 said that they were very comfortable with the NGB. The Center for Strategic and Budgetary Analysis replied to a question on NGB saying we have studied the NGB issue to death. The need, the requirement, and the technology are in hand and reasonably well understand.

And I believe Secretary Gates last week said, "My personal view is that we probably do need a follow-on bomber."

I would ask you, Mr. Secretary and General, whether it is time to be moving forward, looking at the industrial base as well as the need for the NGB?

Mr. DONLEY. Well, Senator, I think there is pretty good consensus that our national defense capabilities need to include more long-range strike and that we need to start modernizing that part of our force structure.

My sense is that the Secretary's decision in this regard earlier this year was based on the fact that we did not quite have all of the parameters of this capability locked down. I will let the chief talk to those in more detail.

So we made a decision to cancel the program that we had laid in. I do think we will need to return to this issue in the QDR. I do think there needs to be a good, thorough discussion about the attributes of the long-range strike capability we need. Its relationship to the Nuclear Posture Review is going to be very important. Obviously, that had not played out yet earlier this year.

So I think the Secretary, as he has indicated, will be open to further discussion.

RETIRING OBSOLESCEMENT AIRCRAFT

Senator BOND. Well, we will look forward to discussing that with you. I won't take up the time of my colleagues here.

One final question. You are talking about the C-5. General Schwartz, you mentioned retiring obsolescent aircraft. I know you are constrained by congressional mandate not to retire those C-5s, some of which, not all of which, may be a very uneconomical way. Modernization isn't going to cut the mustard.

Should we be revisiting that to give the Air Force more flexibility to save costs by retiring inefficient, outmoded aircraft that will not meet the current needs so you can put it into other areas?

General SCHWARTZ. Senator Bond, too much aluminum is almost as bad as not enough. And as the Secretary indicated earlier, 316 tails is about the sweet spot right now. And if it is the decision to have the Air Force take on additional C-17s, it makes sense to begin to alter the fleet mix in a way that maintains that top line. So, yes, retiring older, less reliable C-5As certainly makes sense in the context if we go above 205 C-17s.

And sir, if I may take one minute perhaps of your privilege just to address the bomber briefly, your earlier question? This is important. Long-range strike is an essential capability for the Nation.

As the Secretary indicated, we weren't quite together with the Secretary of Defense on how we define this thing. What is the range? What is the payload? Is it supersonic? Is it subsonic? Is it manned? Is it unmanned? Is it nuclear, non-nuclear? Is it low observable, very low observable? These are the parameters we need to get together with the Secretary on.

There is an unfunded request that we have come forward with that addresses this to keep a concept development activity going so that we can answer these questions, as well as to keep certain technology efforts underway that apply regardless of how we define the platform. These are antennas, low observable antennas. These are data links. These are radars. Stuff like that.

Senator BOND. These have application to others across the fleet, not just long strike?

General SCHWARTZ. They do. Yes, sir. Thank you, sir.

Senator BOND. Thank you very much.

Thank you, Mr. Chairman.

Chairman INOUE. Thank you.

Senator Shelby.

Senator SHELBY. Thank you, Mr. Chairman.

TANKER ACQUISITION

It has been my long-held belief that our military should procure the most capable tanker possible for our airmen using a fair, open, and transparent acquisition process. In separate discussions with both Defense Secretary Robert Gates and Acquisition Chief Dr. Ashton Carter, they assured me that this would be the case. Do you both agree?

Mr. DONLEY. We do, sir.

Senator SHELBY. Okay. This process, I believe, should also utilize a best value method that does not contain an option based purely on lowest cost. I will closely follow, as this subcommittee will, the

procurement process to ensure that our men and women in uniform receive the best equipment possible.

Secretary Donley, the Air Force tanker competition is scheduled to begin later this summer with the release of the request for proposal. There has been some discussion that a lowest price technically acceptable process could be utilized in the competition. I have concerns with this acquisition method because it clearly would not reach everyone's stated objective, that is, that the Air Force procures the best tanker for our warfighters.

Mr. Secretary, is it your belief that our pilots should fly the best, most capable tanker possible and not just the cheapest?

Mr. DONLEY. Sir, we always—we always balance capability and cost—

Senator SHELBY. Right.

Mr. DONLEY [continuing]. In our acquisition process.

Senator SHELBY. You have got to balance it.

Mr. DONLEY. We will continue to do that going forward. We are working on the acquisition strategy for KC-X right now at the senior levels in the Department, and we are committed to sharing with the Congress the results of our work when the Secretary has made a decision exactly how to proceed.

Senator SHELBY. General Schwartz, I know there has been some concerns about protecting, and should be, about the industrial base as the tanker competition moves forward. We are all concerned about jobs in the United States.

I believe any assertion that the Northrop Grumman tanker program steals jobs from American aerospace workers and sends them overseas is factually incorrect. By assembling the Northrop tanker in a new aircraft assembly and militarization facility, this proposal would create almost 50,000 new jobs in 50 States and comply with all current procurement laws in the Buy American Act.

Do you agree that given the vast quantity of jobs that would be created in selecting either Northrop Grumman or Boeing as the winner, it would have a positive impact on our Nation's industrial base? Either one.

General SCHWARTZ. Senator, as you are well aware, my role is to define requirements—

Senator SHELBY. That is right.

General SCHWARTZ [continuing]. And so on. Clearly, as others have suggested, what we want is to get the best possible airplane as quickly as we possibly can. And so, I, frankly, am agnostic about how this exactly gets done, provided we get on with it. And that is what I certainly have offered my Secretary, as well as the Secretary of Defense, is my best advice.

Senator SHELBY. Thank you.

UNMANNED AERIAL VEHICLES

Mr. Secretary, if I could do a little transition to the UAVs. I know you are working with the Army and the other services to develop a UAV acquisition roadmap. While I understand the benefits for the services to work together on this vital issue—I think it is important to do so—I have stated the importance of the Army retaining tactical control of their UAVs.

Do you feel that you can continue to work together with the Army, Navy, and Marine Corps to allow them continued control of the tactical assets that are so critically important to our troops on the ground and commanders in the field, especially as we move forward through the QDR?

Mr. DONLEY. Senator, these are very important capabilities that are being developed for our defense establishment. I will let the chief address the operational piece of this, but let me just say at the DOD level, we do cross-level and look very carefully at production capacity and how that is spread across different platforms, Predators versus Reapers, and other classes of UAVs.

And that is well balanced at the DOD level in terms of who is investing how much where to get the best balance across the services when we put together the budget.

Senator SHELBY. General Schwartz, do you have any comment?

General SCHWARTZ. Yes, sir. Senator Shelby, what General George Casey, the Army Chief of Staff, and I want is what works best, and whatever the division of labor is, is a very pragmatic call. And there is no emphasis within the Air Force of trying to assert ownership. This is a question of how one can best employ the fleet.

Now the reality is, is that, for example, unmanned systems, you have to take account for them in the airspace. You don't want airplanes running together, so on and so forth. If you have an air defense situation, you have got to know who is friendly and who is not. So there is a need for a level of coordination that must continue, regardless of who is operating the platform.

Senator SHELBY. Absolutely.

General SCHWARTZ. But the bottom line is that you should have little concern about whether the Army and the Air Force can collaborate on this. We can, and we are.

Senator SHELBY. And the marines and Navy, too?

General SCHWARTZ. Of course. Yes, sir.

Senator SHELBY. Thank you, Mr. Chairman.

Chairman INOUE. Thank you.

Senator Dorgan.

Senator DORGAN. Mr. Chairman, thank you very much.

I have been at a markup of the Energy Committee. So I am sorry I have been delayed.

General Schwartz and Secretary Donley, welcome.

I want to ask about the UAV and UAS issues. My understanding is that you plan to go from 34 Predator/Reaper combat air patrols to about 50 by the end of 2011. Have you decided where you might assign additional units of personnel to operate that many additional combat air patrol units?

General SCHWARTZ. Senator, we have not done specific assignment of those assets, which will be coming on down the road. Those which are coming on in fiscal year 2010, we have a much firmer idea. Those beyond are not quite as firm at this time.

C-27 JOINT CARGO AIRCRAFT

Senator DORGAN. All right. What is the status of the C-27 joint cargo aircraft program?

General SCHWARTZ. Sir, let me start big on that, if I may, and then get small. At the strategic level, what this is is a question

about who will do the direct support mission for the ground forces in the United States Army in particular? The Air Force traditionally does general support very well. As the Secretary of Defense has commented, it is sort of like running an airline, and you do it to both accomplish the tasks assigned, but to do it as efficiently as possible.

On the other hand, there is a different model which is a direct support model, which means that certain assets are dedicated to certain commanders or maneuver units, maybe not quite as efficient, but improves the reliability of that service to that particular organization or commander.

And what General George Casey, the Chief of Staff of the Army, and I have agreed is that the United States Air Force, if the decision is that the C-27 should migrate to the United States Air Force, we will do the direct support mission of the United States Army the way they think it needs to be done. And that is a commitment.

Now with respect to the program, the Secretary of Defense made a decision. It is not an instantaneous change. The Army is currently in charge of the program, has a program office. We have Air Force people assigned there. We will increase that number of Air Force people assigned or attached. And so, there will be a migration of the program management responsibility over about a year's time from the Army to the Air Force.

And a significant mark on the wall is the deployment of four aircraft to United States Central Command later in fiscal year 2010. That is driving us in terms of how we make the transition to make sure that we have got aircrews and maintainers and so on who can operate these aircraft forward.

Frankly, it might be a mix of Army and Air Force for that first deployment. That is not a problem, I don't think. But ultimately, we will incorporate the C-27 mission into the Air Force and provide the capabilities to the Army that they need and want.

RECRUITMENT AND RETENTION

Senator DORGAN. What kind of experience are you having with recruitment and retention?

General SCHWARTZ. Senator, we actually are in pretty good shape. Arguably, the economy is an asset in this regard in terms of recruiting, and retention has been good. In the noncommissioned officer (NCO) ranks, there is a little bit of softness, not something to be alarmed about. But a little bit of softness in the middle-grade NCOs, and we are watching that carefully.

In both officer and NCO recruitment and retention, we have difficulty in the medical career fields. There is keen competition for medical professionals, nurses, physicians, and so on. And that is an area where we have increased bonuses up to I think \$88 million in the 2010 program in order to try to compete better to bring medical professionals into our Air Force.

B-52 SQUADRON AT MINOT AIR FORCE BASE, NORTH DAKOTA

Senator DORGAN. Just two other questions, if I still have time? What is your status with respect to standing up the new B-52 squadron at Minot Air Force Base?

General SCHWARTZ. On track, sir. And that is part of our nuclear roadmap to do that, and it is on schedule, on track.

AIR FORCE ACTIVITY IN USCENTCOM AREA OF RESPONSIBILITY

Senator DORGAN. And could you just give the subcommittee a general description of the Air Force presence and activities in the war theaters of Iraq and Afghanistan so we get a sense of assets and personnel and so on?

General SCHWARTZ. Yes, sir. Of the 38,000 roughly folks that we have deployed overseas, about 30,000 of those personnel are in Iraq and Afghanistan or in the adjacent spaces. Of that, about 8,000 are Reservists, 5,000 Air National Guard, 3,000 Air Force Reserve. And they are performing a range of missions, certainly from lift to strike to intelligence, surveillance, and reconnaissance.

We run the hospitals at both Bagram Air Base and Balad Air Base on behalf of the joint team. We have, as I mentioned earlier, some of our youngsters performing convoy duties from Kuwait into Iraq, security forces, engineers, the whole array. It is a significant commitment.

We will grow in Afghanistan from about 5,000 today to maybe 6,500 total Air Force personnel as the numbers increase in theater. It is a significant commitment and one we do proudly.

Senator DORGAN. Well, let me thank you, Secretary Donley, and you, General Schwartz, for your willingness to be always available to us. And I would like to send you some additional questions on the C-27 and the combat air patrol future. So I will submit those questions.

And again, let me thank both of you for the work you do. I am very pleased.

Chairman INOUE. Thank you very much.

Senator Bennett.

Senator BENNETT. Thank you, Mr. Chairman.

HILL AIR FORCE BASE AND ICBM SOLID ROCKET INDUSTRIAL BASE

And I want to say to our two witnesses thank you for coming to Utah and for the experience you had. I hope the weather was good enough for you and the hospitality, et cetera. We appreciated your being there. They were there for the Air Force Association meetings last week.

I trust I can be forgiven for being a little parochial and discuss some of the issues relating to Hill Air Force Base and also the intercontinental ballistic missile (ICBM) solid rocket industrial base. On that latter issue, let me thank you for the news that I have received that the Air Force is going to maintain the solid rocket motor industrial base that supports the Minuteman III. What is the status of your request to reprogram fiscal 2009 funds?

Mr. DONLEY. Yes, sir. We do intend to request reprogramming just to beef up this program. The Department is looking at the reprogramming right now, awaiting first the results of the overseas contingency operations (OCO) work that the chairman referred to earlier. So once we have seen the results of the OCO, then the Department will proceed with its reprogramming work.

Senator BENNETT. Do you have any idea how many solid rocket motors you are planning to buy?

Mr. DONLEY. Off the top of my head, I do not have that information. But we will get you that for the record.

Senator BENNETT. Okay. Thank you. Thank you very much.
[The information follows:]

The intent of the warm line is to exercise industry's Minuteman III-unique solid rocket motor production capabilities. Identifying a specific number of solid rocket motors is not an accurate measure of the ability to maintain this industrial base. Our fiscal year 2010 effort will initiate a low-rate production of the Minuteman solid rocket motors which will maintain design-unique material availability, sub-tier material supplier viability, touch labor currency, and design engineering personnel continuity unique to the Minuteman weapon system. In addition, our fiscal year 2010 effort will maintain systems engineering assessment capability and utilize independent verification of production processes. However, the actual production quantities are unknown until the contract is finalized.

F-16 REDUCTIONS AT HILL AIR FORCE BASE, UTAH

Senator BENNETT. Now I want to talk about what appears to be something of a donut hole on the fighter situation. Naturally, we are disappointed to learn that Hill is going to lose one of its three F-16 fighter squadrons as a part of the restructuring, and I understand the restructuring has to go forward and that there are logical reasons for it. But as I look at the locations where the F-16s are going to be removed around the country, they seem to be focused primarily in bases in the intermountain and southwest regions, and that will be geographically the area where you will see most of the F-16s withdrawn. And yet the Utah Test and Training Range (UTTR) is most accessible to those regions, and it seems to me that it would make most sense to take the aircraft away from something that is farther away from the Utah Test and Training Range.

I know Senator Cochran is very proud of the training range in Mississippi, but UTTR is the biggest land-based training range we have and, I think, a major, major asset to the Air Force. So has any thought been given to the fact that it might make more sense to keep the airplanes closer to the training range and take the reductions perhaps someplace else?

General SCHWARTZ. Senator Bennett, we have given thought to an array of considerations. The model of aircraft, their age, the proximity to training opportunities, the arrangements related to total force initiatives, and so on and so forth at various locations. Just to give you a sense, the rough reductions were predominantly in the training area. Air Combat Command took substantially less reductions than did our Air Education and Training Command.

The bottom line is that we have looked at that. It is true that Hill Air Force Base is a candidate to lose 24 F-16s. That is—from a people point of view, sir, that is 591 spaces. We know that is not trivial.

But we have looked at this as a package. And yes, Tucson will lose some airplanes, largely training platforms. Hill Air Force Base will take some down. There are roughly—the split is some overseas, some in Europe, some in the Pacific, a number here in the continental United States.

But I think the key thing here is that we have done this from a fleet management point of view, from a construct which suggests

that if we do this now, it will allow us to leap to F-35 more rapidly and that we need to look to the future and less to the past.

Senator BENNETT. All right. That brings up the donut hole I am talking about because you are going to combine the 388th and the 419th, merge them as a prototype for further efforts to mix active and Reserve fighters, and that is an effort that has seen good results so far.

But the impact on the depot is that they are going to see not just the 500 people you are talking about, but you are going to see a significant drop in depot work. And it is fine to say, well, the F-35 will come in at some particular point, but if that particular point is stretched out, you then lose—we are back to the question of manufacturing base. Only in this case, it is maintenance base. You lose the expertise that is there that could be maintained if there were some way to deal with the question of the F-16s.

F-35 BASING

Now it has been over 1½ years, the other side of the donut hole, stretching it out, that I have been told that Hill would be one of the first Air Force bases to receive an operational F-35 squadron. And now I understand that there is some backing away from that commitment, at least on the timing.

So do you still say that Hill is going to receive one of the first two operational F-35 squadrons? And if so, can you give me some hope that it will come sooner rather than later so that the donut hole can be filled with work?

General SCHWARTZ. Senator, I can't. I can't tell you it will be the first. We haven't made that decision yet. And one thing that the Secretary and I have tried very hard to do is not to make promises we can't keep. And so, I am being straight.

Senator BENNETT. Sure. Obviously, we prefer that.

General SCHWARTZ. Understood, sir. I think, just to give you a sense of what is at play here, there are multiple demands on the new system, as you can well imagine. There are—our commander in the Pacific Air Forces and certainly Admiral Keating at United States Pacific Command (USPACOM) has levied a demand signal for modernization in the Pacific with regard to potential threats on the Asia-Pacific rim.

Likewise, General John Craddock and the United States European Command has indicated that because the allies will gain F-35s in Europe, there will be a need for us to have F-35 presence or we will be out of sync with our allies on the European continent. And likewise, we know very well that we have needs—donut holes, if you will—in the United States.

So there are a lot of moving parts on this. The bottom line is that, and I am not saying anything that I don't think anybody believes, Hill Air Force Base is a great place to fly airplanes. And that is well known, and that certainly will be factored into basing decisions as we sort of integrate all of these demand signals.

Senator BENNETT. Well, I thank you for that. And it is not just a great place to fly airplanes. It is a great place to repair airplanes. And my concern is that if we see the workforce on the repair side, on the depot side drop down because of the action with respect to the F-16 and then a delay in bringing in the F-35, we wake up

to discover that the capacity that we have always identified with Hill suddenly isn't there. Well, not suddenly isn't there, but isn't there.

So I would ask you to take a look at that and say is there any way we can kind of nudge both of these, that is, nudge the F-16 in one way to close that end of the donut hole and nudge the F-35 in the other way to close that end of the donut hole? Yes, it is parochial on my part, but I also think it makes sense for the Air Force's capability to service the F-35 when the time comes.

Thank you, Mr. Chairman.

Chairman INOUE. Thank you very much.

Senator Murray.

Senator MURRAY. Mr. Chairman, thank you very much for having this hearing.

General Schwartz, Secretary Donley, thank you to both of you. It is good to see you again. Let me just start by saying thank you to all the work you and the men and women serving in the Air Force do today to successfully perform the very critical missions that they are doing to safeguard our country.

TANKER COMPETITION AND INDUSTRIAL BASE

It is really important to me that our airmen have everything they need to fight our wars overseas, both today and in the future. So I am going to start my questions today with a shocker. What can you tell me about tankers?

But before I do that, let me just frame that question about the upcoming tanker competition from the standpoint of our domestic industrial base. Mr. Chairman, I am very worried about our domestic industrial base. I am worried about its long-term ability to provide our military forces with what they need to accomplish their national security missions.

During last year's KC-X competition, everybody had real high hopes that it was going to be the best and brightest example of how the acquisition process could function and provide for the needs of our warfighters. Here we are today without a much-needed replacement of our aging fleet of refueling tankers.

Now I applaud the work of Chairman Levin and Senator McCain. They have championed efforts here to move acquisition reform through Congress. As part of that, I included a provision that requires DOD to report on the effects that canceling an acquisition program would have on our Nation's industrial base.

I have talked with both Secretary Gates and Secretary Carter about this issue. I want to make sure that we maintain a domestic industrial base that can respond to the ongoing need of our warfighters.

This is of particular concern to me as a Senator from a State that represents really the entire spectrum of constituencies on this issue. One end of the scale, we have end users who are the servicemembers at many military facilities in Washington State. We have two outstanding Air Force bases, Fairchild and McChord, who rely on the goods and services this industry produces. At the other end, we have the hard-working men and women of the industry, including the smallest supplier companies to the major manufacturers that tirelessly work to support our servicemembers.

So how we move forward with this acquisition is very important to me and to everyone I represent. General Schwartz, so I would like to ask you today how you are taking into account the health and longevity of our domestic industrial base as you tackle acquisition reform in the Air Force?

General SCHWARTZ. Ma'am, the basic approach, the mandate for doing this is clear to our Air Force. The way it has traditionally been done, and I, frankly, think it is appropriate, is that industrial base considerations are typically not considered within specific source selection activity on specific programs.

The acquisition technology and the logistics organization in OSD has the role to do that at particular milestones in the acquisition process. So they have the more global perspective, if you will, not just whether it is a tanker or a fighter or a lift platform or a satellite, but rather, the broader implications for industrial base.

And so, again, not completely in my lane, but the way that is currently being done makes sense to me. And it is clear that the civilian leadership understands the mandate.

Senator MURRAY. Secretary Donley, do you want to add anything?

Mr. DONLEY. No question that the Department has an interest in tracking how industrial base issues get affected by Departmental-level decisions and making sure those are taken into account as we go forward.

Senator MURRAY. We have to think about the future while we are thinking about today.

Well, let me talk about the timeframe for the tanker competition. Secretary Gates said that he needed a full team in place before this competition could be restarted. Now, Secretary Donley and General Schwartz, you are here. Secretaries Lynn and Carter, they have been confirmed and are in place. I have been told that we are going to begin work on this competition process this summer.

TIMING OF TANKER REQUEST FOR PROPOSAL

That is a couple weeks away from now. Can you provide an update on the timing for the request for proposal (RFP) and how this process will follow that?

Mr. DONLEY. Ma'am, we have been working on this issue for a couple of months now fairly intensively with Deputy Secretary Lynn, Secretary Carter, and other members of the acquisition team, and we are in the process of carrying forward the results of that work to the Secretary for his consideration. And we still do hope to get an RFP out this summer on the street.

Senator MURRAY. Hope to is not a definite timeframe.

Mr. DONLEY. No, this is our intent. And we have pledged, Secretary Gates has and I would certainly echo it, that when we have completed the results of our internal work and we are ready to go out, we will be briefing the Congress on the way forward.

Senator MURRAY. Okay. So we are still in the timeframe of summer?

Mr. DONLEY. Yes, ma'am.

Senator MURRAY. Can you tell me what measures are being taken to prevent the claims of an unfair evaluation or scales being tipped to one side or the other?

Mr. DONLEY. Well, we are committed from the get-go to a fair and open competition. There is no doubt of that.

We have taken measures inside the Air Force to strengthen our source selection process. We have, since the events of last summer, increased our focused training on lessons learned from the two protests that were sustained last year, the KC-X and the CSAR-X, to get those lessons learned into our source selection process.

With respect to the KC-X program in particular, we have put a few more senior people into that program office. We have moved contract approval authority up to the Secretary of the Air Force level, and we are undertaking other measures to strengthen the KC-X team and our source selection process as we lead into this RFP process going forward.

Senator MURRAY. Well, this is a difficult process, and all of us want the best aircraft as soon as possible. But I think I share with everyone on this subcommittee, we want to make sure that this is a fair and transparent competition. We are really urging you to make sure that that is very clear.

We want it to be good for the warfighter and good for the taxpayer, which leads me to the question of whether a dual buy is a viable option?

Mr. DONLEY. Well, we share the Secretary's view that a dual buy would be more expensive for the taxpayer in at least three dimensions. It would require the development of two airplanes instead of one. We would end up with two logistics and two sort of depot infrastructure processes in support of that effort instead of one. And in the near term especially, we are concerned about the impact on the Air Force's budget and the Department of Defense's budget generally by going to a dual track approach.

Our program has been structured around a buy of about 15 airplanes per year. To accommodate a dual award strategy, where you are buying airplanes from two providers, probably the minimum order quantity for each is 12 aircraft. So that means instead of buying 15 per year, we would need to be buying about 24 per year.

Senator MURRAY. And we do not have the budget capacity for that?

Mr. DONLEY. Well, this would eat significantly into our procurement program going forward. It potentially would almost double the tanker piece of the Air Force's procurement program within the FYDP going forward.

Senator MURRAY. Which means other things would be left off the table?

Mr. DONLEY. At the same time, we are trying to ramp up JSF, et cetera. So this is a concern to us, and this is basically the reason why we think the dual award would not make sense.

FAIRCHILD AIR FORCE BASE, WASHINGTON—AERIAL REFUELING
MISSION

Senator MURRAY. Okay. I appreciate that, and I want this tanker competition done. You, of course, know I am hoping one plane company wins it. Just as high on the list for me is making sure that we protect our taxpayers in this process. So I appreciate your answer to that question.

Beyond the tanker competition, you are simultaneously working on tanker beddown. So I want to talk about Fairchild Air Force Base in my home State and how it is uniquely positioned to support the KC-X beddown.

We have two air wings who have a very proud refueling history there. I have seen them in action. They are incredible. We have a large runway and a strategic location for the execution of global reach mission, which is important.

I recently met with the wing commander at Fairchild, and we talked about the excellent relationship that Fairchild has with the Spokane community, as well as some of the challenges that they have faced of late. I am sure you are aware that last winter one of Fairchild's key training facilities had its roof collapse during a major snowstorm there. Even though its runway is the right size, it is due as well for some very important maintenance and continued upkeep so it is ready for KC-X.

Can you confirm for me that we are doing everything we can to make sure that Fairchild is ready for the KC-X when the time comes?

General SCHWARTZ. Again, ma'am, I don't want to suggest that, again, promises—not a promise. But certainly Fairchild Air Force Base is an obvious candidate for early beddown. There are others in the country, too, and we will see sort of what the production rate allows us to do. But Fairchild Air Force Base certainly is in the long-term plan.

FUTURE OF 36TH RESCUE FLIGHT—FAIRCHILD AIR FORCE BASE,
WASHINGTON

Senator MURRAY. Okay. Well, I stand ready to help you do whatever we need to do there to make sure we are ready for that as well.

In addition to supporting the refueling mission, Fairchild is also home to the 36th Rescue Flight. They are very important. They support the 336th Training Group and Air Force Survival School. We know that these helicopters evacuate and help locate students who become lost during their survival training. They are very important.

It also supports civilian search and rescue operations. They have actually saved about 600 people during recent missions in a variety of States, not only mine, but Idaho, Oregon, and Montana. They are just extraordinary. Their crewmembers are unbelievable, and everybody just is amazed at their capability. So, first of all, my thanks to them.

But I wanted to make sure that you all were committed to work with us on the future of that 36th Rescue Flight. This is so that we can maintain that very critical training in emergency rescue operations that they have.

General SCHWARTZ. Yes, ma'am. And I would also indicate that that is related to the decision to discontinue the CSAR-X program. And the Secretary made a call on that particular program, but clearly, the mission remains important for the Department of Defense, and that unit is part of that tapestry.

Senator MURRAY. Okay. Well, they are very important to us. I know they are important to you, and I will work with you to make sure we have what we need within the budget process on that.

So thank you very much.

And thank you, Mr. Chairman.

Chairman INOUE. Thank you very much.

Senator Shelby, do you have any questions?

Senator SHELBY. I have no further questions.

Chairman INOUE. Then Mr. Secretary, General Schwartz, I would like to thank both of you for your testimony today.

ADDITIONAL COMMITTEE QUESTIONS

I will be submitting questions on the tanker fleet. I am concerned personally because of the age factor. And I will also inquire into your thoughts further on dual purchase because I have received a report suggesting that there may be massive savings if you had two sources, but I will leave it up to you.

I am also asking questions on the possibility of developing an export version of the F-22. I have had inquiries from our friends and allies abroad indicating strong interest in acquiring such aircraft.

And so, with that, I would like to thank you once again.

[The following questions were not asked at the hearing, but were submitted to the Department for response subsequent to the hearing:]

QUESTIONS SUBMITTED TO HON. MICHAEL B. DONLEY

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

TANKER CONTRACT AWARD

Question. Secretary Donley, will the tanker replacement program request for proposals go out to industry this summer? Is the Department on track to make a contract award for the tanker replacement in early fiscal year 2010?

Answer. We expect to release the draft request for proposal in late September 2009, with a planned contract award in summer 2010.

Question. Secretary Donley, why is the Department confident that the upcoming tanker contract award will not result in a protest to the Government Accountability Office? What is the Department's plan if another protest is lodged and upheld?

Answer. Protests are the prerogative of industry afforded by law. The Air Force cannot guarantee that the losing bidder will not file a protest with the Government Accountability Office. However, the Air Force has worked closely with the Office of the Secretary of Defense to ensure that the source selection strategy we implement will withstand outside scrutiny. If a protest is lodged and upheld, the Air Force will take the Government Accountability Office recommendation into consideration, and evaluate the next steps to recapitalize our tanker fleet.

TANKER DUAL BUY STRATEGY

Question. Secretary Donley, what are the pros and cons of the Department of Defense awarding a split buy of tankers between the two industry competitors? What are the costs associated with this acquisition strategy for the full tanker replacement program?

Answer. The pros and cons of the Department of Defense awarding a split buy of tankers are as follows:

Pros:

—Will likely expand U.S. wide-body aircraft manufacturer industrial base; and

—Lowers risk of protest.

Cons:

—Doubles development cost from approximately \$3.5 billion to \$7 billion;

—To produce the minimum Economic Order Quantity of 12 aircraft per year per competitor would increase average annual production costs from approximately \$3.6 billion per year to \$6.2 billion per year;

- Magnifies training, operations, logistics, and support costs by introducing two new and different airframes at the same time; and
- Would result in a significantly increased cost per aircraft if we pursued a split buy at the current funding level, due to production inefficiencies.

Note: If additional production funds were available to support the procurement of 24 aircraft per year, there would be a faster recapitalization of our tanker fleet; but, we could achieve at least equal benefit from buying 24 aircraft per year from a single offeror

OSD (AT&L) estimates the costs associated with a dual award strategy for the whole KC-X program would be between \$11–\$14 billion (Net Present Value).

STRUCTURAL REPAIRS OF KC-135 TANKERS

Question. Secretary Donley, based on the current tanker replacement program, it will take over 30 years to recapitalize the KC-135 fleet.

Can you elaborate on the cost of the structural repairs that will need to be done on the KC-135 fleet during the acquisition of the replacement tankers? Can these costs be avoided if the fleet is replaced sooner?

Answer.

Discussion of Approach

Skin replacements are the major structural repairs that occur on the KC-135 over and above the existing Programmed Depot Maintenance (PDM) scheduled maintenance. To date, these skin replacements have been manageable. Replacements in PDM have been limited, and there is a reasonable amount of rework that can be accomplished before most of the structures require replacement. However, the lack of a methodology accounting for the interaction of corrosion with fatigue generates uncertainty in our ability to accurately predict structure degradation.

The following assumptions were made to determine the cost and schedule for replacing the skins:

- The dates we have forecast for replacement were selected to gain the most benefit from the work that will be accomplished, therefore the initiation date was schedule and not technically driven.
- To minimize the impact to aircraft availability, it was assumed that no more than 12 aircraft would be down at any one time, and the tasks were grouped to be accomplished concurrently.
- Each estimate uses current year (fiscal year 2009) dollars and is per aircraft; then year dollars will be more.

The information below can be compared with the proposed adjusted schedule for the KC-X. For example, the crown and center wing (wing box) upper skins (see below) would not require replacement until fiscal year 2026. Acquisition of KC-X would eliminate the requirement to modify 230 of the KC-135 aircraft.

Aft Body Skins

Replacement of these skins is already programmed to be done as part of PDM fiscal year 2012-fiscal year 2017.

Estimated cost per airplane: \$0.3 million.

Schedule: Fiscal year 2012-fiscal year 2017, 416 aircraft.

Estimated total cost: \$124.8 million.

Maximum aircraft down: N/A—concurrent with PDM.

Upper Wing and Horizontal Stabilizer Skins

These would be done concurrently, separate from PDM, in a speed line, and include replacement of substructure components that are important to continued use of the aircraft and accessible when the skins are removed.

Estimated cost per airplane: \$6.7 million.

Schedule: Fiscal year 2016-fiscal year 2034, 416 aircraft.

Estimated total cost: \$2.8 billion.

Maximum aircraft down: 12 (at any one time).

Crown and Center Wing (wing box) Upper Skins

This replacement is planned further in the future since recent experience has not indicated significant problems with corrosion or cracking. They are planned to be done concurrently in a speed line and separate from PDM. We have accounted for planned retirements in this increment.

Estimated cost per airplane: \$4.6 million.

Schedule: Fiscal year 2026-fiscal year 2034, 230 aircraft.

Estimated total cost: \$1.1 billion.

Maximum aircraft down: 12 (at any one time).

Due to the materials and the assembly techniques used when the KC-135 aircraft was originally procured, occurrences of corrosion and stress corrosion cracking will continue to be a primary area of concern. These materials are susceptible to corrosion or stress corrosion cracking. Corrosion is aggravated by the assembly techniques that did not use modern methods of corrosion prevention during assembly. Continued inspections, repairs, and preventive maintenance are required to ensure a viable fleet.

Can these costs be avoided if the fleet is replaced sooner? Yes, as indicated in the answers above, some of the costs could be avoided, depending on timing of KC-X replacement and retirement schedule for the KC-135.

END STRENGTH

Question. Secretary Donley, we understand that the Air Force will be allocating personnel to new or growing mission areas such as cyber security, the nuclear enterprise, intelligence, surveillance and reconnaissance and other air support activities.

What tradeoffs are you considering that will enable the Air Force to dedicate more people to these missions?

Answer. In the fiscal year 2010 President's budget, we source these new and emerging missions primarily through the proposed Combat Air Forces (CAF) restructuring plan. This effort accelerates the retirement of approximately 250 of our oldest fighters, funding a smaller but more capable, flexible, and lethal force, and redistributing manpower to emerging high priority missions.

Implementation of the CAF restructure allows the Air Force to realign approximately 4,000 manpower authorizations to emerging and priority missions such as manned and unmanned surveillance operations and nuclear deterrence operations. This restructure is a major step, and was proposed only after a careful assessment of the current threat environment and our current capabilities. In addition to being a significant investment in bridge capabilities to our fifth generation-enabled capability, this action shifts manpower to capabilities needed now for operations across the entire spectrum of conflict.

Question. Secretary Donley, how do you see the roles and missions of the Air National Guard and Air Force Reserve changing in the future?

Answer. As the Air Force moves forward, we must capitalize on the tremendous talent the Air National Guard and Air Force Reserve contribute to the Total Force, as both a strategic and operational resource. It is critical to build on the success of Total Force Integration to drive even greater gains in effectiveness and efficiency, and expanding integration initiatives across the force maximizes our capabilities across the spectrum of conflict—from building partnerships and irregular warfare to conventional operations and strategic deterrence. The Air Force will need to expand associations, both classic and active, as part of our broad effort to modernize our organizations into a more capable Air Force. This expansion also includes examining new mission areas, such as unmanned aerial systems, space and cyber, for Air Reserve component units as appropriate.

C-17 PROGRAM

Question. Secretary Donley, there are some critics of the Department's plan to terminate production of the C-17 strategic airlift aircraft in fiscal year 2010. The next mobility capabilities and requirements study which will inform a decision has not been completed and C-17 is the only warm production line we have for strategic lift aircraft.

What are your views about the adequacy of planned strategic airlift?

Answer. The Air Force's planned fleet of 324 strategic airlift aircraft (213 C-17s, 52 C-5Ms and 59 C-5As) is more than sufficient to meet the current National Military Strategy. The C-5 RERP Nunn-McCurdy review of the 2005 Mobility Capabilities Study established a strategic airlift capability requirement of 33.95 million ton-miles per day, and the Air Force's strategic airlift program of record meets this requirement. The ongoing Mobility Capabilities and Requirements Study 2016, expected in December 2009, will help establish the future strategic airlift requirement.

AIR FORCE NUCLEAR ENTERPRISE

Question. Last fall, the Air Force published a strategic plan on "Reinvigorating the Air Force Nuclear Enterprise."

Secretary Donley, please walk us through the Air Force's plan to restore credibility in delivering secure and reliable nuclear deterrence capabilities to the American people.

Answer. The Air Force has undertaken major efforts to reinvigorate our Nuclear Enterprise, to include a major step by activating a new major air command, Air

Force Global Strike Command (AFGSC), at Barksdale AFB, Louisiana. The AFGSC organizational construct clearly aligns nuclear missile and nuclear capable bomber units under a single command and demonstrates a visible commitment to the nuclear deterrence mission. AFGSC will now foster a robust strategic deterrence enterprise and standardized self-assessment culture.

Additionally, we realigned and consolidated nuclear sustainment under the Nuclear Weapons Center in Air Force Materiel Command. The Nuclear Weapons Center is now the focal point for nuclear weapons life cycle management and positive inventory control for nuclear weapons related material.

The Air Force has also established a new directorate on the Air Staff responsible for Strategic Deterrence and Nuclear Integration under the leadership of a major general. These actions represent the largest reorganization the Air Force has undertaken since the early 1990s, and provides the leadership and focus necessary to accomplish this critical mission with the precision and reliability it demands in today's environment and into the future.

In addition to this significant reorganization effort we have also instituted changes to the Air Force corporate process by adding the Nuclear Panel for specific focus on nuclear issues and charged the Under Secretary of the Air Force to be responsible for broad nuclear policy and oversight. We also founded the Nuclear Issues Resolution and Integration Board and the Nuclear Oversight Board. These boards meet quarterly to ensure Air Force senior leaders involvement and notification on recent events occurring in the nuclear enterprise. The Nuclear Oversight Board is made up of major command commanders with equity in the enterprise and chaired by General Schwartz and me.

We have also examined our inspection and self-assessment culture across the nuclear enterprise and have made improvements there as well. The Air Force Inspection Agency will have oversight of every nuclear-related inspection. Inspection teams will consist of approximately 20 "core" team members who have undergone a standardized training and certification process to ensure consistent rigor. We have implemented a root cause analysis methodology to determine why mistakes were made and if they are a symptom of a larger problem.

Finally, we have undertaken initiatives to deliberately develop leaders in the nuclear enterprise. We have reviewed every Air Force professional military education course from basic training to senior developmental education to ensure every Airman knows and understands the United States' policy and strategy for nuclear weapons. Additionally, we have established a process to track nuclear experience and developed new courses to prepare leaders to fill key nuclear billets. These processes will help ensure we place the right person, with the right skill set, in the right job, and at the right time.

Question. Secretary Donley, how do you plan to rebuild the Air Force's culture and institutions so that each Airman understands the importance of the nuclear deterrence mission?

Answer. The Air Force has conducted a review of the curriculum in every professional military education course from basic training through senior development education to ensure Airman are taught Air Force nuclear policy and strategy at key points throughout their careers.

We have also refocused our nuclear inspection mindset. Instead of inspection teams identifying errors and the units simply fixing identified problems, we now do an extensive root cause analysis to determine why the mistake occurred, and if it is the symptom of a larger problem. This encourages our organizations to take a look at their entire processes to find ways to improve instead of just fixing what is broken. This new process strengthens self-assessment capabilities and instills a "culture of excellence" mentality.

JOINT CARGO AIRCRAFT

Question. Secretary Donley, the Joint Cargo Aircraft program is now an Air Force responsibility rather than a joint Army-Air Force program. In addition, the validated requirement of 78 aircraft appears to have dropped to 38 aircraft.

Why has the Air Force assumed responsibility for this program and what has changed to reduce the requirement?

Answer. The transfer of Army Time Sensitive/Mission Critical airlift support to the Air Force intends to capitalize on efficiencies gained by operating the tactical airlift fleet under a single service. The Department of Defense is now engaged in an overall look to leverage existing intra-theater airlift capability to maximize effectiveness and minimize expenditure of taxpayer dollars. The changes reflected in the fiscal year 2010 President's budget request balance the C-27J capabilities with the

existing capabilities in the Department. The Air Force will continue to evaluate the entire intra-theater fleet as mission needs develop.

FIGHTERS IN THE AIR NATIONAL GUARD

Question. Secretary Donley, the Committee recently received testimony from the Air National Guard alerting us to the fact that 80 percent of their F-16 fighter inventory will face retirement beginning in 2017. Retiring these aircraft will almost eliminate the fighter aircraft that the Air National Guard has dedicated to the Combat Aviation and Air Sovereignty Alert missions.

What steps are you taking to ensure that the Air National Guard is properly equipped for its important homeland security mission over the United States?

Answer. Homeland Defense is the Department of Defense's first priority and we are committed to the Operation NOBLE EAGLE mission through the long term. Recapitalization of the fighter and tanker fleet will require many years, and within the available funding, we will maximize the life of existing aircraft.

We continue shaping our force structure to meet the threat with the best mix of capabilities. To do this, we are acting swiftly to remedy our potential capability gaps, based on accurate service life and fleet health projections over the next 5-15 years. The Quadrennial Defense Review will also take a close look at Homeland Defense requirements and provide us further insight on the force structure required to meet our Nation's air defense needs.

Question. Secretary Donley, is the Air Force looking at new missions for the Air National Guard? Are additional association relationships with active Air Force units planned?

Answer. The Air Force continues to examine opportunities for integration with the Air National Guard and all existing and emerging mission areas are considered for Total Force Integration initiatives. Currently, there are additional fighter associations planned for the Air National Guard. The Air Force recognizes the significant contributions that experienced Air National Guard Airmen bring to Total Force Integration associations and expects those benefits to continue in legacy and next generation missions.

Question. Secretary Donley, if delays in the F-35 Joint Strike Fighter program keep the Air Force from filling the empty fighter spots in the Air National Guard with the new aircraft, will you consider buying 4th generation F-15s and F-16s, which provide improved capability over the aircraft being flown today?

Answer. The United States Air Force has invested heavily in the F-35 program, and we are closely tracking developments in order to ensure that it stays on track. The Chief of Staff of the Air Force, General Schwartz, has stated on many occasions that the key to the Air Force's fighter recapitalization is the F-35, and any initiatives to procure fighter weapons systems other than the F-35 would require buying fewer F-35s. Subsequently, delays in F-35 procurement would also cause an increase in cost and further delay the F-35 for the Air Force, Navy, and Marine Corps.

After the Quadrennial Defense Review is completed, we expect to have a more accurate picture of what the Nation's and Air Force's requirement will be for fighter force structure. If there is going to be a gap in capabilities, this could be addressed by extending the service life of the F-15s and F-16s. We are currently conducting fatigue testing on the F-15 and F-16 fleets to provide a scope and focus on the structural modifications that might be necessary. Once these structural tests are complete, we will have a sense of whether or not we will need a Service Life Extension Program. Beyond this, we have no plans to procure additional 4th generation F-15s and F-16s.

INTELLIGENCE, SURVEILLANCE AND RECONNAISSANCE

Question. Secretary Donley, what is the status of discussions to bring the C-12 programs together, possibly under the Air Force, and avoid duplicative efforts in areas such as sensor development and training programs? What are the disadvantages of a joint approach here?

Answer. The C-12 class of aircraft is made up of over 26 different aircraft variations, and the numerous sensor configurations easily triple the number of overall configurations in separate Services. Consolidation of these converted civilian platforms under one program would be extremely challenging and time-consuming. A few discussions have occurred with regard to merging the C-12 class aircraft under one Service; however, to satisfy urgent warfighter needs, the Air Force's focus has been on producing, modifying, and fielding aircraft as rapidly as possible. Due to the numerous variations and capabilities of currently fielded C-12 systems, separate management is the most rapid way forward for today's needs. To determine the full

range of advantages and disadvantages for a common future platform, further discussion and in-depth analysis will be required.

EXPORT VERSION OF THE F-22

Question. Secretary Donley, I believe the Department should consider an export program for the F-22 Raptor fighter aircraft. Under the rules for such a program, the costs for developing an export variant is borne by the interested nation, not the United States. This would enable us to provide advanced fighter capabilities to our close friends and allies.

Secretary Donley, what is your view of an export program for an F-22 variant?

Answer. The Obeys amendment to the fiscal year 1998 Defense Appropriations Act, reenacted annually in every subsequent appropriations act, prohibits foreign military sales of the F-22A Raptor. However, I believe the F-35 is the aircraft of the future, for both the United States military and our partner nations. It would be very expensive for Japan, Australia, or other nations to buy an export model of the F-22, and this funding is potentially better spent on collectively developing the F-35 and the interoperability that enables us to work together in future joint and coalition operations around the world.

Question. Secretary Donley, could you give the Committee a rough order of magnitude estimate on the cost and schedule to develop an export version of the F-22?

Answer. The rough order of magnitude cost and schedule estimate to develop an export version of the F-22 is estimated at \$2.3 billion for non-recurring development and manufacturing, with the first delivery of an operational aircraft 6.5 years from the Engineering Manufacturing and Development contract.

These figures came from a recent study which was reported to SAC-D staff and Senator Inouye in May 2009. The study also identified an additional cost estimate of \$9.3 billion for the production of 40 aircraft, resulting in a total estimated cost of \$11.6 billion (average aircraft cost of \$290 million). A Letter of Agreement signed in early 2010 would result in the first operational aircraft delivery no sooner than 2017.

The cost and schedule estimates above only include the air vehicle (aircraft, engines, and avionics). The study did not include recurring or non-recurring costs for support and training systems, initial spares, base stand-up, interim contractor support, U.S. government program offices, foreign military sales surcharges or production shutdown.

Question. Secretary Donley, do you think the availability of an export version of the F-22 would change the international market for the F-35 Joint Strike Fighter?

Answer. Introducing the F-22 into the export market as another available fifth generation fighter would have a pronounced effect in reducing international interest in acquiring the F-35. Reduced foreign sales of the F-35 would cause an attendant increase in unit cost to the United States—Air Force, Navy, and Marine Corps—and would have the same effect on those international partners dependant on the F-35 for their future airpower capabilities; potentially decreasing international sales, resulting in even greater unit cost increase.

The benefit of interoperability to the U.S. warfighter is another major concern. The Air Force will maintain a small fleet of F-22s, while acquiring F-35s. The Air Force, Navy, and Marine Corps will have much greater interoperability with partner air forces employing the F-35 than with the F-22.

Finally, non-recurring engineering costs associated with hardware and software re-design to produce an exportable version will be substantial—well over \$2 billion. The result would be an airframe different in many respects from the Air Force F-22, complicating the training of international pilots and adversely affecting interoperability even beyond considerations of fleet size. Additionally, Air Force personnel and technical resources required to develop and oversee such a program would detract from resources needed to properly manage our own acquisition programs.

THE CYBER COMMAND

Question. Secretary Donley, the 24th Air Force, which will stand-up this year at Lackland Air Force Base, Texas, is the Air Force's focal organization for dealing with cyber operations and network warfare. The mission is new and success will depend on developing a highly skilled workforce drawn from a number of Air Force career fields.

What are your plans for identifying and managing the cyber warrior career force?

Answer. The Air Force is committed to establishing dedicated officer, enlisted and civilian career fields to meet the emerging demand and address recruiting, training and retention challenges. Air Force Space Command, as the lead command for

cyber, and the Air Staff are collaborating to identify personnel and positions that are performing or will perform cyber duties. So far, the enlisted Network Warfare Operations (1B4) and officer Cyber Operations (17D) career fields were approved on April 15, 2008, to be established not later than October 2010. No date has been established for civilian career field solutions, as we are still in the early stages of investigation and development.

Question. Secretary Donley, since the cyber field is relatively new, this is an opportunity to optimize a DOD-wide approach to training and operations.

How is the Air Force working with the other Services to develop joint training, joint certifications or shared facilities?

Answer. Joint cyber training standards and certification remain a work in progress. The Office of the Secretary of Defense and Joint Staff are leading the Department of Defense effort in collaboration with the Services, U.S. Strategic Command, and Joint Forces Command. The Air Staff and Air Force Space Command, as lead command for cyber operations, are heading Air Force efforts. Current Joint and Service efforts focus on enhancing existing training programs to further mature and professionalize the force. A robust cyber training enterprise has emerged, composed of Service, Joint, academic and commercial solutions. This initial effort should be complete by spring 2010.

QUESTIONS SUBMITTED BY SENATOR ROBERT C. BYRD

C-5 AIRCRAFT

Question. Mr. Secretary, I believe premature repeal of Section 132 of the fiscal year 2004 National Defense Authorization Act (NDAA) that pertains to the retirement of C-5A strategic lift aircraft language could result in the U.S. Air Force's (USAF) making uninformed force structure decisions, just as the Army and Marine Corps are growing in size and lift requirements. Section 132 was enacted to ensure the USAF does not prematurely retire C-5A aircraft without having the objective data from the C-5 Reliability Enhancement and Re-Engining Program (RERP) Operational Test and Evaluation (OT&E) and a report submitted to the Congressional defense committees.

Should Section 132 be repealed and will the USAF undertake a thorough review of the C-5 OT&E data, which is expected to be available this year, prior to issuing any decisions to retire any C-5 aircraft?

Answer. The United States Air Force will fully consider all information at its disposal, to include the IDA study, prior to making any programmatic decisions.

Question. Mr. Secretary, the fiscal year 2008 NDAA-directed Institute for Defense Analysis (IDA) Study on Size and Mix of Airlift Force (February 2009) affirmed the value of C-5s and their modernization programs. IDA considered 36 alternative mixes and sizes and compared them against the current program of record (316 strategic airlifters). The study found; "that retiring C-5As to release funds to buy and operate more C-17s is not cost-effective". Additionally, "virtually all the C-5s and C-17s have lifetimes beyond 2040".

Will the IDA study's overall conclusion that C-5A RERP is preferable to additional C-17s be fully considered by the USAF prior to moving forward with any plans to retire any C-5A aircraft?

Answer. The United States Air Force fully considers all information at its disposal prior to any programmatic decisions and will fully consider the IDA study if there is a proposal to retire C-5A aircraft.

Question. Mr. Secretary, I do not support repeal of Section 132 of the fiscal year 2004 NDAA. I believe the Office of the Secretary of Defense and the Congress should consider all objective data in support of future fact-based force structure decisions. It is my hope that Section 132 be allowed to expire in the February/March 2010 timeframe following submission, and proper consideration of the C-5 RERP OT&E report to Congress.

Should Section 132 be repealed and a decision made to prematurely retire a portion of, or the entire, C-5A fleet, what would be the impact on the 167th Airlift Wing of the West Virginia Air National Guard, which was just officially designated as a fully operational C-5A unit on April 1, 2009?

Answer. Repeal of Section 132 of the fiscal year 2004 National Defense Authorization Act would provide the Air Force maximum flexibility in managing its strategic airlift fleet. We value the information that reports such as the Reliability Enhancement and Re-engining Program Operational Test and Evaluation provide and weigh them accordingly in our analysis. In addition, we are awaiting the Mobility Capabilities and Requirement Study 2016 final report, expected in late 2009, to make an

updated, fact-based analysis of our strategic airlift fleet. Any future decision to alter the force structure will be based on a detailed evaluation of factors.

Question. Mr. Secretary, at a February 21, 2007, Senate Appropriations Defense Subcommittee hearing on the USAF's fiscal year 2008 budget request, I asked your predecessor, Secretary Wynne to respond to comments made by then-USAF Chief of Staff General Moseley that the USAF would like to retire 25–30 of the worst performing C–5 aircraft. My specific question was, "Under what timeline is the USAF planning to act and to inform Congress and the impacted bases of such retirements?" His response was: "If relieved of legislative restrictions, the USAF would be able to effectively manage the mix of various aircraft fleets. Preliminary options under review include replacing retiring strategic airlift aircraft with newer C–17s or backfilling with newer C–5Bs from within the USAF. No new units are anticipated. Likewise, closures of existing units are not planned. The USAF will be open and transparent with regard to basing plans.

If relieved of legislative restrictions regarding the C–5A aircraft in the near future, do you and General Schwartz intend to replace retiring strategic airlift aircraft with newer C–17s or backfill with newer C–5Bs from within the USAF? You may be assured that I will be following up with you in this regard in the near future.

Answer. The United States Air Force will fully consider all information at its disposal, to include the IDA study, prior to making any programmatic decisions.

QUESTIONS SUBMITTED BY SENATOR BYRON L. DORGAN

JOINT CARGO AIRCRAFT

Question. C–27 Joint Cargo Aircraft (JCA): the Defense Department recently realigned executive agency of the C–27 Joint Cargo Aircraft (JCA) from the U.S. Army to the U.S. Air Force. Concurrent with this action, the total planned procurement of the C–27 aircraft was reduced from 78 to 38. Originally, the Air Force was to procure and assign 24 aircraft to the Air National Guard. Now the plan is for the Air Force to operate all 38 JCAs.

What is the Air Force plan for basing these aircraft?

Answer. Given recent Department of Defense decisions regarding the JCA program, the Air Force is working with the National Guard Bureau and the Army to determine how to best meet domestic requirements and the strong demand for direct support airlift in overseas contingency operations. Similarly, the Air Force is working closely with the National Guard Bureau and the Air National Guard to determine the basing plans for the C–27J. Final basing decisions for this system are still pending.

Question. When and how many C–27 aircraft will be assigned to the 119th Air Guard Wing in Fargo, ND?

Answer. Given recent Department of Defense decisions regarding the JCA program, the Air Force is working with the National Guard Bureau and the Army to determine how to best meet domestic requirements and the strong demand for direct support airlift in overseas contingency operations. Similarly, the Air Force is working closely with the National Guard Bureau and the Air National Guard to determine the basing plans for the C–27J. Final basing decisions for this system are still pending.

NEXT GENERATION BOMBER

Question. Next Generation Bomber (NGB): in the fiscal year 2010 budget, the Air Force is no longer funding continued development of a new long range strike aircraft, the Next Generation Bomber (NGB). Previous Air Force budget submissions indicated a need to obtain an initial capability by the year 2018.

Explain why the Air Force cancelled the NGB program and outline its plans for addressing this need and fulfilling the requirement for a new long range strike platform.

Answer. The decision to cancel the Next Generation Bomber was directed by the Secretary of Defense in the fiscal year 2010 President's budget submission. The Air Force supports the Quadrennial Defense Review and Nuclear Posture Review to assess future strategic requirements.

Question. If the Service is not continuing the new NGB, what steps are being taken to modernize and keep our legacy bomber fleet healthy and viable until a follow-on bomber is fielded?

Answer. The Air Force plans to maintain the current bomber force (B–1s, B–2s, and B–52s) and continue with planned sustainment and modernization programs. The B–1 has five sustainment programs to prevent grounding and one develop-

mental program, which adds data link capability. The B-2 also has robust sustainment and modernization programs. These programs have been in previous budget requests and continue in the fiscal year 2010 President's budget request.

QUESTION SUBMITTED BY SENATOR THAD COCHRAN

REDUCTIONS TO CONTRACTOR WORKFORCE

Question. Secretary Donley, will efforts to reduce your reliance on contractors and hire additional civilian government workers mean an end to "Public-Private" competitions conducted under the Office of Management and Budget A-76 Circular process?

Answer. The Air Force views in-sourcing as one of many efficiency tools that comprise our overall human capital strategy. We do not view it as necessarily being mutually exclusive from reasoned and strategic application of public-private competitions. Presently, the Air Force has no new public-private competitions identified for the remainder of this fiscal year due to the moratorium established by the fiscal year 2009 Omnibus Appropriations Act.

QUESTIONS SUBMITTED BY SENATOR KAY BAILEY HUTCHISON

ADDITIONAL F-22 PURCHASES

Question. Does the Air Force plan to purchase additional F-22 aircraft to fill the gap if and when F-22 attrition occurs?

Answer. The Air Force does not plan to purchase additional F-22s. The fiscal year 2010 President's budget request completes the F-22 program of record at 187 aircraft and the last aircraft will be delivered in March 2012. No further procurement is planned or programmed beyond the program of record. Air Force fleet management actions will ensure the long-term viability and combat capability of the F-22.

F-35 TECHNICAL TRAINING

Question. F-35 technical training is currently conducted in several locations. Follow-on technical training for F-15s, F-16s, and A-10s (Air Force legacy platforms that the F-35 is set to replace) is completed at four additional locations. I believe that there are many benefits to consolidate training at a valued Air Force installation such as Sheppard Air Force Base in Wichita Falls, Texas. This may include reduced costs, experience with allied and international training, expertise and core competencies in fifth-generation fighter technical training, strong positive community support, and reduced permanent change of station and temporary duty moves for our airmen and women.

Please share your thoughts on consolidation of F-35 technical training as well as possible timelines for this to become a reality.

Answer. All F-35 maintenance technicians will receive their initial skills training at Sheppard Air Force Base, Texas. Crew chief, avionics and armament specialists will receive follow-on specialized F-35 training at Eglin Air Force Base, Florida. This arrangement will provide our Airmen with the skills needed.

Beginning in 2013, F-35 maintenance technicians will complete basic military training at Lackland Air Force Base, Texas and then proceed to Sheppard Air Force Base, Texas for maintenance fundamentals training. Thereafter, crew chief, avionics and armament specialists will receive F-35-unique apprentice training at Eglin Air Force Base, Florida. All other Air Force F-35 maintenance technicians will receive initial skills training at Sheppard Air Force Base and F-35-unique hands-on training at a field training detachment at their first operational base.

SUPPORT TO STATES—POTENTIAL MOBILITY CAPABILITY GAP

Question. Currently The Texas National Guard Sherpa (C-23) are scheduled to deploy to support overseas operations. The extreme demands of intra-theater cargo airlift will pose significant stress on an already aging airframe.

How does the Air Force plan to provide adequate replacement support to the States to sustain high maintenance and potential replacement of aircraft attrition if the anticipated and validated C-27 Joint Cargo Aircraft program is not moved forward?

Answer. In accordance with Chapter 1011 of Title 10, the National Guard Bureau is the channel of communication between the States and the Air Force on all matters pertaining to the National Guard. In stationing and allocating Air National

Guard capabilities across the States, the National Guard Bureau has historically endeavored to disperse capabilities geographically in such a way as to facilitate access by States when needed. This practice is expected to continue.

Given recent Department of Defense decisions regarding the JCA program, the Air Force is working with the National Guard Bureau and the Army to determine how to best meet domestic requirements and the strong demand for direct support airlift in overseas contingency operations. Similarly, the Air Force is working closely with the National Guard Bureau and Air National Guard to determine the basing plans for the C-27J. Final basing decisions for this system are still pending.

JOINT CARGO AIRCRAFT

Question. The Joint Cargo Aircraft (JCA) mission was validated at the Joint Capabilities Integration Development Systems (JCIDS) process and approved by the Joint Requirements Oversight Council. The 2009 Quadrennial Roles and Missions Review report found that Service Capabilities were appropriately assigned.

What new information has over-ridden the extensive validation of this thoroughly vetted program?

Answer. The adjustments made to the fiscal year 2010 President's budget request will maximize the robust capabilities resident in our current airlift fleet and ensure all intra-theater requirements are met. The transfer of Army Time Sensitive/Mission Critical airlift support is intended to capitalize on efficiencies gained by operating the tactical airlift fleet under a single Service. The Department of Defense is now engaged in an overall look to leverage existing intra-theater airlift capability as we look to maximize effectiveness and minimize expenditure of taxpayer dollars.

While the requirement for Joint Cargo Aircraft capability remains, the Air Force will, whenever possible, apply existing capability to fill a requirement before procuring additional hardware. Determining the extent to which we can apply our current fleet to this mission area is the task at hand and the Mobility Capability Requirements Study 2016 will help resolve this question.

TEST AND EVALUATION SUPPORT

Question. The new Administration's budget request cuts PE 0605807F almost \$50 million when compared to the fiscal year 2009 budget and by almost \$60 million compared to the first fiscal year 2010 budget request submitted in January. A portion of the cut is just that, a cut. The second element of the cut is based upon the assertion that there will be a savings realized when 750 contractor positions are converted to civil service solutions.

What analysis has been done to identify what the workforce mix of contractor and civil service should be?

Answer. The Service components received Office of the Secretary of Defense-directed contractor to Department of Defense civilian conversion targets which begin in fiscal year 2010. While currently there is no analysis, the Air Force is in the process of identifying specific in-sourcing candidates to comply with the requirement.

CONTRACTOR TO CIVILIAN CONVERSIONS

Question. The new Administration's budget request cuts PE 0605807F almost \$50 million when compared to the fiscal year 2009 budget and by almost \$60 million compared to the first fiscal year 2010 budget request submitted in Jan. A portion of the cut is just that, a cut. The second element of the cut is based upon the assertion that there will be a savings realized when 750 contractor positions are converted to civil service solutions.

What analysis has been done showing the savings that will result from the conversion of contractor positions to civil services positions? Did the analysis include fully burdened costs of civil service positions similar to costs clearly visible for contractor support (i.e., overhead, G&A, material & handling, etc.)?

Answer. The Service components received Office of the Secretary of Defense-directed contractor to Department of Defense civilian conversion targets which begin in fiscal year 2010. The associated funding reductions were based on the Office of the Secretary of Defense's estimate of 40 percent savings. While currently there is no analysis, the Air Force is in the process of identifying specific in-sourcing candidates to satisfy the requirement.

Question. What is the hiring ramp-up schedule for achieving the contractor to civil service conversions? What analysis has been done to verify that OPM and AF offices can achieve the ramp-up schedule?

Answer. The Service components received Office of the Secretary of Defense-directed contractor to Department of Defense civilian conversion targets which begin

in fiscal year 2010. The associated funding reductions were based on the Office of the Secretary of Defense's estimate of 40 percent savings.

Question. What assessments of disruption to programs (operational readiness perspective) have been completed?

Answer. The Service components received Office of the Secretary of Defense-directed contractor to Department of Defense civilian conversion targets which begin in fiscal year 2010. The associated funding reductions were based on the Office of the Secretary of Defense's estimate of 40 percent savings.

MAJOR RANGE AND TEST FACILITY

Question. Defense Test Resource Management Center (DTRMC) is required by law to do an independent scrub of Major Range & Test Facility Base (MRTFB) budgets of the Services. That was accomplished when the fiscal year 2010 President's budget request was delivered to Congress in January of this year which exceeded the current funding level by \$60 million. No such assessment has been, nor is intended, for the new Administration's budget.

What is the Department's plan to avoid circumventing the law and Congress?

Answer. The Defense Test Resource Management Center has issued an addendum to its previous certification of the fiscal year 2010 President's budget request. This addendum addresses the new Administration's budget request.

QUESTIONS SUBMITTED BY SENATOR ROBERT F. BENNETT

MINUTEMAN III

Question. I deeply appreciate the news I received that the Air Force is going to maintain the solid rocket motor industrial base that supports the Minuteman III land-based portion of our nation's strategic missile defense and nuclear deterrence. Only the prompt transfer of funds will prevent further disruptions in production and provide a desirable continuity of employment for the highly sought after engineers and workers of the solid rocket industrial base.

What is the status of the Air Force's request to the Department of Defense to reprogram fiscal year 2009 funds?

Answer. As part of Department of Defense's fiscal year 2009 Omnibus Reprogramming request, the Air Force has submitted a new start request to initiate an ICBM solid rocket motor warm line. Once new start authority is granted by the Congressional Defense Committees and propulsion replacement program contract close-out finalization is completed, the Air Force intends to internally reprogram available funding from within the Minuteman squadrons program element to fund initial warm line activities as a bridge to fiscal year 2010. The fiscal year 2010 President's budget request includes \$43 million for the ICBM solid rocket motor warm line.

Question. How many solid rocket motors is the Air Force planning to buy? If this is not an accurate measure of the ability to maintain a warm line, please explain the rationale that is driving the budget numbers we have seen.

Answer. The number of solid rocket motors is not an accurate measure of the ability to maintain an industrial base. We believe the ability to maintain the industrial base is captured in the fiscal year 2010 effort which is structured to maintain design-unique material availability; sub-tier material supplier viability; touch labor currency; and design engineering personnel continuity unique to the Minuteman weapon system. In addition, the fiscal year 2010 effort is designed to maintain systems engineering assessment capability and utilize independent verification of production processes.

Actual production quantities will not be known until the contract is finalized.

FORCE RESTRUCTURING

Question. I was disappointed to learn that Hill will lose one of its three F-16 fighter squadrons as a part of the recently announced force-wide restructuring. However, upon reviewing the list of locations from which the Air Force plans to remove F-16s, I noticed bases in the intermountain and southwest regions appear to bear the brunt of F-16 force reductions. I find this puzzling due to the tremendous training opportunities afforded by ranges in these regions.

If the Air Force is seeking cost reductions, is it not more efficient to station aircraft near the ranges, like the Utah Test and Training Range, which affords the most effective training environments?

Answer. Proximity to training ranges is one of many criteria the Air Force uses to make basing decisions. The Combat Air Forces fighter force restructuring plan will provide the United States with a smaller, but more flexible, capable, and lethal

force as we bridge to our ultimate goal of a 5th generation-enabled force. As we developed this plan over the last year, we focused on balancing planned force reductions across active duty, Guard, and Reserve components, as well as overseas and U.S. locations. We carefully analyzed the missions across our units in all the Air Force components to achieve the force mix that made the most strategic sense. The changes in this plan were closely coordinated with our Air National Guard and Air Force Reserve partners, as well as our major commands and affected regional combatant commanders.

Question. I also wanted to ask about the confusing signals I've received regarding the restructuring that could take place at Hill. Under the total force integration concept, the 388th and 419th fighter wings were merged together as a prototype for further efforts to mix active and reserve fighters, an effort that has seen great results so far. Despite this the restructuring calls for one full squadron of F-16s to be removed from that combined wing.

Can you explain to me how the Air Force came to this decision, and what you have determined are the real impacts on the total force integration program?

Answer. The fiscal year 2010 Combat Air Forces fighter force restructuring plan offers the Air Force an opportunity to reap significant savings in funds and manpower by accelerating the retirement of approximately 250 of our oldest fighters, reinvest in critical modifications to our combat forces fleet, procure preferred air-to-air and air-to-ground munitions and critical Air Force and Joint enabling technologies, and redistribute manpower to national priority missions.

These actions will provide the United States with a smaller, but more flexible, capable, and lethal force as a capability-based bridge from our legacy-dominated force to our ultimate goal of a 5th generation-enabled force. The proposed Hill Air Force Base, Utah changes are part of a global resource allocation process that makes strategic sense.

As we developed this plan over the last year, we were successful in balancing planned force reductions across our active duty, Guard, and Reserve components, as well as in the States and overseas locations. We carefully analyzed the missions across our units in all the Air Force components to achieve the force mix that made the most strategic sense. The changes in this plan were closely coordinated with our Air National Guard and Air Force Reserve partners, as well as our major commands and affected regional combatant commanders.

The partnership between the active duty and Air Force Reserve components at Hill Air Force Base, Utah was one of the first Total Force Integration (TFI) initiatives. The classic association with the Air Force Reserve regarding F-16s at Hill Air Force Base, Utah has a proven record of success and it has yielded valuable lessons learned for other TFI associations. This association with the Air Force Reserve at Hill Air Force Base will continue to meet the needs of the combatant commanders during and after any force structure changes. The Air Force will continue to assess the impact of force structure changes on associate units in order to maintain an efficient and effective combat air force.

F-35 SQUADRON AT HILL AFB

Question. It has been over a year and half since I was informed that Hill is to be one of the first two Air Forces Bases in the continental United States to receive an operational F-35 squadron. Now, I understand that Hill is only "on track" to receive the F-35. Why is the Air Force stepping back from the commitment it made?

Is Hill going to receive one of the first two operational F-35 squadrons in the continental United States?

Answer. A corporate, across the Air Force, review was not used in developing the previous "roadmap." To ensure the Air Force did not considered all potential basing opportunities to support basing, I directed the current "Enterprise-Wide Look" (EWL), which will include Hill Air Force Base, Utah. The basing process prior to Fall 2008 was de-centrally executed by our major commands. Basing decisions are now at the Headquarters Air Force level. Bringing the basing decision to this level improves the decision making process to meet corporate Air Force requirements and the EWL planning process will assist in defining a measured, transparent and repeatable process; allowing for a narrowing of the list of potential F-35 basing locations. Upon completion of its internal review, the Air Force will release the results of the EWL and its content consistent with requests for information from the public. It would be premature at this time to presuppose the results of the EWL, but we expect to finalize the initial candidate list for the first increment of operational bases by October 2009.

F-35 SOFTWARE WORKLOAD

Question. I understand 22 percent of the depot maintenance for the F-35 is software. Hill's Software Maintenance Group is ranked as one of the top software engineering corporations in the world with a Level 5 Carnegie Mellon Software Capability Maturity rating. The additions to Hill's Software Center will be completed shortly.

How is Hill's performance rated in the competition for the F-35 software workload?

Answer. The F-35 depot source of repair decision process for software is not complete, and we are several years away from any selection process involving the organic depots. There are ongoing discussions between the F-35 Program Office, the Services, and the prime contractor on the most cost effective method to transition software maintenance from the developing contractors to organic depots. Specifics for the timing of depot activation are dependent on completion of software development, results of flight test, and the maturation of software through the end of the system development and demonstration program. The F-35 Program Office will perform a study during 2011 on the activation costs associated with standing up organic software capability through the Future Years Defense Program. The depot source of repair decision for F-35 software is currently scheduled to be completed by the end of 2014.

 QUESTIONS SUBMITTED TO GENERAL NORTON A. SCHWARTZ

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

AGE AND HEALTH OF TANKER FLEET

Question. General Schwartz, I am concerned about the aging Air Force tanker fleet and the health and age of the KC-135 tankers by the time they are replaced.

Can you update the Committee on the status of the Air Force tanker fleet, including the age of the fleet and any current safety and flight concerns?

Answer. The Air Force tanker force structure includes 415 KC-135 R and T models, and 59 KC-10A aircraft with average fleet ages of 48 years and 24 years, respectively. Upon retirement of the last KC-135 planned for 2040, this tanker will have reached 80 years of service. The KC-10 will have achieved 60 years of service upon its planned retirement. Investment programs for both airframes focus on safety of flight and obsolescence issues. The KC-135 aircraft has six ongoing fleet-wide modification programs:

—*Control Column Actuated Brake.*—Modification preventing an unsafe stabilizer trim wheel runaway condition—fleet modification complete in fiscal year 2010.

—*VOR/ILS Antennae Replacement.*—Replaces the obsolete antennae used for navigation and precision instrument landing systems—this is an fiscal year 2010 New Start program.

—*Block 45 Upgrade.*—Cockpit avionics modernization replacing obsolescent Auto-pilot, Flight Director, Radar Altimeter, and Engine Instruments—contract award late fiscal year 2009.

—*Global Air Traffic Management.*—Updates and replaces Communication Navigation Surveillance/Air Traffic Management (CNS/ATM) equipment to meet restricted airspace requirements worldwide; modification complete in fiscal year 2011.

—*Enhanced Surveillance.*—Replaces APX-110 transponder with APX-119, providing enhanced aircraft tracking and Identify Friend or Foe Mode 5 capability (complete by fiscal year 2010).

—*Mode 5.*—DOD-mandated upgrade to the IFF system used for aircraft identification in Air Defense Operations (fiscal year 2010 to fiscal year 2012).

The KC-10, a commercial derivative of the McDonnell Douglas DC-10-30 delivered in 1981, provides both strategic air refueling and airlift for deployment, employment, redeployment and Joint/Combined support operations. In its current configuration, the KC-10 does not meet future Federal Aviation Administration/International Civil Aviation Organization (ICAO) CNS/ATM requirements for 2015 airspace restrictions. To mitigate operational risk, two modification programs exist for the KC-10:

—*CNS/ATM Modification.*—Addresses near-term issues required to keep aircraft operational within 2015 air traffic mandates/restrictions.

—*Boom Control Unit Replacement.*—Replaces unsustainable Boom Control Unit (complete 2012).

END STRENGTH

Question. General Schwartz, how do you see Air Force missions changing as operations draw down in Iraq and increase in Afghanistan?

Answer. The Air Force will continue to provide critical air, space and cyberspace capabilities to the warfighter in both Joint Operating Areas—Iraq and Afghanistan. Continued improvement in Iraqi security will permit the Air Force to move from a “combat” posture toward one more aligned with “advise and assist,” to include shifting focus toward training the Iraqi Air Force.

In Afghanistan, the Air Force continues to provide unique capabilities to the Commander International Security Assistance Force and U.S. Forces Afghanistan. Since January 2009, the Air Force has increased its efforts in airlift, intelligence, surveillance and reconnaissance, space support, electronic warfare, close air support, engineering and logistics to improve the security environment in preparation for the Afghanistan national elections. In addition, the U.S. Air Force component of U.S. Central Command will increase its theater engagement efforts across the area of responsibility as a long-term and enduring measure to enhance regional security and stability.

IRREGULAR WARFARE

Question. General Schwartz, Secretary Gates has made it clear that irregular warfare is of equal strategic importance as the more traditional methods of warfare.

Can you tell us how the Air Force plans to build its irregular warfare capability and how these initiatives are reflected in the Air Force’s fiscal year 2010 budget request?

Answer. The Air Force recognizes the important need to rebalance our forces with additional irregular warfare capabilities, and we have prioritized investments to continue growing these capabilities. Operations in Iraq and Afghanistan have also increased the requirement for low-density/high-demand personnel and platforms, and we expect this high demand to continue as we prosecute counterterrorism and irregular warfare missions. As such, we have invested additional resources in our Airmen and force structure to ensure that we are able to meet the Combatant Commander’s needs, both today and in the future.

Specifically, for the fiscal year 2010 President’s budget request:

- The Air Force gained the Direct Support airlift mission from the U.S. Army. The Service will use 38 C-27J aircraft to support the Time Sensitive/Mission Critical cargo requirements of the U.S. Army to support irregular warfare operations. These aircraft are well suited for the small fields often associated with irregular warfare type missions.
- The Air Force will support USSOCOM’s equipping of 8 MC-130Ws with Precision Strike packages to augment the current AC-130 fleet. This will provide more aircraft for armed overwatch of ground forces engaging in dispersed irregular warfare operations.
- The Air Force will also establish in fiscal year 2010 a formal air advisor training unit at a base that is yet to be determined to build our international partners’ ability to train partner Air Forces.
- The Air Force will be adding an additional 52 (fiscal year 2010)/437 (FYDP) Joint Terminal Attack Controllers and Tactical Air Control Party personnel in support of Army Modularity and their growth to 45 Active Duty Brigade Combat Teams. To ensure that training requirements will be met, the Air Force has also invested in 42 Joint Tactical Controller Training Rehearsal Systems that provide high-fidelity simulator training.
- The Air Force will also be providing dedicated liaison support aligned at the Army Division level by growing from six to eleven Air Support Operations Centers (ASOCs). These ASOCs will add 51 (fiscal year 2010)/201 (FYDP) personnel and five communications, vehicle, and battlefield equipment packages that will ultimately allow the Air Force and Army airspace control elements to merge into one joint organization.
- Additional air liaison manpower (21 fiscal year 2010/91 FYDP) will be added at the Army division and corps level to bolster Air Force leadership and expertise of key enablers in intelligence, surveillance, and reconnaissance; air mobility; space; and electronic warfare.
- The irregular campaigns we are waging in Iraq and Afghanistan are ISR driven. For the foreseeable future we expect this insatiable demand for ISR to continue, but in an effort to meet this demand, the Air Force has surged unmanned aerial systems (UASs) into the fight achieving 36 combat air patrols orbiting 24 hours a day, 365 days a year. The Air Force has also increased investment to expand to a total of 50 UAS combat air patrols by fiscal year 2011. We are also

adding manpower, as the number of personnel that operate and maintain these systems, and process, exploit, and disseminate the intelligence they gather has dramatically increased.

FIFTH GENERATION AIRCRAFT

Question. General Schwartz, the Air Force has gained a great deal of experience in building fifth generation aircraft. The F-22 aircraft still has a substantial maintenance burden to sustain its stealth characteristics.

Will the F-35 have a more sustainable stealth profile, or will we be facing the time-consuming maintenance issues that the F-22 demands?

Answer. The F-35 Program is applying low observable maintainability lessons learned across the spectrum, centered on designed-in maintainability (materials, design, repair), assessment and verification, and training. The low observable coating material for the F-35 is different than that of the F-22, and the techniques required to repair the F-35 coatings are different than those required for the F-22. With the lessons learned from the F-22 program, we expect the F-35 low observable coatings to be easier to maintain and support.

JOINT CARGO AIRCRAFT

Question. General Schwartz, we recently heard that the Air National Guard was expecting to receive about 48 of these aircraft with more going to Army Guard units.

With a buy of just 38 aircraft, what is the basing plan?

Answer. The fiscal year 2010 President's budget request provides funding for 8 C-27J aircraft for the Air Force to perform direct support missions. The Office of the Secretary of Defense, Joint Staff, National Guard Bureau, Army, and Air Force are working to develop a joint implementation plan which will include basing recommendations.

The first 6 locations for 24 aircraft have been previously announced. They are Martin State, MD; Mansfield, OH; Bradley, CT; Battle Creek, MI; Fargo, ND, and Meridian, MS. Each location will receive four aircraft.

The remaining 14 aircraft will be based in accordance with the Air Force Strategic Basing Process. The National Guard Bureau, the lead agency, will present the C-27J basing criteria to the Strategic Basing/Executive Steering Group in October 2009. The recommended criteria will then be presented to the Secretary and Chief of Staff for final approval.

FIGHTERS IN THE AIR NATIONAL GUARD

Question. General Schwartz, the Air Force is focusing its fighter acquisition on fifth generation, or low observable, aircraft. Is stealth required for the Air Sovereignty mission?

Answer. Homeland Defense is the Department of Defense's first priority and we are committed to the Operation NOBLE EAGLE mission through the long term. Stealth technology is not required to protect aircraft fulfilling this mission under any currently projected threat scenario. However, these Operation NOBLE EAGLE fighter aircraft are not dedicated solely to air defense and should be capable to support the full spectrum of combat operations.

INTELLIGENCE, SURVEILLANCE AND RECONNAISSANCE

Question. General Schwartz, the Army and the Air Force have invested in C-12 airplanes to provide full motion video and other capabilities to our troops in Iraq and Afghanistan.

Do you believe that greater efficiencies could be gained through common management of these programs, and if so, what might those be?

Answer. Multiple Service acquisition entities have been tasked to develop and field unique, quick reaction capabilities to meet the increasing and urgent need for full motion video (FMV) in current overseas contingency operations. In response to this urgent need, the Air Force has already fielded 8 MC-12W Project Liberty aircraft that incorporate a combination of sensors (to include FMV) and are proving their worth in combat on each mission. The Air Force will continue this effort to provide a total of 37 Project Liberty aircraft. At this time, potential increased efficiencies of C-12 class aircraft management may not be possible due the wide variety and combination of C-12 aircraft in separate Services. These aircraft have varying sensor combinations assembled under quick reaction timelines required by the warfighter. Additionally, numerous aircrew manning and training requirements may preclude potential efficiencies gained through a common approach at this time.

Question. General Schwartz, we have recently been informed that there are delays in delivering some of the Project Liberty aircraft.

What do these delays mean for fielding the capability, and do you have a plan in place to fix the problems?

Answer. The Secretary of Defense tasked the Air Force to get him a 70 percent solution to the fight as rapidly as possible. The Air Force delivered an 80 percent solution to the warfighters in less than 9 months and is now following up with an aggressive plan to add the remaining 20 percent through a quick reaction block upgrade program. The initial scope of this development effort was estimated at 8 months; actual results were a 7 month delivery date for aircraft numbers 1–7. We are now implementing lessons learned from the modification of aircraft tails numbers 1–7 to improve the modification process for the remaining deliveries. These include opening additional integration and kit production lines on a 24/7 schedule and improvements to the manufacturing and quality control processes. The first Phase II aircraft (tail #8) has been successfully tested in all aspects of mission performance and is the baseline for tails numbers 9–37. Lessons-learned from the development of tail #8 have been applied to the production line for aircraft numbers 9–37 to prevent any further delivery and deployment delays similar to the ones already experienced. No delays in the remaining aircraft deliveries are anticipated.

EXPORT VERSION OF THE F-22

Question. Secretary Donley, I believe the Department should consider an export program for the F-22 Raptor fighter aircraft. Under the rules for such a program, the costs for developing an export variant is borne by the interested nation, not the United States. This would enable us to provide advanced fighter capabilities to our close friends and allies.

General Schwartz, how could the export of F-22 to U.S. allies in the Pacific Rim region affect our international relationships there? Would this be beneficial?

Answer. Due to legal restrictions on discussing F-22 exports, and the overriding technology transfer issues involved, the Air Force does not have a well vetted position on this subject. However, I believe the export of F-22 aircraft to partner air forces would likely have a net negative effect on U.S. international relationships in the Pacific.

An F-22 export program can be expected to shift focus away from F-35 exports, likely driving undesirable price and schedule changes to the F-35 program. For instance, the manufacturer would divert engineering and management resources away from the F-35 to developing an F-22 export variant. Any perturbations in our close allies' F-35 programs, induced by a mid-course U.S. Government policy modification, could tend to disrupt our current stable relationships.

Finally, the exorbitant costs (well over \$2 billion) associated with development of an export variant could well become a point of contention with our partners. The resulting airframe, likely different in many respects from the Air Force F-22 because of technology transfer issues, would also reduce interoperability and lessen partner satisfaction. Although F-22 export could also provide another avenue for security assistance activities, the size of the Air Force F-22 inventory, unlike the F-15 and F-16, will prevent its development into a robust instrument of security cooperation. In contrast, the planned F-35 fleet size translates into much greater security cooperation opportunities which F-22 purchasers would forego. For these reasons, I believe F-22 export would likely have an overall negative effect.

IRREGULAR WARFARE

Question. General Schwartz, in this time of fiscal challenge, how will the Air Force ensure it maintains its existing conventional superiority while investing in these new capabilities? Where do you envision trade-offs?

Answer. The fiscal year 2010 President's budget request reflects tough, thoughtful decisions aimed at properly resourcing capabilities that enable ongoing operations, while maintaining our superiority in conventional capabilities. We have taken aggressive measures to balance our portion of the fiscal year 2010 President's budget request in a fiscally-constrained environment, amidst the challenges of continuing high operations tempo and rising operating costs. To meet the demands of an uncertain and dynamic international security environment, the fiscal year 2010 President's budget request reflects strategic balance across these diverse mission sets and functions.

Question. General Schwartz, if these new initiatives are implemented, how will you ensure that they complement, and do not unnecessarily duplicate, the capabilities of existing Air Force Special Operations Command air advisory units?

Answer. The Air Force strives to be a good steward of taxpayer dollars. Changes in doctrine, organization, training, materiel, leadership and education, personnel, and facilities are evaluated before a material solution is funded. For example, the establishment of the Air Advisor Schoolhouse is a foundational step towards expanding the Building Partner Capacity and Security Force Assistance structure resident in the general purpose forces of our Air Force. They will definitely complement the Aviation Foreign Internal Defense roles of AF Special Operations Squadron units, primarily the 6th Special Operations Squadron. The 6th Special Operations Squadron is considered the "gold standard" for aviation advising, and the time, talent, and treasure invested in this capability result in a graduate-level capability with expertise focused at regions around the globe. However, the demand signal for advising partner nations in aviation far exceeds what Special Operations Squadron units can support. But just as important, a large percentage of these engagement efforts do not require the graduate-level of expertise that a Special Operations Squadron provides. By developing tiered levels of expertise within the general purpose forces, we can work with ambassadors and country teams for a tailored engagement approach that complements Special Operations Squadron activities.

QUESTIONS SUBMITTED BY SENATOR THAD COCHRAN

JOINT CARGO AIRCRAFT

Question. General Schwartz, you may know that the 186th Air Refueling Wing currently flies KC-135 tanker aircraft out of Key Field in Meridian, MS. Due to a 2005 Base Realignment and Closure decision, all of their aircraft will be reassigned and they are scheduled to be replaced with Joint Cargo Aircraft. Given this direct impact on my State, you are probably not surprised when I tell you that I have been watching the Joint Cargo Aircraft program over the last few years. With this budget, the Department of Defense announced its decision to transfer the Joint Cargo Aircraft mission from the Army to the Air Force.

Is it the Department's intent that only the Air Force operates the Joint Cargo Aircraft? If so, can you explain to the committee what steps you are taking to ensure the Army's logistics requirements will be meant in a timely manner?

Answer. While the C-27J has been transferred exclusively to the Air Force, aircraft manning and basing are still being worked. As for ensuring we meet the Army's logistical needs, the Air Force, in conjunction with the Army, is rapidly developing a Concept of Employment (CONEMP) for the Time-Sensitive/Mission Critical (TS/MC) Direct Support airlift mission closely mirroring the Army's current operational construct. In addition, 25 percent of the crew force in the initial C-27J deployment in 2010 will consist of Army personnel to ensure an experienced core cadre to facilitate initial Air Force operations. Close coordination with the Army throughout the program transfer and into the first deployment of the C-27J in the fall of 2010 will be the cornerstone to ensuring mission success.

F-15 RADAR UPGRADES

Question. General Schwartz, I noticed funding for five additional Active Electronically Scanned Array radars for F-15C aircraft is number eight on your Unfunded Priority List. I understand this type of radar is being used on a number of other fighters as well and that it significantly enhances the capability of these aircraft in detecting and engaging enemy threats.

General Schwartz, could you elaborate on the importance of the Active Electronically Scanned Array radar system and also tell us about the need for these five additional systems?

Answer. Active Electronically Scanned Array radar on the remaining long-term F-15 C/Ds in the Air Force inventory adds significant capability ensuring their viability and utility. Among the advantages are significantly improved performance against cruise missiles; a near doubling of improvement in target acquisition and combat identification range; a baseline capability for digital radio frequency memory protection; the ability to detect and track multiple targets, and connectivity with on-board and off-board sensors.

We will also obtain a smaller deployment footprint (nine to one pallets) and greatly improve the meantime between failures.

Question. If funded, would these systems be installed on Active Duty or Air National Guard F-15C aircraft?

Answer. Eighteen APG-63v3 Active Electronically Scanned Array (AESA) radars have already been funded by the Congress for the Air National Guard. The first 14 radars will be installed in the first quarter of calendar year 2010. The remaining

four radars are being procured. Only long-term F-15s (Golden Eagles) are slated for APG-63v3 AESA installation. The five AESA radars noted above for active duty F-15s will be installed at the same time as the ANG radars.

SUBCOMMITTEE RECESS

Chairman INOUE. And this subcommittee will meet next Tuesday, June 9 at 10:30 a.m. At that time, we will receive testimony from the Secretary of Defense, the Honorable Robert Gates, and from the Chairman of the Joint Chiefs of Staff, Admiral Michael Mullen.

And with that, we would like to thank the men and women of the Air Force for their service to our country. Thank you very much, sir.

General SCHWARTZ. Thank you, Mr. Chairman, for your support. [Whereupon, at 12 noon, Thursday, June 4, the subcommittee was recessed, to reconvene at 10:30 a.m., Tuesday, June 9.]

**DEPARTMENT OF DEFENSE APPROPRIATIONS
FOR FISCAL YEAR 2010**

TUESDAY, JUNE 9, 2009

U.S. SENATE,
SUBCOMMITTEE OF THE COMMITTEE ON APPROPRIATIONS,
Washington, DC.

The subcommittee met at 10:28 a.m., in room SD-192, Dirksen Senate Office Building, Hon. Daniel K. Inouye (chairman) presiding.

Present: Senators Inouye, Leahy, Feinstein, Murray, Specter, Cochran, Bond, and Shelby.

DEPARTMENT OF DEFENSE

OFFICE OF THE SECRETARY

STATEMENTS OF:

HON. ROBERT M. GATES, SECRETARY OF DEFENSE

ADMIRAL MICHAEL G. MULLEN, U.S. NAVY, CHAIRMAN, JOINT CHIEFS OF STAFF

ACCOMPANIED BY HON. ROBERT F. HALE, UNDER SECRETARY OF DEFENSE (COMPTROLLER)

STATEMENT OF CHAIRMAN DANIEL K. INOUYE

Chairman INOUYE. This morning the subcommittee is pleased to welcome Dr. Robert Gates, Secretary of Defense, and Admiral Mike Mullen, the Chairman of the Joint Chiefs of Staff, to testify on the administration's budget for fiscal year 2010. Mr. Secretary, while the full Senate Appropriations Committee has already had the pleasure of meeting with you earlier this year regarding the so-called supplemental bill, let me extend a warm welcome to you on behalf of the Defense Subcommittee.

Your continued willingness to put your Nation's needs ahead of your personal interests demonstrates your unwavering commitment to public service and your dedication to the men and women in our military, and our Nation owes you a great debt of gratitude.

The administration has requested \$534 billion for the base budget of the Department of Defense, an increase of \$21 billion over the amount enacted in the last fiscal year. Additionally, the administration has requested \$130 billion in supplemental nonemergency funding for overseas contingency operations in the next fiscal year.

Mr. Secretary, you have called this a reform budget and in recent months you have given several keynote speeches emphasizing in particular the need for greater balance in our force structure be-

tween competing requirements for irregular warfare and conventional warfare and for changing the way the Defense Department does business. This budget request before us reflects these priorities and, as you're well aware, it will raise a few questions.

A key theme you have emphasized in recent months is the need to improve an institutional home in the Department of Defense for the warfighter engaged in the current irregular fight. Much of the critical force protection equipment that is used with great success in the theater today has been funded outside the regular defense budget process and is being managed by newly created ad hoc organizations that appear to be temporary in nature.

For example, since 2005 the Department has procured over 16,000 mine-resistant ambush-protected vehicles, funded entirely with supplemental appropriations. Yet even after 5 years, the role of these vehicles in our force structure and the future role of the office that manages this program within the Department are undefined.

Another example is the ISR Task Force, which is to accelerate the fielding of critical intelligence, surveillance, and reconnaissance assets into the theater. You have made it a point to emphasize these capabilities by adding \$2 billion to the base budget for the ISR capabilities. Yet the role of this task force within the Department's institutional chain of command remains ad hoc and the future is undetermined.

There's no question that these capabilities will be needed in the future. So we hope today you can illustrate to the subcommittee how we can institutionalize the lessons learned with respect to equipping our warfighter and permanently address the warfighter's requirements in the DOD bureaucracy without continuously adding bureaucratic layers.

At the same time, Mr. Secretary, conventional threats to our national security remain. While irregular warfare is and will presumably continue to be the preferred tactic of non-state actors, we cannot lose sight of threats from traditional nation states such as North Korea, Iran, and others. So as we consider the many adjustments your budget proposes to modernize programs designed to address conventional threats, it is important that we understand the strategic underpinnings and consequences of curtailing or terminating programs such as the F-22, the C-17 transport, or future combat systems manned ground vehicles.

Now, there's no question, Mr. Secretary, that the requirements to winning irregular conflicts have been neglected too long. But I believe we must ensure that we strike the right balance between preparing for both irregular and regular wars, and we look forward to hearing your thoughts on that matter.

Finally, Mr. Secretary, your budget emphasizes our Nation's greatest military asset, the All Volunteer Force, by fully funding end strength growth, providing for increased medical research, and increased funding for warfighter families. These programs have long been funded through supplemental appropriations and we welcome your commitment to our servicemembers and their families by institutionalizing these programs in the base budget.

On the other hand, the rising military personnel and healthcare costs are creating budget pressures on our acquisition programs,

calling into question the affordability of many high-priced platforms designed to meet specific military requirements.

So, gentlemen, we have much to discuss this morning. We very much appreciate your being here with us today and we look forward to your testimony. However, before proceeding with your opening statements, may I call upon the vice chairman of the subcommittee, Senator Cochran, for comments.

STATEMENT OF SENATOR THAD COCHRAN

Senator COCHRAN. Mr. Chairman, thank you. I'm pleased to join you in welcoming the distinguished panel to review the budget request of the Department of Defense.

Mr. Secretary, Admiral Mullen, and Comptroller Hale, we appreciate the hard work you're doing and the challenges you face, and we want to be sure that what we do will help deal with the problems that we face in the national security arena, and we thank you for your distinguished service.

Chairman INOUE. Senator Leahy.

STATEMENT OF SENATOR PATRICK J. LEAHY

Senator LEAHY. Just very briefly, Mr. Chairman. I am glad to see the Secretary and Admiral Mullen. I've had many conversations with them and I appreciate their help, as well as Mr. Hale's assistant. I just had an opportunity to lead a Senate delegation on a trip to Iraq and Pakistan and Afghanistan. You've made some visits of your own there, which I think is of significance to the troops, although I think they're probably more excited to see Steven Colbert than they were to see me.

But we did see some extremely hard-working men and women in uniform in each of the places we went. We also saw our coalition forces, especially in Afghanistan, working diligently and taking a large number of casualties. Canada, our neighbor to the North, has had many, as have other coalition nations, and yet they're working very, very hard.

I wanted to be there because, as I've mentioned before, Mr. Secretary, the end of the year we'll see 1,800 members, up to 1,800 members, of the 86th Infantry Brigade Combat Team from the Vermont National Guard going there. They're one of the only units with mountain skills. They train both summertime and in 20 degree below zero weather in Vermont in the wintertime. They are training very hard.

I will, Mr. Chairman, ask some questions on that. Of course, I'm very proud of these men and women that are going. But this is the largest deployment we've ever had. I see Senator Feinstein here. It would be the equivalent on a per capita basis of about 100,000 people going from California.

Mr. Secretary, I appreciate your response and your willingness to work with us on some of the special situations the Guard will have.

Thank you, Mr. Chairman.

Chairman INOUE. Thank you.

Senator Shelby.

Senator SHELBY. Mr. Chairman, I just want to welcome Secretary Gates here, Admiral Mullen, and Comptroller Hale. Thank you.

Chairman INOUE. Thank you, Senator Shelby, Senator Feinstein, Senator FEINSTEIN. No opening statement, Mr. Chairman. I just welcome Secretary Gates and Admiral Mullen.
Chairman INOUE. Senator Bond.

STATEMENT OF SENATOR CHRISTOPHER S. BOND

Senator BOND. Thank you very much, Mr. Chairman.

Welcome, Secretary Gates, Admiral Mullen. We congratulate you on the progress you're making in Afghanistan and Pakistan. It's not easy, but I think you have a way ahead with the counterinsurgency strategy. I will be back to ask some questions, but two points I want to raise with you.

First, you have said we need to shift away from the 99 percent exquisite, service-centric platforms that are so costly and so complex that they take forever to build, deploy in limited quantities, and we must look more to the 80 percent multiservice solutions that can be produced on time, on budget, and in significant numbers. Mr. Secretary, I'd like to know how that fits with the recommendation in the overhead area to go with the NCEO when there are a number of less expensive solutions that can provide a multitude of opportunities for getting the overhead collection we need. Chair Feinstein and I on the Intelligence Committee have been looking at that very intensely and we would like to continue the discussions with you on that.

The second thing, Admiral Roughead recently stated the F/A-18E and F is the aviation backbone of our Navy's ability to project power ashore, and the way the numbers of carrier-capable strike fighters will decrease between 2016 and 2020 to affect our air wing capacity effectiveness. We had asked last year and actually set in law a requirement that there be a report on the multiyear procurement of the F/A-18. I believe that was due in March. We think that is a very important element to consider, particularly with the delays in time, the budget being exceeded, and the failure to meet operational standards of the plane forecast to take its place to date.

So I will look forward to asking more about those and may have some questions for the record. I have another meeting I have to go to, but I will come back for the questions. I thank the chairman and the members of the subcommittee for the indulgence.

Chairman INOUE. Thank you.

Now, Mr. Secretary.

Secretary GATES. Mr. Chairman, Senator Cochran, members of the subcommittee: Thank you for inviting us to discuss the details of the President's fiscal year 2010 defense budget. There is a tremendous amount of material here and I know that there are a number of questions, so I'll keep my opening remarks brief and focus on the strategy and thinking behind many of these recommendations. My submitted testimony has more detailed information on specific programmatic decisions.

First and foremost, as you suggested and commented on, Mr. Chairman, this is a reform budget, reflecting lessons learned in Iraq and Afghanistan, yet also addressing the range of other potential threats around the world now and in the future. I visited Afghanistan last month and as we increase our presence there and refocus our efforts with a new strategy, I wanted to get a sense

from the ground level of the challenges and needs so we can give our troops the equipment and the support to be successful and come home safely.

Indeed, listening to our troops and commanders unvarnished and unscripted has from the moment I took this job been the greatest single source for ideas on what this Department needs to do, both operationally and institutionally. As I told a group of soldiers in Afghanistan, they have done their job; now it is time for us in Washington to do ours.

In many respects this budget builds on all the meetings I have had with troops and commanders and everything that I have learned over the past 2½ years, all underpinning this budget's three principal objectives: First, to reaffirm our commitment to take care of the All Volunteer Force, which in my view represents America's greatest strategic asset. As Admiral Mullen says, if we don't get the people part of this business right, none of the other decisions will matter.

Second, to rebalance this Department's programs in order to institutionalize and enhance our capabilities to fight the wars we are in and the scenarios we are most likely to face in the years ahead, while at the same time providing a hedge against other risks and contingencies.

Third, in order to do this we must reform how and what we buy, making a fundamental overhaul of our approach to procurement, acquisition, and contracting.

From these priorities flow a number of strategic considerations, more of which are included in my submitted testimony. The base budget request is for \$533.8 billion for fiscal year 2010, a 4 percent increase over the fiscal year 2009 enacted level. After inflation, that is 2.1 percent real growth. In addition, the Department's budget request includes \$130 billion to support overseas contingency operations, principally in Iraq and Afghanistan.

I know that there has been discussion about whether this is in fact sufficient to maintain our defense posture, especially during a time of war. I believe that it is. Indeed, I have warned in the past that our Nation must not do what we have done after various previous times of conflict on so many occasions and slash defense spending. I can assure you that I will do everything in my power to prevent that from happening on my watch.

This budget is intended to help steer the Department of Defense toward an acquisition and procurement strategy that is sustainable over the long term, that matches real requirements to needed and feasible capabilities.

As you know, this year we have funded the costs of the war through the regular budgeting process, as opposed to emergency supplementals. By presenting this budget together, we hope to give a more accurate picture of the costs of the wars and also create a more unified budget process to decrease some of the churn usually associated with funding for this Department.

This budget aims to alter many programs and many of the fundamental ways that the Department of Defense runs its budgeting, acquisition, and procurement processes. In this respect, three points come to mind about the strategic thinking behind these decisions. First, sustainability. By that I mean sustainability in light

of current and potential fiscal constraints. It simply is not reasonable to expect the defense budget to continue increasing at the same rate it has over the last number of years. We should be able to secure our Nation with a base budget of more than half a trillion dollars, and I believe this budget focuses money where it can most effectively do that.

I also mean sustainability of individual programs. Acquisition priorities have changed from defense secretary to defense secretary, administration to administration, and Congress to Congress. Eliminating waste and ending requirements creep, terminating programs that go too far outside the line, and bringing annual costs for individual programs down to a more reasonable level will reduce this friction.

Second, balance. We have to be prepared for the wars we are most likely to fight, not just the ones we have been traditionally best suited to fight or threats we conjure up from potential adversaries, who in the real world also have finite resources. As I've said before, even when considering challenges from nation states with modern militaries, the answer is not necessarily buying more technologically advanced versions of what we built on land, at sea, and in the air to stop the Soviets during the cold war.

At the same time, this budget robustly funds many modernization programs that will sustain our significant advantages for potential future conflict. Where certain modernization programs have been cancelled because of acquisition, technological or requirements issues, such as FCS vehicles, it is our intention to re-launch those modernization programs on a much sounder and more sustainable basis after completion of the Quadrennial Defense Review (QDR), the nuclear posture review, the ballistic missile defense review, and the space policy review later this year.

Finally, there are all the lessons learned from the last 8 years, on the battlefield and, perhaps just as importantly, institutionally at the Pentagon. The responsibility of this Department first and foremost is to fight and win the Nation's wars, not just constantly prepare for them. We have to do better. In that respect, the conflicts we are in have revealed numerous problems that I am working to improve and this budget makes real headway in that respect.

At the end of the day, this budget is less about numbers than it is about how the military thinks about the nature of war and prepares for the future, about how we take care of our people and institutionalize support for the warfighter in the long term, about the role of the services in how we can buy weapons as jointly as we fight, about reforming our requirements and acquisition processes.

I know that some will take issue with individual decisions. I would ask, however, that you look beyond specific programs and instead at the full range of what we are trying to do, the totality of the decisions and how they will change the way we prepare for and fight wars in the future.

As you consider this budget and specific programs, I would caution that each program decision is zero sum. A dollar spent for capabilities excess to our real needs is a dollar taken from capability

we do need, often to sustain our men and women in combat and bring them home safely.

PREPARED STATEMENT

Once again, I thank you for this subcommittee's ongoing support of our men and women in uniform, and we look forward to your questions.

Chairman INOUE. Thank you very much, Mr. Secretary.
[The statement follows:]

PREPARED STATEMENT OF ROBERT M. GATES

INTRODUCTION

Mr. Chairman, Senator Cochran, members of the committee, thank you for inviting me to discuss the details of the President's fiscal year 2010 defense budget. First and foremost, this is a reform budget—reflecting lessons learned in Iraq and Afghanistan, yet also addressing the range of other potential threats around the world, now and in the future.

I was in Afghanistan last month. As we increase our presence there—and refocus our efforts with a new strategy—I wanted to get a sense from the ground level of what the challenges and needs are so that we can give our troops the equipment and support to be successful and come home safely. Indeed, listening to our troops and commanders—unvarnished and unscripted—has from the moment I took this job been the single greatest source for ideas on what the Department needs to do both operationally and institutionally. As I told a group of soldiers in Afghanistan, they have done their job. Now it is time for us in Washington to do ours. In many respects, this budget builds on all the meetings I have had with service members, and all that I have learned over the past 2½ years—all underpinning this budget's three principal objectives:

- First, to reaffirm our commitment to take care of the all-volunteer force, which, in my view represents America's greatest strategic asset; as Admiral Mullen says, if we don't get the people part of our business right, none of the other decisions will matter;
- Second, to rebalance this department's programs in order to institutionalize and enhance our capabilities to fight the wars we are in and the scenarios we are most likely to face in the years ahead, while at the same time providing a hedge against other risks and contingencies; and
- Third, in order to do all this, we must reform how and what we buy, meaning a fundamental overhaul of our approach to procurement, acquisition, and contracting.

From these priorities flow a number of strategic considerations, which I will discuss as I go through the different parts of the budget.

The base budget request is for \$533.8 billion for fiscal year 2010—a 4 percent increase over the fiscal year 2009 enacted level. After inflation, that is 2.1 percent real growth. In addition, the Department's budget request includes \$130 billion to support overseas contingency operations, primarily in Iraq and Afghanistan. I know there has been some discussion about whether this is, in fact, sufficient to maintain our defense posture—especially during a time of war. I believe it is. Indeed, I have warned in the past that our Nation must not do what we have done after previous times of conflict and slash defense spending. I can assure you that I will do everything in my power to prevent that from happening on my watch. This budget is intended to help steer the Department of Defense toward an acquisition and procurement strategy that is sustainable over the long term—that matches real requirements to needed and feasible capabilities.

I will break this down into three sections: our people, today's warfighter, and the related topics of acquisition reform and modernization.

OUR PEOPLE

Starting with the roll-out of the Iraq surge, my overriding priority has been getting troops at the front everything they need to fight, to win, and to survive while making sure that they and their families are properly cared for when they return. So, the top-priority recommendation I made to the President was to move programs that support the warfighters and their families into the services' base budgets, where they can acquire a bureaucratic constituency and long-term funding. To take care of people, this budget request includes, among other priorities:

- \$136 billion to fully protect and properly fund military personnel costs—an increase of nearly \$11 billion over the fiscal year 2009 budget level. This means completing the growth in the Army and Marines while halting reductions in the Air Force and Navy. The Marine Corps and Army will meet their respective end-strengths of 202,100 and 547,400 by the end of this fiscal year, so this money will be for sustaining those force levels in fiscal year 2010 and beyond;
- \$47.4 billion to fund military health care;
- \$3.3 billion for wounded, ill and injured, traumatic brain injury, and psychological health programs, including \$400 million for research and development. We have recognized the critical and permanent nature of these programs by institutionalizing and properly funding these efforts in the base budget; and
- \$9.2 billion for improvements in child care, spousal support, lodging, and education, some of which was previously funded in the bridge and supplemental budgets.

We must move away from ad hoc funding of long-term commitments. Overall, we have shifted \$8 billion for items or programs recently funded in war-related appropriations into the base budget.

TODAY'S WARFIGHTER

As I told the Congress in January, our struggles to put the defense bureaucracies on a war footing these past few years have revealed underlying flaws in the priorities, cultural preferences, and reward structures of America's defense establishment—a set of institutions largely arranged to prepare for conflicts against other modern armies, navies, and air forces. Our contemporary wartime needs must receive steady long-term funding and must have a bureaucratic constituency similar to conventional modernization programs and similar to what I have tried to do with programs to support our troops. The fiscal year 2010 budget reflects this thinking:

First, we will increase intelligence, surveillance and reconnaissance (ISR) support for the warfighter in the base budget by some \$2 billion. This will include:

- Fielding and sustaining 50 Predator-class unmanned aerial vehicle orbits by fiscal year 2011 and maximizing their production. This capability, which has been in such high demand in both Iraq and Afghanistan, will now be permanently funded in the base budget. It will represent a 62 percent increase in capability over the current level and 127 percent from over a year ago;
- Increasing manned ISR capabilities such as the turbo-prop aircraft deployed so successfully as part of "Task Force Odin" in Iraq; and
- Initiating research and development on a number of ISR enhancements and experimental platforms optimized for today's battlefield.

Second, we will also spend \$500 million more in the base budget than last year to boost our capacity to field and sustain more helicopters—an urgent demand in Afghanistan right now. Today, the primary limitation on helicopter capacity is not airframes but shortages of maintenance crews and pilots. So our focus will be on recruiting and training more Army helicopter crews.

Third, to strengthen global partnership efforts, we will fund \$550 million for key initiatives. These include training and equipping foreign militaries to undertake counterterrorism and stability operations.

Fourth, to grow our special operations capabilities, we will increase personnel by more than 2,400—or 4 percent—and will buy more aircraft for special operations forces. We will also increase the buy of Littoral Combat Ships (LCS)—a key capability for presence, stability, and counterinsurgency operations in coastal regions—from two to three ships in fiscal year 2010.

Fifth, to improve our intra-theater lift capacity, we will increase the charter of Joint High Speed Vessels (JHSV) from two to four until our own production program begins deliveries in 2011.

And, finally, we will stop the growth of Army Brigade Combat Teams (BCTs) at 45 versus the previously planned 48, while maintaining the planned increase in end strength to 547,400. This will ensure that we have better-manned units ready to deploy, and help put an end to the routine use of stop loss—which often occurs because certain specialties are in high demand. This step will also lower the risk of hollowing the force.

ACQUISITION REFORM AND INSOURCING

In today's environment, maintaining our technological and conventional edge requires a dramatic change in the way we acquire military equipment. I welcome legislative initiatives in the Congress to help address some of these issues and look forward to working with lawmakers in this regard. This budget will support these goals by:

- Reducing the number of support service contractors from our current 39 percent of the workforce to the pre-2001 level of 26 percent and replacing them with full-time government employees. Our goal is to hire as many as 13,800 new civil servants in fiscal year 2010 to replace contractors and up to 33,600 new civil servants in place of contractors over the next 5 years;
- Increasing the size of the defense acquisition workforce, converting 10,000 contractors, and hiring an additional 10,000 government acquisition professionals by 2015—beginning with 4,080 in fiscal year 2010; and
- Terminating and delaying programs whose costs are out of hand, whose technologies are immature, or whose requirements are questionable—for example, the VH-71 presidential helicopter.

MODERNIZATION

We must be prepared for the future—prepared for challenges we can see on the horizon and ones that we may not even have imagined. I know that some people may think I am too consumed by the current wars to give adequate consideration to our long-term acquisition needs. This budget provides \$186 billion for modernization, which belies that claim.

As I went through the budget deliberations process, a number of principles guided my decisions:

The first was to halt or delay production on systems that relied on promising, but as yet unproven, technologies, while continuing to produce—and, as necessary, upgrade—systems that are best in class and that we know work. This was a factor in my decisions to cancel the Transformational Satellite (TSAT) program and instead build more Advanced Extremely High Frequency (AEHF) satellites.

Second, where different modernization programs within services existed to counter roughly the same threat, or accomplish roughly the same mission, we must look more to capabilities available across the services. While the military has made great strides in operating jointly over the past two decades, procurement remains overwhelmingly service-centric. The Combat Search and Rescue helicopter, for example, had major development and cost problems to be sure. But what cemented my decision to cancel this program was the fact that we were on the verge of launching yet another single-service platform for a mission that in the real world is truly joint. This is a question we must consider for all of the services' modernization portfolios.

Third, I looked at whether modernization programs had incorporated the experiences of combat operations since September 11th. This was particularly important to the ground services, which will be in the lead for irregular and hybrid campaigns of the future. The Future Combat Systems' ground vehicle component was particularly problematic in this regard.

Fourth, I concluded we needed to shift away from the 99 percent “exquisite” service-centric platforms that are so costly and so complex that they take forever to build, then are deployed in very limited quantities. With the pace of technological and geopolitical change, and the range of possible contingencies, we must look more to the 80 percent multi-service solution that can be produced on time, on budget, and in significant numbers.

This relates to a final guiding principle: the need for balance—to think about future conflicts in a different way—to recognize that the black and white distinction between irregular war and conventional war is an outdated model. We must understand that we face a more complex future than that, a future where all conflict will range across a broad spectrum of operations and lethality. Where near-peers will use irregular or asymmetric tactics that target our traditional strengths. And where non-state actors may have weapons of mass destruction or sophisticated missiles. This kind of warfare will require capabilities with the maximum possible flexibility to deal with the widest possible range of conflict.

Overall, we have to consider the right mix of weapons and platforms to deal with the span of threats we will likely face. The goal of our procurement should be to develop a portfolio—a mixture of capabilities whose flexibility allows us to respond to a spectrum of contingencies. It is my hope that the Quadrennial Defense Review will give us a more rigorous analytical framework for dealing with a number of these issues. That is one reason I delayed a number of decisions on programs such as the follow-on manned bomber, the next generation cruiser, as well as overall maritime capabilities. But where the trend of future conflict is clear, I have made specific recommendations.

AIR CAPABILITIES

This budget demonstrates a serious commitment to maintaining U.S. air supremacy, the sine qua non of American military strength for more than six decades. The key points of this budget as it relates to air capabilities are:

- An increase in funding from \$6.8 to \$10.4 billion for the fifth-generation F-35, which reflects a purchase of 30 planes for fiscal year 2010 compared to 14 in fiscal year 2009. This money will also accelerate the development and testing regime to fix the remaining problems and avoid the development issues that arose in the early stages of the F-22 program. More than 500 F-35s will be produced over the next 5 years, with more than 2,400 total for all the services. Russia is probably 6 years away from Initial Operating Capability of a fifth-generation fighter and the Chinese are 10 to 12 years away. By then we expect to have more than 1,000 fifth-generation fighters in our inventory;
- This budget completes the purchase of 187 F-22 fighters—representing 183 planes plus the four funded in the fiscal year 2009 supplemental to replace one F-15 and three F-16s classified as combat losses;
- We will complete production of the C-17 airlifter program this fiscal year. Our analysis concludes that we have enough C-17s with the 205 already in the force and currently in production to meet current and future needs;
- To replace the Air Force's aging tanker fleet, we will maintain the KC-X aerial refueling tanker schedule and funding, with the intent to solicit bids this summer. Our aging tankers, the lifeblood of any expeditionary force, are in serious need of replacement;
- We will retire approximately 250 of the oldest Air Force tactical fighter aircraft in fiscal year 2010; and
- Before continuing with a program for a next-generation manned bomber, we should first assess the requirements and what other capabilities we might have for this mission—and wait for the outcome of the Quadrennial Defense Review, the Nuclear Posture Review, and the outcome of post-START arms-control negotiations.

MARITIME CAPABILITIES

The United States must not take its current maritime dominance for granted and needs to invest in programs, platforms, and personnel to ensure that dominance in the future. But rather than go forward under the same assumptions that guided our shipbuilding during the Cold War, I believe we need to reconsider a number of assumptions—a process that will, as I mentioned, be greatly helped by the QDR.

We must examine our blue-water fleet and the overall strategy behind the kinds of ships we are buying. We cannot allow more ships to go the way of the DDG-1000: since its inception the projected buy has dwindled from 32 to three as costs per ship have more than doubled.

The healthy margin of dominance at sea provided by America's existing battle fleet makes it possible and prudent to slow production of several shipbuilding programs. This budget will:

- Shift the Navy Aircraft Carrier program to a 5-year build cycle, placing it on a more fiscally sustainable path. This will result in a fleet of 10 carriers after 2040;
- Delay the Navy CG-X next generation cruiser program to revisit both the requirements and acquisition strategy; and
- Delay amphibious ship and sea-basing programs such as the 11th Landing Platform Dock (LPD) ship and the Mobile Landing Platform (MLP) ship to fiscal year 2011 in order to assess costs and analyze the amount of these capabilities the Nation needs.

The Department will continue to invest in areas where the need and capability are proven by:

- Accelerating the buy of the Littoral Combat Ship, which, despite its development problems, is a versatile ship that can be produced in quantity and go to places that are either too shallow or too dangerous for the Navy's big, blue-water surface combatants;
- Adding \$200 million to fund conversion of six additional Aegis ships to provide ballistic missile defense capabilities;
- Beginning the replacement program for the Ohio class ballistic missile submarine; and
- Using fiscal year 2010 funds to complete the third DDG-1000 Destroyer and build one DDG-51 Destroyer. The three DDG-1000 class ships will be built at Bath Iron Works in Maine and the DDG-51 Aegis Destroyer program will be restarted at Northrop Grumman's Ingalls shipyard in Mississippi.

LAND CAPABILITIES

As we have seen these last few years, our land forces will continue to bear the burdens of the wars we are in—and also the types of conflicts we may face in the future, even if not on the same scale. As I said earlier, we are on track with the expansion of the ground forces, and have added money for numerous programs that directly support warfighters and their families.

Since 1999, the Army has been pursuing its Future Combat Systems—an effort to simultaneously modernize most of its platforms, from the way individual soldiers communicate to the way mechanized divisions move. Parts of the FCS program have already demonstrated their adaptability and relevance to today's conflicts. For example, the connectivity of the Warfighter Information Network will dramatically increase the agility and situational awareness of the Army's combat formations.

But the FCS vehicle program is, despite some adjustments, based on the same assumptions as when FCS was first conceived. The premise behind the design of these vehicles is that lower weight, greater fuel efficiency, and, above all, near-total situational awareness, compensate for less heavy armor—a premise that I believe was belied by the close-quarters combat, urban warfare, and increasingly lethal forms of ambush that we've seen in both Iraq and Afghanistan. I would also note that the current vehicle program does not include a role for our recent \$25 billion investment in the MRAP vehicles being used to good effect in today's conflicts.

With that in mind:

- We have canceled the existing FCS ground vehicle program, and will reevaluate the requirements, technology, and approach and then relaunch a new Army vehicle modernization program, including a competitive bidding process;
- The FCS budget in fiscal year 2010 is \$3 billion. I have directed that the new FCS program be fully funded in the out-years; and
- We will accelerate FCS's Warfighter Information Network development and field it, along with proven FCS spin-off capabilities, across the entire Army.

MISSILE DEFENSE

The United States has made great technological progress on missile defense in the last two decades, but a number of questions remain about certain technologies and the balance between research and development on one hand, and procurement on the other. This is one area where I believe the overall sustainability of the program depends on our striking a better balance. To this end, this budget will:

- Restructure the program to focus on the rogue state and theater missile threat. We will not increase the number of current ground-based interceptors in Alaska as had been planned. But we will continue to robustly fund research and development to improve the capability we already have to defend against long-range rogue missile threats—threats that North Korea's missile launch reminds us are real;
- Cancel the second airborne laser (ABL) prototype aircraft. We will keep the existing aircraft and shift the program to an R&D effort. The ABL program has significant affordability and technology problems and the program's proposed operational role is highly questionable;
- Terminate the Multiple Kill Vehicle (MKV) program because of its significant technical challenges and the need to take a fresh look at the requirement. Overall, the Missile Defense Agency program will be reduced by \$1.2 billion; and
- Increase by \$700 million funding for our most capable theater missile defense systems like the THAAD and SM-3 programs.

CYBER SECURITY

To improve cyberspace capabilities, this budget:

- Increases funding for a broad range of Information Assurance capabilities to improve the security of our information as it is generated, stored, processed, and transported across our IT systems;
- Increases the number of cyber experts this department can train from 80 students per year to 250 per year by fiscal year 2011; and
- Establishes a cyber test range.

There is no doubt that the integrity and security of our computer and information systems will be challenged on an increasing basis in the future. Keeping our cyber infrastructure safe is one of our most important national-security challenges. While information technology has dramatically improved our military capabilities, our reliance on data networks has at the same time left us more vulnerable. Our networks are targets for exploitation, and potentially disruption or destruction, by a growing

number of entities that include foreign governments, non-state actors, and criminal elements.

OVERSEAS CONTINGENCY OPERATIONS

As you know, this year we have funded the costs of the wars through the regular budgeting process—as opposed to emergency supplementals. By presenting this budget together, we hope to give a more accurate picture of the costs of the wars and also create a more unified budget process to decrease some of the churn usually associated with funding for the Department of Defense.

We are asking for \$130 billion to directly support the missions in Iraq and Afghanistan. This is less than the \$141.7 billion we asked for last year through the bridge fund and the remaining supplemental request—which in part reflects shifting some programs into the base budget.

The OCO request includes \$74.1 billion to maintain our forces in Afghanistan and Iraq—from pre-deployment training, to transportation to or from theater, to the operations themselves.

—In Afghanistan, this will support an average of 68,000 military members and six Brigade Combat Team (BCT) equivalents—plus support personnel; and

—In Iraq, this will fund an average of 100,000 military members, but also reflects the President's decision to cut force levels to six Advisory and Assistance Brigades by August 31, 2010. Compared to the fiscal year 2008 enacted levels for Operation Iraqi Freedom, we are asking for less than half.

Aside from supporting direct operations, the OCO funding also includes, among other programs:

—\$17.6 billion to replace and repair equipment that has been worn-out, damaged, or destroyed in theater. The major items include helicopters, fixed-wing aircraft, trucks, Humvees, Bradleys, Strykers, other tactical vehicles, munitions, radios, and various combat support equipment;

—\$15.2 billion for force protection, which includes \$5.5 billion for MRAPs—\$1.5 billion to procure 1,080 new MRAP All Terrain Vehicles (ATV) for Afghanistan and \$4 billion for sustainment, upgrades, and other costs for MRAPs already fielded or being fielded.

—\$7.5 billion for the Afghan National Security Forces (ANSF). Ultimately, the Afghan people will shoulder the responsibility for their own security, so we must accelerate our training of their security forces in order to get more Afghans into the fight;

—\$1.5 billion for the Commander's Emergency Response Fund (CERP)—a program that has been very successful in allowing commanders on the ground to make immediate, positive impacts in their areas of operation. It will continue to play a pivotal role as we increase operations in Afghanistan and focus on providing the population with security and opportunities for a better life. I should note that the Department has taken a number of steps to ensure the proper use of this critical combat-enhancing capability;

—\$1.4 billion for military construction—most of which will go toward infrastructure improvements in Afghanistan to support our increased troop levels; and

—\$700 million for the Pakistan Counterinsurgency Capability Fund (PCCF). This program will be carried out with the concurrence of the Secretary of State and will complement existing and planned State Department efforts by allowing the CENTCOM commander to work with Pakistan's military to build counterinsurgency capability. I know there is some question about funding both the PCCF and the Foreign Military Financing program, but we are asking for this authority for the unique and urgent circumstances we face in Pakistan—for dealing with a challenge that simultaneously requires military and civilian capabilities. This is a vital element of the President's new Afghanistan-Pakistan strategy.

CONCLUSION

Let me close with a few final thoughts.

This budget aims to alter many programs, and many of the fundamental ways that the Department of Defense runs its budgeting, acquisition, and procurement processes. In this respect, three key points come to mind about the strategic thinking behind these decisions.

First of all, sustainability. By that, I mean sustainability in light of current and potential fiscal constraints. It is simply not reasonable to expect the defense budget to continue increasing at the same rate it has over the last number of years. We should be able to secure our Nation with a base budget of more than half a trillion dollars—and I believe this budget focuses money where it can more effectively do just that.

I also mean sustainability of individual programs. Acquisition priorities have changed from defense secretary to defense secretary, administration to administration, and congress to congress. Eliminating waste, ending "requirements creep," terminating programs that go too far outside the line, and bringing annual costs for individual programs down to more reasonable levels will reduce this friction.

Second of all, balance. We have to be prepared for the wars we are most likely to fight—not just the wars we have traditionally been best suited to fight, or threats we conjure up from potential adversaries who, in the real world, also have finite resources. As I've said before, even when considering challenges from nation-states with modern militaries, the answer is not necessarily buying more technologically advanced versions of what we built—on land, at sea, or in the air—to stop the Soviets during the Cold War.

Finally, there are all the lessons learned from the last 8 years—on the battlefield and, perhaps just as important, institutionally back at the Pentagon. The responsibility of this department first and foremost is to fight and win wars—not just constantly prepare for them. In that respect, the conflicts we are in have revealed numerous problems that I am working to improve; this budget makes real headway in that respect.

At the end of the day, this budget is less about numbers than it is about how the military thinks about the nature of warfare and prepares for the future. About how we take care of our people and institutionalize support for the warfighter for the long term. About the role of the services and how we can buy weapons as jointly as we fight. About reforming our requirements and acquisition processes.

I know that some of you will take issue with individual decisions. I would, however, ask you to look beyond specific programs, and instead at the full range of what we are trying to do—at the totality of the decisions and how they will change the way we prepare for and fight wars in the future.

Once again, I thank you for your ongoing support of our men and women in uniform. I look forward to your questions.

Chairman INOUE. Admiral Mullen.

STATEMENT OF ADMIRAL MICHAEL G. MULLEN

Admiral MULLEN. Mr. Chairman, Senator Cochran, distinguished members of this subcommittee: Thank you for the opportunity to appear before you today.

Let me start by saying I fully support not only the President's fiscal year 2010 budget submission for this Department, but more specifically the manner in which Secretary Gates developed it. He presided over a comprehensive and collaborative process the likes of which, quite frankly, I've not seen in more than a decade of doing this sort of work in the Pentagon.

Over the course of several months and a long series of meetings and debates, every service chief and every combatant commander had a voice and every one of them used it. Normally, as you know, budget proposals are worked from the bottom up, with each service making the case for specific programs and then fighting it out at the end to preserve those that are most important to them. This proposal was done from the top down. Secretary Gates gave us broad guidance, his overall vision, and then gave us the opportunity to meet it.

Everything was given a fresh look and everything had to be justified. Decisions to curtail or eliminate a program were based solely on its relevance and on its execution. The same can be said for those we decided to keep. If we are why we buy, I believe the force we are asking you to help us buy today is the right one, both for the world we're living in and the world we may find ourselves living in 20 to 30 years down the road.

This submission before you is just as much a strategy as it is a reform budget. First and foremost, it makes people our top stra-

tegic priority. I've said many times and I remain convinced, the best way to guarantee our future security is to support our troops and their families. It is the recruit and the retain choices of our families and, quite frankly, American citizens writ large, that will make or break the All Volunteer Force. They will be less inclined to make those decisions should we not be able to offer them viable career options, adequate healthcare, suitable housing, advanced education, and the promise of a prosperous life long after they've taken off the uniform.

This budget devotes more than one-third of the total request to what I would call the people account, with the great majority of that figure, nearly \$164 billion, going to pay military pay and healthcare. I am particularly proud of the funds we've dedicated to caring for our wounded. There is in my view no higher duty for this Nation or for those of us in leadership positions than to care for those who sacrificed so much and who must now face lives forever changed by wounds both seen and unseen.

I know you share that feeling, and thank you for the work you've done in this subcommittee and throughout the Congress to pay attention to these needs and to the needs of the families of our fallen. Our commitment to all of them must be for the remainder of their lives.

That's why this budget allocates funds to complete the construction of additional wounded warrior complexes, expands the pilot program designed to expedite the processing of injured troops through the disability evaluation system, increases the number of mental health professionals assigned to deployed units, and devotes more resources to the study and treatment of post-traumatic stress and traumatic brain injuries.

After nearly 8 years of war, we are the most capable and combat experienced military we've ever been, certainly without question the world's best counterinsurgency force. Yet, for all this success, we are pressed and still lack a proper balance between OPTEMPO and home tempo, between unconventional and conventional capabilities, between readiness today and readiness tomorrow.

That, Mr. Chairman, is the second reason this budget of ours acts as a strategy for the future. It seeks balance. By investing more heavily in critical enablers, such as aviation, special forces, cyber operations, civil affairs, language skills, it rightly makes winning the wars we are in our top operational priority. By adjusting active army BCT growth to 45, it helps ensure our ability to impact the fight sooner, increase dwell time, and reduce our overall demand on equipment. By authorizing Secretary Gates to transfer money to the Secretary of State for reconstruction, security, or stabilization, it puts more civilian professionals alongside warfighters in more places like Iraq and Afghanistan.

I said it before, but it bears repeating: More boots on the ground are important, but they will never be completely sufficient. We need people with graphing tablets and shovels and teaching degrees. We need bankers and farmers and law enforcement experts.

As we draw down responsibly in Iraq and shift the main effort to Afghanistan, we need a more concerted effort to build up the capacity of our partners. The same can be said of Pakistan, where boots on the ground aren't even an option.

Some will argue this budget devotes too much money to these sorts of low intensity needs, that it tilts dangerously away from conventional capabilities. In my view it does not. A full 35 percent of this submission is set aside for modernization and much of that will go to what we typically consider conventional requirements. We know there are global risks and threats out there not tied directly to the fight against Al Qaeda and other extremist groups, threats like those we awoke to on this past Memorial Day, when the stability of an entire region was shaken by the increasing belligerence of North Korea.

The work of defending this Nation does not fit nicely into any one bucket. It spans the entire spectrum of conflict. We must be ready to deter and win all wars, big and small, near and far. With this budget submission, the Nation is getting the military it needs for that challenge. It's getting a strategy for the future.

PREPARED STATEMENT

Thank you all for your continued support and for all you do to support the men and women of the United States military and their families.

Chairman INOUE. Thank you very much, Admiral Mullen.
[The statement follows:]

PREPARED STATEMENT OF ADMIRAL MICHAEL G. MULLEN

Chairman Inouye, Senator Cochran, distinguished members of the Committee, it is my privilege to report on the posture of the United States Armed Forces.

First, I would like to thank our Service men and women and their families. Those who defend this Nation and the families who support them remain our most valuable national assets and deserve continued gratitude. I want especially to honor the sacrifices of our wounded, their families, and the families of the fallen. We are redefining our duty to them as a Nation, a duty which I believe lasts for life. I thank everyone in this distinguished body for their continued efforts in support of this cause.

Your Armed Forces stand as the most combat experienced in this Nation's history. Deeply experienced from decades of deployments in harm's way and from 7½ years of war, they have remained resilient beyond every possible expectation. They make me, and every American, very proud.

I am grateful for your understanding of the stress our Armed Forces and their families are under. Your recognition of their burdens and uncertainties has been a vital constant throughout these challenging times. Thank you for your support of initiatives such as transferring G.I. Bill benefits to military spouses and children, military spouse employment support, expanded childcare and youth programs, homeowner's assistance programs, and, most importantly, long-term comprehensive support of Wounded Warrior families.

This testimony comes after a notable transition of administration, the first during wartime since 1968 and the first since the 9/11 attacks on the homeland. Conducted in the face of threats and continued wartime missions overseas, the transition was marked by courtesy and concern for the mission and our forces from start to finish. Transition obviously means change, but in this case, it also meant continuity in providing for the common defense. Continuity has been and is particularly important at this juncture as we implement the key strategic changes underway that end the war in Iraq through a transition to full Iraqi responsibility and reinforce a whole of government effort in Afghanistan and Pakistan.

While several key developments have emerged since I last testified, in particular the global economic crisis, the three strategic priorities for our military that I outlined last year remain valid. First, we must continue to improve stability and defend our vital national interests in the broader Middle East and South Central Asia. Second, we must continue efforts to reset, reconstitute, and revitalize our Armed Forces. Third, we must continue to balance global strategic risks in a manner that enables us to deter conflict and be prepared for future conflicts. The three strategic priorities are underpinned by the concept of persistent engagement, which supports

allies and partners through programs abroad and at home and which must be led by and conducted hand-in-hand with our interagency partners to achieve sustainable results.

KEY DEVELOPMENTS

Over the past year your Armed Forces continued to shoulder a heavy burden worldwide, particularly in the Middle East and South Central Asia. Our emphasis has rightfully remained on the ongoing wars in Afghanistan and Iraq and against al-Qaeda extremists, though we remain ready to face other global challenges.

Per the President's guidance on February 27th, we will end our combat mission in Iraq by August 31, 2010. The Joint Chiefs and I believe this is a prudent course given the sustained security gains we have seen to date and Iraq's positive trajectory. This current plan preserves flexibility through early 2010 by conducting the majority of the drawdown after the Iraqi election period. In the meantime, our troops are on course to be out of Iraqi cities by June of this year and two more brigades will return to the United States without replacement by the end of September. Drawing down in Iraq is not without risks. Lingering political tensions remain and violence could flare from time to time. Assuming no major surprises, however, we will successfully transition fully to the advise and assist mission over the next 16 months and lay the groundwork for a continued partnership with Iraq that promotes security in the region.

In Afghanistan and Pakistan we are providing additional resources to address the increase in violence. The strategic goal as outlined by the President on March 27, 2009, is to disrupt, dismantle, and defeat al-Qaeda and its extremist allies in Pakistan and Afghanistan and to prevent their return to either country. As that strategy was being developed, we began responding to conditions on the ground by reinforcing the International Security and Assistance Force commander with some 17,700 troops, the majority of which will arrive by this summer. Our aim in Afghanistan is to check the momentum of the insurgency, train additional forces, and ensure security for the Afghan national elections in August, while in Pakistan we will work with the Pakistani military to further develop their counterinsurgency skills and build stronger relationships with Pakistani leaders at all levels.

We will shift the main effort from Iraq to Afghanistan in the coming year, though our residual footprint in Iraq will remain larger than in Afghanistan until well into 2010. The strategic environment we face beyond these ongoing conflicts is uncertain and complex. In the near term, we will maintain focus on threats to our vital national interests and our forces directly in harm's way. Increasingly, the greatest mid-term military threats will come from transnational concerns—the proliferation of nuclear weapons and missile technology, transnational terrorism, competition over energy, water, and other vital resources, natural disasters and pandemics, climate change, and space vulnerabilities.

A prominent aspect of this shifting strategic environment is the disturbing trend in cyber attacks, where we face both state and non-State actors. Cyberspace is a borderless domain wherein we operate simultaneously with other U.S. Government agencies, allies, and adversaries. Effectiveness is increasingly defined by how well we share information, leverage technology, and capitalize on the strength of others. When appropriate, DOD will lead. Likewise, when appropriate, DOD will provide support and ensure collective success. Our national security and that of our allies is paramount.

A critical new challenge has been added to the strategic environment—the global economic crisis. Although we do not fully understand the impact or depth of this worldwide recession, dire economic conditions increase the pressures for protectionism. They also staunch the flow of remittances, which provide enormous benefits to developing nations. Prolonged downturns can generate internal strife, authoritarian rule, virulent nationalism, manufactured crises, and state conflict. Decreased energy prices have also affected the global economy, on one hand reducing the resources available to some malicious actors, but on the other hand hurting some key allies. Any conflict involving a major energy producer, however, could escalate prices rapidly, which would undoubtedly hamper prospects for a quicker global recovery. Economic concerns will increasingly be the lens through which we—and our partners and competitors—filter security considerations. Many nations may decrease expenditures on defense and foreign assistance, thus making smaller the pool of collective resources with which we have to address challenges. We will work through our routine military-to-military contacts to address this tendency directly and help to coordinate priorities, emphasizing that we are all bound together in this global economy.

Winning our Nation's current and future wars requires concurrent efforts to restore the vitality of the Armed Forces and balance global risk. I am grateful for Congress's continued support of the programs designed to return our units to the desired levels of readiness and for the honest debate engendered in these chambers to ascertain national interests and determine the best mix of capabilities and programs to protect those interests. The ability to debate these national choices—openly and transparently—is just one of the attractive features of our Republic that others seek to emulate.

Our military remains capable of protecting our vital national interests. At the same time, the strain on our people and equipment from more than 7 years of war has been tremendous. There is no tangible "peace dividend" on the horizon given the global commitments of the United States. We still face elevated levels of military risk associated with generating additional ground forces for another contingency should one arise. I do not expect the stress on our people to ease significantly in the near-term given operations in the Middle East, the strategic risk associated with continued regional instability in South Central Asia, and the uncertainty that exists globally. Over the next 2 years the number of forces deployed will remain high. The numbers will reduce, but at a gradual pace. The drawdown in Iraq is weighted in 2010, with the bulk of the combat brigades coming out after the Iraqi elections. At the same time, through the course of 2009 and into 2010, we will be reinforcing the effort in Afghanistan. Only in 2011 can we expect to see marked improvements in the dwell time of our ground forces.

We cannot—and do not—face these global challenges alone. We benefit greatly from networks of partners and allies. Despite the economic downturn, the bulk of the world's wealth and the majority of the world's most capable militaries are found in those nations we call friends. Persistent engagement maintains these partnerships and lays the foundation upon which to build effective, collective action in times of security and economic crisis. In the coming years we must be careful not to shunt aside the steady work required to sustain these ties. By maintaining regional security partnerships, developing and expanding effective information sharing networks, and continuing military-to-military outreach, we improve the ability to monitor the drivers of conflict and help position our Nation for engagement rather than reaction. Such engagement also propels us toward the common good, relieves some of the burden on our forces, improves the protection of the homeland, and helps secure U.S. vital national interests.

DEFEND VITAL NATIONAL INTERESTS IN THE BROADER MIDDLE EAST AND SOUTH CENTRAL ASIA

Given its strategic importance and our vital national interests, the United States will continue to engage in the broader Middle East and South Central Asia—as a commitment to friends and allies, as a catalyst for cooperative action against violent extremism, as a deterrent against state aggression, as an honest broker in conflict resolution, and as a guarantor of access to natural resources. Yet we recognize that our presence in these regions can be more productive with a lower profile. The Iraq drawdown is the first step on the path to that end.

Attaining our goals in these critical regions requires time, resources, and endurance. Most of the challenges in the region are not military in nature and can only be met successfully from within. Our role remains one essentially of consistent, transparent partnership building. These actions send an unmistakable message to all that the United States remains committed to the common good, while steadily expanding the sets of partnerships available to address future challenges.

Central to these efforts in the Middle East and South Central Asia will be the relentless pressure we maintain on al-Qaeda and its senior leadership. Al-Qaeda's narrative will increasingly be exposed as corrupt and self-limiting. Though too many disaffected young men still fall prey to al-Qaeda's exploitation, I believe the populations in the region will ultimately reject what al-Qaeda offers. Our priority effort will remain against al-Qaeda, but we will also take preventative measures against the spread of like-minded violent extremist organizations and their ideologies to neighboring regions such as the Horn of Africa and the Sahel. The U.S. military's task is to partner with affected nations to combat terrorism, counter violent extremism, and build their capacity to shoulder this same burden.

Afghanistan and Pakistan are central fronts in the fight against al-Qaeda and militant global extremism and must be understood in relation to each other. Afghanistan requires additional resources to counter a growing insurgency partially fed by safe havens and support networks located within Pakistan. Additional U.S. troops will conduct counterinsurgency operations to enhance population security against the Taliban in south/southwest Afghanistan and to accelerate and improve training

and mentoring of Afghan security forces. As in Iraq, our troops will live among the population. We must make every effort to eliminate civilian casualties, not only because this is the right thing to do but also because it deprives the Taliban of a propaganda tool that exploits Afghan casualties and calls into question U.S./NATO endurance and effectiveness in providing security. Although we must expect higher Alliance casualties as we go after the insurgents, their sanctuaries, and their sources of support, our extended security presence must—and will—ultimately protect the Afghan people and limit both civilian and military casualties. Our troops will integrate closely with Afghan forces, with the objective of building Afghan security forces that are capable of assuming responsibility for their country's security.

We expect the reinforcements to have the most pronounced effect over the next 12–24 months. Security gains can only be assured when complemented by development and governance programs designed to build greater self sufficiency over time. Our commanders in the field can lay some of this groundwork through the proven Commanders Emergency Response Program to start smaller projects quickly, but these projects can not compensate for the larger, enduring programs required. A temporary boost in security that is not matched with commensurate political and economic development will not only fail to generate faith in the Afghan government and fail to convince Afghans of our commitment, but also fail to accomplish our objectives. Over time, these objectives will be met more through civilian agencies and non-governmental organizations, with a lighter military presence. Getting to that point, however, requires that military forces generate the security required for political and economic initiatives to take root.

Pakistan is crucial to our success in Afghanistan. In my nine trips to Pakistan, I've developed a deeper understanding of how important it is that we, as a Nation, make and demonstrate a long term commitment to sustaining this partnership. We are taking multiple approaches to rebuild and strengthen relationships and address threats common to both of our nations. One key approach in the near term is to help Pakistan's military to improve its overall—and specifically its counterinsurgency—capabilities. Beyond the trainers we will continue to provide, the Pakistani Counterinsurgency Capability Fund and Coalition Support Funds provide us the means to address this issue directly, and I ask the Congress to support these initiatives and provide the flexibility to accelerate their implementation. We are committed to comprehensive accountability measures to ensure that these funds go exactly where they are intended to go and do not compromise other USG humanitarian assistance objectives. These programs will help the Pakistanis take continued action to combat extremist threats in western Pakistani territories which will complement the reinforcement of troops and special operations efforts in Afghanistan to maintain pressure on al-Qaeda and Taliban leadership. In addition to these initiatives, steady support of the Foreign Military Sales and Foreign Military Financing programs will help us to address the needs expressed by Pakistan's leaders and validated by our civil-military leadership. We will also be well served by the substantially larger request for International Military Education and Training exchanges with Pakistan, to help reconnect our institutions and forge lasting relationships. Military programs must also be supplemented by non-military investment and continued engagement, which further confirm our Nation's long term commitment.

In all, we must recognize the limits of what can be accomplished at what price and at what pace in both countries. This will be a long campaign. We are committed to providing sustained, substantial commitment to Afghanistan and Pakistan. Progress in Afghanistan and Pakistan will be halting and gradual, but we can steadily reduce the threats to our Nation that emanate from conditions in those countries.

In Iraq, we are on the path to stability and long-term partnership as codified in the Security Agreement. Political, ethnic, and sectarian tensions may continue to surface in sporadic bouts of violence. But we also expect that Iraq's Security Forces will continue to improve, malign Iranian influence will not escalate, and, although resilient, al-Qaeda in Iraq will not be able to regroup and reestablish the control it once had. I am heartened by the conduct of Iraq's provincial elections in January and the election of a new Speaker of the Council of Representatives and expect additional political progress in the coming year.

The drawdown in Iraq carries inherent risks. But the plan that is underway provides sufficient flexibility for the ground commander to adjust to Iraqi political and security developments and to deal with the unexpected. We are currently working with Multi-National Force-Iraq, CENTCOM, SOCOM, TRANSCOM, and the Services on the mechanics of the drawdown and the composition of the roughly 35,000- to 50,000-strong transition force provided for in the Status of Forces Agreement that will remain in Iraq after August 31, 2010, to advise and assist the Iraqi Security

Forces, conduct counter terrorism operations, and provide force protection to civilian agencies.

The Iranian government's sponsorship of violent surrogates and failure to improve the confidence of the international community in the intent of its nuclear program, contribute to instability in the broader Middle East. Iran's Islamic Revolutionary Guard Corps—Qods Force orchestrates the activities of its proxies in Iraq and Afghanistan, across the Levant, and beyond. Through these proxies, Iran inserts itself into the Israeli-Palestinian situation and Lebanese internal politics by its direct support of Hamas and Hizballah. Iran's continued failure to comply with U.N. Security Council resolutions and cooperate fully with the IAEA cast doubt on the exclusively peaceful nature of its nuclear program. Our allies in the region share our deep concerns about Iran's nuclear policies, which if unchecked could lead to further regional proliferation as other States would seek nuclear weapons as a hedge—an outcome that would serve neither Iran nor the region. Iran could be an immensely constructive actor in the region, and its choices in the near term will have far reaching consequences. As the administration pursues diplomacy with Iran to address these serious concerns, we will continue to work with the international community to convince Iran to comply with its international obligations under U.N. Security Council resolutions.

Al-Qaeda has expressed the desire for WMD and its intent to strike the homeland is undisputed. Al-Qaeda would also likely use WMD against populations in the broader Middle East. Consequently, the nexus between violent extremism and the proliferation of WMD remains a grave threat to the United States and our vital national interests. The defeat of al-Qaeda would significantly diminish the threat from this nexus, but does not fully remove it given the conceptual blueprint already established for other extremists. We will continue to support national efforts to counter, limit, and contain WMD proliferation from both hostile state and non-State actors. We will also team with partners inside and outside the broader Middle East to reduce vulnerabilities and strengthen regional governments' confidence that we can address the WMD threat. But we must recognize that this threat requires vigilance for the duration, given the magnitude of damage that can be wrought by even a single incident.

The Israeli-Palestinian conflict, in particular the violence in Gaza in from Operation Cast Lead in the Gaza Strip in late December 2008 and January 2009, continues to cast a pall across the region. The Peace Process is primarily a diplomatic endeavor, but one we support fully through such initiatives as the training and advising of legitimate Palestinian security forces, exchanges with Israeli counterparts, and cooperation with Arab military partners. These initiatives support broader national endeavors aimed at a reduction in violence, greater stability, and peaceful co-existence in this critical region.

RESET, RECONSTITUTE, AND REVITALIZE THE ARMED FORCES

Protecting our Nation's interests in recent years has required the significant commitment of U.S. military forces. Indeed, extensive security tasks remain before us as we pursue the stated objectives in Iraq, Afghanistan and Pakistan, defeat the al-Qaeda network, prevent the spread of WMD, deter conflict, preserve our ability to project and sustain military power at global distances, and maintain persistent engagement with allies and partners around the globe. At the core of our ability to accomplish all of these tasks are the talented, trained, and well-equipped members of the Armed Forces. I remain convinced that investment in our people is the best investment you make on behalf of our citizens.

The pace of current commitments has prevented our forces from fully training for the entire spectrum of operations. Consequently, readiness to address the range of threats that might emerge has declined. The demands we have put on our people and equipment over the past 7 years are unsustainable over the long-term. As we continue to institutionalize proficiency in irregular warfare, we must also restore the balance and strategic depth required to ensure national security. Continued operations that are not matched with appropriate national resources will further degrade equipment, platforms, and, most importantly, our people.

Our Nation's service members and their families are at the core of my efforts to reset, reconstitute, and revitalize our forces. Every decision I make takes into consideration their well-being. The All-Volunteer Force has accomplished every mission it has been given, but at a high price. I do not take their service for granted and recognize the limits of their endurance. I remain extremely concerned about the toll the current pace of operations is taking on them and on our ability to respond to crises and contingencies beyond ongoing operations in Iraq and Afghanistan.

The dwell time of units is one key metric we watch closely for the Army and Marine Corps. Dwell time remains at approximately 1:1 for ground units, meaning 1 year deployed and 1 year at home for the Army, 7 months deployed/7 months at home for the Marine Corps, and similar cycles for the Airmen and Sailors serving in joint expeditionary taskings. Dwell time will improve, but we cannot expect it to return to an interim 1:2 or the desired 1:3 or better for several years given the number of ground forces still tasked with re-posturing to Afghanistan, the advise and assist mission in Iraq after drawdown, and other global commitments. Special Operations Forces (SOF) face similar deployment cycles but improvements in their dwell time will lag the Army and Marine Corps given the demand for SOF expertise in the irregular warfare environment we face. A key part of the effort to improve dwell time is the continued commitment to the size of the Army, Marine Corps, and Special Operations Forces as reflected in the 2010 budget. Institution of the "Grow the Force" initiative is an indispensable element of the long-term plan to restore readiness.

Our recruiters met the missions of their military departments for fiscal year 2008 and are well on track for fiscal year 2009. The Services have been able to reduce the number of conduct waivers issued and the Army in the recruiting year to date has seen a marked increase in the number of high school graduates joining its ranks, exceeding the Department of Defense Tier 1 Educational Credential Standard of 90 percent for all three Army components—Active, Army National Guard, and Army Reserve. Retaining combat-proven leaders and the people with the skills we need is just as important. The Services have benefited from the full range of authorities given to them by Congress as retention incentives. I ask for your continued support of these programs, in particular the bonuses used by the Services to retain key mid-career active duty officers and enlisted. I also ask for your continued support of incentives for Reserve and National Guard service to provide flexibility and enhanced retirement benefits. We have made important strides in the past year in equipping these vital members of the Total Force, and their performance over the past 7 years of war has been superb. Economic conditions will ameliorate some of the recruiting and retention pressure in the coming year, but we must recognize that personnel costs will continue to grow as we debate the national level of investment in defense.

As Chairman of the Joint Chiefs of Staff, I have spent the last 18 months meeting with Soldiers, Sailors, Airmen, Marines, Coast Guardsmen, and civilian public servants. In them I recognize the differences in our generations, with the younger ones ever more comfortable with social networking and technology. Yet I recognize in all of them a strong thread of continuity that stretches back to the Nation's beginnings. That thread is a keen awareness of how they and their influencers—parents, teachers, coaches, and peers—perceive the manner in which today's veterans are treated. Service members know that the American people stand fully behind them, regardless of varying opinions over American policy. The All-Volunteer Force has earned this trust and confidence. This contract must be renewed every day with the American people, who can never doubt that we will be good stewards of their most precious investment in their armed forces—the sons and daughters who serve our Nation.

Emblematic of that stewardship is the way we treat returning Wounded Warriors and the parents, spouses and family members who support them. As a Nation, we have an enduring obligation to those who have shouldered the load and who bear the visible and invisible scars of war, some of whom we unfortunately find in the ranks of the homeless. As leaders, we must ensure that all Wounded Warriors and their families receive the care, training, and financial support they need to become self-sufficient and lead as normal a life as possible—a continuum of care that lasts for life. This continuum extends especially to the families of the fallen. Our focus must be more on commitment rather than compensations, and on transition and ability rather than disability. To the degree that we fail to care for them and their families, and enable their return to as normal a life as possible, we undermine the trust and confidence of the American people.

One other area that has been particularly troubling since I last testified is the rise in the number of service member suicides. The Army in particular has been hit hard by a troubling increase over the past 4 years and an already disturbing number of suicides in 2009. We do not know precisely why this is occurring, though the increased stress of wartime is certainly a factor. All Service leaders are looking hard at the problem, to include ensuring that we make a service member's ability to seek mental health care both unimpeded and stigma free. This approach requires a cultural change in all of the Services that will take time to inculcate, but the seeds are planted and taking root. The program at Fort Hood, Texas, is just one example of how a commander-empowered that understands the problem as a result of stress

rather than weakness and incorporates families can sharply reduce the number of suicides in a specific community.

The Department and the Services have also continued to expand comprehensive programs designed to prevent sexual abuse in the military. Such abuse is intolerable and an unacceptable betrayal of trust. We will continue work towards the goal of eliminating this crime from our ranks.

Although the strain on our people is most acute, the strain on equipment and platforms is likewise significant. Through the reconstitution effort over the next decade, we will repair, rebuild, and replace the equipment that has been destroyed, damaged, stressed, and worn out beyond repair after years of combat operations. As Congress is well aware, Service equipment has been used at higher rates under harsher conditions than anticipated. The drawdown in Iraq through the end of next summer will provide us even greater first-hand insight into the state of ground force equipment as we retrograde multiple brigade combat team and enabler sets.

Beyond the wear and tear experienced by ground vehicles in Iraq and Afghanistan, our airframes are aging beyond their intended service lives. Indeed since Desert Storm, 18 years ago, the U.S. Air Force and U.S. Navy have flown near continuous combat missions over the Middle East and the Balkans with the F-15s, F-16s, and F-18s that were designed in the 1960s and 1970s and which, with upgrades, have proven their worth repeatedly over time. We have struggled with a wide variety of airframes, as seen in the fleet-wide groundings of all major fighter weapons systems at various times over the past 5 years, the strains on 30-year-old P-3 Orion reconnaissance aircraft, and ongoing efforts to retire some of our C-130 Hercules and KC-135 Strato-tankers. Maintaining and acquiring sufficiently robust air and naval forces remain pressing requirements as these assets are central to ensuring the command of the sea and air that enables all operations. To help pay for these pressing requirements we must continue to look towards acquisition transformation that supports accelerated fielding of equipment before the speed of technology eclipses its value. We also need to reduce stove-piped Information Technology service solutions and replace them wherever possible with joint enterprise solutions and capabilities that are more effective at reduced costs.

Our forces have relied upon the funds appropriated in the fiscal year 2009 budget request to accomplish equipment reset and to address readiness shortfalls. Congress's continued support is necessary for the predictable, adequate funding required for the repair and replacement of both operational and training equipment. I ask for your continued support for the upcoming fiscal year 2010 funding request. I fully support the vision Secretary Gates has laid out—and which the President has endorsed and forwarded—for the Department and the joint force. This vision and its program decisions emphasize our people first. Our advanced technology, superior weapons systems, and proven doctrine won't produce effective organizations absent quality men and women. These decisions also balance our efforts by addressing the fights we are in and most likely to encounter again without sacrificing conventional capability. That balance helps to check programs that have exceeded their original design, improve efficiency, and steward the resources taxpayers provide us for the common defense. The holistic changes we are making work in combination with one another and span the joint force. I am confident that they not only preserve our war fighting edge but also inject the flexibility required to address today's most relevant challenges.

An area of particular interest is energy—which is essential to military operations. Our in-theater fuel demand has the potential to constrain our operational flexibility and increase the vulnerability of our forces. Thus your Armed Forces continue to seek innovative ways to enhance operational effectiveness by reducing total force energy demands. We are also looking to improve energy security by institutionalizing energy considerations in our business processes, establishing energy efficiency and sustainability metrics, and increasing the availability of alternative sources.

The ongoing revitalization of the joint force makes our conventional deterrent more credible, which helps prevent future wars while winning the wars we are now fighting. Restoring our forces is an investment in security—one which is hard in tough economic times—but one that is required in an exceedingly uncertain and complex security environment. Understanding that environment and having forces capable of the full range of military operations is central to balancing global strategic risk.

BALANCING GLOBAL STRATEGIC RISK

My third priority of balancing global strategic risk is aimed at the core functions of our military—to protect the homeland, deter conflict, and be prepared to defeat enemies. Each function is tied to today's conflicts and each requires continuous at-

tention. Successful campaigns in Iraq and Afghanistan and improved partnership with Pakistan will take us far in the fight against al-Qaeda, although the network has spread tentacles across Asia, Africa, and Europe that we will continue to attack. These campaigns have two functions: first, deterring future conflict, and second, staying prepared by building networks of capable partners who help us see conflict brewing and are ready to stand with us if prevention fails. These functions help to protect and secure the global commons: sea, air, space, and cyberspace. Increasingly, we are encountering more security challenges to these nodes and networks of global commerce. In cyberspace, we are continuing proactive steps to pursue effective organizational constructs and to reshape attitudes, roles, and responsibilities; we must increasingly see our information systems as war fighting tools equal in necessity to tanks, aircraft, ships, and other weapon systems. The Nation must work to increase the security of all vital government and commercial internet domains and improve coordination between all U.S. Government agencies and appropriate private sectors. One related step in strengthening the military's operations in the commons that I continue to support is the United States' accession to the Law of the Sea Convention. This Convention provides a stable legal regime by reaffirming the sovereign immunity of our warships, preserving the right to conduct military activities in exclusive economic zones, ensuring unimpeded transit passage through international straits, and providing a framework to counter excessive claims of other States.

We must be sized, shaped, and postured globally to detect, deter, and confront the threats of the future. At the same time we must leverage the opportunities for international cooperation while building the capacity of partners for stability. These capacity building efforts are investments, with small amounts of manpower and resources, which can, over time, reduce the need to commit U.S. forces. I recognize, as do the Combatant Commanders, that our ability to do so is constrained by ongoing operations, but that does not make building partner capacity any less important. We can magnify the peaceful effects we seek by helping emerging powers become constructive actors in the international system. Fostering closer international cooperation, particularly in today's distressed economic climate, is one method of preventing nations from turning inward or spiraling into conflict and disorder.

The wars we are fighting limit our capacity to respond to future contingencies and preclude robust global partnership building programs. While necessary, our focus on the current mission also offers potential adversaries, both state and non-State, incentives to act. We must not allow today's technological and organizational arrangements to impede our preparation for tomorrow's challenges, which include irregular, traditional and cyber warfare. In cyberspace, one often overlooked challenge is the need for military forces to maintain access to and freedom of action in this global domain. Our command and control and most sensitive information are constantly threatened by intrusion, interruption, and exploitation efforts. We must understand these risks in the context of the combined arms fight and carefully weigh their effects on our national security and global missions. This is true for the military as well as our Nation's public and private sector cyberspace. In all, we continue to mitigate the risk we face in the ability to respond rapidly to other contingencies through a variety of measures. Restoring balance to our forces, however, remains the principal mitigation necessary for the long-term.

Enduring alliances and partnerships extend our reach. In each relationship we remain wedded to this Nation's principles which respect human rights and adhere to the rule of law. The 28-nation North Atlantic Treaty Organization, designed for a far different mission decades ago, has proven adaptive to the times and now leads the security and stability mission in Afghanistan. Australia, New Zealand, South Korea, and Japan have made key contributions to operations in Afghanistan and Iraq. India has emerged as an increasingly important strategic partner. We seek to mature this partnership and address common security challenges globally as well as within the region. Singapore, Indonesia, Australia, New Zealand, and the Philippines continue to work with us to counter international terrorist threats in Southeast Asia while Thailand remains a significant partner in supporting humanitarian assistance and disaster response in South and Southeast Asia. The Trans-Sahara Counterterrorism Partnership has worked to counter transnational terrorist threats in north and west Africa, and cooperative efforts with the Gulf of Guinea nations has generated improvements in maritime security against piracy, illegal trafficking, and overfishing off Africa's west coast. Multinational efforts in the Gulf of Aden are helping stem the unwanted scourge of piracy emanating from Somalia, though much work remains to be done. Colombia continues a successful counterinsurgency campaign in the Andean Ridge that reflects the patient, steady partnership between our nations, and we are particularly grateful for the Colombian Armed Forces' impressive rescue of three Americans held in FARC captivity last July. Military-to-military relationships with Mexico and Canada help to improve homeland security. In the

coming year, in coordination with the Department of Homeland Security, we will work to improve cooperation with Mexico via training, resources, and intelligence sharing as Mexico takes on increased drug-related violence. The examples above represent far broader efforts and partially illuminate how enhancing teamwork with allies and partners helps to protect our shared interests. The interdependency of nations should not be allowed to unravel under economic duress, and these security focused programs are one way of reinforcing beneficial ties that bind.

We also seek to further cooperation with States not in our formal alliances. We have established relationships with the nations in the Caucasus and Central Asia to build a transportation network in support of our efforts in Afghanistan. We recognize the key role Russia plays and are encouraged by Russian assistance with this project. There is more we can do together to bring peace and security to the people of Afghanistan. At the same time, we are troubled by the Russian-Georgian conflict last August and while we acknowledge Russia's security concerns, its actions created a more difficult international situation and damaged its relationship with NATO and the United States. We look forward to resuming military-to-military engagement, as part of our broader relationship, in a manner that builds confidence, enhances transparency, and rights the path towards cooperation.

We likewise seek to continue improved relations with China, which is each year becoming a more important trading partner of the United States. We acknowledge the positive trends in our bilateral relations with China even as we maintain our capabilities to meet commitments in the region, given the security and stability that credible U.S. power has promoted in the western Pacific for over 60 years. We seek common understanding on issues of mutual concern but must recognize China's unmistakable and growing strength in technological, naval, and air capabilities, and this growth's effect on China's neighbors. While we are concerned over events such as the confrontation between U.S.N.S. *Impeccable* and Chinese vessels, we support China's growing role as a regional and global partner. I believe both governments can synchronize common interests in the Pacific. Key among these interests are continued joint efforts aimed at reducing the chance of conflict on the Korean peninsula and the return of North Korea to the Six Party Talks. This is particularly true given North Korea's recent nuclear test and continued testing of intercontinental ballistic missiles in the face of United Nations Security Council Resolutions demanding that it halt nuclear tests or launch of ballistic missiles.

Rebalancing strategic risk also means addressing capability gaps. Our Nation's cyber vulnerabilities could have devastating ramifications to our national security interests. Interruption of access to cyberspace, whether in the public or private sectors, has the potential to substantively damage national security. We cannot conduct effective military operations without freedom of action in cyberspace. Addressing this threat, the President's budget for fiscal year 2010 includes funds to reduce cyber vulnerabilities and to close some of the operational and policy seams between military, government, and commercial Internet domains. Likewise, and related to maintaining a secure global information grid, freedom of action in Space remains vital to our economic, civil, and military well-being. We need to ensure access to cyberspace and Space as surely as we must have access to the sea and air lanes of the global commons. We must also balance the needs of the Combatant Commanders in Intelligence Surveillance and Reconnaissance sensors and processing infrastructure that are proving ever more crucial in missions that span the globe.

Fighting and winning wars will always be the military's most visible mission. Preventing wars through deterrence, however, is preferable. In our strategic deterrence mission, deterring nuclear threats is most crucial. Our Nation remains engaged in many vital efforts to counter nuclear proliferation and reduce global stockpiles through international agreements and support activities. Still, many States and non-State actors have or actively seek these weapons. To preserve a credible deterrent we will need safe, secure, and reliable nuclear weapons, an effective infrastructure to sustain that enterprise, and skilled people to support it. In addition, as our strategic deterrence calculus expands to address new and varied threats, proven missile defense capabilities will remain essential as tools to deter, dissuade and assure in an environment of WMD and ballistic missile proliferation.

PERSISTENT ENGAGEMENT

Our vital national interests call for a wise, long-term investment in global persistent engagement. For military forces, persistent engagement requires successfully conducting ongoing stability operations and building capacity with allies and partners. These efforts range from advising defense ministries to training host nation forces to conducting joint exercises to sharing intelligence to exchanging professional students. Over time, such actions help to provide the basic level of security from

which economic development, representative political institutions, and diplomatic initiatives can take permanent root. Persistent engagement demonstrates enduring U.S. commitment, though, importantly, this commitment must be tempered with humility and a realistic assessment of the limits of our influence. The goal is always to empower partners, who are ultimately the only ones who can achieve lasting results.

During my travels, I've developed a more comprehensive appreciation of the value that personal relationships, fostered over time, bring to our security endeavors. At the senior level, these relationships provide insight and alert us to signals we might have otherwise missed, as such, providing us warning of conflict which can then be used to head off a brewing storm in some cases. These relationships should not be limited to just senior leaders. Rather, they should be developed throughout the careers of our officers and their partner nation colleagues. Such sustained cooperation builds a network of military-to-military contacts that ultimately provides avenues to defuse crises, assure access, institutionalize cooperation, and address common threats.

As I noted in particular with Pakistan, the criticality of "mil-to-mil" exchanges, combined exercises, schoolhouse visits, professional education collaboration, and many other programs are all part of the robust outreach we require. In particular, I ask that the Congress fully fund the Department of State's Foreign Military Financing (FMF) and International Military Education and Training (IMET) programs and Global Train and Equip Programs, which the Departments of State and Defense jointly manage. While many militaries around the world clamor to train with us, we reap far more than the costs of these programs in terms of personal, sustained relationships. These relationships help us bridge difficult political situations by tapping into trust developed over the course of years. I cannot overemphasize the importance of these programs. They require only small amounts of funding and time for long term return on investment that broadly benefits the United States.

I endorse a similar approach for and with our interagency partners, and I fully support the building of a Civilian Response Corps. Achieving the objectives of any campaign requires increased emphasis not only on fully developing and resourcing the capacity of other U.S. agencies (State, USAID, Agriculture, Treasury, and Commerce and so forth), but also on increasing our Nation's ability to build similar interagency capacities with foreign partners.

CONCLUSION

In providing my best military advice over the past 18 months, one important point I have made, consonant with Secretary Gates, is that our military activities must support rather than lead our Nation's foreign policy. Our war fighting ability will never be in doubt. But we have learned from the past 7 years of war that we serve this Nation best when we are part of a comprehensive, integrated approach that employs all elements of power to achieve the policy goals set by our civilian leaders. To this end, I believe we should fully fund the State Department as the lead agent of U.S. diplomacy and development, an action that would undoubtedly resonate globally. This approach obviously requires the backing of a robust military and a strong economy. As we win the wars we are fighting and restore the health of our Armed Forces, the military's approach will increasingly support our diplomatic counterparts through the persistent engagement required to build networks of capable partners. By operating globally, hand-in-hand with partners and integrated with the interagency and non-governmental organizations, we will more successfully protect the citizens of this Nation.

On behalf of our service members, I would like to thank Congress for the sustained investment in them and for your unwavering support in time of war.

ACQUISITION REFORM

Chairman INOUE. Mr. Under Secretary?

If I may now begin my questioning. Mr. Secretary, our troops entered Afghanistan in 2001 and our troops entered Iraq in 2003 and we soon learned that it wasn't what we expected and in some ways we weren't quite prepared. So we rapidly developed platforms like the MRAP and the anti-improvised explosive device (IED) mines. Now, why was it necessary to go outside the regular DOD acquisition process to get these things? And how can we institutionalize

these activities instead of continually adding layers of new bureaucracy?

Secretary GATES. We've had to go outside the regular bureaucracy, I think, in four major areas, one before I became Secretary and three subsequently. The first, that was formed before I became Secretary, was the effort to counter the IEDs, as you suggest. The subsequent ones have been for dealing with wounded warriors, for building the MRAPs, and for greater intelligence, surveillance and reconnaissance needs.

The problem is that there were too few people that came to work in the Pentagon every day asking, what can I do today to help our warfighters succeed and come home safely. So we needed to go outside the regular procurement processes, because frankly without the top-down direction from the Secretary of Defense these efforts would not have been successful.

In the case of the MRAPs, it required using a number of authorities provided by law only to the Secretary of Defense in terms of acquisition of materials and priorities and so on. But in other cases the solution was across multiple services and outside the normal bureaucratic structure.

I believe that the services are changing the way they do business. For example, the Air Force just in the last year or so under General Schwartz's leadership has taken on board the significance of the ISR challenge and the need to have significantly larger numbers of pilots who can pilot, who can run these UAVs and so on. So the services I think are beginning to embrace the needs of the current warfighter and provide for them.

Frankly, the reason for my putting a number of these things into the base budget is because that's where the services draw the resources to be able to go ahead and pursue these programs. For example, the ISR Task Force, my anticipation is that it will disappear, and one of the challenges that I've had is keeping it focused on what can we do in the next 2 or 3 months to help get more ISR capabilities into the field. The natural bureaucratic propensity has been to try and squeeze, because I'm paying attention to that task force, to try and squeeze all kinds of new long-term programs that'll take years and so on into it. So we've had to be very disciplined about keeping it focused on the near term while the longer term issues are taken care of in the regular bureaucracy.

But I'm satisfied enough with the progress that the Air Force and the Army are making in the ISR area that I believe this task force can go away. The truth of the matter is, in the case of the MRAPs, had it not been for the generosity of the Congress and the American people, we never could have built the MRAPs. As you suggest, Mr. Chairman, we built and deployed some 16,000 of these. We are now developing a new kind of MRAP for Afghanistan. But the total cost of that program to date has been about \$26 billion. If we had tried to carve \$26 billion out of the current Pentagon budget, there would have been a real blood-letting. So the only way we were able to do the MRAPs was through the special funding from the Congress.

What I am trying to do is to bring about a change in the culture of the Pentagon so we can, as I described it in another hearing,

walk and chew gum at the same time, so that we can energetically and with a sense of urgency deal with the wars we are in and at the same time plan for the future wars, which, as you rightfully suggested, we have to be prepared to fight.

Chairman INOUE. Thank you.

Admiral Mullen, many have described the acquisition process in DOD to be cumbersome and inflexible because we tend to seek the perfect solution. It takes many years to do this. But for the wars in Iraq and Afghanistan, we, as the Secretary pointed out, we have expedited the process, maybe not seeking 100 percent, but going for 75. My question to you as a leader of troops: Do you believe that we are meeting the needs of warfighters?

Admiral MULLEN. Yes, sir. If I were to use the task force analogy just briefly, because I've been in this building, in and out, but in certainly in the last decade or so for a long time, I just think it takes the kind of leadership focus that has been offered in those to create the sense of urgency, to constantly update the guidance so the system does not take off by itself.

It is really in those areas that the Secretary and you have talked—in addition, the equipment, the personal equipment for our warfighters, which all of us have taken a great interest in, and service chiefs certainly lead that as well. So from an equipment standpoint, absolutely. That doesn't mean that we won't continue to advance in some of these areas, because we still need more capability in terms of capacity. ISR would be a great example.

I also, having participated in this acquisition for a long period of time, think we don't move swiftly, with the sense of urgency and the speed, and we do look too far out to meet the current needs. I've seen the kind of focus that these task forces have created and the leadership that's on top of them be able to do that. I just don't believe our system could have done that.

I do think they need to at some point in time sunset, have a sunset clause, set the criteria out there to be absorbed in the system. As the Secretary has indicated, that's the case for the ISR Task Force.

So I am confident we have the equipment we need. We also need to stay focused as the enemy changes to ensure that we stay ahead of the enemy as he changes his tactics.

Secretary GATES. Mr. Chairman, let me add one more example of, frankly, where we, the Chairman and I, have to fight the inertia of the Department on a daily basis. One of the things that we've been trying to do this spring—this goes to Senator Leahy's point about his troops going to Afghanistan—is drive the medevac time, the time required for medevac, from 2 hours down to the same golden hour that exists in Iraq.

We've made some substantial headway in this. We're now on average at about 68 minutes and many are much faster. I sent a number of additional resources forward from the Air Force and the Army earlier this spring, including three additional field hospitals. But the sad reality is that without the Chairman and I paying attention to this almost daily, getting it done and getting it done in a timely manner is just a real challenge.

BUDGET RATIONALE

So at the end of the day I'm not sure that there is a permanent bureaucratic fix, but what it does take is the focus of the leadership on what's important. And that priority in my view, when we are at war is taking care of those who are at war.

Chairman INOUE. Mr. Secretary, you suggested about 10 percent of this budget will be for irregular warfare, about 50 percent for conventional, strategic, traditional warfare, and 40 percent for dual use. How did you divide it up in that fashion?

Secretary GATES. Well, actually those numbers came after the fact, Mr. Chairman. I made the decisions on each of the program areas independently and in the context of each other from a strategic standpoint and capabilities standpoint. It was only after I had made all the decisions that, frankly, the guys who manage the money told me that that was about how the breakout of the percentages worked. So it basically was a recognition of a reality that was formed by the decisions that had already been made. I didn't go into it with the goal of shifting x dollars.

Chairman INOUE. Thank you.

Senator Cochran.

Senator COCHRAN. Mr. Chairman.

MRAP VEHICLES

I appreciate your mentioning the MRAP vehicles, the vehicles that have been used in Afghanistan. I wonder about whether the budget requests funding for the new all-terrain vehicle (ATV) as well, the M-ATV as it's now referred to. Will that be useful in Afghanistan or do you foresee other uses of those vehicles besides in our efforts to deal with the challenges in Afghanistan?

Secretary GATES. They're primarily being designed for use in Afghanistan, where the extraordinary weight of the regular MRAPs we've designed for Iraq sometimes limits their usefulness off road. So what we have done in the all-terrain MRAP is to try and provide essentially the same level of protection, but with a different design that will give it more capability off road. There is money in the budget, both in the overseas contingency operation funds and also in the base budget, that will fund most of the requirement for the all-terrain vehicles. The requirement has been growing since we submitted the budget, and so I don't think that there's enough money in the budget to buy all of those needed to meet the requirement, but a substantial number. In fact, Mr. Hale can give you the exact numbers.

Mr. HALE. We have 1,000 MRAP ATVs in the 2009 remaining supplemental and 1,080 in the fiscal 2010 OCOA. I believe Congress is adding some to the fiscal 2009 supplemental.

Senator COCHRAN. In connection with ship requirements, we've noticed the increase in the amphibious ship fleet needs that go beyond traditional military missions. The tsunamis, the hurricanes in the Gulf of Mexico, led the military to contribute ships, some aircraft carrier capabilities, for humanitarian relief and providing food and medical supplies to these areas that were hard-hit.

Do you see a continuing need for shipbuilding in the amphibious area because of the willingness to use those vessels for nontraditional missions?

NAVAL ISSUES

Secretary GATES. This is one of the issues where I did not make any significant decisions, because I didn't feel that I had the analytical basis to do so. So one of the subjects that the Quadrennial Defense Review is addressing is the role of amphibious capability going forward, and not whether we need it, but how much we need. So that will be one of the areas of the QDR where I will be looking for some analytical guidance.

But it's clear that those capabilities range far beyond the kind of armed intrusiveness or the armed intervention that was the original design purpose.

MISSILE DEFENSE

Senator COCHRAN. The activity we've noticed with concern in North Korea in the recent short-range missile testing has led to concerns about whether or not we are moving fast enough with a ground-based interceptor production line. What is the impression that you have about the request in this budget as it relates to our capacity to defend ourselves against what looks to be an emerging and a continuing threat from North Korea and maybe others?

Secretary GATES. The ground-based interceptors in Alaska and California clearly are an important element of defense against rogue state launches, and I would say in particular North Korea. I think the judgment and the advice that I got was that the 30 silos that we have now or are under construction are fully adequate to protect us against the North Korean threat for a number of years.

Now, the reality is that if that threat were to begin to develop more quickly than anybody anticipates or in a way that people haven't anticipated, where the 30 interceptors would not look like they were sufficient, it would be very easy to resume this program and expand the number of silos.

I was just in Fort Greeley last week and it's an immensely capable system, and one of the things that I think is important to remember is it is still a developmental system. It has real capabilities and I have confidence that if North Korea launched a long-range missile in the direction of the United States that we would have a high probability of being able to defend ourselves against it.

But one of the things this budget does is robustly fund further development and testing of the interceptors at Fort Greeley and at Vandenberg, so that as new interceptors with new capabilities and that are more sophisticated are developed we will put those into the silos and take the old interceptors out. So the idea is this is not just a static system up in Fort Greeley, but something that is undergoing continuing improvement. If the circumstances should change in a way that leads people to believe that we need more interceptors than the 30, then there's plenty of room at Fort Greeley to expand.

Senator COCHRAN. Well, we thank you and Admiral Mullen and the Department and the soldiers and sailors who carry out your decisions well and continued success as we protect our Nation.

Thank you.

Chairman INOUE. Thank you very much.

Senator Leahy.

Senator LEAHY. Thank you, Mr. Chairman.

MRAP ATV

Secretary Gates, I was going to ask some questions about the MRAP ATV, but Senator Cochran and others have. Chairman Inouye has been very helpful on funding on that critical program.

Mr. Hale, you had mentioned the money for it. In the 2009 supplemental budget, we doubled it here in the Senate. We're now in negotiations with the other body of that. I have a particular interest in this. Everybody I've talked with when I was in Afghanistan told me how much they need this for the same reasons that the Secretary described. I heard from the commanding generals to the coalition forces and others.

You know this terrain probably far better than I, but you just look at the terrain—coming from a rural mountainous area myself, I can easily understand why the MRAPs, as great as they are, with their weight, when they go off road, they're just going to tip over. So I hope it will happen.

AFGHANISTAN

Incidentally, when we were there we visited the Kabul Military Training Center, Senator Whitehouse, Senator Warner—at that sprawling former Soviet base, where the Afghan National Army go through a kind of basic training. I went to the training courses and saw what they do. The extraordinary high rate of illiteracy among the recruits there has to be a cause of concern. I saw so many of the training things where they were written in their language, but also almost like a comic book showing diagrams of people doing things.

Then I read the article, which I'm sure you've seen, the C.J. Chivers article from the New York Times about the failures, especially in the police force, in the training of the police force, and then in the military and on patrol. One of the things that struck me is when one Afghan insulted the other and they started into a fistfight in the middle of patrol, when you're out in an area where you have to depend on everybody being on their highest level.

That's on the bad side. On the good side, I heard from so many there how they don't see us as occupiers; they see us as people trying to help. They see a country, unlike some of its neighbors, a country probably with the potential of pulling this out, with our help. Our help means a lot of money and, unfortunately, a lot of casualties.

How do you feel? Are we going to have a cohesive, trained Afghan National Army and police force? Because I don't see how we leave until there is one. I mean, you just look at this all the time, Mr. Secretary.

Secretary GATES. Let me start and then ask Admiral Mullen to add in. I think our commanders are very optimistic about particu-

larly the Afghan National Army. It is I think at this point perhaps the strongest national institution that exists in Afghanistan, and we are on a path to increase the size from about 82,000 to 134,000.

I think a lot of the problems with the police are being addressed. Part of that problem is the lack of sufficient trainers, and part of the added forces that we're sending in will in fact be for training the police. We have a program where we're going back into districts, pulling the police force out, retraining them, giving them new equipment, and then putting them back in with police mentors. The experience with that program so far has been encouraging. It's still pretty small scale and it needs to be expanded and accelerated, and I hope that the addition of our trainers will be able to do that.

But there's no question but that our ticket out of Afghanistan is the ability of the Afghans to maintain their own security. I think our commanders feel that we're on the right track.

But let me ask Admiral Mullen.

Admiral MULLEN. I would only echo that, Senator Leahy, from the point of view that these are warriors. They are a warrior nation and they have been in many cases at war over the last 30 years. We share the concern about illiteracy. That said, in my many visits this kind of issue has never routinely raised its head as something that we can't take into account and move forward with.

Senator LEAHY. Would you agree that there is a significant difference between the police and the Army.

Admiral MULLEN. Yes, sir, actually not unlike Iraq. In Iraq the army came quicker. It's the same thing in Afghanistan.

Senator LEAHY. But the average person is going to see the police before they're going to see the army in many, many instances in their day to day life.

Admiral MULLEN. Yes, sir.

Senator LEAHY. And if they see bribery and corruption and all that, that's the face of the government. I mean, it's the same in our country. The difference is that we've evolved so most of our police forces are extraordinarily well trained.

Do you feel confident we can turn that around?

Admiral MULLEN. Yes, sir. I think it's actually Minister of Interior Otmar, and I don't know if you met him.

Senator LEAHY. I did.

Admiral MULLEN. He's a very impressive guy. He understands the problems he has and he's addressing them. It's going to take some time.

This program the Secretary mentioned, which is this focused district development, where they go off to school for 8 or 9 weeks and then return with mentors, is another significant step in the right direction. But it's going to take time, and the police are not going to come as fast as the army is. But it is the way out.

Senator LEAHY. And if your staff could keep me posted, both of you, on how that's going, because I'm one who wants to see it work, and I know a number of our Vermonters are going to be involved in helping to train. I think the potential is there. I think it's a real uphill battle.

Thank you.

Chairman INOUE. Thank you.

Senator Shelby.

Senator SHELBY. Thank you, Mr. Chairman.

AIR FORCE/ARMY AIRCRAFT ACQUISITION ISSUES

Secretary Gates, I believe that we must have a fair, open, and honest Air Force tanker acquisition process that ensures that our men and women in uniform receive the best possible aircraft. It's also my belief that the upcoming request for proposals should utilize the best value process so that we're procuring the most capable tanker for our warfighters.

We've talked about this earlier this year and it's my understanding that you stated that you believe the process should be fair, open, transparent. With regard to the process, who will be the acquisition authority for the upcoming tanker competition? Would it be the Office of the Secretary of Defense or the Air Force? Also, do you believe that the draft RFP will be released this month?

Secretary GATES. I don't know that it will be released this month, and I'm in the process, the final decision process in terms of the acquisition authority and the structure we're going to put into place to ensure that it is a fair, open, and transparent process.

I would expect to make the decision on the acquisition process within the next week or 10 days. All I have heard is that their hope is to put the RFP out this summer, perhaps next month. I'm not entirely sure about that. And we will fulfill the commitment that we have made to you to share the draft RFP here in the Congress as part of being a transparent process.

Senator SHELBY. Mr. Secretary, shifting to Army aviation, your proposed budget calls for an additional \$500 million over last year's funding level to field and sustain helicopters. As stated in your testimony, this is an urgent demand in Afghanistan right now, and I support this initiative.

I understand you've indicated the focus will be on recruiting and training more Army helicopter crews. Could you provide additional details regarding how this money would be spent, either now or for the record?

Secretary GATES. I'd be pleased to do that for the record.

[The information follows:]

As you noted, we have an urgent need to train more helicopter pilots and crews. The budget request includes procurement to buy additional helicopters and expand operation and maintenance for the training. More specifically, as the Army developed their fiscal year 2010 budget they planned for an increase of \$70 million for 22 light utility helicopters above the quantities approved for fiscal year 2009. During the final review of the budget, we increased the Army's aircraft account for the UH-60 by \$156 million to bring the total quantity to 95 or an increase of 26 airframes above the fiscal year 2009 level. I am satisfied that this provides for a balanced increase in these various airframes.

To meet the near-term demand for more trained pilots and crews, we also increased funding by \$276 million for aviation training at Fort Rucker. This level of funding allows the Army to support the goal of increasing pilot throughput to 1,375 per year in fiscal year 2010.

Senator SHELBY. Okay.

Secretary GATES. But let me just say that, having visited Fort Rucker, it's clear that the schoolhouse needs to be expanded and modernized.

Senator SHELBY. Thank you.

NAVAL SHIP ISSUES

Admiral Mullen, the LCS, littoral combat ships. The Department's 2010 budget provides an increase in purchase in the littoral combat ship from two to three ships. Do you believe that this program will play a vital role in our Navy's future fleet, and could you tell us here the advantages that the Navy will gain once the service begins to utilize the LCS around the world?

Admiral MULLEN. I need LCS at sea deployed today. The urgency of that requirement has been there for a number of years, which is why we started this program, and that urgency hasn't gone away. I'll be very specific about its need in places like the Persian Gulf. It offers unique characteristics in terms of speed and mobility.

Senator SHELBY. Also firepower.

Admiral MULLEN. And firepower. It certainly provides—back to helicopters, if I'm short one thing sort of across the Department, helicopter qualifies for being at the top.

The LCS also has a small crew. It has flexibility in its mission. It has the modules, depending on where you're going to apply it, where you're going to deploy it, whether it's mine warfare or anti-submarine warfare or surface warfare.

So it's a very adaptable platform. I need them out and I need them in numbers as rapidly as we can get them out.

Senator SHELBY. You need them now, too, if you can.

Admiral MULLEN. Yes, sir.

Senator SHELBY. Thank you, Admiral.

Thank you, Mr. Chairman.

Chairman INOUE. Thank you.

Senator Feinstein.

INTELLIGENCE/SATELLITES

Senator FEINSTEIN. Thank you very much, Mr. Chairman.

Mr. Secretary, I'd like to put on my Intelligence hat for a minute. I note Senator Bond has come back. Without getting into details or classified matters, I wanted to ask you about the overhead architecture program. I think it's fair to say that both sides of the aisle on the Intelligence Committee are very concerned about matters dealing with this program, particularly the huge investment in electrical-optical satellites.

Senator Bond mentioned your statement that you would not necessarily favor a 99 percent solution, but a lesser solution. So my question is, can the Department's imagery needs be met with a larger number of lower resolution systems?

Secretary GATES. I have agreed with Admiral Blair on the architecture that is before you and before this subcommittee. I would say first of all that I think that the primary need for the very high resolution of the upper tier of capabilities is needed above all by the intelligence community. We have had those kinds of satellites—obviously, the new ones are much more sophisticated than when I was last in the intelligence business. But we have always needed that kind of resolution and multimission capability.

My view, the reason that I supported going with the lower tier satellites, frankly is because there is some schedule and technology

risk associated with the upper tier. I felt very strongly about having a capability that was proven technology and that we would have high confidence would work and meet, with the upper tier, the needs of the military.

I would have to get back to you for the record in terms of what military needs are satisfied by the higher resolution capability.

[The information follows:]

Classified response was sent directly from the SECDEF's office to the subcommittee on August 11, 2009.

Senator FEINSTEIN. Well, if you would, I think both Senator Bond and I would appreciate it.

We have extraordinarily serious concern involving the waste of many, many dollars over a period of years and are rather determined that that not happen again. We also have information that the so-called lesser tiered satellites can be just as effective and have a stealth capability. So if you would get back to us on that point, we hope to sit down with Senator Inouye and Senator Cochran and our staff and talk very seriously on this issue, because you know, to make a mistake once or twice is all right, but to continue that mistake doesn't make sense, I think, to the vice chairman or to myself or to other members of the subcommittee or to our technical advisory group who has looked at this as well.

So if you would, I would appreciate it very much.

IRAN

Let me move on to another thing. There has been a lot of discussion in the public press about the possibility of Israel attacking Iran. I think we asked you the last time you were before us: In the last year, do you believe that the chances of that happening have gone up or down?

Secretary GATES. Well, I'd hesitate to speculate about the decisions of another government. But I would say that our concern about the nature of the Iran problem has continued to rise as they continue to make further progress in enriching uranium and particularly in their public statements and also as they have enjoyed some success in their missile field.

So I would say that our concerns with Iran's programs—and I believe I can say also Israel's—has continued to grow, given the unwillingness of the Iranians to slow, stop, or even indicate a willingness to talk about their programs.

Senator FEINSTEIN. Thank you very much.

AFGHANISTAN TROOP LEVELS

A final question if I may, Mr. Chairman. It's on the subject of Afghanistan. We have slipped into this very easily, very quickly. I believe there are about 68,000 men and women either due to Afghanistan or already there. Is that a correct figure?

Secretary GATES. Yes, ma'am.

Senator FEINSTEIN. And you look back at 48 years of history, and let me just give you one quote from a recent Government Accountability Office report. It said: "Some progress has occurred in areas such as economic growth, infrastructure development, and training of the Afghan national security forces. But the overall security situ-

ation in Afghanistan has not improved after more than 7 years of United States and international efforts.”

I’m one that has deep concern as to how you turn this country around after 40 years into a much more secure area. I know you’re making changes and maybe they work and maybe they don’t work. I don’t know. But could you share with us how you see this going, because this is a large commitment over a substantial unknown period of time, with no known benchmarks, no known exit strategy at this time, but just a continuation of beefing up troops and changing commanders.

So if you could give us some idea of what benchmarks you would hold, how you would evaluate success, where you would look for it, and within what timeframe, I think it would be very helpful.

Secretary GATES. Let me open and then ask Admiral Mullen to add his thoughts. First of all, I think that the administration’s new strategy gives us some opportunities that we have not had before, and I think the strategy brings a focus to our efforts that we may not have had before.

AFGHANISTAN

The reality is the situation in Afghanistan went along okay after 2002 until about 2006, and it coincided to a considerable degree to—the beginning of greater Taliban activity in Afghanistan began as Pakistan began to do these peace agreements with various insurgent and extremist groups on their western border, which then freed the Taliban to come across the border because they had no pressure from the Pakistani army.

That situation has continued to worsen, and it is a combination of the Taliban, which are the heart of the problem we face, but not the only piece of it—the Hakkani network, Al Qaeda, and Gulbaddin Hekmatyar and these others. So as this problem became worse in terms of the violence caused by the Taliban coming across the border from Pakistan, I think that it’s self-evident that we were underresourced to deal with it. We did not have the military capabilities or the civilian capabilities in terms of counterinsurgency to be able to deal with it.

I think under the administration’s new strategy we’ll have both the military and the civilian capacity to be able to make headway with the Afghans. I think the key here is the strengthening of the Afghan National Army and police that we talked about earlier. It is the strengthening of other institutions in Afghanistan.

I think one of the things that’s important to remember about Afghanistan is that we have 40 some other nations there as our allies. This is not just the United States carrying this by ourselves. Now, do we wish they had more troops? Do we wish they spent more money? Absolutely. But the fact is our allies have 32,000 troops in Afghanistan. This is not a trivial commitment on their part. As I think Senator Leahy pointed out, the Canadians, the British, the Australians, the Danes, and others have been in the fight and have lost a lot of people.

So I think that the new strategy and now the newest development which gives me more hope than I’ve had in quite a while—the newest development of the Pakistani army taking on these extremists in Swat and elsewhere I think is an extremely important

development, and the possibility of the Afghans, the Pakistanis, ourselves, and our allies together working against this problem has given me more optimism about the future than I've had in a long time in Afghanistan.

I will say we have developed in the inter-agency benchmarks for success. I've pressed very hard for these because I said the last administration had benchmarks forced upon it; let's volunteer them. Let's say, here's what we think we need to achieve and here's how we can measure ourselves against this.

My own view is it's very important for us to be able to show the American people that we are moving forward by the end of the year or a year from now, to show some shift in momentum. This is a long-term commitment, but I think the American people will be willing to sustain this endeavor if they believe it's not just a stalemate and that we're sacrificing lives and not making any headway. So I think the benchmarks are important and I think making an evaluation a year from now of where we are is important.

The last point I'd make before turning it over to Admiral Mullen is I'm very sensitive about the number of troops we put into Afghanistan. I'm too familiar with the Soviets having had 110,000 troops there and still losing. If you don't have the right strategy and if you don't have the Afghan people on your side, you will not win in Afghanistan because, as the Admiral said, they are a warrior nation.

So I think that we have to be very cautious about significantly further expanding the American military footprint in Afghanistan, in my view.

Admiral.

Admiral MULLEN. Ma'am, I'm encouraged there is a strategy and it's a regional strategy. It's not just Afghanistan or Pakistan, because I think they're inextricably linked and we've got to approach it in that, with that in mind.

Second, I recognize that it has changed a lot since 2002 and the resources we're putting in there now meet a need that we've had for some time. Our lessons learned from Iraq, the counterinsurgency force that we are, the civilian-military approach that we now have, obviously with Ambassador Holbrooke, who has focused this effort and does so full time—I believe we know what we need to do. I too am concerned about time and think that with these forces we're putting in there now we've got to reverse the trend of violence over the next 12 to 18 months.

I think it's possible. So I think we have the strategy right. We're resourcing it right. But I do not underestimate the difficulty of the challenge here, the benchmarks, not only in security, which are important, but also in governance and improvement in whether local tribal leaders, local district, sub-district leaders are providing for their people, and that we make the Afghan people the center of gravity here.

We've been through some difficult times with civilian casualties. We can't keep doing that. The more we do that, the more we back up, and it hurts our strategy. So I am actually optimistic, more than I was, but I think the next 12 to 18 months will really tell the tale.

Secretary GATES. We heard two statistics on a teleconference, videoconference, with Kabul this morning from one of our commanders. They believe this year will be the first year in 30 years that Afghanistan will not need to import wheat, that the wheat crop is sufficiently robust that they won't need to import.

And just as important, it's at basically price parity with poppies, and in some districts even higher value than poppies. So maybe I'm grasping at straws, but I thought that was pretty interesting.

Senator FEINSTEIN. It's a good one to grasp.

Thank you very much.

Thank you, Mr. Chairman.

Chairman INOUE. Senator Bond.

Senator BOND. Thank you, Mr. Chairman.

With respect to Afghanistan and Pakistan, I agree with what you've said. I believe the counterinsurgency strategy is important. I think we have to realize that, while our North Atlantic Treaty Organization (NATO) allies had many people over there, they very often didn't get into the fight. They were restrained in the compounds. They traveled around in armored tanks and went back home at night, and the Taliban works at night. We did not have an effective force.

The Admiral has said we have to have an Afghan face. We've got to do that. The counterinsurgency strategy is essential. I know the commanders emergency response, the CERP funds, were used to buy wheat, at least in Nangahar Province, and that kind of rebuilding of agriculture I think is a critical key.

But I would just ask you: Is it reasonable to expect the counterinsurgency to pacify the whole country in 12 or 18 or even 24 months? It seems to me we have to be realistic and we have to say, yes, we're seeing signs of progress. Nangahar Province for example is an area that I know about and poppy production has dropped almost to nothing. But still, does it not take some time to get the full benefits of the counterinsurgency strategy? Should we be looking at a slightly longer timeframe?

Secretary GATES. Absolutely, Senator. What I was referring to and I think what Admiral Mullen was referring to is hoping to see a shift in the momentum over the course of the next year to 18 months. This problem will not be over in 18 months. This problem will not be over in 2 years. This is, let's be honest, a long-term commitment that we are involved in in Afghanistan if we are to ultimately be successful.

I think what we are saying simply is that we think that the strategy needs to show some signs that it's working, not that it has been totally successful a year or 18 months from now.

Senator BOND. I think you can cite Nangahar as one little province that's working. With the marines going into Helmand, I think that you'll see some changes there.

I would mention, following up on what my good friend from California said, the kinds of overhead requirements you have. I was talking with Admiral Blair earlier this morning about intelligence needs in Afghanistan for the PRTs and others. He needed some overhead. That's the kind of thing that we think can very well be supplied in terms of military needs by the smaller, cheaper, more flexible alternatives that we would like to see with NCEO. We

would welcome the opportunity to talk and we will look forward to talking with the chairman, the ranking member, and other members of the subcommittee in a classified setting about some of the problems and some of the opportunities.

I hope that we will be able to continue to talk with you about that, because we feel very strongly about the overhead.

JOINT STRIKE FIGHTER

I want to ask one other point. I agree with Admiral Mullen on so many things. At breakfast last week you said: "We're all concerned about the industrial base. I have been for a period of time. The competition for who is going to build the Joint Strike Fighter (JSF) was done years ago, essentially moving down to one contractor, and that's where we are. What I worry about, you want as much competition for as long as you can. That said, we years ago got down to a minimum number of competitors. I'm concerned about how I do not have a lot of other choices about where to go to build. I think it's an important consideration. We need to pay attention to it."

I would agree with those statements and I think that maintaining the F/A-18 as a bridge, moving forward on the C-17, and the next generation bomber, which you, Mr. Secretary, you indicated you wish to pursue, are all parts of that strategy. I happen to think that, no matter who won the competition, giving the entire purchase was a tragic mistake on the tac air. I would like to hear your comments, both Secretary and Admiral, on the defense industrial base.

Secretary GATES. Well, it is a concern and, frankly, the last time I was in Government in 1993 we had a lot of choices, and when we wanted to build satellites we had multiple choices as well. So I think that, with respect to the F/A-18, we have 31 in the budget for fiscal year 2010. We will probably buy more in 2011. One of the subjects that the Quadrennial Defense Review is examining is the right balance for our tactical air, and I look forward to the conclusions of the QDR on that.

AIRCRAFT ISSUES

Admiral MULLEN. Senator Bond, it's a great airplane. It's actually at a great price. You've certainly dealt with the multiyear aspect of this. One of the reasons it is at a great price is because it has been under multiyear a number of times.

That said, we're at a point in time where we're trying to figure out how long the program goes on, how many more years. That's really the analysis that's at the heart of this.

As I said the other day, although I'm amazed you got absolutely every word I said very accurately—

Senator BOND. My other business is intel.

Admiral MULLEN. And I do have a concern about the industrial base, in airplanes, in ships, in satellites. We dramatically brought the defense contractors together in the 90s and that, by virtue of that, eliminated an awful lot of competition.

So I don't have the answer with how we go ahead here, except I think we do have to pay attention to it over the long run and make some strategic decisions. I think the "we" there is the De-

partment, the services, the industry itself, as well as here in Congress. It's that strategic relationship which I think is important, which says this is how much of America's industrial base we are going to make sure is in good shape for the future. The requirements of that obviously drive that continuation.

As I said before and would only repeat, it was years ago this decision was made about the JSF and at that point in time it's my view we made a national decision to go down to, essentially to go down to one contractor for the future, and we're living with the results of that now.

Senator BOND. I think that's a tragedy. I've made my point time and time again at these hearings year after year. I have an answer for you. If you ever want to call me some time, I'll be happy to share it with you. But I'm not the witness today, Mr. Secretary.

Secretary GATES. You know, I used to be in intelligence and I think I know the answer.

Senator BOND. I'll bet you do. We'll see if we can communicate by mental telepathy.

But can we expect the study assessing the cost-benefits of an F/A-18 multiyear any time soon? I think it was requested in law to be delivered a couple of months ago.

Secretary GATES. We can certainly provide a response, Senator. I think that what we are hoping to do is be able to give you a meaningful response after the QDR. If the decision, for example, were made to continue the F/A-18 line, then a multiyear contract would make all the sense in the world, for exactly the reasons you and Admiral Mullen have been talking about.

We can provide you an interim response if you would like.

Senator BOND. I just think that was required in law, and the QDR, I know everybody hypes it, but if it's just a justification of what you put in the budget—I hope there will be some thinking on that, broader thinking along the lines that maybe Admiral Mullen suggested and your intelligence suggests.

So thank you, Mr. Chairman. I appreciate the opportunity.

Chairman INOUE. Senator Specter.

Senator SPECTER. Thank you, Mr. Chairman.

MISSILE DEFENSE

Mr. Secretary, I was intrigued with one of the points you made in testifying before the Appropriations Committee on the war supplement, where you said that it would be useful in our dealings with Iran to have a missile defense that is aimed only at Iran, and that played into the relationship that we have with Russia; and it is generally recognized that if we're to be successful in dealing with Iran we're going to have to have cooperation of other countries, perhaps mostly Russia.

We've talked before about the issue of having Russia enrich Iran's uranium, which Russia has offered to do and Iran has declined, as a way of being sure that Iran is not moving toward the use of enriched uranium for military purposes.

A two-part question. No. 1: Is any progress being made on publicizing Russia's offer, which I think has gotten scant little attention, and the Iranian refusal really shows—raises the inference of potential bad faith? Second, where do we stand on efforts to pick up your

suggestion that missile defense be aimed only at Iran and not at Russia, which has given so many political problems?

Secretary GATES. First, I think that, although it's certainly not been a secret, it has not been I think widely enough publicized, Russia's offer and Iran's turn-down of it. I think equally not publicized was the fact that the United States indicated that we thought that was a pretty good idea and would be supportive.

With respect to the missile defense, I still have hope that we can get the Russians to partner with us on missile defense directed against Iran.

Senator SPECTER. Have we made that offer, suggesting that missile defense would not be aimed at Russia?

Secretary GATES. Oh, yes. And I've made it myself to then-President Putin and I've made it to President Medvedev. We've made a number of offers in terms of how to partner, and I think there are still some opportunities, for example perhaps putting radars in Russia, having data exchange centers in Russia.

So I think the administration is very interested in continuing to pursue this prospect with the Russians, and it may be that our chances are somewhat improved or making progress because I think the Russians—when I first met with President Putin and talked about this, he basically dismissed the idea that the Iranians would have a missile that would have the range to reach much of Western Europe and much of Russia before 2020 or so, and he showed me a map that his intelligence guys had prepared. And I told him he needed a new intelligence service.

The fact of the matter is the Russians have come back to us and acknowledged that we were right in terms of the nearness of the Iranian missile threat. So my hope is—and that they had been wrong. So my hope is we can build on that and perhaps, perhaps at the President's summit meeting with President Medvedev, perhaps begin to make some steps where they will partner with us and Poland and the Czech Republic in going forward with missile defense in this third site.

I would say, although I took the money out of the 2010 budget for the third site, the reason I did that is because we have enough money in the budget from 2009 that would enable us to do anything in the way of construction necessary.

Senator SPECTER. Mr. Chairman, how much time do I have remaining? There's no clock here.

SYRIA

I'm pleased to see the announcement of the joint military operations or sending military commanders to Syria. It appears to be part of a general change in U.S. policy which I believe is long overdue in trying to at least explore with Syria the possibilities of having them stop destabilizing Lebanon and stop supplying Hamas and moving toward negotiations, which have been brokered so long now by Turkey, with Israel.

What do you say for the opportunities to improve relationships with Syria along those lines?

Secretary GATES. Well, I guess my attitude would be that there's no harm in trying. The CENTCOM representatives who will be going to Syria—I think their mandate is focused on the security of

the border between Syria and Iraq, and particularly to try and enlist Syria's support in stopping the foreign fighters from crossing that border into Iraq and attacking us and the Iraqis.

Senator SPECTER. I have one more question. There may be good news in the offing with what is happening along a number of fronts. The election results in Lebanon with Hezbollah losing and the dominance of U.S.-backed interests is certainly encouraging. There's speculation that President Obama's speech in Cairo may have had some effect on that. The political campaign in Iran by all press accounts is about as much of a political brawl as you see, I'm about to pick south Philadelphia as an illustration.

The question that is in my mind, I'm interested in your views as to whether the change in policy toward Lebanon and Syria and the speech that President Obama has made—is there any intelligence that that is having an impact on the forthcoming Iranian elections and whether it has had any impact on the elections in Lebanon?

Secretary GATES. I have not seen any intelligence specifically relating to either Lebanon or Iran on that.

Senator SPECTER. Thank you very much, Mr. Secretary.

Thank you, Mr. Chairman.

Chairman INOUE. Thank you.

Senator Murray.

Senator MURRAY. Thank you very much, Mr. Chairman.

Secretary Gates and Admiral Mullen, thank you all for being here and for what you do for all of our men and women who serve this country. I really do appreciate it.

I apologize for my voice. I was out in Seattle this week and it was warm weather and the allergy season went crazy. Secretary Gates, you're going to be out there, I believe, to speak to the University of Washington, so be prepared. But I apologize for my voice.

ACQUISITION

I understand I missed some questions from Senator Shelby on the tanker competition and your statement that you expected some kind of decision on how to move forward in the next 7 to 10 days. I wanted to ask you, is that discussion going to include who will lead the process, whether it's you or the Air Force?

Secretary GATES. The period 7 to 10 days was how we will structure the acquisition and who the acquisition authority will be. I'm in the process of making those decisions right now, but have not made final decisions. I don't know with specificity, but, as I told Senator Shelby, our hope is to probably try and get the RFP out mid-summer, and we will fulfill our commitment to bring the draft up for you to look at.

Senator MURRAY. I really appreciate that.

I just wanted to ask you if you're thinking about what kind of measures you're going to take to make sure that we don't have claims of unfair evaluation or the scales being tipped one way or the other as we move through this.

Secretary GATES. Well, part of the process I'm going through right now is to try and structure this in a way that puts the best people on this program and that provides a supervisory role; and right now, tentatively thinking, I'm going to clearly ask the Deputy Secretary to take a very close interest in this process.

Senator MURRAY. Clearly this is a real challenge. We all want the best aircraft at the end of the day. We all want fair and transparent competition. Everybody's saying that and I think that's clear. We all want the best for the warfighter. We also want what's best for the taxpayer as well.

You have been a strong proponent of the winner-take-all competition. Is that still your opinion at this point?

Secretary GATES. Yes, ma'am.

Senator MURRAY. Thank you very much.

ACQUISITION REFORM

Secretary Gates, let me ask you. You've referred to your budget as a reform budget, reforming how and what we buy. I'm really worried about how we are balancing this acquisition reform effort in relation to our domestic industrial base. I'm worried about the long-term ability of our domestic industrial base to provide our military forces what they need to accomplish their national security missions.

Since we talked last April, I have worked with Chairman Levin on the acquisition reform bill and included language to require a report regarding the effects that cancelling a major acquisition program would have on the Nation's industrial base. I wanted to ask you today if you can tell me how you are taking into account the health and longevity of our domestic industrial base, including our suppliers, design engineers, manufacturers, as you tackle acquisition reform in the DOD?

Secretary GATES. Well, I think so far, in terms of the decisions that I've made, most of the decisions have not been taken with a view to the industrial base, but rather acquisition programs that had been extremely badly managed, in substantial measure by the Department of Defense. So I would say that, in all honesty, not very many of the decisions that I have made were made with the industrial base being as an important consideration, but rather as acquisition programs gone badly awry.

But as we go forward, as Admiral Mullen talked about a few minutes ago, clearly we have concerns about the industrial base. But to be perfectly honest, decisions made a long time ago have limited our options in this respect. The best example, as he cited, is the Joint Strike Fighter. So we are where we are, and—

Senator MURRAY. We are where we are, but if we keep going down this road then 10 years from now have to ask, oh my gosh, what happened? If we don't start thinking about it now, we're going to be in a bad place. So I agree with you, we've looked at acquisition reform in terms of contracts gone bad. I do think we have to start talking about acquisition reform in terms of our industrial base as well. I hope we can work with you on that.

Admiral Mullen.

Admiral MULLEN. If I could just offer one other thing, and I spoke to this earlier. But the other thing that I have found which keeps primes very focused as well as subs is predictability. We can't keep changing the program, whatever it is, whoever "we" is, because we all do this, year after year after year, because they just won't plan. They won't invest in the industrial base if there is great uncertainty and great risk associated with that.

So as we come to grips with this whole issue of acquisition, which I think we need to do and which this budget really attempts to do and the acquisition reform legislation is critical to that, is that is a key piece, is can we get programs into some level of predictability and stability.

Senator MURRAY. I think that's really important. So thank you with that.

MILITARY HEALTHCARE

Secretary Gates, I wanted to applaud the budget plan in terms of military healthcare. I really think it goes a long ways toward ensuring that all our servicemembers and their eligible family members have access to and get the best medical care possible. I just want to say, I am still, as I think all of you are, still very concerned about the psychological health of our servicemembers. We continue to see reports—and Admiral Mullen, I know combat-related stress is a great concern for you. If you can just address that for a minute here and tell us what you're doing systemwide to continue to focus on that?

Admiral MULLEN. Again, this budget puts a lot more money in that direction and that's key. We, leadership throughout the Department and clearly the military leadership, is very focused on making more capability and capacity, more mental health providers available. I won't rest on the fact that we're short nationally. If I do that, then I just accept that we're going to be short, and I'm not going to do that until I have no other choice, and I just don't believe we've wrung it out.

We've taken some steps in the stigma issue, but that's still a huge issue. I don't think we really remove that until we get to a point where everybody receives an effective screening and it's not voluntary—you must do it—and create again opportunities to both understand when somebody is suffering, as so many are right now, which is pretty normal and pretty human.

So leadership will continue to focus on this. In fact, it was at Fort Lewis—I was there maybe 18 months ago now—that really—Madigan has really got some very innovative staff personnel, medical personnel there. We're trying to pay attention to them and to spread those kinds of best practices.

But we're not there yet. As long as we've been at this, it's still early.

Secretary GATES. Let me just add two things. First of all, the Admiral mentioned money. This budget, we budgeted \$428 million just for psychological health in 2009, fiscal year 2009. The fiscal year 2010 budget will have \$750 million in it, so a substantial increase focused strictly on psychological health.

MENTAL HEALTHCARE

Second, one of the things that I'd like to explore with the Congress and it goes to the issue of the availability of mental healthcare providers. The truth is there are a lot of places in this country where we are trying to hire them and they aren't available. We have hired a lot, but not as many as we would like.

One of the things that I'd like to explore with the Congress is expanding the military medical education program so that it goes be-

yond just physicians and includes mental healthcare professionals, whether it's people getting master's degrees—and I'm not talking necessarily about funding somebody to become a psychiatrist, but somebody who can do counseling and somebody who is the first-line provider for mental healthcare, and to pay for that education for someone in exchange for a commitment to the military, and then frankly we will have done the country a service because then they can go out into the broader population.

Senator MURRAY. Mr. Secretary, I think that's exactly what we need to be doing because, as the Admiral mentioned, this isn't just a DOD problem; it's a problem for everyone. And we can't just say we hope that they come through the other system. I think if the military really focuses on that and promotes and sustains a program within itself, it will help the military. It will also help the rest of us. So I think it's a great idea and I really would like to work with you on making that happen.

Thank you very much, Mr. Chairman.

Mr. Secretary, I look forward to seeing you out in Seattle at the Husky graduation.

AIRCRAFT ISSUES

Chairman INOUE. Mr. Secretary, Admiral Mullen, as we close this session I'd like to make a couple of observations if I may. Your decision to terminate the acquisition of the C-17s, the F-22s, the DDG 1000, and the future combat system vehicles, we have concerns that it may send the wrong signal to our friends and our potential aggressors that we are reducing our capability. It may also have a long-term impact on our defense industrial base. It may diminish our capacity to provide deterrence and reduce our strength that we provide to our allies. We hope that this is not the consequence, but some have the concern.

VETERAN HEALTH/MENTAL CARE

The second observation is that in that ancient war in which I involved myself about 65 years ago, the casualties were high, but the survival rate was not as good as the ones we have today. For example, in my regiment, which in 1 year's time we went through, from 5,000 men, 12,000 because of replacements, we had no double amputee survivor. None of those survived. Yet if you go to Walter Reed today, double amputations are commonplace.

We had no brain injury survivors. As a result, as I look back, we had very little psychological concerns. But today we have survival rates so well because of high technology that double amputees, triple amputees are surviving, brain injuries are surviving. As we can anticipate, as Senator Murray pointed out, psychological problems become commonplace. I just hope that we are preparing ourselves to cope with all of these problems.

ADDITIONAL COMMITTEE QUESTIONS

With that, I'd like to thank you, Mr. Secretary, Admiral Mullen, Secretary Hale, for your contributions today. We hope that we can continue our discussions because we will be submitting to you, if we may, questions for your concern and response.

[The following questions were not asked at the hearing, but were submitted to the Department for response subsequent to the hearing:]

QUESTIONS SUBMITTED TO ROBERT M. GATES

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

INSTITUTIONALIZING IRREGULAR WARFARE CAPABILITIES

Question. Secretary Gates, our troops entered Afghanistan in 2001 and Iraq in 2003. We soon realized that the threat environment for our military operations was quite different than what we were prepared and equipped for. We responded by rapidly developing and fielding thousands of anti-IED jammers, more than 16,000 mine resistant ambush protective vehicles and countless intelligence, surveillance and reconnaissance assets. All of these programs have saved American lives, yet none of them are Programs of Record and they are all managed outside of the traditional Defense Department bureaucracy. Why was it necessary to go outside of the regular Department of Defense acquisition process? And how can we institutionalize these capabilities instead of continuously adding more layers to the bureaucracy?

Answer. Force protection has always been a priority for our troops. The enemy we face and the tactics and technology we have employed have been truly remarkable. The evolving threat environment requires continued, proactive management of anti-IED programs to keep warfighters protected and as safe as possible given technological limitations. We learn from each innovation and that knowledge will be reflected in all our IED-related acquisition programs. I am very interested in applying these lessons to Afghanistan and to our future programs.

Question. One of the reasons our acquisition system is so cumbersome and inflexible lies in requirements that often demand gold-plated solutions that can take years to develop. Many of the rapid fielding capabilities we're now sending to theater may only represent a 75 percent solution, but collectively, they seem to get the job done. What is your assessment of the new equipment we've been sending into theater? Are we addressing our warfighters' needs?

Answer. In general, the new equipment fielded has had a huge impact in theater, especially in Iraq. The Department is capitalizing on the wartime procurement lessons learned so that Afghanistan can benefit from these experiences. Much of the rapidly, urgently fielded ISR, C2, UAS, force protection, and Counter-IED capabilities are typically low-cost, commercial-off-the-shelf (COTS) or slightly modified-COTS solutions. The short, time-certain need period is a determinant factor. The speed of development and production is increasingly important. Our focus is to improve our ability to anticipate requirements and therefore minimize the need for partial solutions.

IRREGULAR WARFARE

Question. Secretary Gates, roughly 6 months ago, your office issued guidance declaring irregular warfare to be as "strategically important as traditional warfare". You state that the fiscal year 2010 budget rebalances capabilities and provides roughly 10 percent for irregular warfare, 50 percent for traditional, strategic and conventional conflict, and 40 percent for dual-use capabilities. However, with no out-year budget data and no movement by the military services to significantly adapt doctrine and training, how can the Committee be assured that "irregular warfare" is not just a convenient way to cut programs or justify new programs?

Answer. You cannot be assured that the Department of Defense is genuinely increasing its emphasis on irregular warfare until we complete our Quadrennial Defense Review and send you our fiscal year 2011 budget and outyear plans reflecting the results of that Review. My decisions for the fiscal year 2010 budget were only a beginning. We still have to make some tough decisions and then explain how our new emphasis on irregular warfare is not just a convenient way to cut programs and justify new ones.

Question. How will you ensure that the military services will not scale back their full spectrum readiness training too much, so that we can continue to dominate and prevail in major combat operations?

Answer. We will ensure that prudent readiness is maintained the same way we traditionally do—by insisting on sufficient funding for readiness requirements and by having our military and civilian leaders checking on readiness in the field.

ACQUISITION REFORM—REQUIREMENTS

Question. Secretary Gates, as we look at improving the acquisition system due to massive cost overruns and schedule delays, perhaps we should think about the way that weapon system requirements are generated and validated. It appears that too often, “requirements creep”, or reaching for immature technologies makes programs too costly and off-schedule. How can the Department better manage requirements, and perhaps change the service cultures, so that acquisition programs are more likely to provide needed capabilities on time and on cost?

Answer. The Department has established a number of important new policies to improve requirements formulation, establish more effective program technical foundations, and control “requirements creep”:

- To reduce technical risk and refine program requirements, our practice will be to conduct competitive prototyping and complete Preliminary Design Reviews before we initiate a program,
- We will employ independent technical reviews to certify the maturity of program technologies before we permit a program to proceed to the costly final phases of development and finally,
- We have established Configuration Steering Boards (CSBs) with broad executive membership to review all requirements changes and significant technical configuration changes that have the potential to result in cost and schedule impacts to the program.

The intent is to prevent “requirements creep” and defer any changes to future program increments. We believe these actions, complemented by those directed in the Weapons System Acquisition Reform Act, will ensure that our requirements and acquisition approach are tightly related, and that this disciplined approach will result in significantly improved program outcomes.

Question. Do you believe that your staff has the analytic support, such as modeling and simulation tools, for objective analysis to help prioritize requirements?

Answer. The procedures established in the Joint Capabilities Integration and Development System (JCIDS) support the Chairman of the Joint Chiefs of Staff (CJCS) and the Joint Requirements Oversight Council (JROC) in identifying, assessing, and prioritizing joint military capability needs/requirements.

Models and simulations are an important part of the process to identify capability gaps and potential materiel and non-materiel solutions. These are used to support the analytical process by objectively considering a range of operating, maintenance, sustainment, and acquisition approaches through the incorporation of innovative practices. Specifically, as new requirements are identified, models and simulations are used in an analysis of alternatives process to determine if the new requirements can be satisfied through changes in tactics, techniques, procedures, doctrine, training, or leadership. If the analysis of alternatives does not identify alternate solutions to the need, then models and simulations play an important role in concept exploration to identify costs and benefits to potential materiel solutions.

Modeling and simulation tools are available and adequate for objective analysis; through outreach and education, we are continuing to improve the knowledge and expertise of the DOD modeling and simulation workforce.

Question. What improvements or changes would you recommend in order to better manage requirements?

Answer. We are continuously evaluating methods to streamline the management of requirements. To that end, we have made recent changes in the requirements development and management process.

- We are limiting the number of documents that must go through joint review and oversight to those that impact joint operations.
- We have provided guidance to better scope the analysis done in the capability gap assessment process. This will reduce time and resources required while presenting an appropriately defined requirements gap to the Joint Requirements Oversight Council (JROC) for validation. This will allow the Department to move more quickly from the requirements process into the acquisition process.
- We have recognized that information technology systems need to have a more flexible requirements management process than traditional hardware programs. To address this, we have better tailored the requirements process as it applies to information technology systems. Once the JROC approves the initial performance requirements and provides overarching cost and schedule constraints, it will delegate requirements management and oversight to an appropriate Flag level body that has the time and flexibility to effectively manage the development of these systems.

We are also working on future improvements to the requirements management process:

- We are developing an information technology data management tool which will allow us to structure the data in requirements documents to make the information more readily available and visible for comparison and analysis.
 - We are developing a similar tool for managing joint urgent needs to allow for more rapid information sharing so that we can make decisions more rapidly and get solutions into the hands of the warfighter more quickly.
- We will continue to identify opportunities to improve the requirements management process to ensure we provide the correct level of oversight balanced with the ability to respond efficiently to the warfighter's needs.

STRATEGIC IMPLICATIONS OF PROGRAM TERMINATIONS

Question. Secretary Gates, we understand that the fiscal year 2010 budget is a step towards rebalancing resources to build irregular warfare capacity applicable to the current fight. But we still face threats from traditional nation states such as North Korea and potentially Iran or others. How do program terminations such as the F-22, C-17 and Future Combat System Manned Ground Vehicle affect our ability to respond to traditional threats? Are we swinging the pendulum too far the other way?

Answer. Although the proposed fiscal year 2010 defense budget reflects some shifts in emphasis, it is important for the United States to maintain its capabilities for conventional warfare dominance. All of the Military Departments are challenged to find the right balance between making the changes necessary to win the wars we are in and to be prepared for likely future threats. With this budget, I have tried to make a holistic assessment of the capabilities, requirements, risks and needs across the Military Departments.

DE-MILITARIZING U.S. FOREIGN POLICY

Question. Secretary Gates, you have repeatedly made statements about the need to improve the coordination and collaboration of efforts among the Department of Defense, the State Department, the U.S. Agency for International Development and non-governmental organizations. Mr. Secretary, you have even taken the highly unusual step for a Defense Secretary to support an increased budget for the State Department. Can you give the Committee some examples of where this inter-agency effort is currently being employed and how it could be expanded?

Answer. There are many examples of where interagency work is ongoing and could be expanded. What follows are a few examples of such cooperation:

- Strategic Planning.*—Civilian agencies have participated in DOD's strategic planning processes, including the development of DOD's strategic guidance for employing its forces, Combatant Command Theater Campaign Plans, and the Quadrennial Defense Review. DOD participates in a range of planning activities led by the Department of State, U.S. Agency for International Development (USAID), and Department of Homeland Security.
- Building Partner Capacity.*—Innovative "dual key" tools like Section 1206 allow DOD and the Department of State to address security challenges that are the shared responsibility of both Departments. The Secretary of Defense, with Secretary of State concurrence, has leveraged the expertise resident in both departments to execute over \$700 million in train and equip programs in over 40 countries. Separately, DOD, the Department of State, and USAID have published guidance on security sector reform to better integrate train-and-equip programs with efforts that build partner institutions to sustain long-term security.
- Reconstruction and Stabilization.*—DOD has worked closely with the Department of State's Coordinator for Reconstruction and Stabilization in developing an Interagency Management System (IMS) to provide reconstruction and stabilization expertise and whole-of-government planning support for complex contingencies. Realization of the full potential of IMS requires full funding of the Department of State's Civilian Stabilization Initiative.
- Humanitarian Assistance.*—DOD's humanitarian assistance guidance ensures that projects align with wider foreign policy objectives and do not duplicate or replace the work of civilian organizations. DOD is formalizing a USAID role in the clearance process.
- Military-Non-Governmental Organization (NGO) Relations.*—DOD and InterAction—the umbrella for many U.S.-based NGOs—jointly developed guidelines for how the U.S. Armed Forces and NGOs should relate to one another in hostile environments. We continue to educate both communities about the guidelines, foster dialogue, and develop NGO-military liaison arrangements.

Effective interagency coordination and collaboration also depend on giving our civilian partners greater capacity. When our civilian departments and agencies are more robust and engaged with DOD, military risk is reduced and deployments are minimized. For these reasons, I strongly urge you to support the President's fiscal year 2010 foreign affairs and foreign assistance requests. We also need your help in fully funding and authorizing Section 1207 "Security and Stabilization Assistance" for fiscal year 2010. The President requested \$200 million for this important program for fiscal year 2010. Unfortunately, the House Armed Services Committee reduced Section 1207 spending authority from \$100 million to \$25 million in its National Defense Authorization Act mark-up. Section 1207 allows DOD to help the Department of State and USAID address security challenges and defuse crises that might otherwise require a U.S. military response, and it has catalyzed interagency collaboration on Country Teams and in Washington.

GROUND-BASED MISSILE DEFENSE (ALASKA INTERCEPTORS)

Question. Secretary Gates, the budget request would effectively stop the emplacement of ground-based interceptors in Fort Greely, Alaska. Has the ballistic missile threat to the U.S. homeland changed to warrant curtailing this program?

Answer. The Ground-Based Interceptor (GBI) is designed to defeat the relatively small number of unsophisticated missiles that could be launched by a rogue nation against U.S. territory. The rogue country ICBM threat has not evolved as rapidly as was originally projected in 2002. I am confident that deployment of 26 interceptors in Alaska and 4 in California with four spare missiles plus additional missiles for testing gives the Nation a robust capability. The modified program would retain all previously planned reliability upgrades to the GBIs and maintain the planned number of Ground-Based Missile Defense flight tests. We will close the older, prototype Missile Field One and move those missiles into the newly constructed Missile Field Two resulting in an overall higher reliability rate for those missiles. If the threat were to expand, the United States has time to build additional interceptors.

NATIONAL POLAR-ORBITING OPERATIONAL ENVIRONMENTAL SATELLITE SYSTEM (NPOESS)

Question. Secretary Gates, as you know, the Department has had a troubled history with its satellite programs. One of the programs that continue to be plagued with cost growth and schedule problems is NPOESS. Who in the Department of Defense is in charge of making decisions on this program, and what is the plan for the future of the satellite system?

Answer. The May 1994 Presidential Decision Directive/NSTC-2 directed the merging of the DOD and DOC operational weather satellite systems with the objective of reducing the cost of space based data collection for weather prediction. The PDD/NSTC-2 and the December 2008 Amendment to the Tri-agency Memorandum of Agreement (MOA) outline the roles and responsibilities of each agency. DOD is named as the lead agency for systems acquisition. As such, the Under Secretary of Defense for Acquisition, Technology, and Logistics (USD(AT&L)), as Milestone Decision Authority (MDA), makes the final acquisition decisions for NPOESS.

Since NPOESS is such a large portion of the NOAA budget, NOAA has dedicated several senior executives to management and oversight of NPOESS. A significant part of the continued cost growth on NPOESS stems from the growing acknowledgment of climate data as critical to our national interest. The program was not initially set up, nor was it set up after the Nunn-McCurdy restructure, to provide the complex instrumentation desired for climate assessment.

Senior DOD and DOC officials have engaged in discussions concerning management of NPOESS. The DOD and DOC are reviewing a number of courses of action to help alleviate the friction. Options range from enforcing the current MOA to single agency management of the program to a split management strategy. DOD and DOC are also engaged with the Office of Science and Technology Policy to help craft a path forward to benefit all parties involved. The importance of NPOESS and the need to avoid a continuity gap is understood by DOD, DOC, and NASA.

Question. Secretary Gates, there are too many people within the Department of Defense that believe they are in charge of satellite acquisition. With no one actually empowered to make decisions on satellite programs, we continue to see large cost growth and schedule delays in these systems. Do you have a plan to fix this chronic problem or will it be addressed in the ongoing Quadrennial Defense Review?

Answer. Ensuring future space systems are delivered within promised cost and schedule targets requires the proper checks and balances necessary to appropriate management and oversight of the Nation's acquisition programs. In June 2008, the DOD established the Space and Intelligence Capabilities Organization, reporting directly to the Under Secretary of Defense for Acquisition, Technology, and Logistics

(USD(AT&L)), to perform and be accountable for all acquisition oversight and related matters concerning DOD Space and Intelligence programs. A wide range of space related issues are being addressed in the Space Posture Review.

FISCAL YEAR 2010 OVERSEAS CONTINGENCY OPERATIONS REQUEST

Question. Secretary Gates, the fiscal year 2010 budget request includes \$130 billion in non-emergency spending for overseas contingency operations. In the past, the administration has had difficulty predicting the full year costs of these operations. For example, in fiscal year 2008, the administration submitted along with the regular budget request a full-year supplemental request for operations in Iraq and Afghanistan. But within 8 months, the administration submitted two budget amendments to this supplemental request. How confident are you in the fiscal year 2010 overseas contingency operations request that you've submitted to the Congress?

Answer. I am very confident about the \$130 billion war-funding request the President sent to Congress on May 7, just over a month ago. However, I acknowledge that as the months go by security situations in Iraq, Afghanistan, and Pakistan can change, and that might mean that there might be changes in what exactly needs to be funded in fiscal year 2010.

Question. How will you ensure that urgent, unforeseen warfighter requirements are addressed in the fiscal year 2010 overseas contingency operations budget? Can you assure us that the Committee will be informed of any necessary adjustments?

Answer. Yes, I can assure you that my staff and I will keep Congress informed of any needed adjustments in our fiscal year 2010 request, and that is how both Congress and the Department of Defense can address unforeseen warfighter needs.

STRAIN ON THE FORCE

Question. Secretary Gates, the Army's and Marine Corps' suicide and divorce rates have risen sharply this past year. It appears that the strain of frequent deployments is affecting the emotional health of our soldiers and Marines. Do you believe the Department is doing enough to support service members and their families? What more could we do?

Answer. The health and wellbeing of our service members and their families is one of the Department's top priorities and we are addressing suicide prevention and the psychological health of our service members in many ways. The military is the pre-eminent example in suicide prevention, targeting its members with a frequency and number of efforts unparalleled by any other organization.

We are engaged in comprehensive preventive education initiatives. Within the Military Health System (MHS), there are many programs for service members that include the family when providing care and services, especially those deployed or returning from theater. Dedicated resources are focused on identifying the unique problems of military families and establishing or enhancing programs that specifically address the needs of the family. The Defense Centers of Excellence (DCoE) for Psychological Health and Traumatic Brain Injury (TBI) was established in November of 2007 and assesses, validates, oversees, and facilitates prevention, resilience, identification, treatment, outreach, rehabilitation, and reintegration programs for psychological health to ensure the Department meets the needs of the Nation's military communities, service members, and families. We have made significant contributions in support of the service members and their families with psychological health and TBI concerns. Furthermore, the services have a forum to discuss their current suicide prevention programs and best practices through the Department of Defense (DOD) Suicide Prevention and Risk Reduction Committee. The Army has specifically been taking multiple proactive steps to address the issue of suicide within its ranks, including the creation of a suicide prevention task force. The task force was developed as part of a month-long "stand down" to address soldier suicides.

Access to Care

Lack of access to mental health professionals is a particular problem in the MHS due to a shortage of providers and an increased demand for services. The services established an effort to aggressively recruit and retain mental health providers to ensure better access for service members and their families. In the past 2 years, we have placed 1,700 mental health professionals in primary care clinics to increase access and reduce the stigma associated with visiting a mental health facility. In addition, the TRICARE Network has added 10,000 mental health providers, including child psychiatrists and psychologists.

Quality of Care

Research continues to help DOD better understand the mental health status of military families by providing data to develop programs specifically targeted to cur-

rent needs. Evolving evidence has been used to develop psychological health (including post-traumatic stress disorder) clinical practice guidelines and training materials to ensure service members and families receive the best possible care. In addition to providing additional training to the MHS providers and staff, we are sharing military psychological health resources and clinical guidelines with local and community organizations and providers throughout the country who are often the first line in treating Reserve Component beneficiaries. Training is also offered to TRICARE network providers to continually improve their skills.

Resilience, Protection, Prevention

As with many conditions, prevention and early diagnosis are critical for those who are in need of psychological healthcare. The services and DOD have recognized that family, friends, and others in the military member's support system need to be aware of the signs that psychological health or TBI treatment may be necessary, and have instituted programs to inform and train them. The Battlemind Transition Office runs the Army's Resiliency Program, a preventive approach intended to strengthen individual service members, their families, their units, and communities and enhance their ability to cope with stress.

Research

DOD funded research is underway to more precisely identify the effects of war on service members, their families, and especially their children. We are also conducting research to compare the effect on family members of service members who return from deployment wounded versus non-injured. The National Child Traumatic Stress Network Center, based at the Uniformed Services University of the Health Science's Center for the Study of Traumatic Stress, develops knowledge related to military childhood experiences, develops effective public education materials, and expands and studies effective intervention strategies. We also have an ongoing Family Program Assessment to identify the antecedents and consequences of different levels of family readiness by collecting longitudinal data from Army families across the deployment cycle. This study will identify potential predictors of divorce in military families. This information will then be used to design programs to reduce the rate of divorce in military families. The possibility of expanding this study to all services is being actively considered.

Non-Medical Approaches

Six years of deployments and multiple deployments prompted the Department to rethink methods and strategies to deliver family support. Now, Military OneSource provides support services 24 hours per day, 7 days per week to Active Duty, National Guard, and Reserve component service members and their families worldwide. Toll-free confidential telephonic support and a website, www.militaryonesource.com, provide interactive tools, educational materials, discussion boards, links to military and community resources, and tax filing services, among other services. Outreach non-medical counseling offer service members and their family members confidential, short term, situational, problem solving assistance that is instrumental for coping with normal reactions to the stressful situations created by deployments, family separations, and reintegration. Military OneSource offers confidential face-to-face, telephonic, and online counseling up to 12 sessions. The Military and Family Life Consultant program provides professional, confidential, and flexible service delivery on a 30–90 day rotational basis on military installations to meet surge support requirements and to support National Guard and Reserve events. Child and youth behavioral health specialists work with families and educators to identify and help struggling children and families. Additionally, financial counseling is available to assist with the financial concerns of military members and their families during all stages of the deployment cycle.

These are just some of the initiatives we have underway, but we are always looking at the conditions and indicators to determine if there are other actions that can benefit our service members and their families work through their difficult problems.

Question. Do you believe that the Army and Marine Corps force structure is large enough to relieve the operational strain on the force?

Answer. Yes, but I will be reviewing the conclusion of the Quadrennial Defense Review on ground forces before making a final assessment.

Question. Secretary Gates, you recently returned from a trip to Afghanistan. What is your assessment of how our troops are holding up under the continued high operational tempo?

Answer. The troops I had an honor to meet with displayed a high level of morale. It was inspiring to see their level of commitment and positive demeanor in light of all we are asking them to do.

AGE AND HEALTH OF TANKER FLEET

Question. Secretary Gates, I am concerned about the aging Air Force tanker fleet and the health and age of the KC-135 tankers by the time they are replaced. Can you update the Committee on the status of the Air Force tanker fleet, including the age of the fleet and any present safety and flight concerns with the current fleet?

Answer. The USAF tanker force structure includes 415 KC-135 R and T models and 59 KC-10A aircraft with average fleet ages of 48 years and 24 years, respectively. Upon retirement of the last KC-135 planned for 2040, this tanker will have reached 80 years of service. The KC-10 will have achieved 60 years of service upon its planned retirement. Per the fiscal year 2010 Annual Planning and Program Guidance (APPG) and to maintain fleet viability, investment programs for these airframes are focused on safety of flight and obsolescence issues. To this extent, the KC-135 aircraft has six and the KC-10 has two on-going fleet-wide modification programs. Regarding safety of flight issues, the CCAB program addresses the only known "safety of flight" issue for the KC-135. There are no KC-10 safety of flight issues at this time.

The six KC-135 programs consist of the following:

- Control Column Actuated Brake (CCAB).*—Modification preventing an unsafe stabilizer trim wheel runaway condition—fleet modification complete in fiscal year 2010;
- VOR/ILS Antennae Replacement.*—Replaces the obsolescent antennae used for navigation and precision instrument landing systems—this is an fiscal year 2010 New Start program;
- Block 45 Upgrade.*—Cockpit avionics modernization replacing obsolescent Auto-pilot, Flight Director, Radar Altimeter, and Engine Instruments—contract award late fiscal year 2009;
- Global Air Traffic Management (GATM).*—Updates and replaces Communication Navigation Surveillance/Air Traffic Management (CNS/ATM) equipment to meet restricted airspace requirements worldwide; modification complete in fiscal year 2011;
- Enhanced Surveillance (EHS).*—Replaces APX-110 transponder with APX-119 providing enhanced aircraft tracking and IFF Mode 5 capability (complete by fiscal year 2010);
- Mode 5.*—DOD-mandated upgrade to the Identify Friend or Foe (IFF) system used for aircraft identification in Air Defense Operations (fiscal year 2010 to fiscal year 2012).

The KC-10 provides both strategic air refueling and airlift for deployment, employment, redeployment and Joint/Combined support operations. This aircraft is a commercial derivative of the McDonnell Douglas DC-10-30 and since its first delivery in 1981, no major avionics upgrades have been completed. As such, in its current configuration, the KC-10 does not meet future Federal Aviation Administration (FAA)/International Civil Aviation Organization (ICAO) CNS/ATM requirements for 2015 airspace restrictions. To mitigate operational risk, two modification programs exist for the KC-10:

- CNS/ATM Modification:* addresses near term issues required to keep aircraft operational within 2015 air traffic mandates/restrictions;
- Boom Control Unit Replacement:* replaces unsustainable Boom Control Unit (complete 2012).

FISCAL YEAR 2010 TANKER CONTRACT AWARD SCHEDULE

Question. Secretary Gates, will the tanker replacement program request for proposals go out to industry this summer? Is the Department on track to make a contract award for the tanker replacement in early fiscal year 2010?

Answer. Yes. The Department anticipates being able to issue a draft solicitation this summer with award of a contract by late spring 2010.

TANKER CONTRACT COMPETITION

Question. Secretary Gates, do you have confidence that the upcoming tanker contract award will not result in another protest to the Government Accountability Office (GAO)? What is your plan if another protest is upheld by the GAO?

Answer. Contractors have the right to protest any contract award. There is no guarantee there will not be a protest in the upcoming tanker competition. I am confident the Department has a process in place to address the original GAO protest decision findings and to ensure a fair competition. If another protest is upheld by the GAO, we will address it at that time.

STRUCTURAL REPAIRS OF KC-135 TANKERS

Question. Secretary Gates, based on the current tanker replacement program, it will take over 30 years to recapitalize the KC-135 fleet. Can you elaborate on the cost of the structural repairs that will need to be done on the KC-135 fleet during the acquisition of the replacement tankers? Can these costs be avoided if the fleet is replaced sooner?

Answer. Skin replacements are the major structural repairs that occur on the KC-135 when the skins exceed repairable limits. To date, the number of skins needing replacement has been manageable and have not greatly affected Program Depot Maintenance (PDM) flow and overall aircraft availability. There is a reasonable amount of rework that can be accomplished before most of the structures require replacement. Over time, however, the skins will need to be replaced.

The Air Force is planning for three structural repairs to the KC-135 fleet: replacement of Aft Body Skins, replacement of Upper Wing and Horizontal Stabilizer Skins, and replacement of Crown and Center Wing (wing box) Upper Skins. The KC-X recapitalization rate will influence the number of aircraft requiring each structural repair. The calculations below assume 416 KC-135s require replacement of Aft Body and Upper Wing and Horizontal Stabilizer Skins, but that only 230 KC-135s will require replacement of Crown and Center Wing (wing box) Upper Skins (see below). The dates used in the forecasts were selected to gain the most benefit from the work that will be accomplished. Each estimate uses current year, fiscal year 2009, dollars and is per aircraft. Then year dollars would be more.

Aft Body Skins

Replacement of these skins is already programmed to begin in the current FYDP.

Estimated cost per airplane: \$0.3 million.

Estimated total cost: \$124.8 million (416 aircraft).

Max aircraft down: N/A—concurrent with PDM. (Note: Air Force programming this work into the fiscal year 2012 PDM work package reduces potential delays from unscheduled “over and above” work.)

Upper Wing and Horizontal Stabilizer Skins

These would be done concurrently, separate from PDM, in a “speed line,” and would include replacement of substructure components that are important to continued use of the aircraft and accessible when the skins are removed. (Note: The “speed line” will be a stand alone repair line dedicated solely to the upper wing and horizontal stabilizer skin replacement work.)

Estimated cost per airplane: \$6.7 million.

Estimated total cost: \$2.8 billion (416 aircraft).

Max aircraft down: 12 (at any one time).

Crown and Center Wing (Wing Box) Upper Skins

This replacement is planned further in the future since recent experience has not indicated significant problems with corrosion or cracking. They are planned to be done concurrently in a speed line and separate from PDM. We have accounted for planned retirements in this increment.

Estimated cost per airplane: \$4.6 million.

Estimated total cost: \$1.1 billion (230 aircraft).

Max aircraft down: 12 (at any one time).

Due to the materials and the assembly techniques used when the KC-135 aircraft was originally procured, occurrences of corrosion will continue to be a primary area of concern. Continued inspections, repairs, and preventive maintenance are required to ensure a viable fleet.

Question. Can these costs be avoided if the fleet is replaced sooner?

Answer. Yes; as indicated in the answers above, some of the costs could be avoided, depending on timing of KC-X replacement and retirement schedule for the KC-135.

TANKER DUAL BUY STRATEGY

Question. Secretary Gates, I understand that you are strongly opposed to awarding contracts to two tanker manufacturers. Can you elaborate on the pros and cons of this dual buy approach and the costs associated with this type of acquisition strategy?

Answer. The Department’s analysis and experience convinces us that dual sourcing of the KC-X tanker would be costly and ineffective. We oppose the introduction of two separate training, maintenance and logistics requirements simultaneously into the fleet. Developing two tankers at once would require approximately \$14 billion over The FYDP 10–15. Over the life cycle of KC-X we estimate that dual

sourcing would cost the taxpayers \$7–8 billion when compared to a single source. Doubling the number of tanker platforms complicates the Air Force's mission. The Air Force will have to increase its allocation of limited financial and human capital to support the logistics, maintenance and training needs of two tanker platforms over the lifecycle of these aircraft. These lifecycle inefficiencies and complications are unnecessary, and can be avoided by selecting a single tanker platform.

SPECIAL OPERATIONS COMMAND (SOCOM)

Question. Secretary Gates, the Commander of the Special Operations Command, Admiral Olson, recently stated that escalating requirements for capabilities provided by Special Operations Forces have outpaced SOCOM's ability to train new personnel and develop critical enablers in the areas of aviation, intelligence, and communications. To mitigate these shortfalls, Admiral Olson has requested that the military services provide Special Operations Command with additional assistance and manpower in these critical support areas. Are the services able to meet these additional requirements? How will this plan be managed, and to what degree has it been incorporated in the fiscal year 2010 budget request?

Answer. USSOCOM is working with the Military Departments to leverage capabilities to address Special Operations Forces (SOF) shortages in critical mission areas. USSOCOM is currently coordinating with the Military Departments to address critical support areas. Of note, the Military Departments are opening their recruiting and training aperture to increase the number of students at their training centers, including aviation training, to support SOF requirements. The Military Departments are also assisting with providing a mix of organic and dedicated intelligence, surveillance, reconnaissance and communications support for USSOCOM.

The demand for SOF capabilities will continue to increase for the foreseeable future. One of the major focus areas for the Quadrennial Defense Review (QDR) is to balance the force for irregular warfare capabilities, which includes addressing the support of the Military Departments to Special Operations Forces.

Question. Secretary Gates, funding for Special Operations Command has grown from \$2.1 billion in 2001 to nearly \$8.6 billion, including supplemental funding, in fiscal year 2010. During this same time period Special Operations Command's mission has grown exponentially, as evidenced most recently by its designation as the DOD Proponent for Security Force Assistance (SFA). Given this rapid growth in both budget and responsibility, how are you ensuring programmatic and fiscal accountability within Special Operations Command?

Answer. The resources requested and executed by the U.S. Special Operations Command (USSOCOM) are scrutinized and justified throughout the Department's rigorous planning, programming, budgeting and execution process. The discipline of our department-wide processes along with additional actions that USSOCOM has taken internally help ensure that they maintain programmatic and fiscal accountability for the funds allocated to them. Specifically, USSOCOM has implemented several organizational changes and processes to ensure effective stewardship of appropriated funding. The Command has doubled the size of the Financial Management workforce to ensure the appropriate checks and balances are in place, establishing separate Directorates within the Comptroller organization that provide the Command Program and Budget, Policy and fiscal oversight across the enterprise. Also, the Comptroller is now a stand-alone center with direct reporting to the Commander, USSOCOM, on all fiscal matters. Further, USSOCOM complies with the full complement of regulatory and legislative requirements, such as the Federal Managers' Financial Integrity Act (FMFIA) of 1982, and the DOD Managers' Internal Control Program (MICP), as well as the Chief Financial Officers' Act of 1990, as amended. Finally, there are a broad range of accounting tools and processes to provide an additional layer of visibility over the use of MFP-11 funds and help identify any potential abnormalities during execution.

EXPORT VERSION OF THE F-22

Question. Secretary Gates, I believe the Department should consider an export program for the F-22 Raptor fighter aircraft. Under the rules for such a program, the costs for developing an export variant is borne by the interested nation, not the United States. This would enable us to provide advanced fighter capabilities to our close friends and allies. Secretary Gates, what is your view of an export program for an F-22 variant?

Answer. The Department of Defense does not plan to promote the sale of an exportable variant of the F-22. The F-22 was designed and developed solely to meet U.S. requirements and, based on a recent analysis by the Department, would require over \$2 billion of non-recurring investment by a purchasing nation to meet

United States Government (USG) exportability requirements. We will continue to implement our longstanding plans to offer the F-35 Lightning II to selected allied and friendly nations through Foreign Military Sales (FMS) channels based on the USG's evaluation of our foreign policy and national security interests in relation to the potential purchasing nation. The F-35 program, which already has eight cooperative partner nations and two potential FMS purchasers, was developed with exportability in mind. The USG consults closely with our friends and allies on the capability requirements for the current and emerging security environment. The F-35 incorporates coalition warfighting capability and interoperability features in a highly capable, affordable, and supportable 5th generation strike fighter that was designed from its inception to meet the requirements of both the United States and international partners.

MILITARY PERSONNEL COMPENSATION

Question. Secretary Gates, in the last 10 years, active duty military personnel compensation costs have increased by 91 percent. Do you believe that these costs are sustainable? How are these rising costs affecting the Department's ability to adequately fund your acquisition priorities?

Answer. All rising costs, not just military compensation, diminish our ability to fund acquisition adequately.

Whether or not these rising costs are sustainable will depend on several factors, most notably:

- Our progress in moderating the escalating cost of military healthcare.
- Our overhaul of acquisition programs and our ability to control costs in acquisition programs that continue.
- Cooperation with Congress on minimizing non-essential funding in DOD appropriations.

QUESTIONS SUBMITTED BY SENATOR PATRICK J. LEAHY

Question. Secretary Gates, in your testimony, you highlighted the need to have the right programs in place for the future to meet our shifting defense requirements.

A few years ago, DOD and NSA developed the Trusted Foundry Program to ensure government access to computer chips for a diverse range of mission critical programs and to slow the erosion of the domestic supply base. At that time, the government faced challenges producing required chips itself and was having trouble maintaining pace with the rapid advances in chip technology.

The Trusted Foundry Program has been successful in providing our government with access to domestically produced chips and cutting edge microelectronic technologies and processes. In fact, I understand that under the Trusted Foundry Program the access to new technologies in a "trusted" environment, has led to an increase in government demand for more advanced domestically produced semiconductors.

Do you agree that demand for the services provided by the Trusted Foundry Program has met and/or exceeded expectations? What do you foresee to be the role of the Trusted Foundry Program and its network of more than 10 foundries over the next 3-5 fiscal years?

Answer. Yes, demand for the Trusted Foundry has exceeded our expectations. The role of the Trusted Foundry Program and its network of suppliers over the next 3-5 years will be expanded to cover the full defense-wide requirements for trusted microelectronics for Defense systems and weapons.

TRUSTED FOUNDRY

Question. Does the demand for the chips and services from the Trusted Foundry currently exceed the contracted services provided for in the fiscal year 2009 budget?

Answer. Yes, current demand has exceeded the services contracted directly through the Trusted Access Program Office. Several programs like JTRS and GPS have used their program funds to purchase trusted microelectronics through the TAPO when the resources needed by those programs exceeded the capabilities provided within the Trusted Foundry Program.

Question. Does the current budget request fiscal year 2010 support the majority of pending projects that are proposed to use Trusted Foundry services?

Answer. No. Recent estimates are that the DOD purchases about \$3-5 billion in integrated circuits per year. Based on the cyber-threats and direct threats to our systems from counterfeit and tampered parts, we believe that all of those should be trusted. The current 2010 budget request is based on the projected needs for the

few programs that have requested support for obtaining trusted parts. The majority of programs are not yet in full compliance with the Secretary's directive-type memo that calls for full scale implementation of trusted components for our systems. The Trusted Foundry Program is making a concerted effort to align program offices and services with the ability to obtain trusted components from trusted sources.

Question. If Congress were to provide additional funding for the Trusted Foundry Program above the President's fiscal year 2009 request, what additional capacity or services would be your highest priority?

Answer. The priorities of an expanded program are to establish direct contracts with all of the trusted foundries and suppliers to provide trusted parts, drive new leading-edge technologies into the Trusted Foundry, and provide additional fabrication runs for defense programs.

QUESTIONS SUBMITTED BY SENATOR RICHARD J. DURBIN

Question. How, if at all, has the Department of Defense turned to the interagency process to provide rule-of-law training in Afghanistan?

Answer. Working to reduce corruption in Afghanistan has been a U.S. Government objective from the beginning. The principal Department of Defense efforts to reduce corruption include the Department's training and mentoring of Afghan National Security Forces and personnel of the associated Afghan ministries. These efforts support and are supported by other U.S. Government agency efforts to reduce corruption. For example, USAID anti-corruption efforts include training Afghan judges and judicial staff and restructuring personnel and pay structures in the Afghan court system.

Question. Please provide the following: The total number of lawyers (military and civilian) whose primary responsibility is to provide rule-of-law training in Afghanistan on behalf of the Department of Defense; the offices within the Department of Defense (or United States Government) or organization to which these individuals are assigned; the total number of Afghans who have received rule-of-law training from these individuals; an estimate of the total number of Afghans for which the Department of Defense anticipates it will provide rule-of-law training.

Answer. The lead U.S. agency for rule-of-law and other governance development initiatives is the Department of State. There are no military or civilian lawyers providing rule-of-law training as a primary duty on behalf of the Department of Defense.

Question. The President's policy towards Afghanistan notes that part of our counter-insurgency strategy must include building effective local governance.

What is the Department of Defense's plan for combating corruption in the Afghan government entities with which it works on a regular basis, including the Afghan National Army and Afghan National Police?

Answer. The Department works to reduce corruption in Afghanistan principally through training, mentoring, and partnering with the Afghan National Security Forces and the associated Afghan ministries. The training and mentoring programs ensure that Afghan National Army soldiers and officers, Afghan National Police (ANP) officers, and ministry staff understand the potential impact that corrupt practices could have on the population. Partnering with ANP units that have completed the Focused District Development program conducted by International Security Assistance Force units, U.S. and Coalition personnel seek to ensure that ANP officers do not return to corrupt practices. Indirectly, counternarcotics efforts by the Department of Defense and other U.S. Government agencies will help reduce corruption by removing a source of funding for corrupt practices.

Question. What office or offices within the Department of Defense are responsible for anti-corruption policies that the Department of Defense will apply when working with Afghan government entities?

Answer. The Department of State is responsible for rule-of-law and anti-corruption policies at the national level. The Combined Security Transition Command—Afghanistan develops training and mentoring programs and curricula for the Afghan National Security Forces and the relevant ministries in support of U.S. rule-of-law and anti-corruption policies.

QUESTIONS SUBMITTED BY SENATOR DIANNE FEINSTEIN

CONFLICTS BETWEEN THE MILITARY MISSION AND WIND POWER

Question. Earlier this year, my Senate colleagues and I wrote to you to request a more coordinated response to conflicts between the military mission and wind power. Please let me know when we can expect an answer to our request.

Answer. The Office of the Secretary of Defense tasked the Under Secretary of Defense for Acquisition, Technology and Logistics (USD(AT&L)) with responding to the Senator's letter. The response required extensive coordination within the Department because mapping areas feasible for energy development impacts DOD missions and training. It is not simply an issue of the Department's obtaining or using energy. The USD(AT&L) response, which is attached, was finalized and sent on August 13, 2009.

THE UNDER SECRETARY OF DEFENSE,
Washington, DC, August 13, 2009.

Hon. DIANNE FEINSTEIN,
U.S. Senate,
Washington, DC.

DEAR SENATOR FEINSTEIN: Thank you for your May 14 letter to the Secretary of Defense requesting the Department of Defense (DOD) establish clear policy to support renewable energy development projects while maintaining necessary protections for military airspace. I am responding on behalf of the Secretary.

The Department has set ambitious goals for the use of renewable energy and is aggressively pursuing efforts on military bases across the Nation. By 2025, the Department plans to procure or produce the equivalent of 25 percent of the electricity it consumes from renewable sources. The national security challenges posed by reliance on foreign sources of energy are clear, and the transition to renewable sources is a key element of the DOD strategy to respond.

As you know, the Department must balance goals to increase renewable energy with maintenance of critical testing, training and homeland defense capabilities. Some renewable energy projects on or near military installations or surveillance radars can have substantial adverse effects on DOD test and training ranges, training routes, special use airspace, and our air defense and border surveillance assets.

You offered suggestions in two broad areas, one of which being the process by which proposals for renewable energy projects get reviewed. For the very reasons you cited, the Department must evaluate each proposed project on an individual, site-specific basis. The Department's red-yellow-green maps are intended to serve merely as guides. In practice, each proposal must be assessed on the basis of the specific factors such as the physical characteristics of the proposed construction, training, test and surveillance needs, and the local geography. For this reason, it is not feasible to fully centralize decision making on wind development projects. However, my staff will work with other offices in the Department to review the current, decentralized decision process and recommend ways to expedite it and improve transparency.

You also suggested that better technology can help mitigate the limitations on placement of wind energy projects. The Department is conducting flight trials and analytic studies to develop tools to improve prediction of impacts and explore possible mitigations. My staff will explore how we might accelerate development of technical mitigation approaches.

I appreciate your suggestions for ways in which the Department can improve the prospects for the development of wind energy in particular. I share your view that the U.S. Government needs to take the steps necessary to allow our country to exploit the benefits of wind energy generation without compromising national security.

A similar letter has been sent to the other signatories of your letter. I look forward to working with you to address this challenge.

Sincerely,

ASHTON B. CARTER.

Question. As you know, there is a great deal of potential and interest in producing significant amounts of solar electricity on military bases in southern California. At least three bases are considering significant projects, which could make the bases independent of the power grid, combat global warming, and increase our energy security. These efforts are often the result of serious initiative by good base commanders and other people in uniform. (1) What is the Pentagon doing to facilitate the use of solar power on military bases in Southern California? (2) What resources and personnel have you dedicated to this effort? (3) What coordination is occurring between services? (4) Would you consider setting a goal that Southern California

bases should attempt to produce enough solar power on base that they are able to meet or exceed all of their net energy needs?

Answer. What is the Pentagon doing to facilitate the use of solar power on military bases in Southern California? The abundance of available solar energy presents opportunities for the Department of Defense (DOD) to increase the energy security of military bases in California. DOD is employing photovoltaic technologies at many installations in California using Energy Conservation Investment Program (ECIP) funding. Using 2008 and 2009 funds (including funds appropriated in the ARRA), DOD is designing and constructing more than 30 solar projects, including thermal systems for domestic hot water, heating pools, and photovoltaics on roofs to provide building power for a variety of operational needs. In addition to carrying out solar technology applications tailored toward specific buildings, DOD is exploring large, utility-scale solar energy plants in partnership with utility companies and energy developers. For example, the Army recently selected its commercial partners for a project at Fort Irwin that could ultimately provide 500 MW of solar power. Finally, DOD envisions military installations can serve as testbeds for renewable energy technologies that are not yet commercially feasible, including, but not limited to, solar technologies, and we are talking with the Department of Energy (DOE) about potential opportunities.

Note, however, that some proposed large-scale commercial solar development projects, including projects that would be located on land adjacent to military installations, may be incompatible with the military's mission. For example, solar towers can obstruct flight operations and interfere with radar. Photovoltaic arrays can also impact testing and training by degrading habitat for threatened and endangered species. Thus, we must carefully evaluate the impact of these proposed projects. Still, we are committed to transparency wherever possible, and we will try to provide information to stakeholders as early in the process as possible.

What resources and personnel have you dedicated to this effort? Each installation has an energy manager, and many installations have a Resource Efficiency Manager (REM) who works with the installation's engineering and operations staffs to determine which renewable energy technologies can be employed to satisfy installation energy requirements. In addition, the installation-level staff relies on the energy subject matter experts at major commands and field-operating agencies to verify the technical solutions and then authorize a contracting method to implement those solutions. Finally, the military services work closely with the Department of Energy Federal Energy Management Program (FEMP). Drawing on the vast expertise of the DOE's many laboratories, FEMP provides technical assistance to individual installations. FEMP also provides enterprise-wide solutions in areas like utility contracting, power purchase agreements, and utility-scale renewable energy development.

What coordination is occurring between services? Installation-energy issues are coordinated through the Defense Energy Working Group (DEWG), which is chaired by the Deputy Under Secretary of Defense for Installations and Environment (DUSD(I&E)), Dr. Dorothy Robyn. Members of the DEWG include the senior military service officials responsible for installations and energy and the services' chief engineers. The DEWG has met monthly since November 2008, and it has proved to be an invaluable forum. Among other things, the DEWG is trying to identify and reduce key impediments to expanded development of renewable energy at military installations. Complementing the DEWG (and with many of the same members) is the Energy Infrastructure Compatibility Working Group, which focuses on potential encroachment issues, particularly on the ranges used for military training and testing. For example, this group worked with Interior's Bureau of Land Management to draft a Wind Energy Protocol that defines a process for DOD evaluation of proposed wind projects on BLM lands. DOD and Interior are exploring the expansion of the protocol to include solar energy.

Would you consider setting a goal that Southern California bases should attempt to produce enough solar power on base that they are able to meet or exceed all of their net energy needs? For a variety of reasons, it would be premature to set a solar or renewable energy goal for Southern California bases beyond those established in law today. To review, the Energy Policy Act of 2005 establishes as a goal that Federal agencies produce or purchase 3 percent of their electricity from renewable sources by 2007–2009, 5 percent by 2010–2012, and 7.5 percent by 2013. Moreover, in November 2005, DOD established as an internal goal that it would produce or procure 25 percent of its facilities energy from renewable sources by 2025. This 25-percent goal was included in the National Defense Authorization Act for fiscal year 2007. Nevertheless, even these goals represent a challenge, because key technologies are not yet commercially mature or cost-competitive, and, in some cases, mission needs may preclude their use at a particular military installation. In sum,

while we plan to be aggressive in pursuing opportunities for greater reliance on renewable energy, we want to be cost effective and consistent with mission needs.

Question. It is my understanding that there are fuel cell technologies that may meet the emerging requirements of the military. Solid oxide fuel cell systems generate clean, cost-effective, onsite electricity that (1) eliminates dependence on the power grid, (2) uses significantly less fuel than traditional generators, and (3) would improve our overall security posture through reliance on domestic fuel sources.

Have you considered including these options to our military energy portfolio as a way to increase energy security?

Answer. Yes. The Army's Research, Development and Engineering Command, along with DARPA and DOE, is evaluating solid oxide fuel cell (SOFC) technology for military uses. Specifically, they are looking at how SOFC systems can be used at installations and forward operating locations in conjunction with other fuel cell technologies (e.g., reformed methanol and direct methanol) to deliver power to a 250 W battery charger fueled by JP-8. However, in spite of the promising advances in recent years, the successful development of a militarized SOFC for a battery charger is probably some years away.

QUESTIONS SUBMITTED BY SENATOR THAD COCHRAN

Question. Secretary Gates, I understand the Department intends to reduce its reliance on contracted workers by hiring more than 13,000 government civilians to replace contractors. Has the Department identified what positions or functions it intends to in-source, and what savings do you anticipate achieving through this initiative?

Answer. The Department is currently working to identify the specific positions that will be insourced. This identification is not constrained to specific functional communities although the Department does have a focus on the acquisition workforce and functions that have been determined to be inherently governmental, closely associated with inherently governmental, or will increase government oversight. The Department has budgeted for 40 percent savings efficiency from the conversion of these support contractors to civil servants.

Question. Secretary Gates, the cost of providing contracted healthcare for our military beneficiaries and their families has increased substantially in the past 5 years, and shows no sign of decreasing in the near future. As the Department looks to in-source throughout the Department, is there consideration for increasing capacity for care in military clinics and hospitals to reduce the need and the associated cost of contracted care?

Answer. While the cost of providing care for military beneficiaries has certainly escalated in the past several years, it is important to point out the cost increase has been across the Military Health System (MHS) and not just in the Purchased Care Sector. Much of the increase in cost can be attributed to a significant increase in the total number of beneficiaries within the MHS and an expansion of the TRICARE benefit. Having said this, however, most of the cost and workload increase has indeed been seen in the Purchased Care Sector. This has been well recognized by MHS leadership and broad-based efforts are underway to both optimize access to military treatment facilities (MTFs) and the Direct Care Sector and to improve the efficiency and quality of the healthcare experience within facilities. Each of the services has addressed the issue head on.

The Army's "Access To Care Initiative," the Navy's "Patient Centered Medical Home" projects at National Naval Medical Center and San Diego, and the Air Force's innovative "Family Health Initiative" are all excellent examples of the commitment each of the services have made to improving the healthcare experience of beneficiaries and maximizing MTF enrollment within existing capacity and budget. So far, these initiatives have demonstrated early success and the Department hopes to capitalize on these successes to improve performance throughout the system. In addition, Health Affairs/TRICARE Management Activity has piloted a "Pay for Performance" project that has been engineered to incentivize individual MTFs to optimize efforts to improve healthcare quality, access, continuity, and patient satisfaction. Again, the purpose is to stimulate innovation, highlight best practices, and promote their adoption across the MHS.

Question. Secretary Gates, you and Secretary Clinton supported transferring the "Pakistan Counterinsurgency Capability Fund" to the State Department over the next 2 years. What efforts are underway within the interagency to implement this initiative, and where would you like to see the fiscal year 2010 funding appropriated?

Answer. For fiscal year 2010, the Pakistan Counterinsurgency Capability Fund (PCCF) has been appropriated to the Department of State in the Supplemental Appropriations Act, 2009. The Department of Defense is working with the Department of State to build its capacity to manage a wartime program in support of DOD requirements, and needs to ensure that the Department of State has the authorities, resources, and processes necessary to provide our commanders the flexibility sought under PCCF. DOD and the Department of State will work together over the coming months and year to make sure the transfer of management responsibility to the Department of State takes place without any degradation of the support required by DOD to build Pakistan's counterinsurgency capabilities in support of U.S. forces' efforts in Afghanistan.

Question. Admiral Mullen, can you give us your thoughts on how the Pakistan Counterinsurgency Capability Fund will help secure Pakistan's tribal areas, and what actions may be necessary to improve the interagency coordination so these funds are used effectively?

Answer. The Pakistan Counterinsurgency Capability Fund (PCCF) focuses on building enduring capabilities for the Pakistani military to conduct counterinsurgency operations in support of U.S. efforts in Operation Enduring Freedom (OEF). The funding is designed to accelerate development of the Government of Pakistan's capacity to secure its borders, including the tribal areas, deny safe haven to extremists, and provide security for the indigenous population in the border areas with Afghanistan.

PCCF will fund counterinsurgency requirements such as helicopters, soldier equipment, and training. The Department proposed \$400 million for PCCF in the fiscal year 2009 supplemental and \$700 million in the fiscal year 2010 overseas contingency operations request. We are grateful to Congress for supporting our request for \$400 million for the Pakistan Counterinsurgency Fund (PCF) in fiscal year 2009.

For fiscal year 2010, we have requested a clean transfer to DOD of the \$700 million Congress provided to the Department of State to ensure uninterrupted execution of this crucial program while the Departments work closely on developing plans for the Department of State to implement the program in fiscal year 2011.

QUESTIONS SUBMITTED BY SENATOR MITCH MCCONNELL

Question. Recently, it was announced that a heavy armor brigade from Europe will not go to White Sands Missile Range in New Mexico, as originally planned. Will DOD be giving serious consideration to sending that brigade to Fort Knox? If not, why not?

Answer. Senator, the Army released the Grow the Army Stationing Plan in December 2007 after it was approved by the Department of Defense and the President. We will adhere to the same plan once the Quadrennial Defense Review determines force structure end state in Europe. The criteria we would use for a returning Germany brigade would be similar to the criteria we used in December 2007.

Question. What criteria or requirements will be evaluated in order to match resources and capabilities of installations with the returning heavy armor brigade?

Answer. The same criteria will be considered in this decision as was used in the installation analysis for Grow the Army 2007: Maximizing Army installation capabilities; growth capacity; power projection; training; and quality of life. The Base Realignment and Closure 2005 Military Value Model will also be used for computation. Other factors that will be considered include minimizing community impact and disruption to the current plan, while maintaining flexibility for future force mix decisions. Our final stationing decision will reflect the results of analysis and best Military Judgment.

Question. Section 8119 of Public Law 110-116 provides in relevant part that: "(b) REPORT—(1) Not later than December 31, 2007, and every 180 days thereafter, the Secretary of Defense shall submit to the parties described in paragraph (2) a report on the progress of the Department of Defense toward compliance with this section . . . (3) Each report submitted under paragraph (1) shall include the updated and projected annual funding levels necessary to achieve full compliance with this section. The projected funding levels for each report shall include a detailed accounting of the complete life-cycle costs for each of the chemical disposal projects . . ." In its latest report to Congress, the Department did not include funding totals for the out-years for the Blue Grass Army Depot and Pueblo Depot in contravention of this provision. It only included the fiscal year 2010 request figures.

Why was this long-term budget information not included? What was the Department's legal rationale for not including these funding levels? How does this comport with President Obama's promise "not to nullify or undermine Congressional instruc-

tions as enacted into law?" Please provide all of the info required by Section 8119 of Public Law 110-116.

Answer. The Department did not finalize the outyear estimate when the fiscal year 2010 Presidents budget plan was formulated. The outyear programs and funding will not be settled until completion of Quadrennial Defense Review and the follow-on program and budget review later this year.

DOD fully supports President Obama's promise, and doing the legislatively-mandated QDR does not "nullify or undermine Congressional instructions as enacted into law."

We will provide the information required by Section 8119 as soon as we can.

QUESTIONS SUBMITTED BY SENATOR ROBERT F. BENNETT

Question. Iran's leadership uses despicable rhetoric regarding Israel, continues its support for international terrorist groups such as Hezbollah and Hamas, and disregards the international community's concerns over its efforts to obtaining nuclear power and possibly weapons. It seems clear that the regional effect of these actions will be destabilizing in an area of the world vital for U.S. strategic interests.

I want to ask your opinion on the possible change in Iran's attitude, if any, based on the outcome of last week's presidential elections. Do you believe there is any chance that a change in leadership would temper their growing sense of regional importance and detrimental national pride? Would a second term with Ahmadenijad at the helm cause further military concern in the region based on his rhetoric and the state's support of terrorist groups in the region?

Answer. We are watching the events in Iran very closely. Regardless of how the current political dispute is resolved, U.S. and international concerns about Iran's nuclear program and support for terrorism remain unchanged and DOD will continue to focus on steps required to safeguard U.S. security interests.

Question. There has been a great deal of discussion as of late over cyber security. May I commend you for the active and engaged role that the DOD is taking in recognizing and addressing the very real threats posed by cyber security attacks. Having chaired the Senate Special Committee on the Year 2000 Technology Problem (Y2K Committee), I am convinced that a significant national security threat exists. It is clearly short-sighted to suppose that by increasing funding for one year that we will solve all current and future problems. Because threats will evolve, so must our responses. This then would call in to question not so much our individual responses to cyber threats, but the system put in place to address them. Can you describe current efforts to effectively structure the systems that will determine how to secure cyberspace?

Answer. The Department has taken steps to address risk effectively, and ensure our freedom of action in cyberspace. The Department recently established USCYBERCOMMAND, a subunified command under USSTRATCOM. As part of that effort we are reviewing all cyberspace policy and strategy to develop a comprehensive approach to DOD cyberspace operations. Additionally, we are currently reviewing how we acquire information technology (IT) systems within the Department. The end result of the establishment of USCYBERCOMMAND and the policy, strategy and acquisition reviews currently underway will determine how the Department secures cyberspace for our operations.

Question. One of the tests of the new administration's cyber security policy is whether it can move beyond what some say has been outdated or inadequate thinking that had permeated previous debate. Can you describe the right balance in determining the proper role of government intervention so that it does not impose too much bureaucracy on the private sector, but still offers sufficient protection of government resources and assets, especially defense assets?

Answer. An example of creating the right balance is the Department's Defense Industrial Base (DIB) Cyber Security and Information Assurance (CS/IA) program. The DIB CS/IA program was established in September 2007 by the Department to partner with cleared defense contractors to secure critical unclassified DOD information resident on, or transiting, DIB unclassified systems and networks. This DOD-DIB partnering model provides the mechanism to exchange relevant cyber threat and vulnerability information in a timely manner, provides intelligence and digital forensic analysis on threats, supports damage assessments for compromised information, and expands government-to-industry cooperation, while ensuring that industry equities and privacy are protected.

QUESTIONS SUBMITTED TO ADMIRAL MICHAEL G. MULLEN

QUESTIONS SUBMITTED BY CHAIRMAN DANIEL K. INOUE

INSTITUTIONALIZING IRREGULAR WARFARE CAPABILITIES

Question. Admiral Mullen, our troops entered Afghanistan in 2001 and Iraq in 2003. We soon realized that the threat environment for our military operations was quite different than what we were prepared and equipped for. We responded by rapidly developing and fielding thousands of anti-IED jammers, more than 16,000 mine resistant ambush protective vehicles and countless intelligence, surveillance and reconnaissance assets. All of these programs have saved American lives, yet none of them are Programs of Record and they are all managed outside of the traditional Defense Department bureaucracy. Why was it necessary to go outside of the regular Department of Defense acquisition process? And how can we institutionalize these capabilities instead of continuously adding more layers to the bureaucracy?

Answer. The experiences of MRAP, the rapid fielding of Army's Task Force Odin and other ISR capabilities into theater, and the UAS "max capacity" push (more Predators/Global Hawk Block 10s) were invaluable. These exceptional efforts were successful because we prioritized requirements and expedited traditional processes to obtain the agility and responsiveness required for wartime acquisition. Several of these initiatives now are programs of record or transitioning to programs of record.

We are working to institutionalize the procurement of urgently-needed resources in wartime to meet current and future requirements. At Congressional request, GAO and the Defense Science Board (DSB) are currently looking at this problem and we look forward to their recommendations for improvement. The rapid acquisition, deployment, and sustainment activities must be harmonized. Additionally, the Department must balance the need for high-tech and low-tech equipment solutions, while institutionalizing processes and procedures that field capabilities quickly and efficiently, when and where needed.

Question. Admiral Mullen, one of the reasons our acquisition system is so cumbersome and inflexible lies in requirements that often demand gold-plated solutions that can take years to develop. Many of the rapid fielding capabilities we're now sending to theater may only represent a 75 percent solution, but collectively, they seem to get the job done. What is your assessment of the new equipment we've been sending into theater? Are we addressing our warfighters' needs?

Answer. In general, the new equipment fielded has had a huge impact in theater, especially in Iraq. The Department is capitalizing on the wartime procurement lessons learned so that Afghanistan can benefit from these experiences. Much of the rapidly, urgently fielded ISR, C2, UAS, force protection, and Counter-IED capabilities are typically low-cost, commercial-off-the-shelf (COTS) or slightly modified-COTS solutions. The short, time-certain need period is a determinant factor. The speed of development and production is increasingly important. Our focus is to improve our ability to anticipate requirements and therefore minimize the need for partial solutions.

IRREGULAR WARFARE

Question. Admiral Mullen, roughly 6 months ago, your office issued guidance declaring irregular warfare to be as "strategically important as traditional warfare". You state that the fiscal year 2010 budget rebalances capabilities and provides roughly 10 percent for irregular warfare, 50 percent for traditional, strategic and conventional conflict, and 40 percent for dual-use capabilities. However, with no out-year budget data and no movement by the military services to significantly adapt doctrine and training, how can the Committee be assured that "irregular warfare" is not just a convenient way to cut programs or justify new programs?

Answer. Recent conflicts around the world highlight how irregular warfare is increasingly being employed against conventional military forces, and I am absolutely certain that irregular warfare will be with us in future conflicts. I see joint doctrine, education and training adapting accordingly; we have new doctrine in counterinsurgency, stability operations, security force assistance (amongst others) on-line and coming on-line, near-term. IW has also been a specific emphasis area of mine in both joint education and training for a number of years. I fully support the balance between conventional, dual-use, and irregular capabilities in the fiscal year 2010 President's budget request. The program decisions in this budget request emphasize our people first, while balance our efforts by addressing the fights we are in and most likely to encounter again without sacrificing conventional capability. That balance helps to check programs that have exceeded their original design, improve effi-

ciency, and steward the resources taxpayers provide us for the common defense. I am confident that this balance not only preserves our war fighting edge but also injects the flexibility required to address today's most relevant challenges.

Question. How will you ensure that the military services will not scale back their full spectrum readiness training too much, so that we can continue to dominate and prevail in major combat operations?

Answer. We acknowledge adjusting joint force combat capabilities and capacities to provide greater emphasis on fighting irregular forces potentially risks reducing combat capabilities and capacities with respect to regular forces, a less likely but potentially more dangerous security threat. This risk will be mitigated to the extent that combat capabilities and organizations are designed from the outset for maximum versatility and specialized capabilities essential for success against regular forces or for deterrence are preserved. It can also be mitigated by the development and application of training techniques and technologies that help leaders and their subordinates master new skills more quickly than more traditional training methods. There are processes in place for the service chiefs and combatant commanders to provide annual comprehensive assessments of their ability to meet Title 10 and Unified Command Plan responsibilities including the entire range of military operations. The Department's readiness reporting processes assess readiness to meet the demands of the National Military Strategy across the entire set of NMS missions, and are based largely on information reported by the services and combatant commands. Decreases in preparedness for major combat operations caused by increasing IW preparedness would be evident through reporting by the combatant commanders and service chiefs, and managed appropriately. Lastly, Congress receives the Quarterly Readiness Report produced by OSD in conjunction with the Joint Staff and the services.

ACQUISITION REFORM—REQUIREMENTS

Question. Admiral Mullen, as we look at improving the acquisition system due to massive cost overruns and schedule delays, perhaps we should think about the way that weapon system requirements are generated and validated. It appears that too often, "requirements creep", or reaching for immature technologies makes programs too costly and off-schedule. How can the Department better manage requirements, and perhaps change the service cultures, so that acquisition programs are more likely to provide needed capabilities on time and on cost?

Answer. The Department is committed to improve systems acquisition performance. We must generate greater agility and responsiveness in our acquisition system, especially wartime procurements and foreign military sales. The Department made a number of key revisions to its acquisition policies and procedures. It is important to institutionalize these changes with discipline and better measures of effectiveness.

Part of improving the acquisition process is improving the front end of the process—our requirements definition. To improve overall performance, the Joint Staff has implemented Requirements Management training for all those who occupy positions of responsibility in defining and vetting requirements documents. The Joint Requirements Oversight Council (JROC) has also continued to refine its processes and aims to establish well defined, realistic requirements. To improve this process, the JROC has focused and streamlined the capabilities-based assessment (CBA) to ensure it provides an appropriate definition of capability needs to support a decision for a material solution and the warfighter defined requirements to be met. In order to provide the warfighter an increased role in the requirements process, the JROC has begun to experiment with delegation of Joint Capabilities Board (JCB) authority to appropriate functional combatant commands (JFCOM for C2 and SOCOM for special operations related capabilities). The JROC is continuing to evaluate this delegation of JCB authorities and will next look at delegation to TRANSCOM for logistics capabilities and STRATCOM for net-centric and battlespace awareness capabilities. The JROC has updated its instruction and procedures to provide additional direction delineating capabilities the JROC must approve to ensure they receive appropriate oversight without undue delay. Finally, the JROC is working to fully implement the provisions and changed enacted in the Weapon Systems Acquisition Reform Act of 2009.

Question. Do you believe that your staff has the analytic support, such as modeling and simulation tools, for objective analysis to help prioritize requirements?

Answer. The Joint Staff has adequate analytical support both in terms of qualitative methods (human in the loop war gaming capabilities) and quantitative methods (modeling and simulation capabilities) to validate assumptions and outcomes. These analytic tools help frame the front end of the requirements development process.

ess and feed into Capability Based Assessments which are conducted to assess and prioritize specific capability gaps.

Question. What improvements or changes would you recommend in order to better manage requirements?

Answer. We are continuously evaluating methods to streamline the management of requirements. To that end, we have made recent changes in the requirements development and management process.

—We are limiting the number of documents that must go through joint review and oversight to those that impact joint operations.

—We have provided guidance to better scope the analysis done in the capability gap assessment process. This will reduce time and resources required while presenting an appropriately defined requirements gap to the Joint Requirements Oversight Council (JROC) for validation. This will allow the Department to move more quickly from the requirements process into the acquisition process.

—We have recognized that information technology systems need to have a more flexible requirements management process than traditional hardware programs. To address this, we have better tailored the requirements process as it applies to information technology systems. Once the JROC approves the initial performance requirements and provides overarching cost and schedule constraints, it will delegate requirements management and oversight to an appropriate Flag level body that has the time and flexibility to effectively manage the development of these systems.

We are also working on future improvements to the requirements management process:

—We are developing an information technology data management tool which will allow us to structure the data in requirements documents to make the information more readily available and visible for comparison and analysis.

—We are developing a similar tool for managing joint urgent needs to allow for more rapid information sharing so that we can make decisions more rapidly and get solutions into the hands of the warfighter more quickly.

We will continue to identify opportunities to improve the requirements management process to ensure we provide the correct level of oversight balanced with the ability to respond efficiently to the warfighter's needs.

STRATEGIC IMPLICATIONS OF PROGRAM TERMINATIONS

Question. Admiral Mullen, we understand that the fiscal year 2010 budget is a step towards rebalancing resources to build irregular warfare capacity applicable to the current fight. But we still face threats from traditional nation states such as North Korea and potentially Iran or others. How do program terminations such as the F-22, C-17 and Future Combat System Manned Ground Vehicle affect our ability to respond to traditional threats? Are we swinging the pendulum too far the other way?

Answer. I don't think the President's fiscal year 2010 budget (PB-10) swings the pendulum too far away from traditional threats. PB-10 provides a rebalancing of the Department's programs in order to enhance our capability to fight the wars we are in today and the scenarios we are most likely to face in the years ahead. This rebalancing also provides a hedge against other risks and contingencies. Last year's National Defense Strategy concluded that although U.S. predominance in conventional warfare is not unchallenged, it is sustainable for the medium term given current trends. PB-10 focused on what programs are necessary to deter aggression, project power when necessary, and protect our interests and allies around the globe.

DE-MILITARIZING U.S. FOREIGN POLICY

Question. Admiral Mullen, earlier this year, you suggested that the military should be "brave enough not to lead" when it comes to foreign policy. Can you elaborate on that concept for us?

Answer. We have learned from the past 7 years of war that we serve this Nation best when we are part of a comprehensive, integrated approach that employs all elements of power to achieve the policy goals set forth by our civilian leaders. The lead agent of U.S. diplomacy and development should be the State Department, which obviously requires the backing of a robust military and a strong economy. As we win the wars we are fighting and restore the health of our Armed Forces, the military's approach will increasingly support our diplomatic counterparts through the persistent engagement required to build networks of capable partners. Integrated with these partners and the interagency and non-governmental organizations, we will more successfully protect the citizens of this Nation.

GROUND-BASED MISSILE DEFENSE (ALASKA INTERCEPTORS)

Question. Admiral Mullen, the Department's budget request would effectively stop the emplacement of ground-based interceptors in Fort Greely, Alaska. Has the ballistic missile threat to the U.S. homeland changed to warrant curtailing this program?

Answer. The threat of long-range ballistic missile attacks by rogue states, such as North Korea today and Iran in the near-future, remain a threat to the U.S. homeland. The fiscal year 2010 budget adequately addresses the current North Korean threat and provides limited protection against future threats from the Middle East.

FISCAL YEAR 2010 OVERSEAS CONTINGENCY OPERATIONS REQUEST

Question. Admiral Mullen, how will you ensure that urgent, unforeseen warfighter requirements are addressed in the fiscal year 2010 overseas contingency operations budget? Can you assure us that the Committee will be informed of any necessary adjustments?

Answer. We built the fiscal year 2010 overseas contingency operations budget with the best information available. The new administration provided us with the decisions necessary to produce estimates reflective of the current policies of the United States for the operations in Iraq and Afghanistan for fiscal year 2010.

However, changing conditions on the ground and the commander's assessment of needs to prevail in the operations could drive the requirement for changes in force structure or in other areas that would compel the Department to make adjustments to the budget. We ask for your support of legislative proposals that would increase our flexibility for responding to these types of adjustments. Legislative proposals such as raising the threshold level for urgent minor construction, expanding or continuing train/equip authorities, and continuing or expanding authority for the transfer of equipment to the Iraqi/Afghan security forces increase our flexibility and are essential to the successful conduct of the operations. Should we experience significant urgent, unforeseen requirements we cannot resolve on our own, we will work with the administration to inform the committee as appropriate.

STRAIN ON THE FORCE

Question. Admiral Mullen, the Army's and Marine Corps' suicide and divorce rates have risen sharply this past year. It appears that the strain of frequent deployments is affecting the emotional health of our soldiers and Marines. Do you believe the Department is doing enough to support service members and their families? What more could we do?

Answer. The high suicide rates are a sobering gauge of challenges currently facing all the services. Failed relationships, alcohol abuse, legal, financial and occupational difficulties all remain established risk factors for suicide. We know that high mission tempo associated with the wars in Iraq and Afghanistan, increased deployment lengths, repeated deployments and limited downtime between deployments are all associated with increased mental health issues. We believe that combat deployments, combat stress and suicide rates are all very much related, although analytical data citing this direct correlation is not yet available.

In response to this belief, we are actively engaged in efforts to reduce the stress on the force and their families by increasing dwell time at home between deployments. Over the next 18–24 months, we anticipate a move toward 2 years at home for every 1 year deployed for our active duty forces and 5 years at home for every one year deployed for our reserve component forces.

Meanwhile, the services are actively engaged in educating service members and leaders at all levels on suicide prevention, and programs targeting risk factors and incorporating protective factors have been instituted. Joint initiatives, such as the establishment of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury and the DOD Suicide Prevention and Risk Reduction Committee provide infrastructure to assess, validate, oversee and facilitate best practice prevention, resilience, identification, treatment, outreach, rehabilitation and reintegration programs to ensure we meet the needs of the Nation's military communities.

The military has made large strides to provide improved and increased mental health support for service members and families. Each service has been addressing this issue since 2003, most actively since 2007. DOD has made sufficient funding available to meet the psychological health requirements as currently established by OSD(HA) and the services through 2010. We have increased military/civilian mental

health provider numbers by 75 percent and network mental health providers by 25 percent since 2001.

Despite these overall increases in mental health provider staffing to support our military communities, shortfalls remain. Although the services are funded, a shortfall of nearly 1,000 additional mental health providers is reported across the services this year. Complicating this shortfall is the similar overall shortage of providers in the civilian sector, as well as difficulty hiring clinicians for the relatively remote locations of the posts, camps, and installations where service members and their families reside. Numerous mental health recruitment and retention staffing initiatives continue in order to try to fill this gap, including direct hire authority of civilians, scholarships, critical skills retention bonuses and loan repayment programs. However, dedicated efforts to address our military health system's current distribution/utilization of mental health personnel, staffing models, standard of care and practice issues and manpower accounting capabilities must be further examined and modified where required.

Senator Inouye, your sponsorship of significant telemedicine legislation and research is greatly appreciated. We are striving to leverage these assets.

Because of the nature of the problem and the number of service members affected, the medical community alone will not succeed without increased leadership emphasis targeting prevention and cultural change. A continued concerted effort is required to first identify and then successfully reverse the root causes of the complex issues we confront as well as fighting the mental health stigma at every level. I do not consider the elimination of mental health stigma to be a health issue, but a leadership issue. I am determined to change our culture and assure you this is a top priority.

Question. The Army and Marine Corps have now both completed their planned end strength growth. Do you believe that the Army and Marine Corps force structure is large enough to relieve the operational strain on the force?

Answer. The Army and Marine Corps force structure will be large enough to relieve the operational strain on the force when, in the Army's case, the 22,000 personnel are fully accessed and trained. With respect to the Marine Corps, the authorized 202,000 active duty end strength is sufficient to meet 1:2 Active Duty dwell and 1:5 Reserve Force dwell in the mid-term.

The Army sought and received a temporary increase of up to 22,000 personnel in end strength to alleviate the continued pressure of global demands. This increase will serve to relieve the strain on the force by improving the Army's ability to fill deploying units (both BCTs and enablers) in order to offset increasing non-deployable rates (13 percent in 2009, primarily medical conditions) and the elimination of the Stop Loss program.

Additionally, when fully implemented, the temporary increase will improve the strength of units in RESET by achieving over 100 percent authorized strength for TRAIN/READY units to provide more units with deployable strength at or above 93 percent.

Up to 2,000 of the 22,000 will be focused on officer increases (through retiree recalls) and NCO increases (retention actions and retiree recalls) with the priority for the retiree recalls to fill/offset Worldwide Individual Augmentation System (WIAS) requirements.

The Army's decision to seek the full 22,000 temporary increase will be based on detailed analysis of the demand assumptions projected for summer 2010 and the impact on readiness of the first 15,000 of the temporary end-strength increase which will be complete by September, 2010.

With respect to force readiness, the improvement in readiness will be incremental as we bring increasing numbers of the 22,000 into the force. The first priority is to increase deployer fill. We have determined the priority Military Occupational Specialties (MOS) and training base capacity allowing us to impact those units with goal of bringing the first 5,000 on by the end of the fiscal year.

The transition to the Afghanistan-focused CENTCOM theater campaign plan before a sufficiently reduced demand for forces in Iraq impacted the overall demand for Army forces. Of the 43 Active Component Brigade Combat Teams (BCT), all are either committed to global operations, in transit to those operations, in Army force regeneration, RESET, or training phases with a Boots-On-Ground (BOG) to dwell ratio of 1:1.4. The Army's manning guidance for deploying BCTs is to man to 105 percent assigned strength in order to attain 95 percent deployed strength. U.S. Army in coordination with CENTCOM guidance deploys all combat arms forces at or above 90 percent deployed strength. Deploying units that do not achieve a manning level of 90 percent at Latest Arrival Date (LAD) plus 30 days must "deploy by exception" as approved by the Chief of Staff of the Army.

AGE AND HEALTH OF TANKER FLEET

Question. Admiral Mullen, I am concerned about the aging Air Force tanker fleet and the health and age of the KC-135 tankers by the time they are replaced. Can you update the Committee on the status of the Air Force tanker fleet, including the age of the fleet and any present safety and flight concerns with the current fleet?

Answer. Our current Air Force tanker fleet has been operating without readiness issues, but with the age of KC-135s averaging 48 years, future operational availability will depend on flight hours and usage patterns.

SPECIAL OPERATIONS COMMAND (SOCOM)

Question. Admiral Mullen, the Commander of the Special Operations Command, Admiral Olson, recently stated that escalating requirements for capabilities provided by Special Operations Forces have outpaced SOCOM's ability to train new personnel and develop critical enablers in the areas of aviation, intelligence, and communications. To mitigate these shortfalls, Admiral Olson has requested that the military services provide Special Operations Command with additional assistance and manpower in these critical support areas. Are the services able to meet these additional requirements? How will this plan be managed, and to what degree has it been incorporated in the fiscal year 2010 budget request?

Answer. Through the generous support of Congress, the services have been able to meet the additional requirements for conventional support to special operations. In limited situations, the services have supported special operations requests with "ad hoc" solutions and by detailing "in lieu of" manpower or assets to assist. Looking forward, achieving the Grow the Force Initiatives in the Army and Marine Corps and the significant increases in ISR and rotary wing aviation training requested in the fiscal year 2010 President's budget will ensure critical conventional force enablers to special operations forces are provided to support current conflicts and prepare for future challenges.

Question. Funding for Special Operations Command has grown from \$2.1 billion in 2001 to nearly \$8.6 billion, including supplemental funding, in fiscal year 2010. During this same time period Special Operations Command's mission has grown exponentially, as evidenced most recently by its designation as the DOD Proponent for Security Force Assistance (SFA). Given this rapid growth in both budget and responsibility, how are you ensuring programmatic and fiscal accountability within Special Operations Command?

Answer. Special Operations Command (SOCOM) has developed rigorous strategic planning, programming, budgeting and execution processes. The command submits its program for Special Operations Forces (SOF)-peculiar requirements, funded through defense-wide appropriations lines, directly to the Department, in much the same way the services do. While the four component commands work their SOF-peculiar requirements through SOCOM's processes, they must also work through their individual parent services to ensure the approval and resourcing of service-common requirements.

Commander, SOCOM has taken several steps since 2001 to help ensure effective stewardship of appropriated funding. SOCOM has not only increased the number of military and civilian financial management personnel who execute and oversee resources, and in June 2008, the commander made the financial management function a stand-alone center, and the Comptroller reports directly to him.

Specifically, there are several programs and processes in place to help command financial managers maintain visibility over the command's SOF-peculiar Major Force Program (MFP)-11 funding. The command established a quarterly resourcing process, the Joint Resources Management Program (JRMP) with the Deputy Commander as the final decision-making authority. Further, the component command and the Theater Special Operations Command (TSOC) comptrollers participate in the allocation of SOCOM's funding. The JRMP oversees all MFP-11 resources; this year, the process was more closely aligned with the command's Center for Acquisition and Logistics, and includes quarterly execution reviews of all procurement and RDTE programs.

The command has established controls to reasonably ensure that obligations and costs are in compliance with any applicable laws; its funds, property, and other assets are safeguarded against waste, loss, unauthorized use or misappropriation; and they properly record and account for revenues and expenditures.

Finally, SOCOM uses accounting processes and tools to provide additional visibility over the use of MFP-11 funds, and to help identify potential abnormalities during execution. These include: the analysis of the monthly Appropriation Status FY Programs and Subaccounts Report (AR(M)1002); Tri-Annual Reviews (TARs), which require financial analysts to formally review all open documents to determine

validity of funds obligated and committed, and de-obligates for other purposes those that are not valid; electronic databases such as the Financial Information System that provide command personnel with real-time fund status; and the Defense Departmental Reporting System, which provides SOCOM's official financial reports and Auditable Financial Statements.

QUESTIONS SUBMITTED BY SENATOR RICHARD J. DURBIN

Question. In 2008, the Department of Defense's Defense Institute for International Legal Studies (DIILS) began its "Afghan National Army Legal Development Program" in response to a request for rule-of-law training from the Combined Security Transition Command—Afghanistan. Approximately eight Afghans were trained to be the trainers for future Afghan Legal Advisor training programs. In March 2009, the first course, taught by these trainers trained 50 Afghan National Army and Afghan Ministry of Defense legal advisors on various aspects of the "rule of law."

What is the Department of Defense's comprehensive plan to ensure that its rule-of-law training in Afghanistan is conducted in a consistent, systematic, and integrated manner?

Answer. Defense Institute for International Legal Studies (DIILS) has been active in Afghanistan since February 2004. DIILS was part of a Legal Development Training Team (LDTT) engaged in the development of a Comprehensive Legal Officer Training Plan (CLOTP) for the Afghan National Army (ANA). The CLOTP entailed working with eight experienced ANA legal personnel to develop a curriculum and instructional materials for a formal course of instruction for ANA legal officers. The LDTT and the Afghan legal personnel co-authored, co-produced, and implemented the training program and provided the training to a mix of 50 officers from the ANA and the MOD. The goal of this course is that every Afghan legal officer be able to participate and attend this course over the next 1–2 years. This program is under the overall oversight of the Staff Judge Advocate (SJA) for CSTC–A. The SJA is responsible for the conduct of this course and will continue to encourage the cadre of Afghan instructors to implement this program of instruction.

Question. What is the Department of Defense's plan to monitor adherence to rule-of-law principles within the Afghan National Army, Afghan National Police, and Afghan Ministry of Defense and provide follow-up training?

Answer. The Department of State is the department responsible for rule-of-law and other governance and development initiatives. Please also see the answer to the previous question.

QUESTIONS SUBMITTED BY SENATOR MITCH MCCONNELL

Question. Admiral Mullen recently predicted that in 2009 the Army would see a record number of suicides. So far this year, the highest reported number of suicides on an Army installation has been at Fort Campbell in my home State of Kentucky, with 11 suicides. I find this deeply troubling. What immediate action is being taken at Fort Campbell to prevent further suicides among soldiers?

Answer. In April 2009, the Army published Annex D of the Army Campaign Plan for Health Promotion, Risk Reduction and Suicide Prevention which was distributed to Commanders throughout the Army. This was followed by an All-Army Action (ALARACT) from VCSA GEN Peter W. Chiarelli encouraging Commanders to utilize the guidance provided in Annex D. Annex D directs Installation, Garrison and Military Treatment Facility Commanders to optimize efforts of already existing programs by ensuring their coordination, integration, evaluation and marketing. There were specific steps and tasks to be completed in preparation for further ongoing programmatic changes initiated by the group of subject matter experts.

In addition, those experts have worked closely with command elements at Fort Campbell and the Army's Office of the Surgeon General to address the unique needs of the military community at that installation. Consequently, Fort Campbell developed a concept of "resilience teams" which will supplement current medical assets. The resilience team is placed into each Brigade and works closely with unit leaders, soldiers and families to identify high risk individuals. Medical personnel have also been "surged" to Fort Campbell from other installations to supplement existing assets while Fort Campbell works to expeditiously fill vacancies.

Fort Campbell has redistributed its behavioral health assets to maximize access to care among its supported Soldier population, to include relocating some behavioral health assets to fill brigade-level behavioral science officer positions.

In addition, the Army's Center for Health Promotion and Preventive Medicine (CHPPM) sent a team to assess whether leadership turnover and training were con-

tributing factors. A senior psychiatrist from the Army Surgeon General's office performed a staff assistance visit in June and will conduct a follow up visit in July.

Question. What mental health and counseling resources are currently available to soldiers and their families at Fort Campbell?

Answer. Blanchfield Army Community Hospital (BACH) supports a military population of 78,222 eligible beneficiaries with an average of 8,000 claims per month for mental healthcare in the BACH network area. The current staffing picture for services provided by the Community Counseling Center, Adult Behavior Health Unit, Child and Adolescent Psychiatry Unit, Social Work Service and the Family Advocacy Program includes a total of 201 behavioral health providers (military, civilian and contractors). Twenty-five additional positions have been recently funded and filled, and recruiting actions are underway for another 15 positions which are funded, but unfilled. (Information provided by U.S. Army Office of the Surgeon General on July 27, 2009.)

In addition to the services listed in the previous paragraph, the Substance Abuse Program currently has eight available counselors and two counselor vacancies. BACH is actively engaged in recruitment efforts to increase the total number of substance abuse counselors to 15. All soldiers are seen on a walk-in basis; however, rehabilitation team meetings are not meeting the 7-day completion standard due to the staffing shortfalls. Group treatment settings are provided for all participating soldiers; however, group participation is limited to generic pre-treatment groups for the first 4–5 weeks, until which time space in specific treatment groups becomes available.

Office of the Secretary of Defense (OSD) Military OneSource (MOS) supplements existing Fort Campbell Army Family programs by providing a 24-hour toll-free information and referral telephone line and Internet/web based service. MOS has received a total of 3,802 calls for counseling with 11 of those resulting in telephonic counseling, 1,455 in-person counseling and 1,200 referrals to in-person counseling. Seventy percent of these contacts were from service members and 30 percent for family members. The top five reasons for in person counseling includes relationship, stress management, depression, personal growth and returning from deployment. All soldiers and their families have access to Military OneSource which provides up to 12 counseling sessions free of charge with providers from the local community.

Each battalion at Fort Campbell has a chaplain who is available for soldiers and family members and there are additional chaplains integrated throughout the installation.

As of June 23, 2009 the U.S. Army OTSG Headquarters reports 2,735 behavioral health providers in the U.S. Army staffing inventory with a current shortfall of 336. This is an increase of 156 providers since the last update provided June 9, 2009 with March 2009 numbers. Funding is available for the shortage of 336 mental health providers. The Army is using a number of incentives with continuous positive outcomes shown in an increase in positions being filled. There continues to be work in the area of determining the correct staffing model and numbers to meet the needs of all locations of the military population.

Question. Are these resources going to be increased in light of the rise in the suicide rate? If not, why not?

Answer. Yes, the Army Medical Command (MEDCOM) has sent 31 additional behavioral health specialists to support Fort Campbell's soldiers and families. Specifically, it doubled the number of Army Substance Abuse Counselors from 8 to 16; it sent 3 additional psychiatrists, 6 additional clinical psychologists, and 3 additional licensed clinical social workers. These personnel will stay in place at Fort Campbell until permanent military, civilian, and contract personnel arrive at Fort Campbell.

There is a very active and robust recruiting effort at Fort Campbell which aims to fill vacant behavioral health positions while maintaining standards to ensure the highest quality of care for our soldiers and families.

In the interim, Fort Campbell developed a concept of "resilience teams" which will supplement the already existing medical assets at Fort Campbell by placing these teams into each Brigade. These teams will work closely with unit leaders, soldiers and families to identify high risk individuals. Medical personnel have been "surged" to Fort Campbell from other installations to supplement existing assets while Fort Campbell works to expeditiously fill vacancies. In addition, the Army Office of the Surgeon General and MEDCOM are actively reviewing the Automated Staffing Assessment Model to evaluate the necessity of modifying the required number of behavioral health and primary care providers given the effects of protracted conflict on the soldiers, families and the military health system.

Question. More broadly, what is the Army doing across the board to address this deeply troubling trend?

Answer. The Army is focusing, but not limiting, its efforts through the Army Campaign Plan for Health Promotion, Risk Reduction and Suicide Prevention. This plan was developed through a group of subject matter experts convened by the VCSA GEN Peter W. Chiarelli. The experts developed approximately 250 tasks which span the entire Policy, Doctrine, Organization, Training, Materiel, Leadership, Personnel, Facilities and Resource (P-DOTMLPeF-R) spectrum and incorporated those tasks in a synchronization matrix. This matrix is a working document and has been staffed with the Army Suicide Prevention Council which is made up of senior representatives from across the Army Staff. The tasks are designed to approach suicide prevention from a holistic perspective with the belief that if we address areas which contribute to suicide, the rate of suicide will decline.

The Army also completed Phase I of Suicide Prevention Training during an unprecedented stand down from February 15 to March 15. The Army is currently executing Phase II of suicide prevention training (March 16 to July 16). Phase III will follow and will consist of ongoing efforts that are developed and modified to address the evolving needs of the Army.

Question. Does the military need greater authority or resources in this area? If so, what are they?

Answer. DOD recognizes the need for comprehensive mental health programs to support our soldiers, sailors, airmen, marines and their families. The services currently have an estimated staffing need for 4,935 mental health professionals (3,072 Army, 1,011 Air Force and 852 Navy); 479 (9.7 percent) of these positions are unfilled (337 Army, 100 Air Force and 42 Navy). DOD has budgeted over \$1.7 billion and \$1.8 billion for fiscal years 2009–2010 respectively to pay for these shortfalls; significant hiring initiatives and overall progress continue to be made across the services, although challenges remain. We continue to refine our staffing models (accounting for increased deployments, occupational issues, risks for combat-related illness and injuries and cumulative stress on servicemembers and families) in order to best define numbers and types of staffing necessary to most effectively meet our goals of building resilience, reducing stigma and providing timely access to preventive and therapeutic mental healthcare while maintaining servicemember and family satisfaction. Requirements will continue to evolve and additional authorities and resources may be required in the future.

The Nation's overall shortage and maldistribution of mental health providers is a significant impediment to filling our currently funded, yet empty mental health provider billets. According to experts from the U.S. Department of Health and Human Services' Health Resources and Services Administration, a shortage of over 5,000 mental health practitioners exists in the civilian mental health provider communities serving United States underserved areas. This shortage is likely to grow, as witnessed by recent media attention to increased demand for mental health services by the U.S. civilian population as well. The national shortage compounds our problem of attracting non-uniformed providers to the rural areas in which many military installations are located, negatively impacting both military and TRICARE network staffing. Greater authority and resourcing to provide scholarships to civilians-in-training in exchange for medical service within our military health system would benefit DOD mental health professional recruitment efforts.

In an effort to find alternative solutions to the ongoing national mental health professional shortage, Internet technologies are being explored within the military and network health communities. We believe telehealth technologies could be utilized to expand services to military members and their families in these underserved areas. TRICARE Management Activity has recently modified the managed care support contracts to allow Employee Assistance Program level consultations at home. A study protocol for in-home psychiatric consultation capability using these modalities is also being developed. Legislative change providing relief for healthcare provider State licensure requirements and restrictions during telemedicine has the potential to foster greater telemedicine access and would help military families and the Nation as a whole.

Finally, we believe that non-medical factors such as recruitment, retention, training, leadership and stigma are critical aspects of the larger, complex problem which must continue to be closely examined if we are to effectively deal with the issues facing our servicemembers and their families.

QUESTIONS SUBMITTED BY SENATOR ROBERT F. BENNETT

Question. I understand the State Department is considering placing North Korea back on its list of state sponsors of terrorism. The recent missile tests, nuclear detonation and farcical trial of two American journalists are only the most recent exam-

ples of the North Korean regime's intentionally bellicose actions intended to antagonize the international community and provide diplomatic maneuvering from which to blackmail the rest of the world. The new administration's view of missile defense focuses on rogue state and theater missile threats. It seems especially pertinent at this time to look at the missile defense system in Alaska that has been targeted for reduction.

Is it wise at this point to reduce the number of ground-based interceptors and await the result of the Quadrennial Defense Review and the Nuclear Posture Review to determine the best capabilities to defend against threats from an obvious rogue state whose missile are already capable of striking our northern-most state?

Answer. The interceptors in place (to include programmed improvements), plus those planned for in the fiscal year 2010 budget, are sufficient to defend against the North Korean ballistic missile threat capable of striking U.S. homeland. Given the current shot doctrine, 30 operational GBIs provide sufficient fire power to protect the United States from ICBMs given the number of ICBM launch complexes and the long development time required for additional ICBM launch complexes in North Korea and Iran. The U.S. inventory of operational GBIs may be expanded in the future should the threat grow.

Question. The United States has an obvious and immediate interest in the future of Pakistan, a nuclear-armed state with a history of military coups, ethnic and religious instability that contains lawless, drug-filled hinterlands that harbor international terrorists. With this explosive mix geographically adjacent to our troops in Afghanistan and cross-border cooperation between drug cartels, Al-Qaeda and the Taliban I am very concerned about our future military plans for the region. I understand the budget request for \$700 million for the Pakistan Counterinsurgency Capabilities Fund will compliment Department of State efforts and be coupled with the Foreign Military Financing Program underway.

Can you describe in an unclassified setting the contingency plans we may have with regard to the Pakistani military, its nuclear weapons and stability in the region should the Pakistani government fail or be overthrown by Islamic militants?

Answer. The Department of Defense routinely plans for a variety of contingencies around the world. For security reasons, we cannot comment further.

SUBCOMMITTEE RECESS

Chairman INOUE. Our next hearing will be held on June 19 at 10:30, at which time we'll listen to public witnesses.

Mr. Secretary, Admiral Mullen, Mr. Hale, we thank you very much for your service to our country and, through you, we thank the men and women of our uniformed services. Thank you very much.

[Whereupon, at 12:09 p.m., Tuesday, June 9, the subcommittee was recessed, to reconvene at 10:30 a.m., Friday, June 19.]

**DEPARTMENT OF DEFENSE APPROPRIATIONS
FOR FISCAL YEAR 2010**

THURSDAY, JUNE 18, 2009

U.S. SENATE,
SUBCOMMITTEE OF THE COMMITTEE ON APPROPRIATIONS,
Washington, DC.

The subcommittee met at 10:30 a.m., in room SD-192, Dirksen Senate Office Building, Hon. Daniel K. Inouye (chairman) presiding.

Present: Senators Inouye and Cochran.

NONDEPARTMENTAL WITNESSES

STATEMENT OF ALEC PETKOFF, DEPUTY DIRECTOR, NATIONAL SECURITY COMMISSION, THE AMERICAN LEGION

OPENING STATEMENT OF CHAIRMAN DANIEL K. INOUE

Chairman INOUE. I'm pleased to welcome all of you to this hearing, where we'll receive public testimony pertaining to various issues related to the fiscal year 2010 Defense appropriations request.

Because we have so many witnesses who wish to present testimony, I'd like to remind each witness that, unfortunately, they'll have to be limited to 3 minutes. Like to have this all day, but I have a supplemental appropriations pending on the floor.

So at this point, I'd like to recognize the first witness, Mr. Alec Petkoff, deputy director of the—national security of The American Legion.

Mr. PETKOFF. Thank you, Mr. Chairman.

Mr. Chairman, I want to thank you for inviting The American Legion to share its views on defense appropriations for fiscal year 2010.

Since its founding in 1919, The American Legion remains steadfast in support of a strong national defense. The United States is a Nation at war, still battling against extremist Islamists all over the world. The United States also must be prepared for any number of threats to our national security, whether they arise from powerful nation states, rogue nation states, nonstate violent extremists, natural disasters, or instability resulting from economic downturns in the world economy.

Our need for a ready and robust military is clear. Now is not the time to slow down or reduce the level of spending required to keep our country safe from this spectrum of threats. From quality-of-life issues, to force structure, to military healthcare, to procurement,

none of these areas should be neglected at the expense of the other. With this in mind, we would like to briefly highlight some vital areas of concern.

The first area of concern is the size of the active duty force. For decades, The American Legion has advocated for an active duty force of at least 2.1 million members. Since September 11, 2001, we have seen the results of having a force that is too small in relation to our national security needs. The results have been dramatically bad for our military servicemembers. These results are multiple deployments without adequate dwell time, straining military servicemembers, and likewise their families, to the breaking point; the required implementation of stop-loss, and the dramatic transformation of the National Guard from a strategic force to an operational force, which has increased our risk and reduced our strategic freedom of action. These results have had negative impacts on readiness and quality of life.

Three years ago, Congress decided to increase the size of the force, adding 65,000 soldiers to the Army. This initiative has been a success. The Army reached its increased recruiting goal earlier this year, 2 years ahead of schedule. The Grow the Force Initiative has been successful, but that does not mean it should end.

This is reinforced by Defense Secretary Robert Gates, who said, in testimony before the Senate Armed Services Committee last month, that despite the success of the Grow the Force Initiative, he remains concerned by the limited dwell time that our soldiers have between deployments. Therefore, The American Legion recommends further funding to significantly increase the size of the force beyond the original Grow the Force Initiative.

The American Legion also has the following recommendations for the subcommittee:

In military personnel, The American Legion supports a military pay raise from the suggested 2.9 percent to 3.9 percent, to help close the civilian-military pay gap, and additional funds for Reserve Officer Training Corps.

In operation and maintenance, with respect to defense health programs, The American Legion supports the full funding of TRICARE for retirees, dependents, and all Reserve forces. The American Legion also supports wounded warrior care improvements, to include outreach and treatment for traumatic brain injury and all mental and combat-stress related illnesses. And finally, funding for a standalone DOD research program into blood cancers, through the congressionally directed medical research program.

In procurement, the Army should obtain necessary equipment to man the full complement of 48 brigade combat teams, as opposed to the proposed cutback to 45, and continue to refit and update the equipment of our Reserve forces, and timely procurement of advanced Air Force and Navy weapons systems, aircraft, and ships.

In research, development, testing and evaluation, increases in missile defense, electronic warfare technology, and weapons technology are needed. Cuts to missile defense seem unwise.

And finally, military construction—construction improvements to base medical facilities, commissaries, exchanges, and other facilities. And we urge that whenever a base realignment and closure

is conducted, that certain base facilities, such as medical facilities, commissaries, exchanges, and other facilities, be preserved for use by active duty, reservists, retired military, veterans, and their families.

The American Legion, again, thanks the chairman for having this important hearing, and for inviting us to present our views. I look forward to continue working with this subcommittee on these important issues of national defense.

Chairman INOUE. Thank you very much. I would welcome any written material you may have.

Mr. PETKOFF. I would like to submit our written testimony for the record at this time, Mr. Chairman.

Chairman INOUE. Thank you.
[The statement follows:]

PREPARED STATEMENT OF ALEC PETKOFF

Mr. Chairman and members of the Subcommittee, thank you for inviting The American Legion to share its views on defense appropriations for fiscal year 2010. Since its founding in 1919, The American Legion remains steadfast in its support of a strong national defense which is reflected in the Preamble to The American Legion Constitution, namely, "To uphold and defend the Constitution of the United States of America," and "to inculcate a sense of individual obligation to the community, state and nation."

The United States is a Nation at war still battling against extremist Islamists all over the world. The United States also must be prepared for any number of threats to our national security whether they arise from powerful nation-states like Russia or China; rogue nation-states like Iran, North Korea or Somalia; natural disasters; or instability resulting from economic downturns in the world economy. Our need for a robust military is clear. Now is not the time to slow down or reduce the level of spending required to keep our country safe. With this in mind, The American Legion offers the following recommendations with a brief summary of explanation followed by a more complete rendering of The American Legion's views and recommendations:

APPROPRIATIONS PROPOSALS FOR SELECTED GENERAL DISCRETIONARY PROGRAMS FOR DEPARTMENT OF DEFENSE FOR FISCAL YEAR 2010¹

[In Billions]

	Funding for fiscal year 2009	Proposed defense funding for fiscal year 2010	The American Legion's fiscal year 2010 recommendations
Total Defense Spending	\$654.7	\$663.7	\$728.2
Military Personnel	\$142.7	\$149.6	\$150
Operation and Maintenance	\$273.5	\$276.2	\$315.7
Defense Health Programs (Operation and Maintenance)	\$25.7	\$26.9	² \$63.2
Procurement	\$133.2	\$131.2	\$136.2
Research, Development, Test and Evaluation	\$81.7	\$78.9	\$100
Military Construction	\$28	\$22.9	\$26.3

¹ Includes Overseas Contingency Operations or OCO funding.
² Increase already included in Operation and Maintenance.

Military Personnel.—Military pay raise from 2.9 to 3.4 percent to help close the civilian/military pay gap. Additional funds for Reserve Officer Training Corps (ROTC).

Operation and Maintenance.—The Administration's overall modest increase in operations and maintenance is found mostly in the line item, "Administration and Servicewide Activities" while the line item "Operation Forces" actually gets a decrease. While one can only assume the decrease is predicated on a drawdown of forces in Iraq, The American Legion recommends that more funds be allocated in case the plans for withdrawal are found to be premature by either the Iraqi government or more importantly our commanders on the ground.

Defense Health Programs.—Fully fund TRICARE for retirees, dependents and all reserve forces; Stand alone fund for blood cancers; Wounded Warrior Care improvements.

Procurement—Army.—Obtain necessary equipment to man the full complement of 48 BCTs, Navy—Oppose shifting the Navy Aircraft Carrier program to a 5-year build cycle. Longer cycles only mean larger costs and a weakened force. Air Force—Continue to purchase more F-22 Raptors and to hasten purchase and building of the aerial refueling tankers. Reserve Forces—Continue to refit and update equipment.

Research, Development, Test and Evaluation.—Increases in missile defense, electronic warfare technology, and weapons technology needed. Cuts to missile defense are unwise.

Military Construction.—Construction and improvements to base medical facilities, commissaries, exchanges and other facilities.

The American Legion upholds the following national security principles as fundamental to the best interests of the United States:

- The National Security Strategy needs to be reassessed so that missions and resources are more closely aligned, particularly during the upcoming Quadrennial Defense Review.
- The credibility of the United States in an unstable world needs to be maintained by retaining requisite military capabilities to deal with actual and potential threats.
- Such a strategy requires that the Armed Forces be more fully structured, equipped and budgeted to achieve this strategy.
- Active and reserve military end strengths should be increased to an absolute minimum of 2.1 million for the foreseeable future.
- At least 12 full-strength Army Divisions, 11 deployable Navy aircraft carrier battle groups, three or more Marine Corps Expeditionary Forces, and 13 or more active Air Force fighter wing equivalents should be retained, as the minimum needed baseline force.
- Defense budgets should be funded at least 4 percent of Gross Domestic Product (GDP) during time of peace, and at 5 percent or more during time of war to fund both people and weapons requirements.
- The National Guard and Reserves must be realistically manned, structured, equipped, trained, fully deployable and maintained at high readiness levels, and not over-utilized in order to accomplish their increasing and indispensable missions and roles in the national defense.
- Peacetime Selective Service registration should be retained so as to maintain a viable capability to rapidly reconstitute forces in the event of emergencies or war.
- Force modernization for the Armed Forces needs to be realistically funded, and not further delayed, or the United States is likely to unnecessarily risk American lives in the years ahead. Production of airlift and sealift assets needs to be expedited.
- The American people expect that whenever Armed Forces are committed, that they will be committed only when America's vital national interests are threatened and only as a last resort after all reasonable alternatives have been explored and tried.
- Peacekeeping, peace enforcement, peace-making and humanitarian operations detract from military readiness to conduct combat operations across the full spectrum of potential conflicts. Such operations should be limited, congressionally approved and separately appropriated on a case-by-case basis.
- The honorable nature of military service should be upheld, as it not only represents fulfillment of American patriotic obligation, but is also a privilege and responsibility of citizenship that embodies the highest form of service to the Nation.
- The United States Government must honor its obligations to all service members, veterans, military retirees and their families with equitable earned benefits, lasting military retirement compensation and other appropriate incentives, such as timely access to quality health care for all beneficiaries.
- Major incentives for military service should include an enhanced GI Bill for education and training, improved quality-of-life features, and a reduced operational tempo in order to recruit and retain a high-quality and fully manned, professionally led force.
- The United States Government is urged to retain the necessary deployed forces worldwide to accomplish short-term as well as long-term commitments and contingencies.

The American Legion would like to thank Subcommittee Members for their hard work on previous legislation to improve the quality-of-life for America's Total Force military, retirees, and their families.

This portion of the statement will contain issues on the following subject areas:

- Quality-of-Life;
- Force Structure;
- Manpower and Weapons Systems;
- POW/MIA.

QUALITY-OF-LIFE

It is with particular purpose that The American Legion address quality-of-life issues before the issues of "force structure" and "manpower and weapons systems" as concerns our national defense. Maintaining a high quality-of-life for our service members has to be the first priority of any nation that seeks to defend its interests at home or abroad. Whether it be the infantryman, the pilot, the mechanic, or the cook, America needs to be able to attract and retain the best and brightest our Nation has to offer. Without such Americans to answer the call to service, all other money spent on defense will be in vain. And so it is with good reason that The American Legion is first concerned with the enhancement of quality-of-life issues for active-duty service members, Reservists, the wounded and disabled, military retirees, and their families. If we are to win the war on terror, and prepare for the wars of tomorrow—in this decade and beyond—we must take care of the DOD's (Department of Defense) greatest assets; namely, its men and women in uniform.

The United States must honor its obligations to all service members (past, present and future) and their families. The American Legion urges the Congress and DOD to support and fund quality-of-life features for Active-Duty, National Guard and Reservists as well as military retirees, veterans and their dependents, and military survivors. This is including but not limited to, the following:

- Military pay comparability for the Armed Forces and regular increases in the Basic Allowances for Quarters; renovation and construction of military quarters and increased funding for child day care centers are direly needed. Pay raises must be competitive with the private sector;
- Adequate medical, mental and dental health services; morale, welfare and recreational facilities; and non-privatized exchanges and commissary facilities. The Defense Commissary Agency (DECA) and its functions should be retained and not relegated to the military services;
- Preserving an attractive retirement system for the active and Reserve components and annual cost-of-living adjustments (COLAs) paid at the same rate and concurrently with other Federal retiree COLAs; oppose any changes to the military retirement system, whether prospective or retroactive, that would violate contracts made with military retirees and undermine morale and readiness;
- Requiring that the Services perform mandatory physical examinations, without waivers, for all separating veterans;
- Fully funding the concurrent receipt of military retirement pay, military separation pays, and Department of Veterans Affairs (VA) disability compensation as well as Special Compensation pays for disabled military retirees;
- That the Survivor Benefit Plan and Dependency and Indemnity Compensation (SBP/DIC) offset be eliminated;
- TRICARE for Life and the TRICARE Senior Pharmacy program for Medicare-eligible military retirees, their dependents and military survivors, should be adequately funded; and regular cost-of-living adjustments to military retirement deployment pay, capital gains tax exclusions, tax-free and increased death gratuity payments, and combat zone tax exclusions for service in South Korea;
- Congressional re-enactment of Impact Aid to fund the local public school education of military dependents;
- Adequately protecting the American public and the Armed Forces from the actual or potentially harmful effects of friendly and hostile chemical, biological and nuclear agents or munitions;
- Urging the Congress to extend and improve additional quality-of-life benefits, allowances and privileges to the National Guard and Reserves involved in homeland security and other missions so as to more closely approximate those of the active force. Military retirement pay and TRICARE healthcare for members of the Reserve Components should be authorized before age 60. Hazardous duty and incentive pays for Reservists should be the same as active duty; tax credits to private businesses that pay the difference between military and civilian salaries to mobilized Reservists and restore travel exemptions for Reserve and Guard members for expenses associated with attending drills;

- Military health care should also be provided to members of the Reserve Components and their dependents, who become injured while on active duty status regardless of the number of days served on active duty, to the same degree as active duty members under the same circumstances;
- Whenever a Base Realignment and Closure (BRAC) is conducted, The American Legion will urge that certain base facilities such as base medical facilities, commissaries, exchanges and other facilities be preserved for use by active duty and Reservist personnel and military retired veterans and their families;
- Walter Reed Army Medical Center not be closed until after Overseas Contingency Operations have ended;
- That the numerous, recurring and serious pay problems experienced by the Active and Reserve Components be immediately resolved; and
- Traumatic Brain Injury and Combat Stress Disorders be diagnosed and effectively treated in the military.

Wounded Warrior Care

The respective branches of the military often like to pontificate on how they all “take care of their own.” Nowhere is this statement put more to the test than when dealing with the combat and severely wounded. Since the Building 18 episode at Walter Reed Army Medical Center, a well-deserved spotlight was put on the whole transition process for outgoing military personnel. The resulting findings were somewhat surprising in that it was not the quality of medical care that was in question, but rather it was everything else. Some of those issues included electronic transference of medical records; scheduling of appointments; housing; family support issues; the Physical Evaluation Board (PEB) and Medical Evaluation Board (MEB) process; applying for VA benefits and receiving them without a gap in pay upon discharge from the military; endless forms, paperwork and tests.

The American Legion supports many of the reforms, most of which are still in the form of pilot programs, that address these issues. Warrior Transition Units (WTUs) need to be fully funded and fully staffed. PEB/MEB process needs to be overhauled. Great strides have been made since 2007, but the progress made (particularly in the area of the WTUs) not only needs to be maintained but expanded.

The American Legion supports some of the recommendations of the President’s Commission on Care for America’s Returning Wounded Warriors (the Dole/Shalala Commission). Under the Commission’s proposal, service members found unfit for military duty (a determination made by DOD based on a joint VA/DOD collaborative examination process) would be awarded a lifetime annuity payment by DOD based on years of service and rank. The purpose of this annuity is to compensate for the loss of the service member’s military career.

As these reforms are instituted, the new rating system and compensation should be made retroactive to correct those past egregious disability decisions and call for the re-rating and reevaluation of immediate past military disability retired personnel.

Since Operations Enduring Freedom and Iraqi Freedom began, over 5,000 Americans have given their lives in our operations in Iraq and Afghanistan and over 34,000 have been wounded in action. Of those wounded, over 15,700 did not return to duty. Caring for our military and ensuring good quality-of-life for the service member and the family is part of the ongoing cost of war and national security.

The fiscal year 2009 budget has \$3 billion to improve army barracks, military hospitals, and other facilities. The American Legion recommends a minimum of \$3.4 billion for fiscal year 2010 in order to ensure that there are no delays in construction and improvement of living quarters and medical facilities.

The fiscal year 2009 budget has \$25.8 billion, \$2.4 billion above 2008, for medical care. This includes \$300 million for traumatic brain injury (TBI) and psychological health. The American Legion applauds Congress for this increase and recommends that funding for fiscal year 2010 be \$28 billion in order to sustain current costs and to improve treatment for TBI and psychological health professionals, particularly for the Reserve force that may live in rural areas.

Force Health Protection

The American Legion continues to actively monitor the DOD’s implementation of Force Health Protection policies and urges continual congressional oversight to ensure that all Force Health Protection laws and policies, including thorough pre- and post-deployment physical and mental examinations, are being properly implemented in a consistent manner by all military branches.

The American Legion also urges DOD to actively track and follow-up, with proper medical care, adverse reactions to vaccinations as well as any and all health-related complaints associated with the ingestion of controversial drugs such as

pyridostigmine bromide and Lariamand. In addition, The American Legion urges DOD to continually improve its treatment of service personnel who have been diagnosed with post-traumatic stress disorder and/or traumatic brain injury.

Concurrent Receipt of Military Retired and Severance Pays and Disability Compensation and Their Dependents

Military retired pay and disability compensation have been erroneously equated in one form or another for too long. One pay is earned through service and the other is compensation for debilitating injuries that were acquired while in service (on the job, so to speak). To offset one against the other is clearly unfair.

The American Legion expresses its gratitude to the Congress for the authorization of both Combat-Related Special Compensation (CRSC) and partial concurrent receipt for over 200,000 disabled military retirees but urges the Congress to authorize and fund full concurrent receipt for all disabled military retirees to include those rated at 40 percent and below and to authorize the CRSC payment of military disability retiree pay and VA disability compensation for those disabled military retirees.

Additionally, The American Legion urges Congress to eliminate the phase-in of provisions in Public Law 108-136 so as to accelerate restored retired pay in less than 10 years and to authorize the concurrent receipt of military severance pay for less than 30 percent disabled service members and VA disability compensation.

TRICARE

The American Legion has a longstanding position that it should prevail upon any Administration and DOD to reconsider any proposals to implement any increases in the military retirees' TRICARE enrollment fees, deductibles, or premiums. The American Legion urges Congress to fully fund military and VA healthcare programs for beneficiaries as well as a permanent TRICARE program for Guardsmen and Reservists. The American Legion recommends that the following guidelines be incorporated as part of the DOD healthcare package for military retirees, dependents and military survivors:

- Administrative barriers to an effective TRICARE system to include raising TRICARE provider reimbursements; program portability between TRICARE regions; reducing delays in claim payments; and increasing electronic claims processing need to be removed. Improve TRICARE enrollment procedures, beneficiary education, decrease administrative burdens, eliminate non-availability requirements and eliminate unnecessary reporting requirements;
- TRICARE programs to include the TRICARE for Life and the TRICARE Senior Pharmacy programs which are used by 1.3 million Medicare-eligible military retirees and their dependents should be fully funded annually;
- Restore TRICARE reimbursement policy to pay up to what TRICARE would have paid had there been no other health insurance as was the policy before 1993;
- Dual eligible disabled retirees continue to receive health care from both military treatment facilities and VA medical centers. TRICARE Prime Remote should be included for military retirees, dependents and military survivors;
- All military beneficiaries should be authorized to receive dental and visual care at military treatment facilities;
- Retired Reservists and their dependents should be eligible for TRICARE coverage when they become eligible to receive retirement pay; The American Legion urges that all discharging service members, active and Reservists be required to have discharge and retirement physical examinations; physicals should not be optional or abbreviated;
- Adequate military medical personnel, to include graduates of the Uniformed Services University of Health Sciences and members of the Commissioned Officer Corps of the Public Health Service, should be retained on active duty to provide health care for active duty and retired military personnel and their dependents;
- The Federal Employee Health Benefits Plan (FEHBP) should be authorized as an alternative to TRICARE for those military retirees and dependents who can afford such premiums;
- TRICARE fees should not be increased except as authorized by Congress, not by DOD;
- Military construction funding should be authorized for the construction of Walter Reed Military Medical Center and the Fort Belvoir Army Community Center;

- If Congress increases TRICARE fees, the increases should be at a rate no larger than the rate of pay increases for Active, Reserve, National Guard, military and medical retirees, and military survivors.

Quality-of-Life for National Guard and Reserve Forces

The American Legion urges Congress and DOD to pass legislation and create policy that addresses all the needs of the Reserve forces to include:

- Full range of active duty retention bonuses and recruiting incentives, pay promotions and health care quality-of-life be applicably activated to the National Guard and Reserve;
- Qualified Reservists should be authorized to receive Military retirement pay and TRICARE healthcare before age 60;
- Hazardous duty and incentive pays for Reservists set the same as active-duty;
- Creating tax credits to private businesses paying the difference between military and civilian salaries to mobilized Reservists;
- Restoring travel exemptions for Reserve and Guard members for expenses associated with attending drills;
- Military health care provided to members of the Reserve Components and their dependents, who become injured while on active duty status regardless of the number of days served on active duty;
- Retired Reservists and their dependents should be eligible for TRICARE coverage when they become eligible to receive retirement pay;
- All discharging Reservists should be required to have complete discharge and/or retirement physical examinations to the same standard as the active-duty force.

General Quality-of-Life Issues

Armed Forces Retirement Homes

The American Legion urges the Congress to support and fund those measures, to include annual Congressional appropriations, which will provide for the long-term solvency and viability of the Armed Forces Retirement Home—Washington. The American Legion also strongly supports the rebuilding of the Armed Forces Retirement Home at Gulfport, Mississippi.

Support for the Selective Service Registration Program

The American Legion supports the retention of the Selective Service Registration Program as being in the best interests of all Americans, and its maintenance is a proven cost-effective, essential, and rapid means of reconstituting the required forces to protect our national security interests.

Reforming the Military Absentee Voting System

The American Legion urges that appropriate laws and guidelines be developed at Federal, State and local levels with the intent that all military absentee voters and their families will have their votes counted in every election. The American Legion also recommends that the sending and receiving of blank and completed military absentee ballots be accomplished electronically as much as possible.

Military Commissaries

The American Legion urges DOD and the Congress to continue full Federal funding of the military commissary system and to retain this vital non-pay compensation benefit system. This quality-of-life benefit is essential to the morale and readiness of the dedicated men and women who have served, and continue to serve, the national security interests of the United States. The American Legion opposes any efforts to institute “variable pricing” or to privatize the military commissary system or to dismantle or downsize the Defense Commissary Agency.

Military Funeral Honors

The American Legion reaffirms that the Congress should mandate and appropriately fund DOD and the Military Services, to include reimbursing the National Guard, so as to provide military honors upon request at veterans’ funerals in coordination with Veterans’ Service Organizations such as The American Legion at local levels. The Department of Defense should implement equitable and expedient reimbursement procedures for members of the veterans’ service organizations who participate in military funeral honors.

The American Legion also recommends that an action be taken to change the wordage, as currently written in Section 578 Public Law 106–65 to: That any and all funeral directors performing services for any veteran of The United States armed forces shall be required to ask the veteran’s family member or other interested party

if military honors are requested, at no expense to the family, rather than placing the burden upon the veteran's family at this time of bereavement.

FORCE STRUCTURE

The current active-duty personnel level has been funded to maintain just under 1.37 million active-duty service members. Military leaders had been making up manpower shortages by increasing the OPTEMPO, increasing rotations to combat zones, and by over-utilizing the Reserve Components. American military personnel are deployed to over 150 countries worldwide. Many of these personnel are from the Reserve Components. Multiple deployments, particularly to combat zones, are often the core element of the recruitment and retention challenges that have confronted the Army. While all the services have met or exceeded their recruitment goals for 2008, this is due in large part to the uncertainty in the economy and to the great successes our forces are having in Iraq. All of the services could find themselves in recruitment difficulties again if the economy recovers quickly or if casualties begin to rise again either in Iraq, Afghanistan or some other area of the world where our national security is threatened. We applaud Congress for funding the requested end strength increases of 7,000 for the Army, 5,000 for the Marine Corps, and 1,300 for the Army Guard for fiscal year 2009. However, The American Legion insists that these nominal increases are not enough to adequately provide for the needs of a strong national security posture. The active force combined with the reserve force still only totals under 1.75 million. As stated previously, The American Legion urges an active and reserve force of 2.1 million.

Modernization of weapons systems is vital to properly equip the armed forces, but is totally ineffective without adequate personnel to effectively operate state-of-the-art weaponry. No military personnel should go into battle with unarmed or under-armored vehicles or without body armor or with vehicles and helicopters that are approaching or exceeding their service lives. America stands to lose its service members on the battlefield and during training exercises due to aging equipment. The current practice of trading off force structures and active-duty personnel levels to recoup or bolster modernization or transformation resources must be discontinued. The Army and the Marine Corps need to be immediately funded to reset their combat forces so as to maintain their readiness.

The American Legion recommends restoring former military force structures and increasing active-duty end strengths so as to improve military readiness and to more adequately pursue the Overseas Contingency Operations (OCO). The American Legion seeks to improve alignment of service levels with missions to ease deployment rates and improve quality-of-life features. Ensuring readiness also requires retaining the peacetime Selective Service System to register young men for possible military service in case of a national emergency. Military history repeatedly demonstrates that it is far better to err on the side of preserving robust forces to protect America's interests than to suffer the consequences of an inadequate force structure or military non-readiness, especially during time of war.

America needs a more realistic strategy with appropriate force structure, weaponry, and equipment with increased active-duty and Reserve components and readiness levels to achieve its national security objectives.

Other Force Structure Issues and Recommendations

Support for the Non-Federal Roles of the National Guard

The active-duty force must be able to better accomplish its operational objectives around the globe without relying so heavily on the National Guard. The Guard must go back to its primary roles in homeland security and used as a mainly strategic asset and not as an operational one. The American Legion urges the Congress to retain National Guard units at reasonable readiness levels so that in addition to their active duty missions they may continue to provide civil disturbance and natural and man-made disaster assistance; perform civil defense and drug interdictions functions as well as other essential State or Federal roles as required to include border security.

Uniformed Services University of the Health Sciences (USU)

The American Legion urges the Congress to: continue its demonstrated commitment to USU, as a national asset, for the continued provision of uniquely educated and trained uniformed physicians, advanced practice nurses, and scientists dedicated to careers of service in the Army, Navy, Air Force, and the United States Public Health Service; support timely construction at the USU campus during fiscal years 2009-2010; continue funding the University's collaborative effort for sharing its chemical, radiological and biological, nuclear and high yield explosive (CBRNE)

expertise and training; support development of the USU Immersive, Wide Area Virtual Environment (WAVE) Simulation for CBRNE/WMD Medical Readiness Training; support funding for the Graduate School of Nursing Teaching/Educational Programs; and, encourage continued close collaboration and progress towards the OSD-proposed Joint Medical Command and WRNMMC with USU as the core academic health center.

Aeronautical and Space Exploration

The American Legion deems it imperative that the United States, in the face of increasing competition, maintain its hard-won status as the world leader in aeronautics and aircraft production and in space exploration and research. To realize this goal, we urge the Congress to provide:

- Adequate funding for the Nation's civilian and military aerospace research and development programs to maintain U.S. technological leadership.
- Adequate funding to build, upgrade and enhance the Nation's civilian and military aerospace research facilities and wind tunnels.
- A renewed national commitment to education involving academia in aeronautical and aerospace engineering research and technologies insuring a state-of-the-art educated work force.
- Over-watch and investigate functions and related activities with respect to the transfer of American aerospace technology abroad.

Combating Cyberspace Threats

The American Legion urges the Congress to appropriate the necessary funding and resources to combat the continuing cyberspace and other threats to the United States in the 21st Century.

National Missile Defense System

The American Legion urges the United States Government to develop and continue to deploy a national missile defense system which is in the national interest of the United States and the American people and an essential ingredient of our homeland security.

Considering the growing threats of rocket and missile attacks by Iran and North Korea, proposed cuts to missile defense seem unwise. Even if cuts are being made in systems that are not deemed successful, those monies should be reallocated to those defense systems that are working.

MANPOWER AND WEAPONS SYSTEMS

The President's fiscal year 2010 Defense budget request should require continued funding to sustain current Overseas Contingency Operations (OCO) while maintaining the war-fighting capabilities of the Armed Forces. For years, the increased Operations Tempo (OPTEMPO), OCO, and budgetary shortfalls have had a devastating impact on military readiness, modernization, and personnel.

The American Legion recommends that the fiscal year 2010 Defense appropriations bill should include higher military pay raises and allowances as well as recruitment bonuses and incentives. The Defense Health Program, to include the TRICARE health care system, needs to be fully funded without new or increased TRICARE fees. Authorizations for continued higher spending on modernization must include: the resetting, repairing and procuring of Army weapons systems and equipment; continued spending for development of, and fielding, Joint Strike Fighters for the Air Force and Navy; and, procurement of more F-22A Raptor fighter jets and aerial refueling tankers for the Air Force.

The American Legion urges Congress to increase defense spending to levels that represent at least 5 percent of GDP. This represents not only ongoing needs, but also the shared burden of the American people during a time of war.

Defense budgets, military manpower and force structures are currently one-third of their 1986 peacetime levels. Military capabilities are at significantly lower levels than the Persian Gulf War in 1991. With only 10 active Army divisions in the inventory, it is little wonder that thousands of Reservists and Guardsmen have been called to active-duty to bolster homeland security and in fighting the wars in Iraq and Afghanistan. The current plan to cap the Brigade Combat Team numbers to 45, as opposed to the recommended 48, is a terrible case of robbing Peter to pay Paul. While the size of the force will still increase, the actual size of combat ready ground forces will still be inadequate. If our national security needs require more administrators and trainers, then so be it, but it should not come at a cost of a reduction in combat ready forces.

The American Legion, along with its previous quality-of-life and force structure recommendations, further recommends the following as regards the purchasing of weapons systems and armaments in general:

Rebuilding America's Defense Industrial Base

The American Legion urges the new administration and the Congress to rebuild America's industrial base by continuing to adequately fund research, development and acquisition budgets to assure that our military production can meet national requirements especially when U.S. military power is committed. Rebuilding America's industrial base could, and perhaps should, be part of the administration's plan to reinvigorate the economy.

We encourage the new Administration and the Congress in the rebuilding of America's defense industrial base by having a proper balance of policies that:

- Increase and then sustain domestic production at levels that maintain a robust and internationally competitive defense industry.
- Keep the arms industry internationally competitive.
- Ensure that the United States is not putting itself at risk by having our armaments produced offshore.

Buy American

The American Legion urges Congress to require Government contractors to utilize American-made components and subsystems in construction of their equipment over those made by foreign subcontractors for use by the United States military services to ensure the defense of the country, as well as the continued employment of Americans and veterans at subcontractor facilities.

Foreign Investments in the American Defense Industry

The American Legion urges the U.S. Government to ensure that foreign entities are not permitted to own critical industries, especially those involved in producing defense items. The American Legion further opposes the transfer and sales of sensitive technologies which may endanger our national security and economic interests.

Commercial Shipbuilding for Defense

The American Legion urges the Congress to vigorously act to stop the further erosion of our vital maritime capability by boosting naval budgets, promoting commercial shipbuilding, expanding the use of U.S. flagships in world commerce, and resisting foreign actions that would further damage America's defense industrial base.

Procurement of Sufficient F-22 Aircraft

The American Legion advocates that the procurement of F-22 Raptor aircraft should be approved and funded by Congress for the stated USAF requirement of 381 and that such procurement be funded through additional appropriations even if that should result in an increase in the overall National Defense Budget.

MILITARY CONSTRUCTION

Military Construction is directly related to the quality-of-life of the service member and their dependants. As such, Military Construction must be funded to a level that meets the immediate and future needs of DOD. The cornerstone to a strong national defense is not based on weapon systems purchased or the way the force structure is organized, but rather, the way military service members and their families are treated and cared for on military installations within the continental United States and overseas. In today's All-Volunteer Armed Forces, maintaining the highest quality-of-life standards is the least we should do in the interest of national security and as the thanks of a grateful Nation to those who serve.

Military Construction

The \$26.3 billion recommendation is based of the current force structure of 1.75 million. This recommendation also accounts for the modest upcoming authorized increases in the sizes of the Army and Marine Corps.

In fiscal year 2009, \$25 billion, (\$4.4 billion above fiscal year 2008) was appropriated for Military Construction. The large increase is mostly due to the costs of implementing Base Realignment and Closure (BRAC) and plans to increase the size of the Army and Marine Corps. It should be noted that The American Legion recommends a 2.1 million man force structure as opposed to the current force size. As such, if authorization and funding for the expansion of the active-duty and reserve force increased by an additional 50,000 service members for fiscal year 2010 (in order to get closer to The American Legion's recommended force structure level),

The American Legion would recommend \$31.3 billion for Military Construction funding for the construction associated with such an expansion of forces.

Quality-of-Life and BRAC

A quality-of-life concern that must be considered is the welfare of our retired military. Often, when a service member retires from service, whether medically or by longevity, they choose to live in close proximity to a military installation. They choose this in order to have access to the benefits they earned from honorable service. Those benefits include access to base medical facilities, commissaries, exchanges and other facilities.

Whenever a Base Realignment and Closure (BRAC) is conducted, The American Legion will urge that certain base facilities (such as base medical facilities, commissaries, exchanges and other facilities) be preserved for use by active-duty and Reservist personnel and military retired veterans and their families.

One key element of quality of life for service members and their families is the quality of their housing, whether it is supplied by the military in the form of on-base housing, or the availability and quality of off-base housing. Long standing policy of DOD has been to rely on local community housing. This policy comes into conflict with reality where there is a localized influx of military families, whether from BRAC or "Grow the Army"-like programs.

Currently, roughly 63 percent of all military families reside in off-base, private sector housing. A further 26 percent reside in residences built under the Military Housing Privatization authorities. Of the remaining 11 percent, 8 percent live in Government-owned housing and 3 percent in (primarily overseas) leased housing. However, the transience of forces may cause localized market problems in the coming years, as changes occur resulting from BRAC, Grow the Force initiatives, global re-posturing and joint basing. Some installations may suddenly find they have a surplus of housing as a result, while in other areas housing availability may be in deficit. Ensuring that service members and their families have access to safe, affordable and sufficient housing must remain a priority in order to address the quality of life for these families.

One initiative which has received excellent reviews from the services has been the Military Housing Privatization Initiative (MHPI) which encourages high quality construction, sustainment, and renovation of military housing by leveraging capital and expertise from the private sector. Under this initiative, 94 projects have been awarded, allowing the DOD to eliminate nearly all inadequate domestic family housing. This program should be continued and expanded with additional resources.

Numerous media reports surfaced last year of troops returning from OCO to barracks that were unsatisfactory. In one case, a distraught father of a soldier with the 82nd Airborne at Fort Bragg, NC went so far as film the living conditions and to publicize it through social networking sites. Following this renewed interest, the Army in particular began a sweeping inspection of all its living facilities and barracks to ascertain the level of need that many of them required in terms of maintenance and repair. The reforms resulted in the First Sergeants Barracks Initiative (FSBI) where the barracks are continually monitored for needed repairs, and "ownership" of barracks for deployed troops is transferred to post control for the duration of the deployment. This successful innovation should be adequately funded to accomplish these needed renovations.

In October of 2007, Secretary of the Army Pete Geren initiated a program entitled the "Army Family Covenant." At the time he stated:

The Health of our all-volunteer force, our Soldier-volunteers, our Family-volunteers, depends on the health of the Family. The readiness of our all-volunteer force depends on the health of the Families. I can assure you that your Army leadership understands the important contribution each and every one of you makes. We need to make sure we step up and provide the support families need so the army stays healthy and ready.

This covenant addressed various ways to improve family readiness by:

- Standardizing and funding existing family programs and services;
- Increasing accessibility and quality of healthcare;
- Improving Soldier and Family Housing;
- Ensuring excellence in schools, youth services, and child care; and
- Expanding education and employment opportunities for family members.

While we enlist soldiers, airmen, marines and navy personnel, we also re-enlist families. Issues of the covenant from which funding comes under the rubric of the Military Construction appropriations should be funded fully to ensure that we maintain a high level of quality of life, and thereby ensure a higher rate of reenlistment for the Armed Forces.

The commitment to this program by the Army was demonstrated by the testimony of Keith Easton, Assistant Secretary of the Army for Installations on March 12. He noted that the Army Family Covenant Program has shown significant progress in meeting its' goals since it came into existence. The program itself shows a commitment and understanding of the importance of family in our force structure and maintaining readiness and force levels. This program is another which should be expanded through adequate funding, to ensure the well being of service members and demonstrate the national commitment towards helping them individually and collectively prosper and reach their potential.

Increased spending in the area of military construction not only serves the strategic needs of the armed forces but also the needs of the service members. It takes approximately 8 years to build a senior Non-Commissioned Officer. To lose a member of the armed forces like that to the civilian world, because they feel they can have a better quality of life for them and their family outside of the services, is a cost that can not be recouped.

The American Legion fully supports the Army Family Covenant Program and engages all of its 14,000+ local American Legion posts to become involved.

Wounded Warrior Care

All branches of the armed forces ascribe to the ethic that they "take care of their own." Nowhere is this statement put more to the test than when dealing with the combat and severely wounded. Since the Building 18 episode at Walter Reed Army Medical Center, a well-deserved spotlight was put on the whole transition process for outgoing military personnel. The fiscal year 2009 budget has \$3 billion to improve army barracks, military hospitals, and other facilities. The American Legion recommends a minimum of \$3.4 billion for fiscal year 2010 in order to ensure that there are no delays in construction and improvement of living quarters and medical facilities.

Further, The American Legion advocates that Walter Reed Army Medical Center should not be closed until after the wars in Iraq and Afghanistan have ended. As such Walter Reed Army Medical Center needs to be funded at levels high enough to meet and exceed the high standards of care our service members deserve.

Uniformed Services University of the Health Sciences

The American Legion has supported the Uniformed Services University of the Health Sciences (USU), since its establishment in 1972 as the Nation's Federal Academic Health Center. USU is dedicated to providing uniquely educated and trained uniformed officers for the United States Army, Navy, Air Force and Public Health Service. USU alumni are currently serving over 20-year careers and thus providing continuity and leadership for the Military Health System (MHS) as physicians, advanced practice nurses and scientists. USU F. Edward Héert School of Medicine has a year-round, 4-year curriculum that is nearly 700 hours longer than found at other U.S. medical schools. These extra hours focus on epidemiology, health promotion, disease prevention, tropical medicine, leadership and field exercises. Doctoral and Masters degrees in the biomedical sciences and public health are awarded by interdisciplinary and department-based graduate programs within the School of Medicine. Programs include infectious disease, neuroscience, and preventive medicine research.

USU Graduate School of Nursing offers a Master of Science in Nursing degree in Nurse Anesthesia, Family Nurse Practitioner, Perioperative Clinical Nursing, Psychiatric Mental Health Nurse Practitioner, and a full and part-time program for a Ph.D. degree in Nursing Science. The university's continuing education program is unique and extensive, serving and sustaining the professional and readiness requirements of the Defense Department's worldwide military healthcare community.

The university's nationally ranked military and civilian faculty conduct cutting edge research in the biomedical sciences and in areas specific to the DOD health care mission such as combat casualty care, infectious diseases and radiation biology. The university specializes in military and public health medicine, focusing on keeping people healthy, disease prevention, and diagnosis and treatment. USU faculty offer significant expertise in tropical medicine and hygiene, parasitology, epidemiologic methods and preventive medicine.

The Department of Defense and the United States Congress have recognized that the extensive military-unique and preventive health care education provided in the multi-service environment of USU ensures Medical Readiness and Force Health Protection for the MHS. USU is recognized as the place where students receive thorough preparation to deal with the medical aspects of Weapons of Mass Destruction, including chemical, radiological and biological, nuclear and high yield explosive (CBRNE) terrorism or other catastrophe. USU has developed similar training for ci-

vilian first responders, medical professionals and emergency planners. USU is also uniquely qualified and experienced in simulation technology, education and training.

With the establishment by the Office of the Secretary of Defense (OSD) of a Joint Medical Command in fiscal year 2008, the role of USU will expand. Plans to establish the Walter Reed National Military Medical Center (WRNMMC) by 2011 has created close collaboration between the Armed Services Flag Officers and the President of USU to create a world-class military academic health center, expanding the role of USU.

As stated previously, The American Legion urges the Subcommittee to: continue its demonstrated commitment to USU, as a national asset, for the continued provision of uniquely educated and trained uniformed physicians, advanced practice nurses, and scientists dedicated to careers of service in the Army, Navy, Air Force, and the United States Public Health Service; support timely construction at the USU campus during fiscal years 2009–2010; continue funding the University's collaborative effort for sharing its chemical, radiological and biological, nuclear and high yield explosive (CBRNE) expertise and training; support development of the USU Immersive, Wide Area Virtual Environment (WAVE) Simulation for CBRNE/WMD Medical Readiness Training; support funding for the Graduate School of Nursing Teaching/Educational Programs; and, encourage continued close collaboration and progress towards the OSD-proposed Joint Medical Command and WRNMMC with USU as the core academic health center.

Armed Forces Retirement Homes

The United States Soldiers' and Airmen's Home (USSAH) and the United States Naval Home (USNH), jointly called the Armed Forces Retirement Home (AFRH), are continuing care facilities which were created more than 150 years ago to offer retirement homes for distinguished veterans who had served as soldiers, sailors, airmen and Marines in our Nation's conflicts. The AFRH system, which is available to retiree veterans from all the Armed Services whose active duty was at least 50 percent enlisted or warrant officer, has been supported by a trust fund resourced by 50 cents a month withheld from active duty enlisted and warrant officer paychecks as well as from fines and forfeitures from disciplinary actions, resident fees and interest income. The extensive downsizing of the Armed Forces has resulted in a 39 percent decrease in that revenue and, coupled with rising nursing home care costs, the Homes have been operating at an \$8–10 million annual deficit which would reportedly require both Homes to close their doors.

The American Legion urges the Subcommittee to support measures which will provide for the long-term solvency and viability of the Armed Forces Retirement Home—Washington, DC. The American Legion also strongly supports the rebuilding of the Armed Forces Retirement Home at Gulfport, Mississippi which was destroyed by Hurricane Katrina.

American Battle Monuments Commission

The American Battle Monuments Commission (ABMC) was established by law in 1923, as an independent agency of the Executive Branch of the United States Government. The Commission's commemorative mission includes:

- Designing, constructing, operating and maintaining permanent American cemeteries in foreign countries.
- Establishing and maintaining U.S. military memorials, monuments and markers where American armed forces have served overseas since April 6, 1917, and within the United States when directed by public law.
- Controlling the design and construction of permanent U.S. military monuments and markers by other U.S. citizens and organizations, both public and private, and encouraging their maintenance.

The resulting United States Military Cemeteries have been established throughout the world and are hallowed grounds for America's war dead. United States Military Cemeteries existing in foreign countries today are in need of adequate funding for repair, maintenance, additional manpower and other necessities to preserve the integrity of all monuments and cemeteries which are realizing increased numbers of visitors annually.

Adequate funding and human resources to the American Battle Monuments Commission must be provided in order to properly maintain and preserve these hallowed, final resting places for America's war dead located on foreign soil. In fiscal year 2009, \$59.5 million, \$15 million above fiscal year 2008 was provided for the care and operation of our military monuments and cemeteries around the world. The American Legion applauded this increased funding and supports the continued full funding for the needs of the American Battle Monuments Commission.

Funding for Joint POW/MIA Accounting Command

The American Legion has long been deeply committed to achieving the fullest possible accounting for U.S. personnel still held captive, missing and unaccounted for from all of our Nation's wars. The level of personnel and funding for the Joint POW/MIA Accounting Command (JPAC) has not been increased at a level commensurate with the expanded requirement to obtain answers on Americans unaccounted for from wars and conflicts prior to the Vietnam War. It is the responsibility of the U.S. Government to account as fully as possible for America's missing veterans, including—if confirmed deceased—the recovery of their remains when possible. The Congress has a duty and obligation to appropriate funds necessary for all Government agencies involved in carrying out strategies, programs and operations to solve this issue and obtain answers for the POW/MIA families and our Nation's veterans. This accounting effort should not be considered complete until all reasonable actions have been taken to achieve the fullest possible accounting. The American Legion calls on Congress to provide increases in personnel and full funding for the efforts of JPAC, the Defense POW/Missing Personnel Office (DPMO), the Life Sciences Equipment Laboratory, and the Armed Forces DNA Laboratory, including specific authorization to augment assigned personnel when additional assets and resources are necessary. The American Legion remains steadfast in our commitment to the goal of achieving the fullest possible accounting for all U.S. military and designated civilian personnel missing from our Nation's wars.

JPAC was forced to reduce field operations in pursuit of missing U.S. personnel in early 2006 due to a failure of DOD to provide adequate funding. The mission of JPAC has been expanded by Congress to include investigation and recovery operations dating back to and including unaccounted for WWII personnel, while funding levels have not increased to meet this requirement. The headquarters currently utilized by JPAC is no longer capable of housing neither the expanded command nor the expanded laboratory requirements for forensic identifications. The American Legion calls on the Congress to ensure that JPAC has at least \$62 million per year in operation funds and an additional \$64 million per year for fiscal year 2010 through fiscal year 2011 for JPAC military construction funds as part of the budget for the Department of Defense in connection with JPAC. The American Legion calls on the Congress to ensure that such funds be approved and restricted for use for no purpose other than those included in the mission statement of the Joint POW/MIA Accounting Command, Hickam AFB, Hawaii.

The American Legion commends Admiral Timothy Keating, Commander, U.S. Pacific Command, for his commitment to seek U.S. Navy funding in the amount of \$105 million to begin construction of a new JPAC headquarters, including a state-of-the-art laboratory in fiscal year 2010, to be completed in fiscal year 2011. Furthermore, The American Legion urges the Congress to fully fund this U.S. Navy military construction project to ensure that those who serve our Nation—past, present, and future—are returned and accounted for as fully as possible.

CONCLUSION

The United States continues to fight in OCO and defend our vital national interests. While America may be safer and has not suffered another tragic event on our soil since the tragic day of 9/11/01, the world is still not a safe place. The American Legion thanks the Subcommittee for inviting The American Legion to this hearing and looks forward to working with Congress and the administration on the many issues in National Defense facing our country.

Chairman INOUE. And now the deputy director of the National Military Family Association, Ms. Kelly Hruska.

STATEMENT OF KELLY B. HRUSKA, GOVERNMENT RELATIONS, DEPUTY DIRECTOR, NATIONAL MILITARY FAMILY ASSOCIATION

Ms. HRUSKA. Thank you, Mr. Chairman, for the opportunity to highlight the National Military Family Association's belief that policies and programs should provide a firm foundation for families buffeted by the uncertainties of deployment and transformation. It is imperative full funding for these programs be included in the regular budget process, not merely added on as a part of supplemental funding. Programs must expand and grow to adapt to the changing needs of servicemembers and families as they cope with multiple deployments and react to separations, reintegration, and

the situation of those returning with both visible and invisible wounds.

Standardization in delivery, accessibility, and funding are essential. Programs should provide for families in all stages of deployment, and reach out to them in all geographic locations. Families should be given the tools to take greater responsibility for their own readiness. We appreciate your help over the past years in addressing many of these important issues.

The increased access to resources and programs by the Joint Family Support Assistance Program, now offered in all States and territories, allows families to receive added help when they need it, during all cycles of deployment. The Military Family Readiness Council held its first informal meeting in December. We feel this will be an effective tool in identifying programs that work, and in helping to eliminate overlapping or redundant programs, as the council reviews existing resources for military families. In an effort to make their efforts more credible, our association would like to see more funding set aside to be used for pilot programs that may come out of the council's recommendations, or allows DOD to replicate best practices, as necessary. This seed funding would streamline the bureaucracy and get the pilot programs out to families faster.

Huge strides have been made in the building of brick-and-mortar child development centers on military installations. Within the next year or two, thousands of spaces will become available for our military families. But, the need for more spaces will still exist. Innovative strategies are needed to address the non-availability of after-hours childcare and respite care. We applaud the partnership between the services and the National Association of Childcare Resources and Referral Agencies that provides subsidized childcare to families who cannot access installation-base child development centers. Including National Guard and Reserve families. Families often find it difficult to obtain affordable, quality care, especially during hard-to-fill hours and on weekends.

Both the Navy and the Air Force have piloted 24/7 programs. These innovative programs must be expanded to provide care to more families at the same high standard as the services' traditional child development programs.

The Army, as part of the funding attached to the Army Family Covenant, has rolled out more resources for respite care of families of deployed services. Respite care is needed across the board for families of the deployed, and the wounded, ill, and injured. We are pleased the services have rolled out more respite care for special-needs families, but since the programs are new we are unsure of the impact it will have on families. We appreciate the recent increase to the special survivor indemnity allowance, for surviving spouses, but the elimination of the dependency and indemnity compensation offset to the survivor benefit plan annuity should still remain a high priority.

Our association recognizes and appreciates the many resources and programs that support our military families during this time of war. The need will not go away the day the war ends. We believe it is imperative these programs be included in the regular budget process.

In our written statement we have identified other ways to assist military families, and will be glad to expand on those suggestions, should you have any questions.

Military families—one size does not fit all, but they are united in their sacrifices in support of their servicemembers and our Nation. We ask you to help the Nation sustain and support them.

Thank you, sir.

Chairman INOUE. I thank you very much, Ms. Hruska.

And to all the witnesses, if you have supporting documents and memos, please feel free to submit them, because I can assure you we'll read them.

[The statement follows:]

PREPARED STATEMENT OF KELLY B. HRUSKA

Chairman Inouye and Distinguished Members of this Subcommittee, the National Military Family Association would like to thank you for the opportunity to present testimony on the quality of life of military families—the Nation's families. You recognize the sacrifices made by today's service members and their families by focusing on the many elements of their quality of life package: access to quality health care, robust military pay and benefits, support for families dealing with deployment, and special care for the families of the wounded, ill and injured and those who have made the greatest sacrifice.

In this statement, our Association will expand on several issues of importance to military families: Family Readiness; Family Health; Family Transitions.

FAMILY READINESS

The National Military Family Association believes policies and programs should provide a firm foundation for families buffeted by the uncertainties of deployment and transformation. It is imperative full funding for these programs be included in the regular budget process and not merely added on as part of supplemental funding. We promote programs that expand and grow to adapt to the changing needs of service members and families as they cope with multiple deployments and react to separations, reintegration, and the situation of those returning with both visible and invisible wounds. Standardization in delivery, accessibility, and funding are essential. Programs should provide for families in all stages of deployment and reach out to them in all geographic locations. Families should be given the tools to take greater responsibility for their own readiness.

We appreciate provisions in the National Defense Authorization Acts of the past several years that recognized many of these important issues. The increased access to resources and programs provided by the Joint Family Support Assistance Program (JFSAP), now offered in all States and territories, allows families to receive added help when they need it during all cycles of deployment. The Military Family Readiness Council held its first informal meeting in December. We feel this will be an effective tool in identifying programs that work and in helping to eliminate overlapping or redundant programs as the Council reviews existing resources for military families. Our Association is proud to represent military families as a member of the Council.

Our Association believes that it is imperative full funding for family readiness programs be included in the regular budget process and not merely added on as part of supplemental funding.

Child Care

The Services—and families—continue to tell us more child care is needed to fill the ever growing demand, including hourly, drop-in, respite, and after-hour child care. We've heard stories like this:

Child care facilities on base are beyond compare—for spouses and military members who work nine to five. In our increasingly service-oriented economy, the job I have has me working until at least seven most days, and usually as late as midnight 1 to 2 days a week. When my husband deploys or has a stint on second shift, I run out of options quickly. I have been unable to get another, more conventional job in the 2 years I have been in this area . . . there are minimum requirements as to what shifts I need to work to maintain full-time employment at my current workplace, and I cannot have those waived for an entire deployment.

Innovative strategies are needed to address the non-availability of after-hour child care (before 6 a.m. and after 6 p.m.) and respite care. We applaud the partnership between the Services and the National Association of Child Care Resource and Referral Agencies (NACCRRA) that provides subsidized childcare to families who cannot access installation based child development centers. Families often find it difficult to obtain affordable, quality care especially during hard-to-fill hours and on weekends. Both the Navy and the Air Force have programs that provide 24/7 care. These innovative programs must be expanded to provide care to more families at the same high standard as the Services' traditional child development programs. The Army, as part of the funding attached to its Army Family Covenant, has rolled out more space for respite care for families of deployed soldiers. Respite care is needed across the board for the families of the deployed and the wounded, ill, and injured. We are pleased that the Services have rolled out more respite care for special needs families, but since the programs are new we are unsure of the impact it will have on families.

At our Operation Purple® Healing Adventures camp for families of the wounded, ill and injured, we were told there is a tremendous need for access to adequate child care on or near military treatment facilities. Families need the availability of child care in order to attend medical appointments, especially mental health appointments. Our Association encourages the creation of drop-in child care for medical appointments on the DOD or VA premises or partnerships with other organizations to provide this valuable service.

Our Association urges Congress to ensure resources are available to meet the child care needs of military families to include hourly, drop-in and increased respite care for families of deployed service members and the wounded, ill and injured.

Working with Youth

Older children and teens must not be overlooked. School personnel need to be educated on issues affecting military students and be sensitive to their needs. To achieve this goal, schools need tools. Parents need tools, too. Military parents constantly seek more resources to assist their children in coping with military life, especially the challenges and stress of frequent deployments. Parents tell us repeatedly they want resources to "help them help their children." Support for parents in their efforts to help children of all ages is increasing, but continues to be fragmented. New Federal, public-private initiatives, increased awareness, and support by DOD and civilian schools educating military children have been developed. However, many military parents are either not aware such programs exist or find the programs do not always meet their needs.

Our Association is working to meet this pressing need through our Operation Purple® summer camps. Unique in its ability to reach out and gather military children of different age groups, Services, and components, Operation Purple provides a safe and fun environment in which military children feel immediately supported and understood. Last year, with the support of private donors, we achieved our goal of sending 10,000 military children to camp. We also were successful in expanding the camp experience to families of the wounded and bereaved. This year, we expect to maintain those numbers by offering 95 weeks of camp in 37 States and territories, as well as conducting several pilot family reintegration retreats in the National Parks.

Through our Operation Purple camps, our Association has begun to identify the cumulative effects multiple deployments are having on the emotional growth and well being of military children and the challenges posed to the relationship between deployed parent, caregiver, and children in this stressful environment. Understanding a need for qualitative analysis of this information, we contracted with the RAND Corporation in 2007 to conduct a pilot study aimed at the current functioning and wellness of military children attending Operation Purple camps and assessing the potential benefits of the OPC program in this environment of multiple and extended deployments. The results of the pilot study were published last spring and confirmed much of what we have heard from individual families. They also highlighted gaps in our current knowledge, including how family relationships are affected by deployment and reintegration. The study looked at differences in child and caregiver experiences based on Service component, such as how life is different during deployment for families from the Active Component compared to those in the Guard or Reserve.

In May 2008, we embarked on phase two of the project—a longitudinal study on the experience of 1,507 families, which is a much larger and more diverse sample than included in our pilot study. RAND is following these families for 1 year, and interviewing the non-deployed caregiver/parent and one child per family between 11 and 17 years of age at three time points over that year. Recruitment of participants

has been extremely successful because families are eager to share their experiences. RAND is currently gathering information from these families for the 6-month follow-up survey. Preliminary findings from the first round of surveys provide additional support for the pilot study results and identify new areas to investigate. This includes examining the relationship between the total months of deployment that a family experiences and its association with non-deployed caregiver's mental health and child's well-being at school and at home. In addition, RAND is assessing the impact of reintegration on the families and how this varies by a service member's rank and Service component.

This study will provide valuable data to inform the future creation and implementation of services for children and families. More specifically, we hope this study will provide more detailed and clearer understanding of the impact of multiple and extended deployments on military children and their families. We expect to present the final study results in Spring 2010.

National Guard and Reserve

Our Association would like to thank Congress for authorizing many provisions that affect our Reserve Component families, who have sacrificed greatly in support of our Nation. We continue to ask Congress to fully fund these programs so vital to the quality of life of our National Guard and Reserve families.

The National Military Family Association has long realized the unique challenges our Reserve Component families face and their need for additional support. This need was highlighted in the final report from the Commission on the National Guard and Reserves, which confirmed what we had always asserted: "Reserve Component family members face special challenges because they are often at a considerable distance from military facilities and lack the on-base infrastructure and assistance available to active duty families." While citing a robust volunteer network as crucial, the report also stated that family readiness suffers when there are too few paid staff professionals supporting the volunteers.

Our Association would also like to thank Congress for the provisions which allowed for the implementation of the Yellow Ribbon Reintegration program which is so crucial to the well-being of our Reserve Component families. We urge Congress to make the funding for this program permanent. We also believe that family members should be paid a travel allowance to attend these important reintegration programs. Furthermore, DOD and service providers need to move away from the one-size fits all approach to reintegration which does not work for all the Reserve Components due to the specific nature of each mission and the varying length of deployments.

Our Association asks Congress to fully fund the Yellow Ribbon Reintegration program and other provisions affecting our Reserve Component families and to move away from the one-size fits all approach to reintegration.

Military Housing

Privatized housing is a welcome change for military families and we are pleased the fiscal year 2009 NDAA called for an annual report that addresses the best practices for executing privatized housing contracts. With our depressed economy, increased oversight is critical to ensure timely completion of these important projects. Project delays negatively impact the quality of life of our families.

Commanders must be held accountable for the quality of housing and customer service in privatized communities. Housing areas remain the responsibility of the installation Commander even when managed by a private company. Services members who are wounded and must move to a handicap accessible home or break their lease provisions due to short-notice PCS orders should not be penalized. Service members should not languish on wait lists while civilians occupy housing. While privatization contracts permit other non-military occupants for vacant units, Commanders must ensure that privatized housing is first and foremost meeting the needs of the active duty population of the installation. In some cases, this will require modification or renegotiation of contracts.

Our Association feels there needs to be a review of BAH standards. While families who live on the installation are better off, families living off the installation are forced to absorb more out-of-pocket expenses in order to live in a home that will meet their needs. BAH standards are based on an outdated concept of what would constitute a reasonable dwelling. For example, in order to receive BAH for a single family dwelling a service member must be an E9. However, if that same service member lived in military housing, he or she would likely have a single family home at the rank of E6 or E7. BAH standards should mirror the type of dwelling a service member would occupy if government quarters were available.

Our Association believes that BAH standards should be reviewed and should better reflect the type of dwelling the service member would occupy if government quarters were available.

Commissaries and Exchanges

The commissary is a key element of the total compensation package for service members and retirees and is valued by them, their families, and survivors. Not only do our surveys indicate that military families consider the commissary one of their most important benefits, during this economic downturn, many families are returning to the commissary to help them reduce their grocery budget. In addition to providing average savings of more than 30 percent over local supermarkets, commissaries provide an important tie to the military community. Commissary shoppers get more than groceries at the commissary. They gain an opportunity to connect with other military family members and to get information on installation programs and activities through bulletin boards and installation publications. Finally, commissary shoppers receive nutrition information and education through commissary promotions and educational campaigns contributing to the overall health of the entire beneficiary population.

Our Association appreciates the provision included in the fiscal year 2009 NDAA allowing the use of proceeds from surcharges collected at remote case lot sales for Reserve Component members to help defray the cost of those case lot sales. This inclusion helps family members, not located near an installation partake in the valuable commissary benefit.

Our Association is concerned there will not be enough commissaries to serve areas experiencing substantial growth, including those locations with service members and families relocated by BRAC. The surcharge was never intended to pay for DOD and Service transformation. Additional funding is needed to ensure commissaries are built or expanded in areas that are gaining personnel as a result of these programs.

The military exchange system serves as a community hub, in addition to providing valuable cost savings to members of the military community. Equally important is the fact that exchange system profits are reinvested in important Morale, Welfare and Recreation (MWR) programs, resulting in quality of life improvements for the entire community. We believe that every effort must be made to ensure that this important benefit and the MWR revenue is preserved, especially as facilities are down-sized or closed overseas. Exchanges must also continue to be responsive to the needs of deployed service members in combat zones and have the right mix of goods at the right prices for the full range of beneficiaries.

Family Care Plans

We have heard from single parent and dual military families about the expenses incurred when they have to relocate their children to another location when they are activated for deployment. This issue was raised within the Army Family Action Plan process. Service members requiring activation of Family Care Plans are not compensated for the travel of dependents and shipment of the dependent's household goods. Some items such as infant equipment, computers and toys are necessary for the emotional and physical well-being of the children in their new environment during an already stressful time. Implementation of the Family Care Plan should not create additional financial hardship and emotional stress on the service member and family.

We recommend that changes be made to the DOD Joint Travel Regulations to provide for travel and shipment of household goods to fulfill the needs of a deploying service member's Family Care Plan.

FAMILY HEALTH

Family readiness calls for access to quality health care and mental health services. Families need to know the various elements of their military health system are coordinated and working as a synergistic system. Our Association is concerned the DOD military health care system may not have all the resources it needs to meet both the military medical readiness mission and provide access to health care for all beneficiaries. It must be funded sufficiently, so the direct care system of military treatment facilities (MTF) and the purchased care segment of civilian providers can work in tandem to meet the responsibilities given under the TRICARE contracts, meet readiness needs, and ensure access for all military beneficiaries.

*Military Health System**Improving Access to Care*

In an interview with syndicated Military Update columnist Tom Philpott in December of 2008, MG (Dr.) Elder Granger, deputy director of TRICARE, gave the Military Health System (MHS) an overall grade of “C-plus or B-minus”. His discussion focused on access issues in the direct care system—our military hospitals and clinics—reinforcing what our Association has observed for years. We have consistently heard from families that their greatest health care challenge has been getting timely care from their local military hospital or clinic. In previous testimony before this subcommittee we have noted the failure of MTFs to meet TRICARE Prime access standards and to be held accountable in the same way as the TRICARE contractors are for meeting those standards in the purchased care arena.

In discussions with families the main issues are: access to their Primary Care Managers (PCM); getting appointments; getting someone to answer the phone at central appointments; having appointments available when they finally get through to central appointments; after hours care; getting a referral for specialty care; being able to see the same provider or PCM; and having appointments available 60, 90, and 120 days out in our MTFs. Families familiar with how the MHS referral system works seem better able to navigate the system. Those families who are unfamiliar experienced delays in receiving treatment or decide to give up on the referral process and never obtain a specialty appointment.

Case management for military beneficiaries with special needs is not consistent across the MHS, whether within the MTFs or in the purchased care arena. Thus, military families end up managing their own care. The shortage of available health care providers only adds to the dilemma. Beneficiaries try to obtain an appointment and then find themselves getting partial health care within the MTF, while other health care is referred out into the purchased care network. Meanwhile, the coordination of the military family’s care is being done by a non-synergistic health care system. Incongruence in the case management process becomes more apparent when military family members transfer from one TRICARE region to another and is further exasperated when a special needs family member is involved. Each TRICARE Managed Care Contractor has created different case management processes. There needs to be a seamless transition and a warm handoff between TRICARE regions for these families and the establishment of a universal case management process across the MHS.

Our wounded, ill, and injured service members, veterans, and their families are assigned case managers. In fact, there are many different case managers: Federal Recovery Coordinators (FRC), Recovery Care Coordinators, each branch of Service, TBI care coordinators, VA liaisons, etc. The goal is for a seamless transition of care between and within the two governmental agencies: DOD and the VA. However, with so many to choose from, families often wonder which one is the “right” case manager. We often hear from families, some who have long since been medically retired with a 100 percent disability rating or others with less than 1 year out from date-of-injury, who have not yet been assigned a FRC. We need to look at whether the multiple, layered case managers have streamlined the process, or have only aggravated it. Our Association still finds these families alone trying to navigate a variety of complex health care systems trying to find the right combination of care. Many qualify for and use Medicare, VA, DOD’s TRICARE direct and purchased care, private health insurance, and State agencies. Does this population really need all of these different systems of receiving health care? Why can’t the process be streamlined?

TRICARE

While Congress temporarily forestalled increases over the past 2 years, we believe DOD officials will continue to support large increased retiree enrollment fees for TRICARE Prime combined with a tiered system of enrollment fees, the institution of a TRICARE standard enrollment fee and increased TRICARE Standard deductibles. Two reports, the Task Force on the Future of the Military Health Care and The Tenth Quadrennial Review of Military Compensation Volume II, recently recommended the same.

We acknowledge the annual Prime enrollment fee has not increased in more than 10 years and that it may be reasonable to have a mechanism to increase fees. With this in mind, we have presented an alternative to DOD’s proposal should Congress deem some cost increase necessary. The most important feature of our proposal is that any fee increase be no greater than the percentage increase in the retiree cost of living adjustment (COLA). If DOD thought \$230/\$460 was a fair fee for all in 1995, then it would appear that raising the fees simply by the percentage increase

in retiree pay is also fair. We also suggest it would be reasonable to adjust the TRICARE Standard deductibles by tying increases to the percentage of the retiree annual COLA. We stand ready to provide more information on this issue if needed.

Support for Special Needs Families

We applaud Congress and DOD's desire to create a robust health care and educational service for special needs children. But, these robust services do not follow them when they retire. We encourage the Services to allow these military families the opportunity to have their final duty station be in an area of their choice. We suggest the Extended Care Health Option (ECHO) be extended for 1 year after retirement for those already enrolled in ECHO prior to retirement.

There was discussion last year by Congress and military families regarding the ECHO program. The fiscal year 2009 NDAA included a provision to increase the cap on certain benefits under the ECHO program to \$36,000 per year for training, rehabilitation, special education, assistive technology devices, institutional care and under certain circumstances, transportation to and from institutions or facilities, because certain beneficiaries bump up against it. The ECHO program was originally designed to allow military families with special needs to receive additional services to offset their lack of eligibility for State or federally provided services impacted by frequent moves. We suggest that before making any more adjustments to the ECHO program, Congress should direct DOD to certify if the ECHO program is working as it was originally designed and has been effective in addressing the needs of this population. We need to make the right fixes so we can be assured we apply the correct solutions.

National Guard and Reserve Member Family Health Care

National Guard and Reserve families need increased education about their health care benefits. We also believe that paying a stipend to a mobilized National Guard or Reserve member for their family's coverage under their employer-sponsored insurance plan may prove to be more cost-effective for the government than subsidizing 72 percent of the costs of TRICARE Reserve Select for National Guard or Reserve members not on active duty.

TRICARE Reimbursement

Our Association is concerned that continuing pressure to lower Medicare reimbursement rates will create a hollow benefit for TRICARE beneficiaries. As the 111th Congress takes up Medicare legislation, we request consideration of how this legislation will impact military families' health care, especially access to mental health services.

National provider shortages in the psychological health field, especially in child and adolescent psychology, are exacerbated in many cases by low TRICARE reimbursement rates, TRICARE rules, or military-unique geographic challenges—for example large populations in rural or traditionally underserved areas. Many psychological health providers are willing to see military beneficiaries on a voluntary status. However, these providers often tell us they will not participate in TRICARE because of what they believe are time-consuming requirements and low reimbursement rates. More must be done to persuade these providers to participate in TRICARE and become a resource for the entire system, even if that means DOD must raise reimbursement rates.

We have heard the main reason for the VA not providing health care and psychological health care services is because they cannot be reimbursed for care rendered to a family member. However, the VA is a qualified TRICARE provider. This allows the VA to bill for services rendered in their facilities to a TRICARE beneficiary. There may be a way to bill other health insurance companies as well. The VA needs to look at the possibility for other methods of payments.

Pharmacy

We caution DOD about generalizing findings of certain beneficiary pharmacy behaviors and automatically applying them to our Nation's unique military population. We encourage Congress to require DOD to utilize peer-reviewed research involving beneficiaries and prescription drug benefit options, along with performing additional research involving military beneficiaries, before making any recommendations on prescription drug benefit changes, such as co-payment and tier structure changes for military service members, retirees, their families, and survivors.

We appreciate the inclusion of Federal pricing for the TRICARE retail pharmacies in the fiscal year 2008 NDAA. However, we need to examine its effect on the cost of medications for both beneficiaries and DOD. Also, we will need to see how this potentially impacts the overall negotiation of future drug prices by Medicare and civilian private insurance programs.

We believe it is imperative that all medications available through TRICARE Retail Pharmacy (TRRx) should also be available through TRICARE Mail Order Pharmacy (TMOP). Medications treating chronic conditions, such as asthma, diabetes, and hypertension should be made available at the lowest level of co-payment regardless of brand or generic status. We agree with the recommendations of The Task Force on the Future of Military Health Care that OTC drugs be a covered pharmacy benefit and there be a zero co-pay for TMOP Tier 1 medications.

National Health Care Proposal

Our Association is cautious about current rhetoric by the Administration and Congress regarding the establishment of a National health care insurance program. As the 111th Congress takes up a National health care insurance proposal, we request consideration of how this legislation will also impact TRICARE, military families' access to health care, and especially recruitment and retention of our service members at a time of war.

DOD Must Look for Savings

We ask Congress to establish better oversight for DOD's accountability in becoming more cost-efficient. We recommend:

- Requiring the Comptroller General to audit MTFs on a random basis until all have been examined for their ability to provide quality health care in a cost-effective manner;
- Creating an oversight committee, similar in nature to the Medicare Payment Advisory Commission, which provides oversight to the Medicare program and makes annual recommendations to Congress. The Task Force on the Future of Military Health Care often stated it was unable to address certain issues not within their charter or the timeframe in which they were commissioned to examine the issues. This Commission would have the time to examine every issue in an unbiased manner;
- Establishing a Unified "Joint" Medical Command structure, which was recommended by the Defense Health Board in 2006.

Our Association does not support the recommendation of the Task Force on the Future of Military Health Care to carve out one regional TRICARE contractor to provide both the pharmacy and health care benefit. We agree a link between pharmacy and disease management is necessary, but feel this pilot would only further erode DOD's ability to maximize potential savings through TMOP. We were also disappointed to find no mention of disease management or a requirement for coordination between the pharmacy contractor and Managed Care Support Contractors in the Request for Proposals for the new TRICARE pharmacy contract. The ability certainly exists for them to share information bi-directionally and should be established.

Our Association believes optimizing the capabilities of the facilities of the direct care system through timely replacement of facilities, increased funding allocations, and innovative staffing would allow more beneficiaries to be cared for in the MTFs, which DOD asserts is the most cost effective. The Task Force made recommendations to make the DOD MHS more cost-efficient which we support. They conclude the MHS must be appropriately sized, resourced, and stabilized; and make changes in its business and health care practices.

Our Association suggests this Subcommittee DOD reassess the resource sharing program used prior to the implementation of the T-Nex contracts and take the steps necessary to ensure Military Treatment Facilities (MTF) meet access standards with high quality health care providers.

We also suggest this Subcommittee direct the Department to make case management services more consistent across the direct and purchased care segments of the MHS.

Our Association recommends a 1-year transitional active duty ECHO benefit for the family members of service members who retire.

We believe tying increases in TRICARE enrollment fees to the percentage increase in the Retiree Cost of Living Adjustment (COLA) is a fair way to increase beneficiary cost shares should Congress deem an increase necessary.

We oppose DOD's proposal to institute a TRICARE Standard enrollment fee and believe Congress should reject this proposal because it changes beneficiaries' entitlement to health care under TRICARE Standard to just another insurance plan.

Our Association strongly believes an enrollment fee for TFL is not appropriate. We believe that Reserve Component families should be given the choice of a stipend to continue their employer provided care during deployment.

Behavioral Health Care

Our Nation must help returning service members and their families cope with the aftermaths of war. DOD, VA, and State agencies must partner in order to address behavioral health issues early in the process and provide transitional mental health programs. Partnering will also capture the National Guard and Reserve member population, who often straddle these agencies' health care systems.

Full Spectrum of Care

As the war continues, families' need for a full spectrum of behavioral health services—from preventative care to stress reduction techniques, to individual or family counseling, to medical mental health services—continues to grow. The military offers a variety of psychological health services, both preventative and treatment, across many agencies and programs. However, as service members and families experience numerous lengthy and dangerous deployments, we believe the need for confidential, preventative psychological health services will continue to rise. It will also remain high for some time even after military operations scale down.

Access to Behavioral Health Care

Our Association is concerned about the overall shortage of psychological health providers in TRICARE's direct and purchased care network. DOD's Task Force on Mental Health stated timely access to the proper psychological health provider remains one of the greatest barriers to quality mental health services for service members and their families. While families are pleased more psychological health providers are available in theater to assist their service members, they are disappointed with the resulting limited access to providers at home. Families are reporting increased difficulty in obtaining appointments with social workers, psychologists, and psychiatrists at their MTFs and clinics. The military fuels the shortage by deploying some of its child and adolescent psychology providers to combat zones. Providers remaining at home report they are overwhelmed by treating active duty members and are unable to fit family members into their schedules. This can lead to compassion fatigue, creating burnout and exacerbating the provider shortage problem.

We have seen an increase in the number of psychological health providers joining the purchased care side of the TRICARE network. However, the access standard is 7 days. We hear from military families after accessing the psychological health provider list on the contractor's websites that the provider is full and no longer taking patients. The list must be up-to-date in order to handle real time demands by families. We need to continue to recruit more psychological health providers to join the TRICARE network and we need to make sure we specifically add those in specialty behavioral health care areas, such as child and adolescence psychology and psychiatrists.

Families must be included in mental health counseling and treatment programs for service members. Family members are a key component to a service member's psychological well-being. We recommend an extended outreach program to service members, veterans, and their families of available psychological health resources, such as DOD, VA, and State agencies. Families want to be able to access care with a psychological health provider who understands or is sympathetic to the issues they face.

Frequent and lengthy deployments create a sharp need in psychological health services by family members and service members as they get ready to deploy and after their return. There is also an increase in demand in the wake of natural disasters, such as hurricanes and fires. We need to maintain a flexible pool of psychological health providers who can increase or decrease rapidly in numbers depending on demand on the MHS side. Currently, Military Family Life Consultants and Military OneSource counseling are providing this type of service for military families on the family support side. We need to make the Services, along with military family members, more aware of resources along the continuum. We need the flexibility of support in both the MHS and family support arenas.

Availability of Treatment

Do DOD, VA and State agencies have adequate psychological health providers, programs, outreach, and funding? Better yet, where will the veteran's spouse and children go for help? Many will be left alone to care for their loved one's invisible wounds resulting from frequent and long combat deployments. Who will care for them when they are no longer part of the DOD health care system?

The Army's Mental Health Advisory Team (MHAT) IV report links reducing family issues to reducing stress on deployed service members. The team found the top non-combat stressors were deployment length and family separation. They noted

soldiers serving a repeat deployment reported higher acute stress than those on their first deployment and the level of combat was the major contribution for their psychological health status upon return. These reports demonstrate the amount of stress being placed on our troops and their families.

Our Association is especially concerned with the scarcity of services available to the families as they leave the military following the end of their activation or enlistment. Due to the service member's separation, the families find themselves ineligible for TRICARE, and are very rarely eligible for healthcare through the VA. Many will choose to locate in rural areas lacking available psychological health providers. We need to address the distance issues families face in finding psychological health resources and obtaining appropriate care. Isolated service members, veterans, and their families do not have the benefit of the safety net of services and programs provided by MTFs, VA facilities, Community-Based Outpatient Centers and Vet Centers. We recommend:

- using alternative treatment methods, such as telemental health;
- modifying licensing requirements in order to remove geographic practice barriers that prevent psychological health providers from participating in telemental health services outside of a VA facility; and
- educating civilian network psychological health providers about our military culture as the VA incorporates Project Hero.

National Guard and Reserve Members

The National Military Family Association is especially concerned about fewer mental health care services available for the families of returning National Guard and Reserve members as well as service members who leave the military following the end of their enlistment. They are eligible for TRICARE Reserve Select, but as we know, National Guard and Reserve members are often located in rural areas where there may be no mental health providers available. Policy makers need to address the distance issues that families face in linking with military mental health resources and obtaining appropriate care. Isolated National Guard and Reserve families do not have the benefit of the safety net of services provided by MTFs and installation family support programs. Families want to be able to access care with a provider who understands or is sympathetic to the issues they face. We recommend the use of alternative treatment methods, such as telemental health; increasing mental health reimbursement rates for rural areas; modifying licensing requirements in order to remove geographic practice barriers that prevent mental health providers from participating in telemental health services; and educating civilian network mental health providers about our military culture.

Wounded, Ill, and Injured Families

When designing support for the wounded, ill, and injured in today's conflict, our Association believes the government, especially DOD, VA, and State agencies, must take a more inclusive view of military and veterans' families. Those who have the responsibility to care for the wounded service member must also consider the needs of the spouse, children, parents of single service members, siblings, and other caregivers. Family members are an integral part of the health care team and recovery process.

Caregivers need to be recognized for the important role they play in the care of their loved one. Without them, the quality of life of the wounded service members and veterans, such as physical, psycho-social, and mental health, would be significantly compromised. They are viewed as an invaluable resource to DOD and VA health care providers because they tend to the needs of the service members and the veterans on a regular basis. And, their daily involvement saves DOD, VA, and State agency health care dollars in the long run. Their long-term psychological care needs must be addressed. Caregivers of the severely wounded, ill, and injured services members who are now veterans have a long road ahead of them. In order to perform their job well, they will require access to mental health services.

The Vet Centers are an available resource for veterans' families providing adjustment, vocational, and family and marriage counseling. The VA health care facilities and the community-based outpatient clinics (CBOCs) have a ready supply of mental health providers, yet regulations restrict their ability to provide mental health care to veterans' families unless they meet strict standards. Unfortunately, this provision hits the veteran's caregiver the hardest. We recommend DOD partner with the VA to allow military families access to mental health services. We also believe Congress should require the VA, through its Vet Centers and health care facilities to develop a holistic approach to care by including families when providing mental health counseling and programs to the wounded, ill, or injured service member or veteran.

The Defense Health Board has recommended DOD include military families in its mental health studies. We agree. We encourage Congress to direct DOD to include families in its Psychological Health Support survey; perform a pre and post-deployment mental health screening on family members (similar to the PDHA and PDHRA currently being done for service members); and sponsor a longitudinal study, similar to DOD's Millennium Cohort Study, in order to get a better understanding of the long-term effects of war on our military families.

Children

Our Association is concerned about the impact deployment and/or the injury of the service member is having on our most vulnerable population, children of our military and veterans. Multiple deployments are creating layers of stressors, which families are experiencing at different stages. Teens especially carry a burden of care they are reluctant to share with the non-deployed parent in order to not "rock the boat." They are often encumbered by the feeling of trying to keep the family going, along with anger over changes in their schedules, increased responsibility, and fear for their deployed parent. Children of the National Guard and Reserve members face unique challenges since there are no military installations for them to utilize. They find themselves "suddenly military" without resources to support them. School systems are generally unaware of this change in focus within these family units and are ill prepared to lookout for potential problems caused by these deployments or when an injury occurs. Also vulnerable, are children who have disabilities that are further complicated by deployment and subsequent injury of the service members. Their families find stress can be overwhelming, but are afraid to reach out for assistance for fear of retribution to the service member's career. They often choose not to seek care for themselves or their families.

The impact of the wounded, ill, and injured on children is often overlooked and underestimated. Military children experience a metaphorical death of the parent they once knew and must make many adjustments as their parent recovers. Many families relocate to be near the treating Military Treatment Facility (MTF) or the VA Polytrauma Center in order to make the rehabilitation process more successful. As the spouse focuses on the rehabilitation and recovery, older children take on new roles. They may become the caregivers for other siblings, as well as for the wounded parent. Many spouses send their children to stay with neighbors or extended family members, as they tend to their wounded, ill, and injured spouse. Children get shuffled from place to place until they can be reunited with their parents. Once reunited, they must adapt to the parent's new injury and living with the "new normal."

We encourage partnerships between government agencies, DOD, VA and State agencies and recommend they reach out to those private and non-governmental organizations who are experts on children and adolescents. They could identify and incorporate best practices in the prevention and treatment of mental health issues affecting our military children. We must remember to focus on preventative care upstream, while still in the active duty phase, in order to have a solid family unit as they head into the veteran phase of their lives. School systems must become more involved in establishing and providing supportive services for our Nation's children.

Caregivers

In the 7th year of the Global War on Terror, care for the caregivers must become a priority. Our Association hears from the senior officer and enlisted spouses who are so often called upon to be the strength for others. We hear from the health care providers, educators, rear detachment staff, chaplains, and counselors who are working long hours to assist service members and their families. They tell us they are overburdened, burnt out, and need time to recharge so they can continue to serve these families. These caregivers must be afforded respite care; given emotional support through their command structure; and, be provided effective family programs.

Education

The DOD, VA, and State agencies must educate their health care and mental health professionals of the effects of mild Traumatic Brain Injury (mTBI) in order to help accurately diagnose and treat the service member's condition. They must be able to deal with polytrauma—Post-Traumatic Stress Disorder (PTSD) in combination with multiple physical injuries. We need more education for civilian health care providers on how to identify signs and symptoms of mild TBI and PTSD.

The families of service members and veterans must be educated about the effects of mTBI and PTSD in order to help accurately diagnose and treat the service member/veteran's condition. These families are on the "sharp end of the spear" and are

more likely to pick up on changes attributed to either condition and relay this information to their health care providers.

Reintegration Programs

Reintegration programs become a key ingredient in the family's success. Our Association believes we need to focus on treating the whole family with programs offering readjustment information; education on identifying mental health, substance abuse, suicide, and traumatic brain injury; and encouraging them to seek assistance when having financial, relationship, legal, and occupational difficulties.

Successful return and reunion programs will require attention over the long term, as well as a strong partnership at all levels between the various mental health arms of DOD, VA, and State agencies.

DOD and VA need to provide family and individual counseling to address these unique issues. Opportunities for the entire family and for the couple to reconnect and bond must also be provided. Our Association has recognized this need and is piloting two family retreats in the National Parks to promote family reintegration following deployment.

We recommend an extended outreach program to service members, veterans, and their families of available psychological health resources, such as DOD, VA, and State agencies.

We encourage Congress to request DOD to include families in its Psychological Health Support survey; perform a pre and post-deployment mental health screening on family members (similar to the PDHA and PDHRA currently being done for service members); and sponsor a longitudinal study, similar to DOD's Millennium Cohort Study, in order to get a better understanding of the long-term effects of war on our military families.

We recommend the use of alternative treatment methods, such as telemental health; increasing mental health reimbursement rates for rural areas; modifying licensing requirements in order to remove geographic practice barriers that prevent mental health providers from participating in telemental health services; and educating civilian network mental health providers about our military culture.

Caregivers must be afforded respite care; given emotional support through their command structure; and, be provided effective family programs.

Wounded Service Members Have Wounded Families

Our Association asserts that behind every wounded service member and veteran is a wounded family. It is our belief the government, especially the DOD and VA, must take a more inclusive view of military and veterans' families. Those who have the responsibility to care for the wounded, ill, and injured service member must also consider the needs of the spouse, children, parents of single service members and their siblings, and the caregivers. We appreciate the inclusion in the fiscal year 2008 NDAA Wounded Warrior provision for health care services to be provided by the DOD and VA for family members. DOD and VA need to think proactively as a team and one system, rather than separately; and addressing problems and implementing initiatives upstream while the service member is still on active duty status.

Reintegration programs become a key ingredient in the family's success. In the spring of 2008, our Association held a focus group composed of wounded service members and their families to learn more about issues affecting them. Families find themselves having to redefine their roles following the injury of the service member. They must learn how to parent and become a spouse/lover with an injury. Each member needs to understand the unique aspects the injury brings to the family unit. Parenting from a wheelchair brings a whole new challenge, especially when dealing with teenagers. Parents need opportunities to get together with other parents who are in similar situations and share their experiences and successful coping methods. Our Association believes we need to focus on treating the whole family with programs offering skill based training for coping, intervention, resiliency, and overcoming adversities. Injury interrupts the normal cycle of deployment and the reintegration process. We must provide opportunities for the entire family and for the couple to reconnect and bond, especially during the rehabilitation and recovery phases. We piloted a Operation Purple® Healing Adventures camp to help wounded service members and their families learn to play again as a family and plan one more in the summer of 2009.

Brooke Army Medical Center (BAMC) has recognized a need to support these families by expanding in terms of guesthouses co-located within the hospital grounds and a family reintegration program for their Warrior Transition Unit. The on-base school system is also sensitive to issues surrounding these children. A warm, welcoming family support center located in guest housing serves as a sanctuary for family members. The DOD and VA could benefit from looking at successful pro-

grams like BAMC's which has found a way to embrace the family unit during this difficult time.

Transitioning for the Wounded and Their Families

Transitions can be especially problematic for wounded, ill, and injured service members, veterans, and their families. The DOD and the VA health care systems, along with State agency involvement, should alleviate, not heighten these concerns. They should provide for coordination of care, starting when the family is notified that the service member has been wounded and ending with the DOD, VA, and State agencies working together, creating a seamless transition, as the wounded service member transfers between the two agencies' health care systems and, eventually, from active duty status to veteran status.

Transition of health care coverage for our wounded, ill, and injured and their family members is a concern of our Association. These service members and families desperately need a health care bridge as they deal with the after effects of the injury and possible reduction in their family income. We have created two proposals. Service members who are medically retired and their families should be treated as active duty for TRICARE fee and eligibility purposes for 3 years following medical retirement. This proposal will allow the family not to pay premiums and be eligible for certain programs offered to active duty, such as ECHO for 3 years. Following that period, they would pay TRICARE premiums at the rate for retirees. Service members medically discharged from service and their family members should be allowed to continue for 1 year as active duty for TRICARE and then start the Continued Health Care Benefit Program (CHCBP) if needed.

Caregivers

Caregivers need to be recognized for the important role they play in the care of their loved one. The VA has made a strong effort in supporting veterans' caregivers. The DOD should follow suit and expand their definition. Caregivers of the severely wounded, ill, and injured services members have a long road ahead of them. In order to perform their job well, they must be given the skills to be successful. This will require the caregiver to be trained through a standardized, certified program, and appropriately compensated for the care they provide. The time to implement these programs is while the service member is still on active duty status.

Our Association proposes that new types of financial compensation be established for caregivers of injured service members and veterans that could begin while the hospitalized service member is still on active duty and continue throughout the transition to care under the VA. This compensation should recognize the types of medical and non-medical care services provided by the caregiver, travel to appointments and coordinating with providers, and the severity of injury. It should also take into account the changing levels of service provided by the caregiver as the veteran's condition improves or diminishes or needs for medical treatment changes. These needs would have to be assessed quickly with little time delay in order to provide the correct amount of compensation. The caregiver should be paid directly for their services, but the compensation should be linked to training and certification paid for by the VA and transferable to employment in the civilian sector if the care is no longer needed by the service member. Our Association looks forward to discussing details of implementing such a plan with Members of this Subcommittee.

Consideration should also be given to creating innovative ways to meet the health care and insurance needs of the caregiver, with an option to include their family. Perhaps, caregivers of severely injured service members or veterans can be given the option of buying health insurance through the Federal Employees Health Benefit Program or through enrollment in CHAMPVA. A mechanism should also be established to assist caregivers who are forced out of the work force to save for their retirements, for example, through the Federal Thrift Savings Plan.

There must be a provision for transition for the caregiver if the caregiver's services are no longer needed, chooses to no longer participate, or is asked by the veteran to no longer provide services. The caregiver should still be able to maintain health care coverage for 1 year. Compensation would discontinue following the end of services/care provided by the caregiver.

The VA currently has eight caregiver assistance pilot programs to expand and improve health care education and provide needed training and resources for caregivers who assist disabled and aging veterans in their homes. DOD should evaluate these pilot programs to determine whether to adopt them for themselves. Caregivers' responsibilities start while the service member is still on active duty.

Relocation Allowance

Active Duty service members and their spouses qualify through the DOD for military orders to move their household goods (known as a Permanent Change of Station (PCS)) when they leave the military service. Medically retired service members are given a final PCS move. Medically retired married service members are allowed to move their family; however, medically retired single service members only qualify for moving their own personal goods.

The National Military Family Association is requesting the ability for medically retired single service members to be allowed the opportunity to have their caregiver's household goods moved as a part of the medical retired single service member's PCS move. This should be allowed for the qualified caregiver of the wounded service member and the caregiver's family (if warranted), such as a sibling who is married with children or mom and dad. This would allow for the entire caregiver's family to move, not just the caregiver. The reason for the move is to allow the medically retired single service member the opportunity to relocate with their caregiver to an area offering the best medical care, rather than the current option that only allows for the medically retired single service member to move their belongings to where the caregiver currently resides. The current option may not be ideal because the area in which the caregiver lives may not be able to provide all the health care services required for treating and caring for the medically retired service member. Instead of trying to create the services in the area, a better solution may be to allow the medically retired service member, their caregiver, and the caregiver's family to relocate to an area where services already exist.

The decision on where to relocate for optimum care should be made with the Federal Recovery Coordinator (case manager), the service member's medical physician, the service member, and the caregiver. All aspects of care for the medically retired service member and their caregiver shall be considered. These include a holistic examination of the medically retired service member, the caregiver, and the caregiver's family for, but not limited to, their needs and opportunities for health care, employment, transportation, and education. The priority for the relocation should be where the best quality of services is readily available for the medically retired service member and his/her caregiver.

The consideration for a temporary partial shipment of caregiver's household goods may also be allowed, if deemed necessary by the case management team.

Provide transitioning wounded, ill and injured service members and their families a bridge of extended active duty TRICARE eligibility for 3 years, comparable to the benefit for surviving spouses.

Caregivers of the wounded, ill and injured must be provided with opportunities for training, compensation and other support programs because of the important role they play in the successful rehabilitation and care of the service member.

Service members medically discharged from service and their family members shall be allowed to continue for 1 year as active duty for TRICARE and then start the Continued Health Care Benefit Program (CHCBP) if needed.

Senior Oversight Committee

Our Association is appreciative of the provision in the fiscal year 2009 NDAA continuing the DOD/VA Senior Oversight Committee (SOC) for an additional year. We understand a permanent structure is in the process of being established and manned. We urge Congress to put a mechanism in place to continue to monitor DOD and VA's partnership initiatives for our wounded, ill, and injured service members and their families, while this organization is being created.

The National Military Family Association encourages the Armed Service Committee along with the Veterans' Affairs Committee to talk on these important issues. We can no longer be content on focusing on each agency separately because this population moves too frequently between the two agencies, especially our wounded, ill, and injured service members and their families.

We would like to thank you again for the opportunity to provide information on the health care needs for the service members, veterans, and their families. Military families support the Nation's military missions. The least their country can do is make sure service members, veterans, and their families have consistent access to high quality mental health care in the DOD, VA, and within network civilian health care systems. Wounded service members and veterans have wounded families. The caregiver must be supported by providing access to quality health care and mental health services, and assistance in navigating the health care systems. The system should provide coordination of care with DOD, VA, and State agencies working together to create a seamless transition. We ask Congress to assist in meeting that responsibility.

FAMILY TRANSITIONS

Our Association will promote policies and access to programs providing training and support for families during the many transitions they experience.

Survivors

In the past year, the Services have been focusing on outreach to surviving families. In particular, the Army's SOS (Survivor Outreach Services) program makes an effort to remind these families that they are not forgotten. DOD and the VA must work together to ensure surviving spouses and their children can receive the mental health services they need, through all of VA's venues. New legislative language governing the TRICARE behavioral health benefit may also be needed to allow TRICARE coverage of bereavement or grief counseling. The goal is the right care at the right time for optimum treatment effect. DOD and the VA need to better coordinate their mental health services for survivors and their children.

We ask that the active duty TRICARE Dental benefit be extended to surviving children to mirror the active duty TRICARE medical benefit to which they are now eligible. We also ask that eligibility be expanded to those Reserve Component family members who had not been enrolled in the active duty TRICARE Dental benefit prior to the service member's death.

Our Association recommends that surviving children be allowed to remain in the TRICARE Dental Program until they age out of TRICARE eligibility and that eligibility be expanded to those Reserve Component survivors who had not been enrolled prior to the service member's death. We also recommend that grief counseling be more readily available to survivors.

Our Association still believes the benefit change that will provide the most significant long-term advantage to the financial security of all surviving families would be to end the Dependency and Indemnity Compensation (DIC) offset to the Survivor Benefit Plan (SBP). Ending this offset would correct an inequity that has existed for many years. Each payment serves a different purpose. The DIC is a special indemnity (compensation or insurance) payment paid by the VA to the survivor when the service member's service causes his or her death. The SBP annuity, paid by DOD, reflects the longevity of the service of the military member. It is ordinarily calculated at 55 percent of retired pay. Military retirees who elect SBP pay a portion of their retired pay to ensure that their family has a guaranteed income should the retiree die. If that retiree dies due to a service connected disability, their survivor becomes eligible for DIC.

Surviving active duty spouses can make several choices, dependent upon their circumstances and the ages of their children. Because SBP is offset by the DIC payment, the spouse may choose to waive this benefit and select the "child only" option. In this scenario, the spouse would receive the DIC payment and the children would receive the full SBP amount until each child turns 18 (23 if in college), as well as the individual child DIC until each child turns 18 (23 if in college). Once the children have left the house, this choice currently leaves the spouse with an annual income of \$13,848, a significant drop in income from what the family had been earning while the service member was alive and on active duty. The percentage of loss is even greater for survivors whose service members served longer. Those who give their lives for their country deserve more fair compensation for their surviving spouses.

We appreciate the establishment of a special survivor indemnity allowance as a first step in the process to eliminate the DIC offset to SBP.

We believe several other adjustments could be made to the Survivor Benefit Plan. Allowing payment of the SBP benefits into a Special Needs Trust in cases of disabled beneficiaries will preserve their eligibility for income based support programs. The government should be able to switch SBP payments to children if a surviving spouse is convicted of complicity in the member's death.

We ask the DIC offset to SBP be eliminated to recognize the length of commitment and service of the career service member and spouse. We also request that SBP benefits be allowed to be paid to a Special Needs Trust in cases of disabled family members.

Spouse Employment, Unemployment

Our Association appreciates the expansion of the Military Spouse Career Advancement Accounts. We look forward to the rollout and full implementation of the expanded program and hope that the definition of "portable careers" is broad enough to support the diverse military spouse population. To further spouse employment opportunities, we recommend an expansion to the Workforce Opportunity Tax Credit for employers who hire spouses of active duty and Reserve component service members, and to provide tax credits to military spouses to offset the expense in ob-

taining career licenses and certifications when service members are relocated to a new duty station within a different State.

Families on the Move

Our Association is concerned about the timely implementation of the Defense Personal Property Program, formerly titled "Families First." Worldwide rollout is still incomplete and it is unclear if customer satisfaction surveys are incorporated into the carrier ranking process. Full Replacement Value has been rolled out, but is handled differently by each carrier. Families are confused about how and where to file claims. Congressional oversight is needed to press for implementation of this program and deliver the best possible service to our families.

Our Association is grateful for the addition of the weight allowance for spousal professional materials. We ask that Congress broaden the language to require the Service Secretaries to implement this much needed benefit.

A PCS move to an overseas location can be especially stressful. Military families are faced with the prospect of being thousands of miles from extended family and living in a foreign culture. At many overseas locations, there are insufficient numbers of government quarters resulting in the requirement to live on the local economy away from the installation. Family members in these situations can feel extremely isolated; for some the only connection to anything familiar is the local military installation. Unfortunately, current law permits the shipment of only one vehicle to an overseas location, including Alaska and Hawaii. Since most families today have two vehicles, they sell one of the vehicles.

Upon arriving at the new duty station, the service member requires transportation to and from the place of duty leaving the military spouse and family members at home without transportation. This lack of transportation limits the ability of spouses to secure employment and the ability of children to participate in extra curricular activities. While the purchase of a second vehicle alleviates these issues, it also results in significant expense while the family is already absorbing other costs associated with a move. Simply permitting the shipment of a second vehicle at government expense could alleviate this expense and acknowledge the needs of today's military family.

Our Association requests that Congress ease the burden of military PCS moves on military families by pressing for the full implementation of the Defense Personal Property Program and by authorizing the shipment of a second vehicle for families assigned to an overseas location on accompanied tours.

Education of Military Children

While our Association remains appreciative for the additional funding you provide to civilian school districts educating large numbers of military children, DOD Impact Aid still remains under-funded. We urge Congress to increase funding for schools educating large numbers of military children to \$60 million for fiscal year 2010. We also encourage you to make the additional funding for school districts experiencing growth available to all school districts experiencing significant enrollment increases and not just to those districts meeting the current 20 percent enrollment threshold. The arrival of several hundred military students can be financially devastating to any school district, regardless of how many of those students the district already serves. This supplement to Impact Aid is vital to school districts that have shouldered the burden of ensuring military children receive a quality education despite the stresses of military life.

As increased numbers of military families move into new communities due to Global Rebasing and BRAC, their housing needs are being met further and further away from the installation. Thus, military children may be attending school in districts whose familiarity with the military lifestyle may be limited. Educating large numbers of military children will put an added burden on schools already hard-pressed to meet the needs of their current populations. With over 70,000 military families returning to the United States, at the same time the Army is moving over one third of its soldiers within the United States, we urge Congress to authorize an increase in this level of funding until BRAC and Global Rebasing moves are completed.

Although it does not fall under the purview of this Subcommittee, we thank Congress for passing the Higher Education Opportunity Act of 2008, which contained many new provisions affecting military families. Chief among them was a provision to expand in-State tuition eligibility for military service members and their families. Under this provision, colleges and universities receiving Federal funding under the act will be required to offer in-State tuition rates for active duty service members and their families and provide continuity of in-State rates if the service member receives orders for an assignment out of State. However, family members have to be

currently enrolled in order to be eligible for continuity of in-State tuition. Our Association is concerned that this would preclude a senior in high school from receiving in-State tuition rates if his or her family PCS's prior to matriculation. We urge Congress to amend this provision.

Our Association congratulates the DOD Office of Personnel and Readiness and the Council of State Governments (CSG) for drafting the Interstate Compact on Educational Opportunity for Military Children and for spearheading the adoption of this important legislation. Designed to alleviate many of the transition issues facing military children, the Compact has now been adopted in 20 States. In addition, Hawaii has a Compact bill awaiting their Governor's signature, and 11 other States are working active legislation this year. With 10 States needed to enact the Compact, the first meeting of the Interstate Commission on Educational Opportunity for Military Children met in October 2008. Our Association is pleased to have been a member of both the Advisory Group and Drafting Team, and has been working actively to support the adoption of this Compact, which will greatly enhance the quality of life of our military children and families.

We ask Congress to increase the DOD supplement to Impact Aid to \$60 million to help districts better meet the additional demands caused by large numbers of military children, deployment-related issues, and the effects of military programs and policies. We also ask Congress to allow all school districts experiencing a significant growth in their military student population due to BRAC, Global Rebasing, or installation housing changes to be eligible for the additional funding currently available only to districts with an enrollment of at least 20 percent military children.

Spouse Education

Since 2004, our Association has been fortunate to sponsor our Joanne Holbrook Patton Military Spouse Scholarship Program, with the generosity of donors who wish to help military families. In 2007, we published *Education and the Military Spouse: The Long Road to Success*, based on spouse scholarship applicant survey responses, identifying education issues and barriers specific to military spouses. The entire report may be found at www.nmfa.org/education.

The survey found military spouses, like their service members and the military as a whole, value education and set education goals for themselves. Yet, military spouses often feel their options are limited. Deployments, the shortage of affordable and quality child care, frequent moves, the lack of educational benefits and tuition assistance for tuition are discouraging. For military spouses, the total cost of obtaining a degree can be significantly higher than the cost for civilian students. The unique circumstances that accompany the military lifestyle have significant negative impacts upon a spouse's ability to remain continuously enrolled in an educational program. Military spouses often take longer than the expected time to complete their degrees. More than one-third of those surveyed have been working toward their goal for 5 years or more. The report offers recommendations for solutions that Congress could provide:

- Ensuring installation education centers have the funding necessary to support spouse education programs and initiatives;
- Providing additional child care funding to support child care needs of military spouse-scholars;
- Helping to defray additional costs incurred by military spouses who ultimately spend more than civilian counterparts to obtain a degree.

Our Association wishes to thank Congress for passing the Post 9/11 G.I. Bill for service members and for including transferability of the benefit to spouses and children. We will continue to monitor the implementation of this benefit, and hope to see the regulations posted soon.

Military Families—Our Nation's Families

We thank you for your support of our service members and their families and we urge you to remember their service as you work to resolve the many issues facing our country. Military families are our Nation's families. They serve with pride, honor, and quiet dedication. Since the beginning of the war, government agencies, concerned citizens and private organizations have stepped in to help. This increased support has made a difference for many service members and families, yet, some of these efforts overlap while others are ineffective. In our testimony, we believe we have identified improvements and additions that can be made to already successful programs while introducing policy or legislative changes that address the ever changing needs of our military population. Working together, we can improve the quality of life for all these families.

Chairman INOUE. Our next witness represents the Fleet Reserve Association: Mr. John Davis, director of legislative programs. Mr. Davis.

**STATEMENT OF JOHN R. DAVIS, DIRECTOR, LEGISLATIVE PROGRAMS,
FLEET RESERVE ASSOCIATION**

Mr. DAVIS. Good morning, Chairman Inouye. My name is John Davis, and I want to thank you for the opportunity to express FRA's views today.

The association also wants to thank the Obama administration for adequately funding healthcare without a proposed TRICARE fee increase.

FRA believes that raising TRICARE fees during the war on terror would send the wrong message, and that could impact recruitment and retention. A recent FRA survey indicates that more than 90 percent of all active duty, retired, and veteran respondents cited healthcare as their top quality-of-life benefit. That is why FRA supports the Military Retirees Health Care Protection Act, H.R. 816, that would prohibit increasing TRICARE fees unless approved by Congress.

FRA welcomes the 10-percent increase in funding to provide case managers and mental health counselors to heal and rehabilitate our wounded warriors. Adequate funding is necessary for a seamless transition and quality services for wounded warriors, especially those with traumatic brain injury (TBI) and post traumatic stress disorder (PTSD).

FRA is also grateful for the administration calling for improvements to concurrent receipt. And it's also mentioned in the budget resolution.

The offset for chapter 61 retirees would be phased out over 5 years. FRA supports legislation authorizing the immediate payment of concurrent receipt of full military retired pay and veterans disability compensation for all disabled retirees. And this improvement is a big step toward achieving that goal. And if authorized, we urge the subcommittee to provide funding.

FRA strongly supports the funding of the 3.4 percent pay increase for active duty pay, which is one-half of 1 percent above the administration's request. Pay increases, in recent years, have contributed to improved morale, readiness, and retention. Better pay reduces family stress, especially for junior enlisted. Military pay and benefits must reflect the fact that military service is very different from work in the private sector. FRA strongly supports the fully funded family readiness program and stands foursquare in support of our Nation's reservists. Due to the demands of the war on terror, Reserve units are now increasingly being mobilized to augment active duty components. As a result of these operational demands, the Reserve component is no longer a strategic reserve, but is now an operational reserve. And that is an integral part of the total force. That is why, if authorized, FRA supports funding for retroactive eligibility for early retirement benefit, to include reservists who have supported contingency operations since September 11, 2001.

The 2008 Defense Authorization Act reduced the Reserve retirement age by 3 months for every 90 days of active duty, but this

only applies to the service after the effective date of the legislation, which is January 28, 2008, and leaves out more than 600,000 reservists mobilized since 9/11.

Thank you again for giving me this opportunity to speak.
Chairman INOUE. Thank you very much, Mr. Davis.
[The statement follows:]

PREPARED STATEMENT OF JOHN R. DAVIS

OVERVIEW

Mr. Chairman, ensuring that wounded troops, their families and the survivors of those killed in action are cared for by a grateful Nation remains an overriding priority for the Fleet Reserve Association (FRA). The Association thanks you and the entire Subcommittee for your strong and continuing support of funding for the Department of Defense (DOD) portion of the Wounded Warrior Assistance Program. Another top FRA priority is full funding of the Defense Health Program (DHP) to ensure quality care for active duty, retirees, Reservists, and their families.

THE FISCAL YEAR 2010 BUDGET

The DOD request totals \$663.8 billion for fiscal year 2010, which is a base budget increase of \$20.5 billion representing a 4-percent increase over fiscal year 2009 (2.1 percent in real growth). It is noteworthy that for the first time in 4 years, the proposed budget fully funds military health care programs without calling for a TRICARE fee increase. FRA appreciates the reluctance of the new administration to shift health care costs to beneficiaries, and the inclusion of additional money to make improvements in current receipt to expand the number of disabled military retirees receiving both their full military retired pay and VA disability compensation. The budget also calls for a 2.9-percent active duty pay increase that equals the Employment Cost Index (ECI), \$1.1 billion to fund military housing and support programs for service members and their families, and \$3.3 billion to support injured service members in their recovery, rehabilitation, and reintegration.

As Operation Iraqi Freedom ends and troops depart from Iraq, some will be urging reductions in spending, despite the need to bolster efforts in Afghanistan and other operational commitments around the world. FRA understands the budgetary concerns generated by the current economic slowdown but advocates that cutting the DOD budget during the Global War on Terror would be short sighted and that America needs a Defense budget that will provide adequate spending levels for both "benefits and bullets."

This statement lists the concerns of our members, keeping in mind that the Association's primary goal is to endorse any positive safety programs, rewards, quality of life improvements that support members of the Uniform Services, particularly those serving in hostile areas, and their families, and survivors.

WOUNDED WARRIORS

A two-front war, a lengthy occupation and repeated deployments for many service members has put a strain on the DOD/VA medical system that treats our wounded warriors. The system is impacted not only by volume but by the complexity of injuries and the military has shown that it is woefully inadequate in recognizing and treating cases of Traumatic Brain Injury (TBI) and Post Traumatic Stress Disorder (PTSD).

In recent years substantial progress has been made in the treatment of the Nation's wounded warriors. The fiscal year 2010 budget provides \$3.3 billion to support injured service members in their recovery and rehabilitation and FRA appreciates the \$300 million increase over fiscal year 2009 for mental health programs which includes additional case managers, and mental health counselors. The budget also provides for an expedited Disability Evaluation System (DES), and construction of 12 additional wounded warrior transition complexes. The budget also continues implementation of the Walter Reed National Military Medical Center, Bethesda, Maryland, DeWitt Army Community Hospital, Fort Belvoir, Virginia, and BRAC projects within the national capitol region. More than \$400 million is targeted for medical research for Traumatic Brain Injury (TBI) and other casualty treatment issues. FRA advocates for resources to support an effective delivery system between DOD and VA to ensure seamless transition and quality services for wounded personnel, particularly those suffering from PTSD and TBI.

Adequate funding is essential to providing pre- and post-deployment screenings for mental and physical injuries, and if authorized compensation, training, and health care coverage for family members forced into service as full-time caregivers for the severely wounded warriors. Further, the War on Terror has seen an increasing percentage of women serving in the military (15 percent in 2009 as compared to 4.4 percent in 1988) and combined with the asymmetrical nature of the conflict will undoubtedly cause an increasing number of women casualties that will place unique demands upon the military health care system requiring additional associated funding.

HEALTH CARE

Adequately funding health care benefits for all beneficiaries is part of the cost of defending our Nation and a recent FRA survey indicates that more than 90 percent of all active duty, retired, and veteran respondents and most Reserve participants cited health care as their top quality-of-life benefit. Accordingly, protecting and/or enhancing health care access for all beneficiaries is FRA's top 2009 legislative priority.

Health care costs both in the military and throughout society have continued to increase faster than the Consumer Price Index (CPI) making this a prime target for those wanting to cut the DOD budget. Many beneficiaries targeted in recent proposals to drastically increase health care fees are those who served prior to enactment of the recent and significant pay and benefit enhancements and receive significantly less in retired pay than those serving and retiring in the same pay grade with the same years of service today. They clearly recall promises made to them about the benefit of health care for life in return for a career, and many believe they are entitled to "free" health care for life based on the Government's past commitments.

For these reasons, FRA strongly supports "The Military Retirees' Health Care Protection Act" (H.R. 816) sponsored by Representatives Chet Edwards (TX) and Walter Jones (NC). The legislation would prohibit DOD from increasing TRICARE fees, specifying that the authority to increase TRICARE fees exists only in Congress.

DOD must continue to investigate and implement other TRICARE cost-saving options as an alternative to shifting costs to retiree beneficiaries. FRA notes progress in this area in expanding use of the mail order pharmacy program, Federal pricing for prescription drugs and a pilot program of preventative care for TRICARE beneficiaries under age 65, and elimination of co-pays for certain preventative services. The Association believes these efforts will prove beneficial in slowing military health care spending in the coming years.

Our Nation is at war and imposing higher health care costs on retirees would send a powerful negative message not only to retirees, but to those currently serving about the value of their service. The prospect of drastically higher health care fees for retirees is also a morale issue with the senior enlisted communities who view this as an erosion of their career benefits. Unlike private sector employees, military retirees have answered the call to serve, and most have done so under extremely difficult circumstances while separated from their families to defend the freedoms we enjoy today.

CONCURRENT RECEIPT

FRA appreciates a boost in compensation for benefiting disabled retirees in the new Administration's budget. The fiscal year 2010 budget includes funding for expansion of concurrent receipt of military retired pay and VA disability compensation to retirees who were medically retired from service (Chapter 61 Retirees). Under current law these benefits (CRDP) are offset by the amount of VA disability compensation. This offset would be phased-out over 5 years. FRA supports legislation authorizing the immediate payment of concurrent receipt of full military retired pay and veterans' disability compensation for all disabled retirees, and these improvements reflect a big step toward achieving this goal.

PROTECT PERSONNEL PROGRAMS

Active Duty Pay.—FRA strongly supports the authorization and funding of a 3.4 percent fiscal year 2010 pay increase which is consistent with past support of annual active duty pay increases that are at least 0.5 percent above the Employment Cost Index (ECI). The Association also supports targeted increases, as appropriate for mid-career and senior enlisted personnel to help close the remaining 2.9 percent pay gap between active duty and private sector pay.

Adequate and targeted pay increases authorized in recent years, particularly for middle grade and senior petty and noncommissioned officers, have contributed to

improved morale, readiness, and retention. Better pay reduces family stress, especially for junior enlisted and may reduce the need for military personnel use of short-term pay day loans unaware of the ruinous long-term impact of excessive interest rates. Military pay and benefits must reflect the fact that military service is very different from work in the private sector.

End Strength.—Adequate active duty and Reserves end strengths are essential to success in Operations Enduring Freedom (OEF) and Iraqi Freedom, and other commitments around the world. The fiscal year 2010 budget supports additional end strength for the Marine Corps (202,000) and halts Navy end strength reductions. The Association supports funding to support these proposals and also strongly supports funding for bonuses for service members with extended deployments.

FAMILY READINESS

FRA supports a fully funded, robust family readiness program which is crucial to overall readiness of our military, especially with the demands of frequent and extended deployments. Resource issues continue to plague basic installation support programs at a time when families are dealing with increased deployments, and they often are being asked to do without in other important areas.

The availability of child care is especially important when so much of the force is deployed and this program, along with other family readiness programs must be adequately funded in fiscal year 2010 and beyond.

BRAC and Rebasing.—Adequate resources are required to fund essential quality of life programs and services at bases impacted by the Base Realignment and Closure (BRAC) and rebasing initiatives. FRA is concerned about sustaining commissary access, MWR programs and other support for service members and their families particularly at installations most impacted by these actions. These include Guam, where a significant number of Marines and their families are being relocated from Okinawa. The shortage of funds is curtailing or closing some of the activities while the costs of participating in others have recently increased.

Family Housing.—The Association welcomes the \$200 million more for family housing, child care, and other support services over the fiscal year 2009 budget. Adequate military housing that's well maintained is critical to retention and morale.

Child and Youth Programs.—MCPON Rick West testified before the House Appropriations Subcommittee on Military Construction and Veterans Affairs in February 2009 that there is a need for more child care facilities since the Navy currently provides for only 72 percent of capacity while the goal is 80 percent. Access to child care is important and FRA urges Congress to authorize adequate funding for this important program.

RESERVE ISSUES

FRA stands foursquare in support of the Nation's Reservists. Due to the demands of the War on Terror, Reserve units are now increasingly being mobilized to augment active duty components. As a result of these operational demands, Reserve component is no longer a strategic Reserve but is now an operational Reserve that is an integral part of the total force. And because of these increasing demands on Reservists to perform multiple missions abroad over longer periods of time, it's essential to improve compensation and benefits to retain currently serving personnel and attract quality recruits.

Retirement.—If authorized, FRA supports funding retroactive eligibility for the early retirement benefit to include Reservists who have supported contingency operations since 9/11/2001 (S. 831/S. 644). The fiscal year 2008 Defense Authorization Act (H.R. 4986) reduces the Reserve retirement age (age 60) by 3 months for each cumulative 90-days ordered to active duty. The provision however only applies to service after the effective date of the legislation, and leaves out more than 600,000 Reservists mobilized since 9/11 for Afghanistan and Iraq and to respond to natural disasters like Hurricane Katrina. About 142,000 of them have been deployed multiple times in the past 6 years.

Family Support.—FRA supports resources to allow increased outreach to connect Reserve families with support programs. This includes increased funding for family readiness, especially for those geographically dispersed, not readily accessible to military installations, and inexperienced with the military. Unlike active duty families who often live near military facilities and support services, most Reserve families live in civilian communities where information and support is not readily available. Congressional hearing witnesses have indicated that many of the half million mobilized Guard and Reserve personnel have not received transition assistance services they and their families need to make a successful transition back to civilian life.

CONCLUSION

FRA is grateful for the opportunity to present the organization's views to this distinguished Subcommittee. The Association reiterates its profound gratitude for the extraordinary progress this Subcommittee, with outstanding staff support, has made in advancing a wide range of enhanced benefits and quality-of-life programs for all uniformed services personnel, retirees, their families and survivors. Thank you.

Chairman INOUE. I'd like to point out that, at this moment, several subcommittees are having their meetings or conferences. As a result, you can see that they're busy elsewhere. The vice chairman of this subcommittee had to go to the Energy Committee subcommittee, because he is the senior member there.

So, if I may, I'd like to call upon him for any remarks he may have.

STATEMENT OF SENATOR THAD COCHRAN

Senator COCHRAN. Mr. Chairman, thank you very much.

I'm pleased to be able to come by and join you in thanking these witnesses for preparing testimony, and giving us the benefit of your observations and experience and interest as we review the budget for this next fiscal year for the Department of Defense and related agencies.

Because of your experiences and your knowledge, we take what you say very seriously, and we will carefully review your statements and make sure that the subcommittee considers them as we proceed through our appropriations process for this next fiscal year.

Thank you.

Chairman INOUE. Thank you very much.

And next, the Chief Executive Officer of the Air Force Sergeants Association, Command Master Sergeant John McCauslin, of the Air Force.

**STATEMENT OF COMMAND MASTER SERGEANT JOHN R. McCAUSLIN,
UNITED STATES AIR FORCE (RET.), CHIEF EXECUTIVE OFFICER,
AIR FORCE SERGEANTS ASSOCIATION**

Sergeant McCAUSLIN. Good morning, Chairman Inouye, Senator Cochran.

On behalf of the 125,000 members of the Air Force Sergeants Association, I thank you for your continued support of our airmen and their families. I appreciate this opportunity to present our perspective of six important areas of priority for the fiscal year 2010 defense appropriations.

First, Air Force manpower and equipment. AFSA strongly believes the aging fleet of legacy Air Force systems, facilities, and equipment needs to be modernized. However, we also know the truly most valuable weapon that America has are those serving this Nation, especially the men and women wearing chevrons.

Operational demands, including deployments, have greatly increased to include intelligence activity, reconnaissance, and surveillance resources, the newest combatant command in Africa, the new Air Force Cyber Command, increased activity in Afghanistan and elsewhere overseas. Therefore, AFSA supports General Schwartz's request for more F-35 aircraft to do our job of preserving peace through deterrence.

Quality of life. Our Nation's military should not be considered a financial burden, but considered a national treasure, as they pre-

serve our national security for all that live here. If we expect to retain this precious resource, we simply must provide them and their families with decent and safe work centers, family housing and dormitories, healthcare, childcare, physical fitness centers, and recreational programs and facilities. Tremendous strides have been made to improve access to quality childcare and fitness centers on our military installations, and we're grateful to the Department of Defense and Congress for these collective efforts. However, there's still much work to be done. I have personally visited over 125 Air Force installations in the States and overseas these past 3 years, and I can assure you that the demand for adequate childcare and decent, affordable housing is a top priority among our airmen and their families' decision to stay or get out.

Veterans Affairs healthcare funding. AFSA believes that the healthcare portion of Veterans Affairs (VA) funding should be moved to mandatory annual spending. One of the Nation's highest obligations is their willingness to fully fund VA healthcare facilities and other programs for those who have served in the past or are serving today and will serve in the future.

On a positive note, we're particularly pleased by the tremendous support of Congress and this subcommittee to implement and fund wounded warrior programs across America.

The Air Force Sergeants Association applauds the actions of this subcommittee, other committees and subcommittees, to directly address the issue of unique health challenges faced by our women veterans. AFSA urges an increase to the VA budget so that they can appropriately care for these female veterans, now and in the future.

Regarding the educational benefits. The post-9/11 GI bill was a giant step forward, even though there are still some funding shortfalls being currently worked by Senator Webb's office, and we urge your subcommittee's support.

And finally, my final point concerns basic military pay and the tremendous pay gap, for these last 15 years, that you've helped us close. However, we still have serious problems in the junior enlisted. For example, enrollment in food stamps rose 25 percent in the military this last year alone. Our junior enlisted are all volunteers serving our Nation, yet thousands remain on food stamps.

In conclusion, this was a very brief presentation of our perspective for you. Our detailed, typed testimony has been personally delivered to your subcommittee staff for inclusion today.

Thank you very much.

Chairman INOUE. I thank you very much, Command Master Sergeant.

[The statement follows:]

PREPARED STATEMENT OF JOHN R. "DOC" MCCAUSLIN

Mr. Chairman and distinguished committee members, on behalf of the 125,000 members of the Air Force Sergeants Association, (AFSA), I thank you for your continued support of Airmen and their families. I appreciate this opportunity to present our perspective on priorities for the fiscal year 2010 defense appropriations.

The Air Force Sergeants Association (AFSA) represents Air Force Active Duty, Air National Guard, Air Force Reserve Command, including active, retired and veteran enlisted Airmen and their families. We are grateful for this subcommittee's efforts, and I cannot overstate the importance your work is to those serving this Nation.

You certainly have a daunting task before you and shoulder the tremendous responsibility as you wisely appropriate limited resources based on many factors. The degree of difficulty deciding what is funded isn't lost on us. It is significant.

AIR FORCE MANPOWER

AFSA strongly believes the aging fleet of legacy Air Force systems, facilities, and equipment needs to be modernized. However, we also know the truly most valuable weapon America has are those serving this great Nation, especially the men and women wearing chevrons of the enlisted grades.

We are deeply concerned about the recent Air Force drawdown of manpower in order to facilitate funding of system modernization and recapitalization but we greatly appreciate Congressional support that has reinstated some of that lost resource. The impact on Air Force ability to maintain the highest level of readiness was felt throughout the smaller force and it placed even more stress on our maintainers and security forces.

Although well-intended, that drawdown did not appear to have yielded the results envisioned. Some efficiency was gained as Airmen exercised innovation and continuous process improvement in order to accomplish more. The ole adage "do more with less" certainly and quickly became a reality.

Operational demands including deployments have increased over this same time—increased intelligence activity, reconnaissance and surveillance (ISR) resources, supporting the newest combatant command in Africa, the new Air Force Cyber Command based in Louisiana, increased activity in Afghanistan, and elsewhere overseas. The Air Force has increased its capabilities to ward off threats from the cyber domain and accomplishing the expanding workload associated with more inspections and maintenance to keep aging airframes mission ready.

With the appropriate recommendations from the Armed Service committees, we need to continue offering enlistment bonuses for those career fields that are physically demanding and highly skilled hard to fill jobs since 2001. With Congressional assistance, coupled with the hard work of our Air Force recruiters, we can continue to meet the required annual needs of new Combat Controllers, Para-rescue; Tactical Air Control Party; Explosive Ordnance Disposal; Security Forces; Linguist and Survival, Evasion, Resistance, and Escape Instructors. The amount offered at the initial enlistment ranges from \$2,000 to \$13,000, depending on the career specialty and terms of enlistment. These are currently the only fields offering enlistment bonuses for fiscal year 2009. Congress authorized hazardous duty allowance for all DOD firefighters, still today the services have not funded this program. The Air Force has over 3,000 firefighters who have been authorized this allowance by Congress but not funded.

AFSA believes a course correction is needed to avert severe adverse, long-term consequences that have already begun to affect morale, retention and combat readiness. We strongly support increasing and fully funding Air Force end strength to 332,800.

QUALITY OF LIFE

Our Nation's military should not be considered a financial burden but considered a national treasure as they preserve our national security for all that live here. If we expect to retain this precious resource, we must provide them and their families, with decent and safe work centers, family housing and dormitories, health care, child care and physical fitness centers, and recreational programs and facilities. These areas are a prime recruitment and retention incentive for our Airmen and their families. This directly impacts their desire to continue serving through multiple deployments and extended separations from family and friends.

This Nation devotes considerable resources to train and equip America's sons and daughters—a long term investment—and that same level of commitment should be reflected in the facilities and equipment they use and in where they live, work, and play.

We urge extreme caution in deferring these costs, especially at installations impacted by base realignment and closure (BRAC) decisions and mission-related shifts.

We applaud congressional support for military housing privatization initiatives. This has provided housing at a much faster pace than would have been possible through military construction alone.

AFSA urges Congress to fully fund appropriate accounts to ensure our installations eliminate substandard housing and work centers as quickly as possible. Those devoted to serving this Nation deserve better.

Tremendous strides have been made to improve access to quality child care and fitness centers on military installations, and we are grateful to the Department of

Defense and Congress for these collective efforts. However, there is still much more work to be done. I have personally visited over 125 Air Force installations in the states and overseas these past three years and I can assure you that the demand for adequate child care is a top priority among our Airmen and their families. The importance of this is directly reflected in the military members' family decision to remain in the service or exit.

VETERANS AFFAIRS HEALTHCARE FUNDING

AFSA believes that the healthcare portion of Veterans Affairs (VA) funding should be moved to mandatory annual spending. One of this Nation's highest obligations is the willingness to fully fund VA health care, facilities, and other programs for those who have served in the past, are serving today and will serve in the future.

There are many challenges facing veterans and we are encouraged by the initiatives centered on improving access for all veterans regardless of their VA designated category. Much more emphasis has to be focused on continuity of care and addressing the scars of war, some obvious and others not so, such as traumatic brain injuries and post traumatic stress disorders. We are particularly pleased by the tremendous support of Congress and this Committee to implement and fund Wounded Warrior programs across America. The outpouring of support from civilian communities and volunteer support has been truly amazing and very much appreciated.

WOMEN VETERANS HEALTHCARE ISSUES

The Air Force Sergeants Association applauds the actions of this committee, other committees and sub-committees to directly address the issue of the unique health challenges faced by women veterans. Between 1990 and 2000, the women veteran population increased by over 33 percent from 1.2 million to 1.6 million, and women now represent approximately 9 percent of the total veteran population. By next year, the VA estimates women veterans will comprise well over 10 percent of the veteran population. Currently women make up more than 20 percent of the active duty Air Force, Air National Guard 19 percent, and approximately 26 percent of the Air Force Reserves with thousands serving, or having already returned from serving, in Iraq, Afghanistan and other places a long way from our shores. AFSA urges an increase to the VA budget so they can appropriately care for these veterans now and in the future.

IMPACT AID

Military leaders often use the phrase, "we recruit the member, but we retain the family" when talking about quality of life and retention. Impact Aid is a program at the very core of this premise, because it directly affects the quality of educational programs provided to the children of military service members. In the Department of Defense Dependent Schools, there are over 79,000 children of our active duty force scattered all over the globe.

These children lead unique lives, fraught with challenges associated with frequent changes in schools, repeatedly being uprooted and having to readjust to new communities and friends. Many of these school children are in other countries in either the DODDS system or host nation schools that are not affected by Impact Aid funding. Worrying about what resources might or might not be available to school administrators should not be yet another concern heaped upon them and their parents.

The Impact Aid program provides Federal funding to public school districts in the United States with enrollment of students that have a parent who is a member of the Armed Forces, living on and/or assigned to a military installation.

The budget proposed by the administration is identical to the approved funding in 2009 in spite of increased financial obligations by the servicing local school districts. It has a completely detrimental effect on the military member and their decision to take that next assignment or opt to get out for the good of his or her family. The implicit statement in this action is military children are a lower priority than others in our Nation. We ask this committee to take the steps necessary to show our military men and women that the education of their children is as important as the next child.

AFSA is grateful that Congress funded Impact Aid with 1.265.7 million this past fiscal year. We strongly urge increased funding of this important family quality of life area that has a direct bearing on reenlistment rates and military families quality of life. We urge Congress restore this program to its rightful full funding.

BASIC MILITARY PAY

Tremendous progress has been made over the last 15+ years to close the gap between civilian sector and military compensation. AFSA appreciates these steady efforts and we encourage further steps. We believe linking pay raises to the employment cost index (ECI) is essential to recruiting and retaining the very best and brightest volunteers. AFSA urges the formula for determining annual pay increases to be ECI + 0.5 percent until the gap is completely eliminated. If we want to continue having an all volunteer force then we must continue on the path to close the aforementioned pay gap. Enrollment in food stamps rose 25 percent in the military last year. Our junior enlisted are all volunteers serving our Nation, yet they remain on monthly use of food stamps.

TRANSITION ASSISTANCE PROGRAMS

The all-volunteer military force repeatedly answers this Nation's call to duty and at the end of their tours of duty, whether a few years or after decades of service, all transition to civilian life.

Section 502 of the National Defense Authorization Act of Fiscal Year 1991 codified in sections 1141-1143 and 1144-1150 of title 10, United States Code, authorized comprehensive assistance benefits and services for separating service members and their spouses.

From that legislation, grew a valuable partnership between the Department of Labor and the Departments of Defense, Veterans Affairs and Homeland Security to provide Transition Assistance Program (TAP) employment workshops, VA Benefits Briefings and the Disabled Transition Assistance Program (DTAP). These programs and briefings provide service members valuable job placement assistance, training opportunities, and education on veteran benefits so they make informed choices about post-service opportunities.

We urge the committee to continue fully funding transition assistance programs at a level that serves our deserving volunteer veterans.

In addition, we ask you to support the initiatives in this Congress to pass legislation and fund a program that would create hiring preferences across the Federal Government for military spouses. Under current law, veterans of America's Armed Forces are entitled to preferences over others in competitive hiring positions in Federal Government. We believe the sacrifice of family members warrant this consideration as well.

VETERANS EDUCATION BENEFITS

There's no escaping the fact that college costs are rising. As the gap between the cost of an education and value of the MGIB widens, the significance of the benefit becomes less apparent. For that reason, the Post 9-11 GI Bill was a giant step forward. However, we must make sure that the new post 9-11 stays current at all times, so that this benefit will not lose its effectiveness when it comes to recruiting this Nation's finest young men and women into service. As a member of The Military Coalition and the Partnership for Veterans' Education, we strongly recommend you make the technical corrections to the Post 9-11 Veterans GI Bill that need to be done prior to its implementation this August 1st.

When young enlisted men and women opt for military service, they should know that this Nation will provide them with a no-cost, complete education, as do numerous companies in the private industry. We, as a Government, give them a one-time chance to enroll in the MGIB during basic training. The Department of Defense charges them \$1,200 to enroll at a time when they can least afford it. Service-members are even offered an opportunity to increase their education benefit by paying an additional \$600.

Now that the new Post 9-11 GI bill is coming on board for free, those who already paid for but who have not yet utilized the Montgomery GI Bill, will now have to wait until their chapter 33 entitlements are exhausted before they will be allowed to receive a refund on their Montgomery GI bill contributions. Under current law, those who have contributed the additional \$600, will not have that money returned to them at all.

This is unacceptable.

In good faith and trusting their Government-funded education will be provided in their best interest, service-members now find a program that does not require further investment in their education. However the Government will withhold the service-member's Montgomery GI Bill initial investment and not refund it. Our recommendation is that the service-members who chose to enroll in the chapter 33 benefit, and who bought the additional benefit for \$600, should be given their invest-

ment back or granted an additional 2 years of chapter 30 benefits to roll their \$600 education investment into the new education bill. The latest shortfall with the new bill is that all active duty will not receive the \$1,000 book allowance. We urge the appropriate committees to make the necessary corrections to ensure those on active duty receive this allowance.

Mr. Chairman, we appreciate your efforts and thank you for this opportunity to share our perspective. AFSA realizes the many difficult decisions this committee must make and hope the information presented today proves helpful. As always, the Air Force Sergeants Association remains ready to support you in matters of mutual concern.

Chairman INOUE. And our next witness represents the American Psychological Association, Dr. Gavin O'Shea.

STATEMENT OF GAVIN O'SHEA, Ph.D., ON BEHALF OF THE AMERICAN PSYCHOLOGICAL ASSOCIATION

Dr. O'SHEA. Good morning Mr. Chairman and members of the subcommittee. I'm Dr. Gavin O'Shea from HumRRO, the Human Resources Research Organization. I'm submitting testimony on behalf of the American Psychological Association, or APA, a scientific and professional organization of more than 148,000 psychologists.

For decades, clinical and research psychologists have used their unique and critical expertise to meet the needs of our military and its personnel, playing a vital role within the Department of Defense. My own military-oriented research and consulting focuses on organizational commitment, personnel selection, and leadership assessment.

This morning, I focus on APA's request that Congress reverse disturbing administration cuts to DOD's science and technology budget and maintain support for important behavioral sciences research on counterterrorism and counterintelligence operations.

In terms of the overall DOD S&T budget, the President's request for fiscal year 2010 represents a dramatic step backward for defense research. Defense S&T would fall from the current fiscal year 2009 level of \$13.6 billion to \$11.6 billion, with cuts across the board. With very few exceptions, all basic and applied research accounts within military labs would face cuts, some as high as 50 percent.

This is not the time to reduce support for research that is vital to our Nation's continued security in a global atmosphere of uncertainty and asymmetric threats. APA urges the subcommittee to reverse this cut to the critical defense science program by providing \$14 billion for defense S&T in fiscal year 2010.

Finally, APA is also concerned about the potential loss of invaluable human-centered research programs related to counterintelligence and counterterrorism due to the reorganization of the CIFA office into the Defense Intelligence Agency (DIA). APA urges the subcommittee to provide ongoing funding in fiscal year 2010 for DIA's behavioral research programs on cyberdefense, insider threat, credibility assessment, detection of deception, and other operational challenges.

As noted in a recent National Research Council report, "People are the heart of all military efforts. People operate the available weaponry and technology, and they constitute a complex military system composed of teams and groups at multiple levels. Scientific research on human behavior is crucial to the military, because it

provides knowledge about how people work together, and use weapons and technology to extend and amplify their forces.”

The defense research programs need your help more than ever this year, and we look forward to your support.

Thank you.

Chairman INOUE. I thank you very much, Dr. O’Shea.

[The statement follows:]

PREPARED STATEMENT OF GAVAN O’SHEA

The American Psychological Association (APA) is a scientific and professional organization of more than 148,000 psychologists and affiliates.

For decades, psychologists have played vital roles within the Department of Defense (DOD), as providers of clinical services to military personnel and their families, and as scientific researchers investigating mission-targeted issues ranging from airplane cockpit design to human intelligence-gathering. More than ever before, psychologists today bring unique and critical expertise to meeting the needs of our military and its personnel. APA’s testimony will focus on reversing Administration cuts to the overall DOD Science and Technology (S&T) budget and maintaining support for important behavioral sciences research within DOD.

DOD RESEARCH

“People are the heart of all military efforts. People operate the available weaponry and technology, and they constitute a complex military system composed of teams and groups at multiple levels. Scientific research on human behavior is crucial to the military because it provides knowledge about how people work together and use weapons and technology to extend and amplify their forces.”—Human Behavior in Military Contexts, Report of the National Research Council, 2008.

Just as a large number of psychologists provide high-quality clinical services to our military service members stateside and abroad, psychological scientists within DOD conduct cutting-edge, mission-specific research critical to national defense.

In terms of the overall DOD S&T budget, the President’s request for fiscal year 2010 represents a dramatic step backward for defense research. Defense S&T would fall from the estimated fiscal year 2009 level of \$13.6 billion to \$11.6 billion with cuts across the board. With the exception of a less-than-1-percent increase in Air Force basic (6.1) research and an increase in basic research in the Office of the Secretary of Defense, all military labs would see cuts to their 6.1, 6.2 and 6.3 accounts, some as high as 50 percent.

The President’s budget request for basic and applied research at DOD in fiscal year 2010 is \$11.6 billion, which represents a stunning decrease of almost \$2 billion or 15 percent from the enacted fiscal year 2009 level of \$13.6 billion. APA urges the Subcommittee to reverse this cut to the critical defense science program by providing a total of \$14 billion for Defense S&T in fiscal year 2010. This is not the time to cut back on research vital to our Nation’s continued security in a global atmosphere of uncertainty and asymmetric threats.

BEHAVIORAL RESEARCH WITHIN THE MILITARY SERVICE LABS AND DOD

Within DOD, the majority of behavioral, cognitive and social science is funded through the Army Research Institute (ARI) and Army Research Laboratory (ARL); the Office of Naval Research (ONR); and the Air Force Research Laboratory (AFRL), with additional, smaller human systems research programs funded through the Office of the Secretary of Defense, the Defense Advanced Research Projects Agency (DARPA), and DOD’s Defense Intelligence Agency (DIA).

The military service laboratories provide a stable, mission-oriented focus for science, conducting and sponsoring basic (6.1), applied/exploratory development (6.2) and advanced development (6.3) research. These three levels of research are roughly parallel to the military’s need to win a current war (through products in advanced development) while concurrently preparing for the next war (with technology “in the works”) and the war after next (by taking advantage of ideas emerging from basic research). All of the services fund human-related research in the broad categories of personnel, training and leader development; warfighter protection, sustainment and physical performance; and system interfaces and cognitive processing.

National Academies Report Calls for Doubling Behavioral Research

The 2008 National Academies report on Human Behavior in Military Contexts recommended doubling the current budgets for basic and applied behavioral and so-

cial science research “across the U.S. military research agencies.” It specifically called for enhanced research in six areas:

- intercultural competence;
- teams in complex environments;
- technology-based training;
- nonverbal behavior;
- emotion; and
- behavioral neurophysiology.

Behavioral and social science research programs eliminated from the mission labs due to cuts or flat funding are extremely unlikely to be picked up by industry, which focuses on short-term, profit-driven product development. Once the expertise is gone, there is absolutely no way to “catch up” when defense mission needs for critical human-oriented research develop. As DOD noted in its own Report to the Senate Appropriations Committee: “Military knowledge needs are not sufficiently like the needs of the private sector that retooling behavioral, cognitive and social science research carried out for other purposes can be expected to substitute for service-supported research, development, testing, and evaluation . . . our choice, therefore, is between paying for it ourselves and not having it.”

Defense Science Board Calls for Priority Research in Social and Behavioral Sciences: Mapping the Human Terrain

This emphasis on the importance of social and behavioral research within DOD is echoed by the Defense Science Board (DSB), an independent group of scientists and defense industry leaders whose charge is to advise the Secretary of Defense and the Chairman of the Joint Chiefs of Staff on “scientific, technical, manufacturing, acquisition process, and other matters of special interest to the Department of Defense.”

In its 2007 report on 21st Century Strategic Technology Vectors, the DSB identified a set of four operational capabilities and the “enabling technologies” needed to accomplish major future military missions (analogous to winning the Cold War in previous decades). In identifying these capabilities, DSB specifically noted that “the report defined technology broadly, to include tools enabled by the social sciences as well as the physical and life sciences.” Of the four priority capabilities and corresponding areas of research identified by the DSB for priority funding from DOD, the first was defined as “mapping the human terrain.”

MAINTAINING BEHAVIORAL RESEARCH ON COUNTERINTELLIGENCE

In addition to strengthening the DOD S&T account, and behavioral research within the military labs in particular, APA also is concerned with maintaining invaluable human-centered research programs formerly within DOD’s Counterintelligence Field Activity (CIFA) now that staff and programming have been transferred to the Defense Intelligence Agency. Within this DIA program, psychologists lead intramural and extramural research programs on counterintelligence issues ranging from models of “insider threat” to cybersecurity and detection of deception. These psychologists also consult with the three military services to translate findings from behavioral research directly into enhanced counterintelligence operations on the ground.

APA urges the Subcommittee to provide ongoing funding in fiscal year 2010 for counterintelligence behavioral science research programs at DIA in light of their direct support for military intelligence operations.

SUMMARY

On behalf of APA, I would like to express my appreciation for this opportunity to present testimony before the Subcommittee. Clearly, psychological scientists address a broad range of important issues and problems vital to our national security, with expertise in modeling behavior of individuals and groups, understanding and optimizing cognitive functioning, perceptual awareness, complex decision-making, stress resilience, recruitment and retention, and human-systems interactions. We urge you to support the men and women on the front lines by reversing another round of cuts to the overall defense S&T account and the human-oriented research projects within the military laboratories and CIFA.

As our Nation rises to meet the challenges of current engagements in Iraq and Afghanistan as well as other asymmetric threats and increased demand for homeland defense and infrastructure protection, enhanced battlespace awareness and warfighter protection are absolutely critical. Our ability to both foresee and immediately adapt to changing security environments will only become more vital over the next several decades. Accordingly, DOD must support basic Science and Tech-

nology (S&T) research on both the near-term readiness and modernization needs of the department and on the long-term future needs of the warfighter.

Below is suggested appropriations report language for fiscal year 2010 which would encourage the Department of Defense to fully fund its behavioral research programs within the military laboratories and protect counterintelligence research:

Department of Defense

Research, Development, Test, and Evaluation

Behavioral Research in the Military Service Laboratories.—The Committee notes the increased demands on our military personnel, including high operational tempo, leadership and training challenges, new and ever-changing stresses on decision-making and cognitive readiness, and complex human-technology interactions. To help address these issues vital to our national security, the Committee has provided increased funding to reverse cuts to psychological research through the military research laboratories: the Air Force Office of Scientific Research and Air Force Research Laboratory; the Army Research Institute and Army Research Laboratory; and the Office of Naval Research.

Human-Centered Counterintelligence Research.—The Committee urges the Department of Defense to continue supporting human-centered research, formerly coordinated through the Counterintelligence Field Activity, at the Defense Intelligence Agency.

Chairman INOUE. And now may I call upon the chair of the Extremities War Injuries Project Team of the American Academy of Orthopaedic Surgeons, Dr. Andrew Pollak.

STATEMENT OF ANDREW N. POLLAK, M.D., CHAIR, EXTREMITY WAR INJURIES AND DISASTER PREPAREDNESS PROJECT TEAM, AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS

Dr. POLLAK. Good morning, Senators. I'm Dr. Andy Pollak, and I chair the Extremity War Injuries Project Team for the American Academy of Orthopaedic Surgeons. During the day, I serve as chief of orthopaedic surgery at the Shock Trauma Center at the University of Maryland in Baltimore.

On behalf of military and civilian orthopaedic surgeons and researchers throughout the country, I take this opportunity to urge the subcommittee to continue to provide significant resources for peer-reviewed medical research in the area of extremity war injuries, injuries arising from trauma to the bones, joints, muscles, and tendons of the arms and legs.

We thank you for providing the DOD with the funding for this purpose since fiscal year 2006, including \$117 million total in fiscal year 2009, and we urge you to consider increasing funding for this program, in fiscal year 2010, to \$150 million.

Chairman Inouye, we know of your personal experience involving extremity trauma during war, and appreciate the fact that you have both personal and professional perspectives from which to address this issue.

We're very grateful for the dedicated work of Senators Harkin and Hutchison, both members of the subcommittee. They worked together in support of last year's appropriation, and have both expressed support for growing this program to \$150 million for fiscal year 2010.

Mr. Chairman, I've had the privilege of performing surgery in military facilities in Balad, Iraq, and Landstuhl, Germany. I can assure this subcommittee of the outstanding quality of trauma care being delivered by the military health system there. The problem facing surgeons emanates from limitations in medical knowledge and techniques in the management of these horrific injuries. We

need your help to advance the state of the art. We also need your help to improve our ability to treat consequences of severe injury to the extremities, such as arthritis, nerve damage, infection, and failure of bones to heal properly.

I'll keep the statistics short. Extremity injury is the most common type of injury sustained in battle, affecting over 80 percent of wounded warriors. Extremity wounds are the greatest source of expense related to hospitalization of wounded warriors after combat injury. Extremity war wounds are the greatest source of war-related disability expense for the military, expected to total \$1.8 billion, lifetime, for payments related to injuries sustained to American warriors in Iraq and Afghanistan, exclusive of costs associated with their medical care. And conditions analogous to arthritis were the most common reason for disability-related retirement from the Army in 2008.

The peer-reviewed orthopaedic research programs were designed to help military surgeons find new, limb-sparing techniques, with the goals of avoiding amputations, and preserving and restoring the function of injured extremities, limiting disability and suffering, and, whenever possible, allowing our warriors to return to duty as soon as it's safely possible.

The interest and capacity of the U.S. research community is very strong. This past year, as a result of funding made available in the fiscal year 2008 supplemental appropriation, the DOD accepted applications for development of a consortium of military and civilian trauma centers to begin work on the critically important clinical studies necessary to understand the best ways to treat extremity injuries, and to translate recent scientific advances in bone growth and tissue regeneration to the real world, where these advances can help improve the lives of our injured heroes.

Mr. Chairman, Mr. Vice Chairman, you've recognized the urgent need to finance extremity research over the past 4 years, and we're extremely grateful for that support. Based on the level of scientific need, our goal is to see the Defense Department programs achieve an operating level of \$150 million per year.

Thank you and the entire subcommittee for your vision and leadership in responding to this appeal. We strongly urge your continued action.

Chairman INOUE. All right, thank you very much, Dr. Pollak. [The statement follows:]

PREPARED STATEMENT OF ANDREW N. POLLAK

Chairman Inouye, Vice Chairman Cochran, Members of the Senate Defense Appropriations Subcommittee, thank you for the opportunity to testify today. I am Andrew N. Pollak, M.D., and I speak today on behalf of the American Academy of Orthopaedic Surgeons (AAOS), of which I am an active member, as well as my military and civilian orthopaedic surgery colleagues who are involved in extremity trauma research and care.

I am Chair of the Academy's Extremity War Injuries and Disaster Preparedness Project Team, past-chair of its Board of Specialty Societies, and a subspecialist in orthopaedic traumatology. I am Associate Director of Trauma and Head of the Division of Orthopaedic Traumatology at the R Adams Cowley Shock Trauma Center and the University of Maryland School of Medicine. My Division at Shock Trauma is responsible for providing education and training in orthopaedic traumatology to residents from eight separate training programs nationally, including the Bethesda Naval, Walter Reed Army and Tripler Army military orthopaedic residency programs. In addition, Shock Trauma serves as the home for the Air Force Center for

the Sustainment of Trauma and Readiness Skills (CSTARS) program. I also serve as Second Vice President of the Orthopaedic Trauma Association.

Senators, on behalf of all the military and civilian members of the American Academy of Orthopaedic Surgeons, please allow me to take this opportunity today to thank you both, as well as the Members of this Subcommittee, for your vision and leadership in providing funding in fiscal years 2006 through 2009 for the peer reviewed medical research program on orthopaedic and extremity war injuries. In particular, we thank you for providing \$66 million in your fiscal year 2009 Conference Bill and for creating the Peer Reviewed Orthopedic Research Program to cover the full range of research—from basic to clinical trials.

We also thank you most sincerely for your consideration of providing funding in the fiscal year 2009 Supplemental Appropriations Bill. Your commitment to building this research enterprise and enabling the Department of Defense to pursue answers to its critical medical needs must be recognized. Clearly this effort by the Congress will provide medical benefit through improved treatments and procedures to help our Wounded Warriors heal better and quicker.

We are very grateful for the dedicated work of Senators Tom Harkin and Kay Bailey Hutchison—both Members of this Subcommittee—in sponsoring a “Dear Colleague” letter this year supporting the ultimate goal of achieving an annual operating level of \$150 million per year for this critical peer reviewed research program.

It really cannot be overstated: the level and consistency of appropriations you are providing are “game-changing.” It provides the Department with the ability to move rapidly in developing the full research continuum, especially clinical trials—an essential form of investigation that has not existed in the extremity injury field previously because of a lack of significant and sustained resources. Just last month because of your support the U.S. Army’s Medical Research and Materiel Command accepted applications in response to its first ever call for the formation of network for clinical research into these challenges. In addition because of this critical funding, in April the Command hosted a 2-day scientific conference to further examine needs, and prioritize areas for its broadened research agenda.

Mr. Chairman, our message is straightforward:

- Extremity trauma and its sequelae represent the single most common injury class our wounded warriors suffer, the greatest source of inpatient medical care expense for the DOD, the single greatest source of injury related disability expense for the military, and the most common cause for disability retirement from all branches of the armed services;
- the state of the science must be advanced to provide better treatment options for our wounded service members who suffer extremity trauma and other injuries to their bone and muscles with a goal of limiting the profound long-term disability associated with these injuries;
- the current peer reviewed research program has great potential to address a wide range of bone and muscle injuries and conditions that are sidelining our troops at increasing rates; and
- the Defense Department must be convinced to proactively budget for research on military-related orthopaedic injuries, including extremity trauma, but until that occurs, we believe that the Congress has an obligation to ensure—as you have done—that the necessary resources are appropriated and directed to the task.

As the Iraq and Afghanistan conflicts enter their seventh year, the Nation continues to face a profound need for focused medical research to help military surgeons find new limb-sparing techniques with the goal of avoiding amputations and preserving and restoring the function of injured extremities.

Chairman Inouye, we know of your experience with extremity trauma during war and appreciate the fact that you have both personal and professional perspectives from which to address this issue and we honor your service as well as that of Vice Chairman Cochran.

U.S. military researchers have documented that approximately 82 percent of war injuries suffered fighting the global war on terror involve the extremities—often severe and multiple injuries to the arms and legs.

The evidence is also reflected in legislative documents. House Report 111–105 accompanying the recent fiscal year 2009 Supplemental Appropriations Bill, H.R. 2346, correctly states that “. . . extremity injuries are the most prevalent injury, and amputations following battlefield injury now occur as twice the rate as in past wars. Understanding how to treat and facilitate rapid recovery from orthopedic injuries should be one of the top priorities for the Military Health System.”

The Report accompanying the fiscal year 2009 House Appropriations Bill made similar points and added: “. . . the committee believes that every aspect of research shall be considered during a time when unique and dynamic research and treatment

is necessary to provide the soldiers the greatest ability to recover from injuries sustained on the battlefield.”

House Report 110–279 accompanying the fiscal year 2008 Defense Appropriations Bill stated that “Extremity injuries are the number one battlefield injury . . . dynamic research and treatment is necessary to provide service members the greatest ability to recover from injuries sustained on the battlefield.”

A recent U.S. Army analysis of soldiers injured in Iraq and Afghanistan from 2001 through 2005 shows that extremity injuries account for the greatest proportion of medical resource utilization and cause the greatest number of disabled soldiers. In fact, soldiers with extremity injuries had the longest average inpatient stays, accounted for 65 percent of total inpatient resource utilization and 64 percent of projected disability benefits costs in the future. The projected disability cost for extremity injuries sustained in this conflict to date—exclusive of ANY short or long-term medical costs—is estimated to be approximately \$1.2 billion.

In addition, muscle and bone injuries are sidelining a growing number of troops in our current conflicts. Data from the U.S. Army reported 257,000 acute orthopaedic injuries in 2007—an increase of 10,000 over the previous year. Increasing numbers of troops are listed as “non-deployable” as a result of injuries related to carrying heavy combat gear in repeated deployments, and, in the case of Afghanistan, carrying those loads in high altitude settings.

A February 1, 2009 Washington Post article on this challenge stated that “Army leaders and experts say the injuries—linked to the stress of bearing heavy loads during repeated 12- or 15-month combat tours—have increased the number of soldiers categorized as “non deployable.”

The article goes on to quote General Peter W. Chiarelli, the Army Vice Chief of Staff: “You can’t hump a rucksack at 8,000 to 11,000 feet for 15 months, even at a young age, and not have that have an impact on your body, and we are seeing an increase in muscular-skeletal issues.”

THE PEER REVIEWED ORTHOPAEDIC RESEARCH PROGRAM

Chairman Inouye, the AAOS and military and civilian orthopaedic surgeons and researchers are very grateful for your Subcommittee’s vision in providing support for Peer Reviewed Orthopedic Research. This is the first program created in the Department of Defense dedicated exclusively to funding peer-reviewed intramural and extramural orthopaedic research. Having the program administered on behalf of the Defense Health Program by the U.S. Army Medical Research and Materiel Command, Fort Dietrick, ensures that the funding closely follows the research priorities established by the Armed Forces. With the assistance of the Army’s Institute of Surgical Research, MRMC has extensive experience administering military-related research grant programs. Military orthopaedic surgeons have also had significant input into the creation of this program and fully support its goals.

The design of the program fosters collaboration between civilian and military orthopaedic surgeons and researchers and various facilities. Civilian researchers have the expertise and resources to assist their military colleagues with the growing number of patients and musculoskeletal injuries and war wound challenges in building the military research program. As can be seen in extensive numbers of research applications submitted under each RFP, civilian investigators are extremely interested in advancing this research and have responded enthusiastically to engage in this important work which will also provide wide ranging spin-off benefits to civilian trauma patients.

The program is growing to encompass the full spectrum of research, from basic and translational studies to clinical trials. It focuses on targeted, competitively-awarded research where peer reviewers score proposals on the degree of (1) military relevance, (2) military impact, and (3) scientific merit. Military and civilian orthopaedic surgeons are highly involved in defining the research topics and in evaluating and scoring the proposals. This unique process ensures that projects selected for funding have the highest chance for improving treatment of battlefield injuries and deployment related musculoskeletal injuries.

Significant new funding from the Congress will allow for more robust numbers of grants, a broader scope of work and increased multi-institutional collaboration. As mentioned earlier, clinical trials and more in-depth tracking of long term outcomes are in the planning stages—important components in rapidly advancing the state of the science.

By funding the Peer Reviewed Orthopedic Research Program—operated on behalf of all services by the Army’s Medical Research and Materiel Command—your committee is advancing the state of the science in this field to the benefit of our current servicemen and women—and those who will step forward in the future to defend

our Nation. Your action will directly result in improved treatments for our Wounded Warriors and injured troops now and in future conflicts.

It is important to point out that unique to the current conflicts is a new type of patient, a war fighter with multiple and severely mangled extremities who is otherwise free of life-threatening injury to the torso or whose life-threatening injuries have been successfully addressed because of improvements in protective body armor and the excellent care quickly delivered through the echelon treatment system. Such injuries are rarely seen in civilian surgical hospitals, even in Level 1 trauma centers like my own at Shock Trauma in Baltimore. Current challenges that often compound the battlefield injuries include serious infections due to the nature of the injuries and the environment in which they are sustained, and the need for immediate transport for more complex surgery.

The Academy's interest in this effort began in the very early days of Operation Enduring Freedom when our deployed military Academy members began to report the great clinical needs that were emerging as they went about their work in surgery to save injured servicemen and women. Soon studies on the nature of injuries in Iraq and Afghanistan documented the high proportion of extremity injuries as well as the severity of injuries.

I have been fortunate to travel to and operate in the U.S. Army Hospital in Landstuhl, Germany several times and to the Air Force Theater Hospital in Balad, Iraq to initiate the Academy's Distinguished Visiting Scholars Program. This program is a joint initiative between the AAOS and the Orthopaedic Trauma Association. The activity allows civilian orthopaedic trauma specialists with demonstrated clinical expertise and national recognition for their teaching abilities to volunteer two weeks at a time to be away from their practices performing surgery and teaching at Landstuhl Regional Medical Center. I also had the privilege of operating in Balad, Iraq as part of a request by Air Force Surgeon General James Roudebush to evaluate the trauma care being delivered at the Air Force Theater Hospital and to investigate the feasibility and value of extending the Distinguished Visiting Scholars Program into Iraq and Afghanistan. Based on my experiences in Balad, I can assure this committee of the outstanding quality of trauma care being delivered there by the military health system. I believe the quality of medical care being delivered to our injured warriors in Balad is at or above the care being delivered in our finest trauma centers within the United States.

On January 21-23 of this year, the fourth annual Extremity War Injuries Scientific Symposium was held in Washington, DC, sponsored by our Academy, along with the Society of Military Orthopaedic Surgeons, The Orthopaedic Research Society and the Orthopaedic Trauma Association. This combined effort of three major associations and the United States military began in 2006 in an initiative to examine the nature of extremity injuries sustained during Operation Enduring Freedom and Operation Iraqi Freedom and to plan for advancing the state of the science and treatment of these injuries. Each year the meetings are attended by over 175 military and civilian leaders in orthopaedic and extremity medical research and treatment from around the world. We have been very fortunate to have had many outstanding leaders speak to the conference audiences in the past about their perspectives on injuries being sustained by our armed forces. These speakers have included Joint Chiefs Chairman Adm. Michael Mullen, Senator Tom Harkin, Representatives John Murtha, Dutch Ruppersberger, and Tom Latham, and the previous Assistant Secretary of Defense for Health Affairs, Ward Casscells. This conference series has produced widely referenced scientific publications describing the clinical challenges posed by extremity war injuries, and a research agenda to guide the scientific community and the managers of the Peer Reviewed Orthopedic Research Program in planning and executing the program.

ORTHOPAEDIC TRAUMA FROM OPERATION IRAQI FREEDOM AND OPERATION ENDURING FREEDOM

The likelihood of surviving wounds on the battlefield was 69.7 percent in WWII and 76.4 percent in Vietnam. Now, thanks in part to the use of body armor, "up-armored" vehicles, intense training of our combat personnel and surgical capability within minutes of the battlefield, survivability has increased dramatically to 90.2 percent as of February 2007.

The Armed Forces are attempting to return significantly injured warriors to full function or limit their disabilities to a functional level in the case of the most severe injuries. The ability to provide improved recovery of function moves toward the goal of keeping injured warriors part of the military team. Moreover, when they do leave the Armed Forces, these rehabilitated warriors have a greater chance of finding worthwhile occupations outside of the service to contribute positively to society. The

military believes that it has a duty and obligation to provide the highest level of care and rehabilitation to those men and women who have suffered the most while serving the country and our Academy fully supports those efforts.

It comes as no surprise that the vast majority of trauma experienced in Iraq and Afghanistan is orthopaedic-related, especially upper and lower extremity and spine. A recent article in the *Journal of Orthopaedic Trauma* reports on wounds sustained in Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) based on data from the Joint Theater Trauma Registry, a database of medical treatment information from theater of combat operations at U.S. Army medical treatment facilities. From October, 2001 through January, 2005, of 1,566 soldiers who were injured by hostile enemy action, 1,281 (82 percent) had extremity injuries, with each soldier sustaining, on average, 2.28 extremity wounds. These estimates do not include non-American and civilians receiving medical care through U.S. military facilities. (Owens, Kragh, Macaitis, Svoboda and Wenke. Characterization of Extremity Wounds in Operation Iraqi Freedom and Operation Enduring Freedom. *J Orthopaedic Trauma*. Vol. 21, No. 4, April 2007. 254–257.)

An earlier article reported on 256 battle casualties treated at the Landstuhl Regional Medical Center in Germany during the first 2 months of OIF, finding 68 percent sustained an extremity injury. The reported mechanism of injury was explosives in 48 percent, gun-shot wounds in 30 percent and blunt trauma in 21 percent. As the war has moved from an offensive phase to the current counter-insurgency campaign, higher rates of injuries from explosives have been experienced. (Johnson BA, Carmack D, Neary M, et al. Operation Iraqi Freedom: the Landstuhl Regional Medical Center experience. *J Foot Ankle Surg*. 2005; 44:177–183.) According to the JTTR, between 2001 and 2005, explosive mechanisms accounted for 78 percent of the war injuries compared to 18 percent from gun shots.

While medical and technological advancements, as well as the use of fast-moving Forward Surgical Teams, have dramatically decreased the lethality of war wounds, wounded soldiers who may have died in previous conflicts from their injuries are now surviving and have to learn to recover from devastating injuries. While body armor is very effective in protecting a soldier's torso, his or her extremities are particularly vulnerable during attacks.

Characteristics of Military Orthopaedic Trauma

At this point there have been almost 40,000 warriors evacuated to Landstuhl Regional Medical Center in the Global War on Terror. Of these, almost 16,000 have been wounded in action. As mentioned earlier, the vast majority have injuries to their extremities—often severe and multiple injuries to the arms and legs. Most wounds are caused by exploding ordnance—frequently, improvised explosive devices (IEDs), rocket-propelled grenades (RPGs), as well as high-velocity gunshot wounds. Military surgeons report an average of 3 wounds per casualty.

According to the *New England Journal of Medicine*, blast injuries are producing an unprecedented number of “mangled extremities”—limbs with severe soft-tissue and bone injuries. (“Casualties of War—Military Care for the Wounded from Iraq and Afghanistan,” *NEJM*, December 9, 2004). The result of such trauma is open, complex wounds with severe bone fragmentation. Often there is nerve damage, as well as damage to tendons, muscles, vessels, and soft-tissue. In these types of wounds, infection is often a problem. According to the JTTR, 53 percent of the extremity wounds are classified as penetrating soft-tissue wounds, while fractures compose 26 percent of extremity wounds. Other types of extremity wounds composing less than 5 percent each are burns, sprains, nerve injuries, abrasions, amputations, contusions, dislocations, and vascular injuries.

The sheer number of extremity injuries represents a staggering health burden. Between January 2003, and February 2009, over 15,000 U.S. Warriors have been wounded-in-action severely enough to require evacuation out of theater. In addition, 780 American patients have lost at least one limb.

Military Versus Civilian Orthopaedic Trauma

While there are similarities between military orthopaedic trauma and the types of orthopaedic trauma seen in civilian settings, there are several major differences that must be noted.

With orthopaedic military trauma, there are up to five echelons of care, unlike in civilian settings when those injured are most likely to receive initial treatment at the highest level center. Instead, wounded warriors get passed from one level of care to the next, with physicians and other health care providers rendering the most appropriate type of care possible in the context of the limitations of a battlefield environment in order to ensure the best possible outcome. The surgeon in each subsequent level of care must try to recreate what was previously done. In addition, a

majority of injured soldiers have to be “med-evaced” to receive care and transportation is often delayed due to weather or combat conditions. It has been our experience that over 65-percent of the trauma is urgent and requires immediate attention.

Injuries from IEDs and other explosive ordnance in Iraq and Afghanistan differ markedly from those of gunshot wounds sustained in civilian society. The contamination, infection and soft-tissue injury caused by exploding ordnance requires more aggressive treatment and new techniques, especially when the wounded warrior was in close proximity to the blast radius.

Warriors are usually in excellent health prior to injury. However, through the evacuation process they may not be able to eat due to medical considerations resulting in impaired body nitrogen stores and decreased ability to heal wounds and fight infections. This presents many complicating factors when determining the most appropriate care.

The setting in which care is initially provided to wounded soldiers is less than ideal, to say the least, especially in comparison to a sterile hospital setting. The environment, such as that seen in Iraq and Afghanistan, is dusty and hot, leading to concerns about secondary contamination of wounds in the hospital setting. For example, infection from *acinetobacter baumannii*, a ubiquitous organism found in the desert soil of Afghanistan and Iraq, is extremely common. In addition, the surgical environment is under constant threat of attack by insurgents. Imagine teams of medical specialists working in close quarters to save an injured serviceman while mortars or rockets are raining down on the hospital. Finally, the forward-deployed surgical team is faced with limited resources that make providing the highest level of care difficult.

While, as I have stated, there are many unique characteristics of orthopaedic military trauma, there is no doubt that research done on orthopaedic military trauma also benefits trauma victims in civilian settings. Many of the great advancements in orthopaedic trauma care have been made during times of war, including principles of debridement of open wounds, utilization of external fixation and use of tourniquets for control of hemorrhage which has been used extensively during the current conflict.

Research Needs.—With such strong research interest and capacity, and the great need for medical breakthroughs in this field, the scientific community believes that a sustained, multi-year program funded at \$150 million per year is justified. Such significant funding is required allow the Defense Department to conduct multi-center clinical trials—research projects that would greatly advance the field and significantly benefit the battlefield injured warriors. In addition, basic and translational research also must be sustained, as in any major research undertaking, to provide the underpinnings for advancing clinical breakthroughs. Research in the management of extremity injuries and other disabling orthopaedic conditions will lead to quicker recovery times, improved function of limbs, better response rates to infection, and new advances in rehabilitation benefiting both military and civilian patients. General areas of research need include bone regeneration, improved healing of massive soft tissue damage, prevention of wound infection, techniques to improve irrigation and debridement of blast injuries, prevention of bone reformation abnormalities, and epidemiology of current battle-related injuries.

Specific areas of research need include:

- Prevention and treatment of post-traumatic arthritis;
- Prevention and treatment of infections following high-energy extremity war injury;
- Management of segmental bone defects;
- Establishment of tissue viability markers—this would assist surgeons in better understanding the ideal frequency and techniques of debriding wound cleaning);
- Timing of treatment—early versus late surgical treatment;
- Prevention and treatment of chronic neck and low back arthritic conditions resulting from combat associated stress and overuse injury;
- Treatment of severe muscle, nerve, ligament and other soft-tissue injury associated with combat trauma; and
- Rehabilitation of high-performance warriors after significant combat related injury.

Future Needs of Orthopaedic Research

As mentioned earlier, an important development in this scientific effort has been the convening of the annual Extremity War Injury Symposia, which began in January of 2006. These widely attended medical conferences in Washington, D.C. bring together leading military and civilian clinicians and researchers to focus on the immediate needs of personnel sustaining extremity injuries. Discussions at the con-

ferences have confirmed that there is tremendous interest and much untapped research capacity in the Nation's military and civilian research community.

These extraordinary scientific meetings were a partnership effort between organized orthopaedic surgery, military surgeons and researchers. They were attended by key military and civilian physicians and researchers committed to the care of extremity injuries. The first conference addressed current challenges in the management of extremity trauma associated with recent combat in Iraq and Afghanistan. The major focus was to identify opportunities to improve care for the sons and daughters of America who have been injured serving our Nation. The second focused on the best way to deliver care within the early echelons of treatment. The third explored the wide spectrum of needs in definitive reconstruction of injuries. Scientific proceedings from the symposia have been published by our Academy and made available to the military and civilian research community. Each conference has continued to refine the list of prioritized research needs which I will summarize:

Timing of Treatment

Better data are necessary to establish best practices with regard to timing of debridement, timing of temporary stabilization and timing of definitive stabilization. Development of animal models of early versus late operative treatment of open injuries may be helpful. Prospective clinical comparisons of treatment groups will be helpful in gaining further understanding of the relative role of surgical timing on outcomes.

Techniques of Debridement

More information is necessary about effective means of demonstrating adequacy of debridement. Current challenges, particularly for surgeons with limited experience in wound debridement, exist in understanding how to establish long-term tissue viability or lack thereof at the time of an index operative debridement. Since patients in military settings are typically transferred away from the care of the surgeon performing the initial debridement prior to delivery of secondary care, opportunities to learn about the efficacy of initial procedures are lost. Development of animal models of blast injury could help establish tissue viability markers. Additional study is necessary to understand ideal frequencies and techniques of debridement.

Transport Issues

Clinical experience suggests that current air evacuation techniques are associated with development of complications in wound and extremity management although the specific role of individual variables in the genesis of these complications is unclear. Possible contributing factors include altitude, hypothermia and secondary wound contamination. Clinical and animal models are necessary to help develop an understanding of transport issues.

Coverage Issues

Controlled studies defining the role of timing of coverage in outcome following high-energy extremity war injuries are lacking. Also necessary is more information about markers and indicators to help assess the readiness of a wound and host for coverage procedures. Additional animal modeling and clinical marker evaluation are necessary to develop understanding in this area.

Antibiotic Treatments

Emergence of resistant organisms continues to provide challenges in the treatment of infection following high-energy extremity war injuries. Broader prophylaxis likely encourages development of antibiotic resistance. In the context of a dwindling pipeline of new antibiotics, particularly those directed toward gram-negative organisms, development of new technologies to fight infection is necessary. This patient population offers opportunity to assess efficacy of vaccination against common pathogens. Partnerships with infectious disease researchers currently involved in addressing similar questions warrants further development.

Management of Segmental Bone Defects

A multitude of different techniques for management of segmental bone defects is available. These include bone transport, massive onlay grafting with and without use of recombinant proteins, delayed allograft reconstruction, and acute shortening. While some techniques are more appropriate than others after analysis of other clinical variables, controlled trials comparing efficacy between treatment methods are lacking. Variables that may affect outcome can be grouped according to patient characteristics including co-morbidities, injury characteristics including severity of bony and soft-tissue wounds, and treatment variables including method of internal fixation selected. Evaluation of new technologies for treatment of segmental bone

defects should include assessment of efficacy with adequate control for confounding variables and assessment of cost-effectiveness. Partnerships with other military research programs may be particularly effective in improving clinical capabilities in this area.

Development of an Animal Model

A large animal survival military blast injury model is necessary to serve as a platform for multiple research questions including: negative pressure wound therapy v. bead pouch v. dressing changes; wound debridement strategy; effect of topical antibiotics; modulation of inflammatory response; timing of wound closure; and vascular shunt utilization.

Prevention of Post-Traumatic Arthritis

More research is necessary to better understand how to address traumatic injuries to articular cartilage with associated articular loss. Current treatment options include artificial joint replacement and joint fusion. Regeneration of cartilage and re-growth of joint surfaces is poorly understood and warrants further investigation. Similarly, the role of cadaver joint surfaces in replacing injured joints in soldiers warrants further consideration and investigation. Initial research has been exciting in this area, particularly in the area of allograft hand transplantation.

Amputee Issues

Development and validation of “best practice” guidelines for multidisciplinary care of the amputee is essential. Treatment protocols should be tested clinically. Studies should be designed to allow for differentiation between the impacts of the process versus the device on outcome. Failure mode analysis as a tool to evaluate efficacy of treatment protocols and elucidate shortcomings should be utilized. Clinically, studies should focus on defining requirements for the residual limb length necessary to achieve success without proceeding to higher level amputation. Outcomes based comparisons of amputation techniques for similar injuries and similar levels should be performed. Use of local tissue lengthening and free tissue transfer techniques should be evaluated. In the context of current results and increasing levels of expectation for function following amputation, development of more sensitive and military appropriate outcomes monitors is necessary.

Heterotopic Ossification

This condition, known as “H.O.” by the many soldiers who experience it, is abnormal and uncontrolled bone growth that often occurs following severe bone destruction or fracture. Animal models of heterotopic ossification should be utilized to develop early markers for heterotopic ossification that could identify opportunities for early treatment and prevention. Better information is needed about burden of disease including prevalence following amputation for civilian versus military trauma and frequency with which symptoms develop. Treatment methods such as surgical debridement, while effective, necessarily interrupt rehabilitation. Prevention could expedite recovery and potentially improve outcome.

CONCLUSION

With extremity trauma injuries being the most common form of injury seen in current military conflicts and musculoskeletal injuries becoming an increasing factor in sidelining our troops, it is crucial that significant funding be directed specifically to the advancement of research. The AAOS has worked closely with the top military orthopaedic surgeons and medical leaders, at world-class facilities such as the U.S. Army Institute of Surgical Research, Brooke Army Medical Center, Bethesda Naval Hospital, Landstuhl Regional Medical Center, the Medical Research and Materiel Command and Walter Reed Army Medical Center to identify the gaps in research and clinical treatment—and the challenges are many.

Orthopaedic research currently being carried out at those and other facilities, and at civilian medical centers, is vital to the health of our soldiers and to the Armed Forces’ objective to return injured soldiers to full function in hopes that they can continue to be contributing soldiers and active members of society.

The 17,000 members of our Academy thank you for sustaining the Peer Reviewed Orthopedic Research Program. While Congress funds an extensive array of medical research through the Department of Defense, with over 80 percent of military trauma being extremity-related, I can assure you that this type of medical research will greatly benefit our men and women serving in the Global War on Terror and in future conflicts.

Mr. Chairman and Mr. Vice Chairman, the American Academy of Orthopaedic Surgeons, as well as the entire orthopaedic trauma community, stands ready to

work with this Subcommittee to identify and prioritize research opportunities for the advancement in the care of extremity and orthopaedic injuries. Military and civilian orthopaedic surgeons and researchers are committed to pursuing scientific inquiry that will benefit the unfortunately high number of soldiers afflicted with such conditions and return them to the highest level of function possible. This investment to improve treatment for our soldiers will be well spent. It is imperative that the Federal Government—when establishing its defense health research priorities in the future—continues to ensure that research on treating orthopaedic and extremity war injuries remains a top priority. We appreciate your consideration of our perspective on this critical issue and urge your continued action on behalf of our Nation's servicemen and women.

Chairman INOUE. And we'd like to thank the whole panel and now call upon the new panel.

Thank you very much.

The next panel consists of Ms. Frances Visco, Ms. Jackie S. Rowles, Mr. Rick Jones, Ms. Cara Tenenbaum, Colonel William Holahan, and Ms. Elizabeth Cochran.

I've been advised that Mr. Wicks will be substituting for Ms. Jackie Rowles.

And our next witness is the president of the National Breast Cancer Coalition, Ms. Frances Visco.

**STATEMENT OF FRAN VISCO, J.D., PRESIDENT, NATIONAL BREAST
CANCER COALITION**

Ms. VISCO. Thank you, Chairman Inouye, Senator Cochran.

I'm here as a 22-year breast cancer survivor, a wife, a mother, and the president of the National Breast Cancer Coalition. As you know, NBCC is a coalition of more than 600 organizations from across the country whose mission is to end breast cancer.

I want to thank you, as I do every year, for your continued support of this program. And I want to report to you that this program continues to be incredibly successful. It continues to create new models of science, new models of research, through a competitive, peer-reviewed process that releases funding to scientists around the world.

This program has funded innovative research, it has filled the gaps in the traditional funding mechanisms. It has also been copied by the National Institutes of Health, by private foundations. The models that this program has launched have now changed science in many different areas within the Department of Defense, collaborations within the Defense Department, and without. It has resulted in bringing many new young scientists into the field of research, and biomedical research. And I'm very proud to say—very proud of the military—that this program has incredibly low administrative costs, so that 90 percent—more than 90 percent of the appropriations go directly to research funding.

There's an incredibly high return on the investment of these funds. And, most importantly, this program is transparent, and it is accountable to the taxpayers. It is possible to see where every dollar of these funds has gone. And the public gets a report of the results of the research that has been funded with these dollars.

It has made an incredible difference to women with breast cancer, to their families, but really to all disease research. And I want to take my last moments to say how grateful we are to the members of the military, to—who administer this program. They are passionately committed to this mission, and they do an incredible

job. And I want to thank you very much for continuing and allowing this program to proceed.

Thank you.

Chairman INOUE. Thank you very much, Ms. Visco.

[The statement follows:]

PREPARED STATEMENT OF FRAN VISCO

Thank you, Mr. Chairman and members of the Appropriations Subcommittee on Defense, for the opportunity to submit testimony today about a Program that has made a significant difference in the lives of women and their families.

I am Fran Visco, a 21-year breast cancer survivor, a wife and mother, a lawyer, and President of the National Breast Cancer Coalition (NBCC). My testimony represents the hundreds of member organizations and thousands of individual members of the Coalition. NBCC is a grassroots organization dedicated to ending breast cancer through action and advocacy. The Coalition's main goals are to increase Federal funding for breast cancer research and collaborate with the scientific community to implement new models of research; improve access to high quality health care and breast cancer clinical trials for all women; and expand the influence of breast cancer advocates wherever breast cancer decisions are made.

You and your Committee have shown great determination and leadership in funding the Department of Defense (DOD) peer-reviewed Breast Cancer Research Program (BCRP) at a level that has brought us closer to eradicating this disease. Chairman Inouye and Ranking Member Cochran, we appreciate your longstanding personal support for this Program. I am hopeful that you and your Committee will continue that determination and leadership.

I know you recognize the importance of this Program to women and their families across the country, to the scientific and health care communities and to the Department of Defense. Much of the progress in the fight against breast cancer has been made possible by the Appropriations Committee's investment in breast cancer research through the DOD BCRP. This Program has launched new models of biomedical research that have benefited other agencies and both public and private institutions. It has changed for the better the way research is performed and has been replicated by programs focused on other diseases, by other countries and states. To support this unprecedented progress moving forward, we ask that you support a separate \$150 million appropriation for fiscal year 2010. In order to continue the success of the Program, you must ensure that it maintain its integrity and separate identity, in addition to the requested level of funding. This is important not just for breast cancer, but for all biomedical research that has benefited from this incredible government Program. In addition, as Institute of Medicine (IOM) reports concluded in 1997 and 2004, there continues to be excellent science that would go unfunded without this Program. It is only through a separate appropriation that this Program is able to continue to focus on breast cancer yet impact all other research. The separate appropriation of \$150 million will ensure that this Program can rapidly respond to changes and new discoveries in the field and fill the gaps in traditional funding mechanisms.

Since its inception, this Program has matured into a broad-reaching influential voice forging new and innovative directions for breast cancer research and science. Breast cancer is an extraordinarily complex disease. Despite the enormous successes and advancements in breast cancer research made through funding from the DOD BCRP, we still do not know what causes breast cancer, how to prevent it, or how to cure it. It is critical that innovative research through this unique Program continues so that we can move forward toward eradicating this disease.

OVERVIEW OF THE DOD BREAST CANCER RESEARCH PROGRAM

The DOD peer-reviewed Breast Cancer Research Program has established itself as a model medical research program, respected throughout the cancer and broader medical community for its innovative, transparent and accountable approach. The pioneering research performed through the Program has the potential to benefit not just breast cancer, but all cancers, as well as other diseases. Biomedical research is being transformed by the DOD BCRP's success.

This Program is both innovative and incredibly streamlined. It continues to be overseen by an Integration Panel including distinguished scientists and advocates, as recommended by the IOM. Because there is little bureaucracy, the Program is able to respond quickly to what is currently happening in the research community. Because of its specific focus on breast cancer, it is able to rapidly support innovative proposals that reflect the most recent discoveries in the field. It is responsive, not

just to the scientific community, but also to the public. The flexibility of the Program has allowed the Army to administer it with unparalleled efficiency and effectiveness.

An integral part of this Program has been the inclusion of consumer advocates at every level. Breast cancer is not just a problem of scientists; it is a problem of people. Advocates bring a necessary perspective to the table, ensuring that the science funded by this Program is not only meritorious, but it is also meaningful and will make a difference in people's lives. The consumer advocates bring accountability and transparency to the process. Many of the scientists who have participated in the Program have said that working with the advocates has changed the way they approach research. Let me quote Dr. Michael Diefenbach of Mount Sinai School of Medicine:

"I have served as a reviewer for the Department of Defense's Breast and Prostate Cancer Review programs and I am a member of the behavioral study section for the National Cancer Institute . . . I find survivors or advocate reviewers as they are sometimes called bring a sense of realism to the review process that is very important to the selection and ultimately funding process of important research . . . Both sides bring important aspects to the review process and the selected projects are ultimately those that can fulfill scientific rigor and translatability from the research arena to clinical practice. I urge that future review panels include advocate reviewers in the review process."

Since 1992, nearly 600 breast cancer survivors have served on the BCRP peer review panels. As a result of this inclusion of consumers, the Program has created an unprecedented working relationship between the public, scientists, and the military, and ultimately has led to new avenues of research in breast cancer. The vital role of the advocates in the success of the BCRP has led to consumer inclusion in other biomedical research programs at DOD. This Program now serves as an international model.

It is important to note that the Integration Panel that designs this Program has a strategic plan for how best to spend the funds appropriated. This plan is based on the state of the science—both what scientists know now and the gaps in our knowledge—as well as the needs of the public. While this plan is mission driven, and helps ensure that the science keeps that mission—eradicating breast cancer—in mind, it does not restrict scientific freedom, creativity or innovation. The Integration Panel carefully allocates these resources, but it does not predetermine the specific research areas to be addressed.

UNIQUE FUNDING OPPORTUNITIES

The DOD BCRP research portfolio includes many different types of projects, including support for innovative ideas, networks to facilitate clinical trials, and training of breast cancer researchers.

Developments in the past few years have begun to offer breast cancer researchers fascinating insights into the biology of breast cancer and have brought into sharp focus the areas of research that hold promise and will build on the knowledge and investment we have made. The Innovative Developmental and Exploratory Awards (IDEA) grants of the DOD Program have been critical in the effort to respond to new discoveries and to encourage and support innovative, risk-taking research. Concept Awards support funding even earlier in the process of discovery. These grants have been instrumental in the development of promising breast cancer research by allowing scientists to explore beyond the realm of traditional research and unleash incredible new ideas. IDEA and Concept grants are uniquely designed to dramatically advance our knowledge in areas that offer the greatest potential. IDEA and Concept grants are precisely the type of grants that rarely receive funding through more traditional programs such as the National Institutes of Health and private research programs. They therefore complement, and do not duplicate, other Federal funding programs. This is true of other DOD award mechanisms also.

Innovator awards invest in world renowned, outstanding individuals rather than projects, by providing funding and freedom to pursue highly creative, potentially groundbreaking research that could ultimately accelerate the eradication of breast cancer. The Era of Hope Scholar Award supports the formation of the next generation of leaders in breast cancer research, by identifying the best and brightest scientists early in their careers and giving them the necessary resources to pursue a highly innovative vision of ending breast cancer.

These are just a few examples of innovative funding opportunities at the DOD BCRP that are filling gaps in breast cancer research. Scientists have lauded the

Program and the importance of these award mechanisms. In 2005, Zelton Dave Sharp wrote about the importance of the Concept award mechanism:

“Our Concept grant has enabled us to obtain necessary data to recently apply for a larger grant to support this project. We could have never gotten to this stage without the Concept award. Our eventual goal is to use the technology we are developing to identify new compounds that will be effective in preventing and/or treating breast cancer . . . Equally important, however, the DOD BCRP does an outstanding job of supporting graduate student trainees in breast cancer research, through training grants and pre-doctoral fellowships . . . The young people supported by these awards are the lifeblood of science, and since they are starting their training on projects relevant to breast cancer, there is a high probability they will devote their entire careers to finding a cure. These young scientists are by far the most important ‘products’ that the DOD BCRP produces.”—Zelton Dave Sharp, Associate Professor, Interim Director/Chairman, Institute of Biotechnology/Dept. Molecular Medicine, University of Texas Health Science Center (August 2005).

The DOD BCRP also focuses on moving research from the bench to the bedside. DOD BCRP awards are designed to fill niches that are not addressed by other Federal agencies. The BCRP considers translational research to be the application of well-founded laboratory or other pre-clinical insight into a clinical trial. To enhance this critical area of research, several research opportunities have been offered. Clinical Translational Research Awards have been awarded for investigator-initiated projects that involve a clinical trial within the lifetime of the award. The BCRP has expanded its emphasis on translational research by also offering five different types of awards that support work at the critical juncture between laboratory research and bedside applications.

The Centers of Excellence award mechanism brings together the world’s most highly qualified individuals and institutions to address a major overarching question in breast cancer research that could make a significant contribution towards the eradication of breast cancer. Many of these Centers are working on questions that will translate into direct clinical applications. These Centers include the expertise of basic, epidemiology and clinical researchers, as well as consumer advocates.

Dr. John Niederhuber, now the Director of the National Cancer Institute (NCI), said the following about the Program when he was Director of the University of Wisconsin Comprehensive Cancer Center in April, 1999:

“Research projects at our institution funded by the Department of Defense are searching for new knowledge in many different fields including: identification of risk factors, investigating new therapies and their mechanism of action, developing new imaging techniques and the development of new models to study [breast cancer] . . . Continued availability of this money is critical for continued progress in the Nation’s battle against this deadly disease.”

Scientists and consumers agree that it is vital that these grants continue to support breast cancer research. To sustain the Program’s momentum, \$150 million for peer-reviewed research is needed in fiscal year 2010.

SCIENTIFIC ACHIEVEMENTS

One of the most promising outcomes of research funded by the DOD BCRP was the development of the first monoclonal antibody targeted therapy that prolongs the lives of women with a particularly aggressive type of advanced breast cancer. This drug could not have been developed without first researching and understanding the gene known as HER-2/neu, which is involved in the progression of some breast cancers. Researchers found that over-expression of HER-2/neu in breast cancer cells results in very aggressive biologic behavior. The same researchers demonstrated that an antibody directed against HER-2/neu could slow the growth of the cancer cells that over-expressed the gene. This research, which led to the development of the targeted therapy, was made possible in part by a DOD BCRP-funded infrastructure grant. Other researchers funded by the DOD BCRP are identifying similar kinds of genes that are involved in the initiation and progression of cancer.

Another example of innovation in the Program is in the area of imaging. One DOD BCRP awardee developed a new use for medical hyperspectral imaging (MHSI) technology. This work demonstrated the usefulness of MHSI as a rapid, noninvasive, and cost-effective evaluation of normal and tumor tissue during a real-time operating procedure. Application of MHSI to surgical procedures has the potential to significantly reduce local recurrence of breast tumors and may facilitate early determination of tumor malignancy.

Studies funded by the DOD BCRP are examining the role of estrogen and estrogen signaling in breast cancer. For example, one study examined the effects of the two main pathways that produce estrogen. Estrogen is often processed by one of two pathways; one yields biologically active substances while the other does not. It has been suggested that women who process estrogen via the biologically active pathway may be at higher risk of developing breast cancer. This research will yield insights into the effects of estrogen processing on breast cancer risk in women with and without family histories of breast cancer.

Another example of success from the Program is a study of sentinel lymph nodes (SLNs). This study confirmed that SLNs are indicators of metastatic progression of disease. The resulting knowledge from this study and others has led to a new standard of care for lymph node biopsies. If the first lymph node is negative for cancer cells, then it is unnecessary to remove all the lymph nodes. This helps prevent lymphedema which can be painful and have lasting complications.

FEDERAL MONEY WELL SPENT

The DOD BCRP is as efficient as it is innovative. In fact, 90 percent of funds go directly to research grants. The flexibility of the Program allows the Army to administer it in such a way as to maximize its limited resources. The Program is able to quickly respond to current scientific advances and fulfills an important niche by focusing on research that is traditionally under-funded. This was confirmed and reiterated in two separate IOM reports released in 1997 and 2004. The areas of focus of the DOD BCRP span a broad spectrum and include basic, clinical, behavioral, environmental sciences, and alternative therapy studies, to name a few. The BCRP benefits women and their families by maximizing resources and filling in the gaps in breast cancer research.

The Program is responsive to the scientific community and to the public. This is evidenced by the inclusion of consumer advocates at both the peer and programmatic review levels. The consumer perspective helps the scientists understand how the research will affect the community and allows for funding decisions based on the concerns and needs of patients and the medical community.

The outcomes of the BCRP-funded research can be gauged, in part, by the number of publications, abstracts/presentations, and patents/licensures reported by awardees. To date, there have been more than 12,241 publications in scientific journals, more than 12,000 abstracts and nearly 550 patents/licensure applications. The American public can truly be proud of its investment in the DOD BCRP. Scientific achievements that are the direct result of the DOD BCRP grants are undoubtedly moving us closer to eradicating breast cancer.

INDEPENDENT ASSESSMENTS OF PROGRAM SUCCESS

The success of the DOD peer-reviewed Breast Cancer Research Program has been illustrated by several unique assessments of the Program. The IOM, which originally recommended the structure for the Program, independently re-examined the Program in a report published in 1997. They published another report on the Program in 2004. Their findings overwhelmingly encouraged the continuation of the Program and offered guidance for program implementation improvements.

The 1997 IOM review of the DOD peer-reviewed Breast Cancer Research Program commended the Program, stating, "the Program fills a unique niche among public and private funding sources for cancer research. It is not duplicative of other programs and is a promising vehicle for forging new ideas and scientific breakthroughs in the Nation's fight against breast cancer." The 2004 report spoke to the importance of the program and the need for its continuation.

TRANSPARENT AND ACCOUNTABLE TO THE PUBLIC

The DOD peer-reviewed Breast Cancer Research Program not only provides a funding mechanism for high-risk, high-return research, but also reports the results of this research to the American people every 2 to 3 years at a public meeting called the Era of Hope. The 1997 meeting was the first time a federally-funded program reported back to the public in detail not only on the funds used, but also on the research undertaken, the knowledge gained from that research and future directions to be pursued.

Sixteen hundred and consumers and researchers met for the fifth Era of Hope meeting in June, 2008. As MSNBC.com's Bob Bazell wrote, this meeting "brought together many of the most committed breast cancer activists with some of the Nation's top cancer scientists. The conference's directive is to push researchers to think 'out of the box' for potential treatments, methods of detection and prevention in

ways.” He went on to say “the program . . . has racked up some impressive accomplishments in high-risk research projects . . .”

One of the topics reported on at the meeting was the development of more effective breast imaging methods. An example of the important work that is coming out of the DOD BCRP includes a new screening method called molecular breast imaging, which helps detect breast cancer in women with dense breasts—which can be difficult using a mammogram alone. I invite you to log on to NBCC’s new website <http://influence.stopbreastcancer.org/> to learn more about the exciting research reported at the 2008 Era of Hope.

The DOD peer-reviewed Breast Cancer Research Program has attracted scientists across a broad spectrum of disciplines, launched new mechanisms for research and facilitated new thinking in breast cancer research and research in general. A report on all research that has been funded through the DOD BCRP is available to the public. Individuals can go to the Department of Defense website and look at the abstracts for each proposal at <http://cdmrp.army.mil/bcrp/>.

COMMITMENT OF THE NATIONAL BREAST CANCER COALITION

The National Breast Cancer Coalition is strongly committed to the DOD BCRP in every aspect, as we truly believe it is one of our best chances for finding cures for and ways to prevent breast cancer. The Coalition and its members are dedicated to working with you to ensure the continuation of funding for this Program at a level that allows this research to forge ahead. From 1992, with the launch of our “300 Million More Campaign” that formed the basis of this Program, until now, NBCC advocates have appreciated your support.

Over the years, our members have shown their continuing support for this Program through petition campaigns, collecting more than 2.6 million signatures, and through their advocacy on an almost daily basis around the country asking for support of the DOD BCRP.

There are 3 million women living with breast cancer in this country today. This year, more than 40,000 will die of the disease and more than 240,000 will be diagnosed. We still do not know how to prevent breast cancer, how to diagnose it truly early or how to cure it. It is an incredibly complex disease. We simply cannot afford to walk away from this program.

Since the very beginning of this Program in 1992, Congress has stood with us in support of this important investment in the fight against breast cancer. In the years since, Chairman Inouye and Ranking Member Cochran, you and this entire Committee have been leaders in the effort to continue this innovative investment in breast cancer research.

NBCC asks you, the Defense Appropriations Subcommittee, to recognize the importance of what has been initiated by the Appropriations Committee. You have set in motion an innovative and highly efficient approach to fighting the breast cancer epidemic. We ask you now to continue your leadership and fund the Program at \$150 million and maintain its integrity. This is research that will help us win this very real and devastating war against a cruel enemy.

Thank you again for the opportunity to submit testimony and for giving hope to all women and their families, and especially to the 3 million women in the United States living with breast cancer.

Chairman INOUE. And now may I call upon Mr. Wicks, representing the American Association of Nurse Anesthetists.

STATEMENT OF TERRY WICKS, PAST PRESIDENT, ON BEHALF OF THE AMERICAN ASSOCIATION OF NURSE ANESTHETISTS (AANA)

Mr. WICKS. Chairman Inouye, Senator Cochran, and members of the subcommittee, good morning.

My name is Terry Wicks, and I am a past president of the 40,000-member American Association of Nurse Anesthetists. The quality of healthcare America provides our servicemen and women and their dependents has long been this subcommittee’s high priority. Today, I report to you the contributions that certified registered nurse anesthetists, or CRNAs, make toward our services’ mission. I will also provide you our recommendations to further improve military healthcare for these challenging times.

I also ask that—unanimous consent that my written statement be entered into the record.

Chairman INOUE. So ordered.

Mr. WICKS. America's CRNAs provide some 30 million anesthetics annually, in every healthcare setting requiring anesthesia care. And we provide that care safely. The Institute of Medicine reported, in 2000, that anesthesia care is 50 times safer than it was in the early 1980s.

For the United States Armed Forces, CRNAs are particularly critical. In 2005, 493 active duty and 790 reservist nurse anesthetists provided anesthesia care indispensable to our Armed Forces' current mission. Not long ago one CRNA, Major General Gail Pollock, served as Acting Surgeon General of the Army.

Today, CRNAs serve in major military hospitals, in educational institutions, aboard ships, and in isolated bases abroad and at home, and as members of forward surgical teams, and they are as close to the tip of the spear as they can be. In most of these environments, CRNAs provide anesthesia services, alone, with anesthesiologists, enabling surgeons and other clinicians to safely deliver lifesaving care to our soldiers.

In recent years, however, the number of CRNAs needed in the Armed Forces has fallen below—the number of CRNAs in the services has fallen below the number needed. The private market for nurse anesthetists is extremely strong, and the military has struggled to compete. The services, this subcommittee, and the authorizing committees have responded with increased benefits to CRNAs, incentive specialty pay, and the health professions loan repayment program, focusing on incentives for multiyear agreements.

The profession of nurse anesthesia has likewise responded. Our Council on Certification of Nurse Anesthetists reports that, in 2008, our schools produced 2,161 graduates, double the number since the year 2000, and 2,100 nurse anesthetists were certified. That growth is expected to continue, and the Council on Accreditation of Nurse Anesthesia Educational Programs projects that nurse anesthesia programs will produce over 2,400 graduates in 2009.

These combined actions have helped strengthen the services' readiness and the quality of healthcare available to our servicemen and women.

So, our first recommendation to you is to extend and strengthen this successful incentive service pay program for CRNAs. The authorizing committee has extended the ISP program, and we encourage this subcommittee to continue funding ISP levels sufficient for the services to recruit and retain CRNAs needed for the mission.

Our second recommendation is for the subcommittee to encourage all the services to adopt the joint scope of practice. Standard practice across the services enhances patient safety and the quality of healthcare of our servicemen and women. The Navy, in particular, has made a great deal of progress toward adopting the joint scope of practice of independent practitioners. We encourage its adoption in all the services.

Like our military CRNAs that serve each and every day, the American Association of Nurse Anesthetists stands ready to work with Congress to ensure that all our Nation's military men and women get the care they need and deserve.

Thank you, and I'll be happy to answer any question that you may have.

Chairman INOUE. All right. Thank you very much, Mr. Wicks. [The statement follows:]

PREPARED STATEMENT OF JACKIE S. ROWLES, CRNA, MBA, MA, FAAPM,
PRESIDENT, AMERICAN ASSOCIATION OF NURSE ANESTHETISTS (AANA)

Chairman Inouye, Ranking Member Cochran, and Members of the Subcommittee: The American Association of Nurse Anesthetists (AANA) is the professional association that represents over 40,000 Certified Registered Nurse Anesthetists (CRNAs) across the United States, including more than 500 active duty and over 750 reservists in the military reported in 2009. The AANA appreciates the opportunity to provide testimony regarding CRNAs in the military. We would also like to thank this committee for the help it has given us in assisting the Department of Defense (DOD) and each of the services to recruit and retain CRNAs.

CRNAs AND THE ARMED FORCES: A TRADITION OF SERVICE

Let us begin by describing the profession of nurse anesthesia, and its history and role with the Armed Forces of the United States.

In the administration of anesthesia, CRNAs perform the same functions as anesthesiologists and work in every setting in which anesthesia is delivered including hospital surgical suites and obstetrical delivery rooms, ambulatory surgical centers, health maintenance organizations, and the offices of dentists, podiatrists, ophthalmologists, and plastic surgeons. Today, CRNAs administer some 30 million anesthetics given to patients each year in the United States. Nurse anesthetists are also the sole anesthesia providers in the vast majority of rural hospitals, assuring access to surgical, obstetrical and other healthcare services for millions of rural Americans.

Our tradition of service to the military and our Veterans is buttressed by our personal, professional commitment to patient safety, made evident through research into our practice. In our professional association, we state emphatically "our members' only business is patient safety." Safety is assured through education, high standards of professional practice, and commitment to continuing education. Having first practiced as registered nurses, CRNAs are educated to the master's degree level, and some to the doctoral level, and meet the most stringent continuing education and recertification standards in the field. Thanks to this tradition of advanced education and clinical practice excellence, we are humbled and honored to note that anesthesia is 50 times safer now than in the early 1980s (National Academy of Sciences, 2000). Research further demonstrates that the care delivered by CRNAs, physician anesthesiologists, or by both working together yields similar patient safety outcomes. In addition to studies performed by the National Academy of Sciences in 1977, Forrest in 1980, Bechtoldt in 1981, the Minnesota Department of Health in 1994, and others, Dr. Michael Pine, MD, MBA, recently concluded once again that among CRNAs and physician anesthesiologists, "the type of anesthesia provider does not affect inpatient surgical mortality" (Pine, 2003). Thus, the practice of anesthesia is a recognized specialty in nursing and medicine. Most recently, a study published in *Nursing Research* confirmed obstetrical anesthesia services are extremely safe, and that there is no difference in safety between hospitals that use only CRNAs compared with those that use only anesthesiologists (Simonson et al, 2007). Both CRNAs and anesthesiologists administer anesthesia for all types of surgical procedures from the simplest to the most complex, either as single providers or together.

NURSE ANESTHETISTS IN THE MILITARY

Since the mid-19th century, our profession of nurse anesthesia has been proud and honored to provide anesthesia care for our past and present military personnel and their families. From the Civil War to the present day, nurse anesthetists have been the principal anesthesia providers in combat areas of every war in which the United States has been engaged.

Military nurse anesthetists have been honored and decorated by the U.S. and foreign governments for outstanding achievements, resulting from their dedication and commitment to duty and competence in managing seriously wounded casualties. In World War II, there were 17 nurse anesthetists to every one anesthesiologist. In Vietnam, the ratio of CRNAs to physician anesthesiologists was approximately 3:1. Two nurse anesthetists were killed in Vietnam and their names have been engraved on the Vietnam Memorial Wall. During the Panama strike, only CRNAs were sent with

the fighting forces. Nurse anesthetists served with honor during Desert Shield and Desert Storm.

Military CRNAs also provide critical anesthesia support to humanitarian missions around the globe in such places as Bosnia and Somalia. In May 2003, approximately 364 nurse anesthetists had been deployed to the Middle East for the military mission for "Operation Iraqi Freedom" and "Operation Enduring Freedom." When President George W. Bush initiated "Operation Enduring Freedom," CRNAs were immediately deployed. With the new special operations environment new training was needed to prepare our CRNAs to ensure military medical mobilization and readiness. Brigadier General Barbara C. Brannon, Assistant Surgeon General, Air Force Nursing Services, testified before this Senate Committee on May 8, 2002, to provide an account of CRNAs on the job overseas. She stated, "Lt. Col Beisser, a certified registered nurse anesthetist (CRNA) leading a Mobile Forward Surgical Team (MFST), recently commended the seamless interoperability he witnessed during treatment of trauma victims in Special Forces mass casualty incident."

Data gathered from the U.S. Armed Forces anesthesia communities reveal that CRNAs have often been the sole anesthesia providers at certain facilities, both at home and while forward deployed. For decades CRNAs have staffed ships, isolated U.S. Bases, and forward surgical teams without physician anesthesia support. The U.S. Army Joint Special Operations Command Medical Team and all Army Forward Surgical Teams are staffed solely by CRNAs. Military CRNAs have a long proud history of providing independent support and quality anesthesia care to military men and women, their families and to people from many nations who have found themselves in harm's way.

In the current mission, CRNAs are deployed all over the world, on land and at sea. This committee must ensure that we retain and recruit CRNAs for now and in the future to serve in these military deployments overseas. This committee must ensure that we retain and recruit CRNAs now and in the future to serve in these military overseas deployments and humanitarian efforts, and to ensure the maximum readiness of America's armed services.

NURSE ANESTHESIA PROVIDER SUPPLY AND DEMAND: SOLUTIONS FOR RECRUITMENT AND RETENTION

In all of the Services, maintaining adequate numbers of active duty CRNAs is of utmost concern. For several years, the number of CRNAs serving in active duty fell short of the number authorized by the Department of Defense (DOD). This is further complicated by strong demand for CRNAs in both the public and private sectors.

It is essential to understand that while there is strong demand for CRNA services in the public and private healthcare sectors, the profession of nurse anesthesia is working effectively to meet this workforce challenge. The AANA anticipates growing demand for CRNAs. Our evidence suggests that while vacancies exist, the demand for anesthesia professionals can be met if appropriate actions are taken. As of January 2009, there are 108 accredited CRNA schools to support the profession of nurse anesthesia. The number of qualified registered nurses applying to CRNA schools continues to climb. The growth in the number of schools, the number of applicants, and in production capacity, has yielded significant growth in the number of nurse anesthetists graduating and being certified into the profession, while absolutely maintaining and strengthening the quality and competence of these clinicians. The Council on Certification of Nurse Anesthetists reports that in 2008, our schools produced 2,161 graduates, double the number since 2000, and 2,110 nurse anesthetists were certified. The growth is expected to continue. The Council on Accreditation of Nurse Anesthesia Educational Programs (COA) projects that CRNA schools will produce over 2,417 graduates in 2009.

This Committee can greatly assist in the effort to attract and maintain essential numbers of nurse anesthetists in the military by their support to increase special pays.

INCENTIVE SPECIAL PAY FOR NURSES

According to a March 1994 study requested by the Health Policy Directorate of Health Affairs and conducted by DOD, a large pay gap existed between annual civilian and military pay in 1992. This study concluded, "this earnings gap is a major reason why the military has difficulty retaining CRNAs." In order to address this pay gap, in the fiscal year 1995 Defense Authorization bill Congress authorized the implementation of an increase in the annual Incentive Special Pay (ISP) for nurse anesthetists from \$6,000 to \$15,000 for those CRNAs no longer under service obliga-

tion to pay back their anesthesia education. Those CRNAs who remained obligated receive the \$6,000 ISP.

Both the House and Senate passed the fiscal year 2003 Defense Authorization Act Conference report, H. Rept. 107-772, which included an ISP increase to \$50,000. The report included an increase in ISP for nurse anesthetists from \$15,000 to \$50,000. The AANA is requesting that this committee fund the ISP at \$50,000 for all the branches of the armed services to retain and recruit CRNAs now and into the future. Per the testimony provided in 2006 from the three services' Nurse Corps leaders, the AANA is aware that there is an active effort with the Surgeons General to closely evaluate and adjust ISP rates and policies needed to support the recruitment and retention of CRNAs. In 2006, Major General Gale Pollock, MBA, MHA, MS, CRNA, FACHE, Deputy Surgeon General, Army Nurse Corps of the U.S. Army stated in testimony before this Subcommittee, "I am particularly concerned about the retention of our certified registered nurse anesthetists (CRNAs). Our inventory of CRNAs is currently at 73 percent. The restructuring of the incentive special pay program for CRNAs last year, as well as the 180 (day)-deployment rotation policy were good first steps in stemming the loss of these highly trained providers. We are working closely with the Surgeon General's staff to closely evaluate and adjust rates and policies where needed."

There have been positive results from the Nurse Corps and Surgeons General initiatives to increase incentive special pays for CRNAs. In testimony before the House Armed Services Committee in 2007, Gen. Pollock stated, "We have . . . increased the Incentive Special Pay (ISP) Certified Registered Nurse Anesthetist, and expanded use of the Health Professions Loan Repayment Program (HPLRP). The . . . Nurse Anesthetist bonuses have been very successful in retaining these providers who are critically important to our mission on the battlefield." She also stated in that same statement, "In 2004, we increased the multi-year bonuses we offer to Certified Registered Nurse Anesthetists with emphasis on incentives for multi-year agreements. A year's worth of experience indicates that this increased bonus, 180-day deployments, and a revamped Professional Filler system to improve deployment equity is helping to retain CRNAs."

There still continues to be high demand for CRNAs in the healthcare community leading to higher incomes widening the gap in pay for CRNAs in the civilian sector compared to the military. However, the ISP and other incentives the services are providing CRNAs has helped close that gap the past 3 years, according to the most recent AANA membership survey data. In civilian practice, all additional skills, experience, duties and responsibilities, and hours of work are compensated for monetarily. Additionally, training (tuition and continuing education), healthcare, retirement, recruitment and retention bonuses, and other benefits often equal or exceed those offered in the military. Therefore, it is vitally important that the Incentive Special Pay (ISP) be supported to ensure retention of CRNAs in the military.

AANA thanks this Committee for its support of the annual ISP for nurse anesthetists. AANA strongly recommends the continuation in the annual funding for ISP at \$50,000 or more for fiscal year 2010, which recognizes the special skills and advanced education that CRNAs bring to the DOD healthcare system, and supports the mission of our U.S. Armed Forces.

BOARD CERTIFICATION PAY FOR NURSES

Included in the fiscal year 1996 Defense Authorization bill was language authorizing the implementation of a board certification pay for certain clinicians who are not physicians, including advanced practice nurses.

AANA is highly supportive of board certification pay for all advanced practice nurses. The establishment of this type of pay for nurses recognizes that there are levels of excellence in the profession of nursing that should be recognized, just as in the medical profession. In addition, this pay may assist in closing the earnings gap, which may help with retention of CRNAs.

While many CRNAs have received board certification pay, some remain ineligible. Since certification to practice as a CRNA does not require a specific master's degree, many nurse anesthetists have chosen to diversify their education by pursuing an advanced degree in other related fields. But CRNAs with master's degrees in education, administration, or management are not eligible for board certification pay since their graduate degree is not in a clinical specialty. Many CRNAs who have non-clinical master's degrees either chose or were guided by their respective services to pursue a degree other than in a clinical specialty. The AANA encourages DOD and the respective services to reexamine the issue of restricting board certification pay only to CRNAs who have specific clinical master's degrees.

DOD/VA RESOURCE SHARING: U.S. ARMY-VA JOINT PROGRAM IN NURSE ANESTHESIA,
FORT SAM HOUSTON, SAN ANTONIO, TX

The establishment of the joint U.S. Army-VA program in nurse anesthesia education at the U.S. Army Graduate Program in Anesthesia Nursing, Fort Sam Houston, in San Antonio, TX holds the promise of making significant improvements in the VA CRNA workforce, as well as improving retention of DOD registered nurses in a cost effective manner. The current program utilizes existing resources from both the Department of Veterans Affairs Employee Incentive Scholarship Program (EISP) and VA hospitals to fund tuition, books, and salary reimbursement for student registered nurse anesthetists (SRNAs). This joint program also serves the interests of the Army.

This VA nurse anesthesia program started in June 2004 with three openings for VA registered nurses to apply to and earn a Master of Science in Nursing (MSN) in anesthesia granted through the University of Texas Houston Health Science Center. In the future, the program is granting degrees through the Northeastern University Bouve College of Health Sciences nurse anesthesia educational program in Boston, Mass. At a time of increased deployments in medical military personnel, this type of VA-DOD partnership is a cost-effective model to fill these gaps in the military healthcare system. At Fort Sam Houston, the VA faculty director has covered her Army colleagues' didactic classes when they are deployed at a moments notice. This benefits both the VA and the DOD to ensure the nurse anesthesia students are trained and certified in a timely manner to meet their workforce obligation to the Federal Government as anesthesia providers. We are pleased to note that the Department of Veterans' Affairs Acting Deputy Under Secretary for Health and the U.S. Army Surgeon General approved funding to start this VA nurse anesthesia school in 2004. In addition, the VA director has been pleased to work under the direction of the Army program director LTC Thomas Ceremuga, CRNA, PhD to further the continued success of this U.S. Army-VA partnership. With modest levels of additional funding in the VA EISP, this joint U.S. Army-VA nurse anesthesia education initiative can grow and thrive, and serve as a model for meeting other VA workforce needs, particularly in nursing.

CONCLUSION

In conclusion, the AANA believes that the recruitment and retention of CRNAs in the armed services is of critical concern. By Congress supporting these efforts to recruit and retain CRNAs, the military is able to meet the mission to provide benefit care and deployment care—a mission that is unique to the military.

The AANA would also like to thank the Surgeons General and Nurse Corp leadership for their support in meeting the needs of the profession within the military workforce. Last, we commend and thank this committee for their continued support for CRNAs in the military.

Chairman INOUE. Our next witness is the legislative director of the National Association for Uniformed Services, Mr. Rick Jones.

**STATEMENT OF RICHARD A. "RICK" JONES, LEGISLATIVE DIRECTOR,
NATIONAL ASSOCIATION FOR UNIFORMED SERVICES**

Mr. JONES. Chairman Inouye, Ranking Member Cochran, it's a privilege to be invited before your subcommittee.

My association is very proud of the job our young generation is doing overseas. They risk their lives every day, and what we do for them is vital for the debt we owe them and the vital job they do for security.

Mr. Chairman, quality healthcare is a strong incentive for a military career. My association asks that you ensure full funding is provided to maintain the value of the healthcare benefit that has been earned by these men and women who have served a career in our military.

Mr. Chairman, the war on terror is fought by an overstretched force. There are signs of wear; simply too many missions and too few troops. We must increase troop strength; it must be resourced.

We ask that you give priority to funding operation and maintenance accounts to reset, recapitalize, and renew the force.

My association asks, also, that you maintain the Walter Reed facility. Its operations support and medical services require an uninterrupted care for those who are catastrophically wounded. We request that funds be in place to ensure that Walter Reed remain open, fully operational, fully functional, until the planned facilities at Bethesda and Fort Belvoir are in place and ready to give appropriate care to these young servicemen and women.

Our wounded warriors deserve the Nation's best quality treatment. They earned it the hard way. With proper resources, we know our Nation will continue to hold the well-being of these troops in hand.

Traumatic brain injury is the signature injury of the war overseas. We request that the subcommittee fund a full spectrum of traumatic brain injury care. The approach to this problem requires resources for hiring doctors, nurses, clinicians, general caregivers. And we must meet the needs of these men and women and their families. They have given so much for our Nation.

We encourage the subcommittee to ensure funding for the Defense Department prosthetic research, to make sure that that is adequately funded. We support the Uniformed Service University Healthcare. That Federal school has the—provides medical instruction to all active duty troops who provide for wartime casualties, for national disasters, for emerging diseases. And we support the Armed Forces Retirement Home in Washington, DC, and in Gulfport, Mississippi.

Mr. Chairman, regarding the supplemental, NAUS received a message from one of our members who wanted us to assure that we support a strong, timely action on the emergency supplemental. The bill will assure that, as our sons and daughters go into harm's way under the flag of the United States, they will have the vital wherewithal to carry out their mission. He's concerned, however, that when he sees not one dime, one penny, nor a shadow of concern is given to our military survivors, yet \$1 billion will be spent on a program to replace older cars—cash for clunkers—he says he's concerned about our survivors.

Thank you very much for the opportunity to testify.

Chairman INOUE. Thank you very much, Director Jones.

[The statement follows:]

PREPARED STATEMENT OF RICK JONES

Chairman Inouye, Ranking Member Cochran, and members of the Subcommittee, it is a pleasure to appear before you today to present the views of the National Association for Uniformed Services on the fiscal year 2010 Defense Appropriations Bill.

My name is Richard "Rick" Jones, Legislative Director of the National Association for Uniformed Services (NAUS). And for the record, NAUS has not received any Federal grant or contract during the current fiscal year or during the previous 2 years in relation to any of the subjects discussed today.

As you know, the National Association for Uniformed Services, founded in 1968, represents all ranks, branches and components of uniformed services personnel, their spouses and survivors. The Association includes all personnel of the active, retired, Reserve and National Guard, disabled veterans, veterans community and their families. We love our country, believe in a strong national defense, support our troops, and honor their service.

Mr. Chairman, the first and most important responsibility of our government is the protection of our citizens. As we all know, we are at war. That is why the de-

fense appropriations bill is so very important. It is critical that we provide the resources to those who fight for our protection and our way of life. We need to give our courageous men and women everything they need to prevail. And we must recognize as well that we must provide priority funding to keep the promises made to the generations of warriors whose sacrifice has paid for today's freedom.

At the start, I want to express NAUS concern about the amount of our investment in our national defense. At the height of the War on Terror, our current defense budget represents only a little more than 4 percent of the gross national product, as opposed to the average of 5.7 percent of GNP in the peacetime years between 1940 and 2000.

We cannot look the other way in a time when we face such serious threats. Resources are required to ensure our military is fully staffed, trained, and equipped to achieve victory against our enemies. Leaders in Congress and the administration need to balance our priorities and ensure our defense in a dangerous world.

Here, I would like to make special mention of the leadership and contribution this panel has made in providing the resources and support our forces need to complete their mission. Defending the United States homeland and the cause of freedom means that the dangers we face must be confronted. And it means that the brave men and women who put on the uniform must have the very best training, best weapons, best care and wherewithal we can give them.

The members of this important panel have taken every step to give our fighting men and women the funds they need, despite allocations we view as insufficient for our total defense needs. You have made difficult priority decisions that have helped defend America and taken special care of one of our greatest assets, namely our men and women in uniform.

And the National Association for Uniformed Services is very proud of the job this generation of Americans is doing to defend America. Every day they risk their lives, half a world away from loved ones. Their daily sacrifice is done in today's voluntary force. What they do is vital to our security. And the debt we owe them is enormous.

Our Association does, however, have some concerns about a number of matters. Among the major issues that we will address today is the provision of a proper health care for the military community and recognition of the funding requirements for TRICARE for retired military. Also, we will ask for adequate funding to improve the pay for members of our armed forces and to address a number of other challenges including TRICARE Reserve Select and the Survivor Benefit Plan.

We also have a number of related priority concerns such as the diagnosis and care of troops returning with Post Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI), the need for enhanced priority in the area of prosthetics research, and providing improved seamless transition for returning troops between the Department of Defense (DOD) and the Department of Veterans Affairs (VA). In addition, we would like to ensure that adequate funds are provided to defeat injuries from the enemy's use of Improvised Explosive Devices (IEDs).

TRICARE AND MILITARY QUALITY OF LIFE: HEALTH CARE

Quality health care is a strong incentive to make military service a career. The provision of quality, timely care is considered one of the most important benefits afforded the career military. The TRICARE benefit, earned through a career of service in the uniformed services, reflects the commitment of a Nation, and it deserves your wholehearted support.

It should also be recognized that discussions have once again begun on increasing the retiree-paid costs of TRICARE earned by military retirees and their families. We remember the outrageous statement of Dr. Gail Wilensky, a co-chair of the Task Force on the Future of Military, calling congressional passage of TRICARE for Life "a big mistake."

And more recently, we heard Admiral Mike Mullen, the current Chairman of Joint Chiefs of Staff, call for an increase in TRICARE fees. Mullen said, "It's a given as far as I'm concerned."

Fortunately, President Obama has taken fee increases off the table this year in the administration budget recommendation. However, with comments like these from those in leadership positions, there is little wonder that retirees and active duty personnel are upset.

Seldom has NAUS seen such a lowing in confidence about the direction of those who manage the program. Faith in our leadership continues, but it is a weakening faith. And unless something changes, it is bound to affect recruiting and retention.

CRIMINAL ACTIVITY COSTS MEDICARE AND TRICARE BILLIONS OF DOLLARS

Recent testimony and studies from the Government Accountability Office (GAO), the investigative arm of the United States Congress, shows us that at least \$80 billion worth of Medicare money is being ripped off every year. Frankly, it demonstrates that criminal activity costs Medicare and TRICARE billions of dollars.

Here are a couple of examples. GAO reports that one company billed Medicare for \$170 million for HIV drugs. In truth, the company dispensed less than a million dollars. In addition, the company billed \$142 million for nonexistent delivery of supplies and parts and medical equipment.

In another example, fake Medicare providers billed Medicare for prosthetic arms on people who already have two arms. The fraud amounted to \$1.4 billion of bills for people who do not need prosthetics.

TRICARE is closely tied to Medicare and its operations are not immune. According to Rose Sabo, Director of the TRICARE Program Integrity Office, the Government Accountability Office says that 10 percent of all health care expenditures are fraudulent. With a military health system annual cost of \$47 billion, fraudulent purchase of care in the military health system would amount to \$4.7 billion.

Last year a Philippine corporation was ordered to pay back more than \$100 million following a TRICARE fraud conviction. But despite TRICARE efforts to uncover this type of criminal activity, money continues to go out the door with insufficient resources dedicated to its recovery.

Regarding TRICARE efforts to uncover fraud problems, it should be noted that documents by the Department of Defense Inspector General (DODIG) reported the fraud as early as 1998 to TRICARE Management Activity (TMA). But it wasn't until 2005 that TMA stopped paying the fraudulent claims reported 7 years earlier by DODIG.

NAUS urges the Subcommittee to challenge DOD and TRICARE authorities to put some guts behind efforts to drive fraud down and out of the system. If left unchecked, fraud will increasingly strip away resources from government programs like TRICARE. And unless Congress directs the administration to take action, you know who will be left in the breach, holding the bag—the law abiding retiree and family.

We recently learned of an incident of clear outright healthcare fraud involving a Medicare/TRICARE provider. The patient was a member of a veterans-related survivor organization and a TRICARE for Life beneficiary. She went to visit a doctor for the first time but was not content with the provider so she did not see him again. But bills against TRICARE continued to roll in for visits and services that were never provided. The beneficiary reported this suspicious activity to the TRICARE Management Activity. TRICARE officials were reticent to talk to the individual when she called them again to report additional fraudulent bills. When the individual's survivor organization became involved, it was told by TRICARE not to worry about the billings because the bogus charges only added up to about \$2,500, which fell below the level of investigative action. The TMA rationale is troublesome on many levels. It is, of course, quite possible that the same doctor charged TRICARE for the "care" of other patients.

A fair portion of the cost of controlling Medicare and TRICARE fraud can be directly attributed to the detection of it. In this instance, a beneficiary attempted to perform her civic duty by "sounding the alarm" only to be ignored by the agency that claims to be committed to preventing, identifying, and assisting in the prosecution of healthcare fraud, not only to save valuable benefit dollars but also to ensure that eligible beneficiaries receive appropriate medical care. Deceitful schemes can adversely impact the quality of the care received. NAUS believes that criminal activity should be identified and prosecuted to the fullest extent of the law, whether it is for \$2,500 or \$250,000.

America expects its government to move courageously and tackle the real problems of issues like fraud in the TRICARE system and the Medicare system. The government should direct and resource its investigative teams to root out criminal activity, rather than looking to take money out of the pockets of military retirees. With hard work and honest public service, we are confident Congress will have more than enough money to pay for earned benefits like TRICARE.

The National Association for Uniformed Services urges increased funding for the Defense Criminal Investigative Service (DCIS), the criminal investigative arm of the DOD Inspector General, and for the TRICARE Program Integrity Office, responsible for anti-fraud activity in the military health system.

We urge the Subcommittee to take the actions necessary for honoring our obligation to those men and women who have worn the Nation's military uniform. Root out the corruption, fraud and waste. And confirm America's solemn, moral obliga-

tion to support our troops, our military retirees, and their families. They have kept their promise to our Nation, now it's time for us to keep our promise to them.

MILITARY QUALITY OF LIFE: PAY

For fiscal year 2010, the administration recommends a 2.9 percent across-the-board pay increase for members of the Armed Forces. The proposal is designed, according to the Pentagon, to keep military pay in line with civilian wage growth.

The National Association for Uniformed Services calls on you to put our troops and their families first. Our forces are stretched thin, at war, yet getting the job done. We ask you to express the Nation's gratitude for their critical service, increase basic pay and drill pay one-half percent above the administration's request to 3.4 percent.

Congress and the administration have done a good job over the recent past to narrow the gap between civilian-sector and military pay. The differential, which was as great as 14 percent in the late 1990s, has been reduced to just under 4 percent with the January 2009 pay increase.

However, we can do better than simply maintaining a rough measure of comparability with the civilian wage scale. To help retention of experience and entice recruitment, the pay differential is important. We have made significant strides. But we are still below the private sector.

In addition, we urge the appropriations panel to never lose sight of the fact that our DOD manpower policy needs a compensation package that is reasonable and competitive. Bonuses have a role in this area. Bonuses for instance can pull people into special jobs that help supply our manpower for critical assets, and they can also entice "old hands" to come back into the game with their skills.

The National Association for Uniformed Services asks you to do all you can to fully compensate these brave men and women for being in harm's way, we should clearly recognize the risks they face and make every effort to appropriately compensate them for the job they do.

MILITARY QUALITY OF LIFE: BASIC ALLOWANCE FOR HOUSING

The National Association for Uniformed Services strongly supports revised housing standards within the Basic Allowance for Housing (BAH). We are most grateful for the congressional actions reducing out-of-pocket housing expenses for servicemembers over the last several years. Despite the many advances made, many enlisted personnel continue to face steep challenge in providing themselves and their families with affordable off-base housing and utility expenses. BAH provisions must ensure that rates keep pace with housing costs in communities where military members serve and reside. Efforts to better align actual housing rates can reduce unnecessary stress and help those who serve better focus on the job at hand, rather than the struggle with meeting housing costs for their families.

MILITARY QUALITY OF LIFE: FAMILY HOUSING ACCOUNTS

The National Association for Uniformed Services urges the Subcommittee to provide adequate funding for military construction and family housing accounts used by DOD to provide our service members and their families quality housing. The funds for base allowance and housing should ensure that those serving our country are able to afford to live in quality housing whether on or off the base. The current program to upgrade military housing by privatizing Defense housing stock is working well. We encourage continued oversight in this area to ensure joint military-developer activity continues to improve housing options. Clearly, we need to be particularly alert to this challenge as we implement BRAC and related rebasing changes.

The National Association for Uniformed Services also asks special provision be granted the National Guard and Reserve for planning and design in the upgrade of facilities. Since the terrorist attacks of Sept. 11, 2001, our Guardsmen and reservists have witnessed an upward spiral in the rate of deployment and mobilization. The mission has clearly changed, and we must recognize they account for an increasing role in our national defense and homeland security responsibilities. The challenge to help them keep pace is an obligation we owe for their vital service.

INCREASE FORCE READINESS FUNDS

The readiness of our forces is in decline. The long war fought by an overstretched force tells us one thing: there are simply too many missions and too few troops. Extended and repeated deployments are taking a human toll. Back-to-back deployments means, in practical terms, that our troops face unrealistic demands. To sus-

tain the service we must recognize that an increase in troop strength is needed and it must be resourced.

In addition, we ask you to give priority to funding for the operations and maintenance accounts where money is secured to reset, recapitalize and renew the force. The National Guard, for example, has virtually depleted its equipment inventory, causing rising concern about its capacity to respond to disasters at home or to train for its missions abroad.

The deficiencies in the equipment available for the National Guard to respond to such disasters include sufficient levels of trucks, tractors, communication, and miscellaneous equipment. If we have another overwhelming storm, hurricane or, God forbid, a large-scale terrorist attack, our National Guard is not going to have the basic level of resources to do the job right.

WALTER REED ARMY MEDICAL CENTER

Another matter of great interest to our members is the plan to realign and consolidate military health facilities in the National Capital Region. The proposed plan includes the realignment of all highly specialized and sophisticated medical services currently located at Walter Reed Army Medical Center in Washington, DC, to the National Naval Medical Center in Bethesda, MD, and the closing of the existing Walter Reed by 2011.

While we herald the renewed review of the adequacy of our hospital facilities and the care and treatment of our wounded warriors that result from last year's news reports of deteriorating conditions at Walter Reed Army Medical Center, the National Association for Uniformed Services believes that Congress must continue to provide adequate resources for WRAMC to maintain its base operations' support and medical services that are required for uninterrupted care of our catastrophically wounded soldiers and marines as they move through this premier medical center.

We request that funds be in place to ensure that Walter Reed remains open, fully operational and fully functional, until the planned facilities at Bethesda or Fort Belvoir are in place and ready to give appropriate care and treatment to the men and women wounded in armed service.

Our wounded warriors deserve our Nation's best, most compassionate healthcare and quality treatment system. They earned it the hard way. And with application of the proper resources, we know the Nation will continue to hold the well-being of soldiers and their families as our number one priority.

DEPARTMENT OF DEFENSE, SEAMLESS TRANSITION BETWEEN THE DOD AND VA

The development of electronic medical records remains a major goal. It is our view that providing a seamless transition for recently discharged military is especially important for servicemembers leaving the military for medical reasons related to combat, particularly for the most severely injured patients.

The National Association for Uniformed Services is pleased to receive the support of President Obama and the forward movement of Secretaries Gates and Shinseki toward this long-supported goal of providing a comprehensive e-health record.

The National Association for Uniformed Services calls on the appropriations committee to continue the push for DOD and VA to follow through on establishing a bi-directional, interoperable electronic medical record. Since 1982, these two departments have been working on sharing critical medical records, yet to date neither has effectively come together in coordination with the other.

The time for foot dragging is over. Taking care of soldiers, sailors, airmen, and marines is a national obligation, and doing it right sends a strong signal to those currently in military service as well as to those thinking about joining the military.

DOD must be directed to adopt electronic architecture including software, data standards, and data repositories that are compatible with the system used at the Department of Veterans Affairs. It makes absolute sense and it would lower costs for both organizations.

If our seriously wounded troops are to receive the care they deserve, the departments must do what is necessary to establish a system that allows seamless transition of medical records. It is essential if our Nation is to ensure that all troops receive timely, quality health care and other benefits earned in military service.

To improve the DOD/VA exchange, the hand-off should include a detailed history of care provided and an assessment of what each patient may require in the future, including mental health services. No veteran leaving military service should fall through the bureaucratic cracks.

DEFENSE DEPARTMENT FORCE PROTECTION

The National Association for Uniformed Services urges the Subcommittee to provide adequate funding to rapidly deploy and acquire the full range of force protection capabilities for deployed forces. This would include resources for up-armored high mobility multipurpose wheeled vehicles and add-on ballistic protection to provide force protection for soldiers in Iraq and Afghanistan, ensure increased activity for joint research and treatment effort to treat combat blast injuries resulting from improvised explosive devices (IEDs), rocket propelled grenades, and other attacks; and facilitate the early deployment of new technology, equipment, and tactics to counter the threat of IEDs.

We ask special consideration be given to counter IEDs, defined as makeshift or "homemade" bombs, often used by enemy forces to destroy military convoys and currently the leading cause of casualties to troops deployed in Iraq. These devices are the weapon of choice and, unfortunately, a very efficient weapon used by our enemy. The Joint Improvised Explosive Device Defeat Organization (JIEDDO) is established to coordinate efforts that would help eliminate the threat posed by these IEDs. We urge efforts to advance investment in technology to counteract radio-controlled devices used to detonate these killers. Maintaining support is required to stay ahead of our enemy and to decrease casualties caused by IEDs.

DEFENSE HEALTH PROGRAM—TRICARE RESERVE SELECT

Mr. Chairman, another area that requires attention is reservist participation in TRICARE. As we are all aware, National Guard and Reserve personnel have seen an upward spiral of mobilization and deployment since the terrorist attacks of Sept. 11, 2001. The mission has changed and with it our reliance on these forces has risen. Congress has recognized these changes and begun to update and upgrade protections and benefits for those called away from family, home, and employment to active duty. We urge your commitment to these troops to ensure that the long overdue changes made in the provision of their health care and related benefits is adequately resourced. We are one force, all bearing a critical share of the load.

DEPARTMENT OF DEFENSE, PROSTHETIC RESEARCH

Clearly, care for our troops with limb loss is a matter of national concern. The global war on terrorism in Iraq and Afghanistan has produced wounded soldiers with multiple amputations and limb loss who in previous conflicts would have died from their injuries. Improved body armor and better advances in battlefield medicine reduce the number of fatalities, however injured soldiers are coming back oftentimes with severe, devastating physical losses.

In order to help meet the challenge, Defense Department research must be adequately funded to continue its critical focus on treatment of troops surviving this war with grievous injuries. The research program also requires funding for continued development of advanced prosthesis that will focus on the use of prosthetics with microprocessors that will perform more like the natural limb.

The National Association for Uniformed Services encourages the Subcommittee to ensure that funding for Defense Department's prosthetic research is adequate to support the full range of programs needed to meet current and future health challenges facing wounded veterans. To meet the situation, the Subcommittee needs to focus a substantial, dedicated funding stream on Defense Department research to address the care needs of a growing number of casualties who require specialized treatment and rehabilitation that result from their armed service.

We would also like to see better coordination between the Department of Defense Advanced Research Projects Agency and the Department of Veterans Affairs in the development of prosthetics that are readily adaptable to aid amputees.

POST TRAUMATIC STRESS DISORDER (PTSD) AND TRAUMATIC BRAIN INJURY (TBI)

The National Association for Uniformed Services supports a higher priority on Defense Department care of troops demonstrating symptoms of mental health disorders and traumatic brain injury.

It is said that Traumatic Brain Injury (TBI) is the signature injury of the Iraq war. Blast injuries often cause permanent damage to brain tissue. Veterans with severe TBI will require extensive rehabilitation and medical and clinical support, including neurological and psychiatric services with physical and psycho-social therapies.

We call on the Subcommittee to fund a full spectrum of TBI care and to recognize that care is also needed for patients suffering from mild to moderate brain injuries, as well. The approach to this problem requires resources for hiring caseworkers,

doctors, nurses, clinicians, and general caregivers if we are to meet the needs of these men and women and their families.

The mental condition known as Post Traumatic Stress Disorder (PTSD) has been well known for over a hundred years under an assortment of different names. For example more than 60 years ago, Army psychiatrists reported, "That each moment of combat imposes a strain so great that . . . psychiatric casualties are as inevitable as gunshot and shrapnel wounds in warfare."

PTSD is a serious psychiatric disorder. While the government has demonstrated over the past several years a higher level of attention to those military personnel who exhibit PTSD symptoms, more should be done to assist service members found to be at risk.

Pre-deployment and post-deployment medicine is very important. Our legacy of the Gulf War demonstrates the concept that we need to understand the health of our service members as a continuum, from pre- to post-deployment.

The National Association for Uniformed Services applauds the extent of help provided by the Defense Department, however we encourage that more resources be made available to assist. Early recognition of the symptoms and proactive programs are essential to help many of those who must deal with the debilitating effects of mental injuries, as inevitable in combat as gunshot and shrapnel wounds.

We encourage the Members of the Subcommittee to provide for these funds and to closely monitor their expenditure and to see they are not redirected to other areas of defense spending.

ARMED FORCES RETIREMENT HOME

The National Association for Uniformed Services encourages the Subcommittee's continued interest in providing funds for the Armed Forces Retirement Home (AFRH).

We urge the Subcommittee to continue its help in providing adequate funding to alleviate the strains on the Washington home. Also, we remain concerned about the future of the Gulfport home, so we urge your continued close oversight on its reconstruction. And we thank the subcommittee for the construction of a new Armed Forces Retirement Home at its present location in Gulfport.

The National Association for Uniformed Services also asks the Subcommittee to closely review administration plans to sell great portions of the Washington AFRH to developers. The AFRH home is a historic national treasure, and we thank Congress for its oversight of this gentle program and its work to provide for a world-class quality-of-life support system for these deserving veterans.

IMPROVED MEDICINE WITH LESS COST AT MILITARY TREATMENT FACILITIES

The National Association for Uniformed Services is also seriously concerned over the consistent push to have Military Health System beneficiaries age of 65 and over moved into the civilian sector from military care. That is a very serious problem for the Graduate Medical Education (GME) programs in the MHS; the patients over 65 are required for sound GME programs, which, in turn, ensure that the military can retain the appropriate number of physicians who are board certified in their specialties.

TRICARE/HA policies are pushing out those patients not on active duty into the private sector where the cost per patient is at least twice as expensive as that provided within Military Treatment Facilities (MTFs). We understand that there are many retirees and their families who must use the private sector due to the distance from the closest MTF; however, where possible, it is best for the patients themselves, GME, medical readiness, and the minimizing the cost of TRICARE premiums if as many non-active duty beneficiaries are taken care of within the MTFs. As more and more MHS beneficiaries are pushed into the private sector, the cost of the MHS rises. The MHS can provide better medicine, more appreciated service and do it at improved medical readiness and less cost to the taxpayers.

UNIFORMED SERVICES UNIVERSITY OF THE HEALTH SCIENCES

As you know, the Uniformed Services University of the Health Sciences (USUHS) is the Nation's Federal school of medicine and graduate school of nursing. The medical students are all active-duty uniformed officers in the Army, Navy, Air Force, and U.S. Public Health Service who are being educated to deal with wartime casualties, national disasters, emerging diseases, and other public health emergencies.

The National Association for Uniformed Services supports the USUHS and requests adequate funding be provided to ensure continued accredited training, especially in the area of chemical, biological, radiological, and nuclear response. In this regard, it is our understanding that USUHS requires funding for training and edu-

cational focus on biological threats and incidents for military, civilian, uniformed first responders, and healthcare providers across the Nation.

JOINT POW/MIA ACCOUNTING COMMAND (JPAC)

We also want the fullest accounting of our missing servicemen and ask for your support in DOD dedicated efforts to find and identify remains. It is a duty we owe to the families of those still missing as well as to those who served or who currently serve. And as President Bush said, "It is a signal that those who wear our country's military uniform will never be abandoned."

In recent years, funding for the Joint POW/MIA Accounting Command (JPAC) has fallen short, forcing the agency to scale back and even cancel many of its investigative and recovery operations. NAUS supports the fullest possible accounting of our missing servicemen. It is a duty we owe the families, to ensure that those who wear our country's uniform are never abandoned. We request that appropriate funds be provided to support the JPAC mission for fiscal year 2010.

APPRECIATION FOR THE OPPORTUNITY TO TESTIFY

As a staunch advocate for our uniformed service men and women, the National Association for Uniformed Services recognizes that these brave men and women did not fail us in their service to country, and we, in turn, must not fail them in providing the benefits and services they earned through honorable military service.

Mr. Chairman, the National Association for Uniformed Services appreciates the Subcommittee's hard work. We ask that you continue to work in good faith to put the dollars where they are most needed: in strengthening our national defense, ensuring troop protection, compensating those who serve, providing for DOD medical services including TRICARE, and building adequate housing for military troops and their families, and in the related defense matters discussed today. These are some of our Nation's highest priority needs and we ask that they be given the level of attention they deserve.

The National Association for Uniformed Services is confident you will take special care of our Nation's greatest assets: the men and women who serve and have served in uniform. We are proud of the service they give to America every day. They are vital to our defense and national security. The price we pay as a Nation for their earned benefits is a continuing cost of war, and it will never cost more nor equal the value of their service.

We thank you for your efforts, your hard work. And we look forward to working with you to ensure we continue to provide sufficient resources to protect the earned benefits for those giving military service to America every day.

Again, the National Association for Uniformed Services deeply appreciates the opportunity to present the Association's views on the issues before the Defense Appropriations Subcommittee.

Chairman INOUE. Our next witness represents the Ovarian Cancer National Alliance, Ms. Cara Tenenbaum.

**STATEMENT OF CARA TENENBAUM, SENIOR POLICY DIRECTOR,
OVARIAN CANCER NATIONAL ALLIANCE**

Ms. TENENBAUM. Good morning, Mr. Chairman, Vice Chairman. I want to thank you and all the members of the subcommittee for the opportunity to testify today. I'm here to talk about the Department of Defense's Ovarian Cancer Research Program, one of the congressionally directed medical research programs.

For more than 10 years, the Ovarian Cancer National Alliance has worked with you to fund groundbreaking research that will help women diagnosed with, and women at high risk for, ovarian cancer. The ovarian cancer community is so grateful for the money you've appropriated in the past and last year, and we respectfully request further funding for this year, fiscal year 2010.

Simply put, the ovarian cancer research program's mission is to eliminate ovarian cancer. It's the only Federal research program with that mission, conquering the disease. Of course, that's a complicated effort. It requires understanding the cause of the disease, its development, how the disease spreads, and recurrence.

The Ovarian Cancer Research Program has a two-tiered peer-review system that chooses the best potential research. Much of this research has been published, patented, granted further Federal funding by the National Cancer Institute, and/or gone into commercial development.

Ovarian cancer is rarely diagnosed in early stages, when survival is best. There is no reliable early-detection test, but the Ovarian Cancer Research Program has made progress on this front. There is one early-detection test that's currently looking at commercialization—it's a urine biomarker test—and another you may have read about in the newspaper, the cancer-sniffing dogs.

The Ovarian Cancer Research Program has also developed two working models—animal models of ovarian cancer—for ovarian cancer: the mouse model, which is commonly used in research, but also the chicken model, which is the only other known animal to get ovarian cancer.

I'm here, not only as an employee of the Ovarian Cancer National Alliance, but as someone with a personal interest in ovarian cancer. I'm an Ashkenazi Jew, my family is from Eastern Europe, and I have a strong family history of cancer. My mother, a breast cancer survivor, is here with me. And I know that I'm at high risk for both breast cancer and ovarian cancer. Because there is no early-detection test, I know that I, and so many other women, have to remain vigilant about our health.

I'm here, and I'm honored to be here, on behalf of the ovarian cancer community. And I ask, on behalf of all of these daughters, mothers, and sisters, like my own—my sister is also here—that you continue to support the Ovarian Cancer Research Program, so that we all have a better chance at detecting ovarian cancer early. We ask you to continue supporting the Ovarian Cancer Research Program's mission to eliminate this deadly disease.

Thank you for your time.

Chairman INOUE. All right. Thank you very much, Ms. Tenenbaum.

[The statement follows:]

PREPARED STATEMENT OF CARA TENENBAUM

Mr. Chairman, Ranking Member, and Members of the Committee, thank you for the opportunity to testify before you today about the Department of Defense's Ovarian Cancer Research Program, one of the Congressionally Directed Medical Research Programs.

My name is Cara Tenenbaum, and I'm the Senior Policy Director at the Ovarian Cancer National Alliance. For more than 10 years, we have worked with you to fund ground breaking research that will help women diagnosed with, and women at high risk for, ovarian cancer. The ovarian cancer community is so grateful for the \$20 million you appropriated to the Ovarian Cancer Research Program for fiscal year 2009. This year we respectfully request \$30 million for this program.

Simply put, the Ovarian Cancer Research Program's mission is to eliminate ovarian cancer. It is the only Federal research program that seeks to conquer this disease, rather than explore it. Of course, conquering ovarian cancer is a complicated effort that requires understanding the causes of the disease, its development, how it spreads and recurrence. The Ovarian Cancer Research Program has a two tiered peer review system that chooses the best potential research. Much of this research has been published, patented, granted further Federal funding by the National Cancer Institute and/or gone into commercial development.

Ovarian cancer is rarely diagnosed in the early stages when survival is best. There is no reliable early detection test, which is an urgent priority for the ovarian cancer community. The Ovarian Cancer Research Program has funded two early de-

tection tests that are in development: one in progress is the discovery and commercialization of a urine biomarker test; the second is a breath test, which you may have read about in the popular press under headlines like “Cancer Sniffing Dogs.”

The Ovarian Cancer Research Program has also developed working animal models of ovarian cancer: the mouse model, which is commonly used in medical research; and the chicken model, which is the only other animal known to get ovarian cancer.

What makes this program unique is not just its use of ovarian cancer survivors as patient reviewers, and its transparency and low overhead, but the numerous grant mechanisms that provide a flexible model that funds innovative research.

I am here, not only as an employee of the Ovarian Cancer National Alliance, but as someone with a personal interest in ovarian cancer. As an Ashkenazi Jew with a strong family history of cancer—my mother, a breast cancer survivor is here with me—I know that I am at high risk for both breast and ovarian cancer. As there is no reliable early detection test for ovarian cancer, I, like so many others, have to rely on my own vigilance for early detection of ovarian cancer.

As a single woman who hopes to have children one day, I’m not ready for prophylactic surgery, although many of the patients I speak with have urged me to consider it. I am not even interested in genetic testing at this point, because without any action steps, I’m left with more worry than solutions. And so, on behalf of the millions of daughters, mothers, and sisters, like my own who has joined me here, I ask that you continue to support funding the Ovarian Cancer Research Program so that we all have a better chance of detecting ovarian cancer early, fighting it with better treatments and fulfilling the Ovarian Cancer Research Program’s mission to eliminate this deadly disease.

I am honored to be here representing the ovarian cancer community in respectfully requesting that Congress provide \$30 million for the Ovarian Cancer Research Program (OCR) in fiscal year 2010 as part of the Federal Government’s investment in the Department of Defense’s Congressionally Directed Medical Research Programs (CDMRP).

THE OVARIAN CANCER RESEARCH PROGRAM

The Ovarian Cancer Research Program was created in 1997 to address a lack of ovarian cancer research, which remains the deadliest gynecologic cancer. The program uses a two tier peer review system, including patient advocates in both levels of review. Reviews are made not only on scientific rigor, but on the impact the proposed research will have on the disease and patients.

To date, accomplishments reported by awardees include 371 publications, 431 abstracts/presentations, and 15 patents applied for/obtained. The Ovarian Cancer Research Program meets each year to evaluate the science and determine funding priorities for the upcoming year. This flexibility, along with input from patient advocates and leading researchers, allows the Ovarian Cancer Research Program to fill current research gaps. Much of the research funded by the Ovarian Cancer Research Program continues to get larger grants from this seed money, including four Ovarian Cancer Specialized Programs of Research Excellence (SPORES) funded by the National Cancer Institute.

The program provides awards in the following categories: Collaborative Translational Research Award, Consortium Development Award, Idea Development Award, Ovarian Cancer Academy Award, Career Development Award, Translational Research Partnership Award, Historically Black Colleges and Universities/Minority Institution Collaborative Research Awards, Pilot Awards, and the New Investigator Research Award. From 1997 to 2009 more than \$140 million has been awarded through these mechanisms.

In fiscal year 2009 alone:

- A New Investigator Award funded a research project using immunotherapy, rather than chemotherapy or surgery, to fight tumors;
- An Idea Development award funded a research project on biomarkers, including the discovery of a biomarker that is elevated 3 years prior to clinical diagnosis of ovarian cancer;
- An Idea Development award to explore the use of a new drug as a single agent and in combination with existing chemotherapy regimens to shrink tumors;
- An Idea Development Award to fund preclinical studies of DNA therapies that induce ovarian cancer cell death without any toxicity to normal cells;
- Phase II research in angiogenesis inhibitors, which stop new blood vessels from forming in a tumor.

OVARIAN CANCER'S DEADLY STATISTICS

According to the American Cancer Society, in 2009, more than 21,000 American women will be diagnosed with ovarian cancer, and more than 15,000 will lose their lives to this terrible disease. Ovarian cancer is the fifth leading cause of cancer death in women. Currently, more than half of the women diagnosed with ovarian cancer will die within 5 years. When detected early, the 5-year survival rate increases to more than 90 percent, but when detected in the late stages, the 5-year survival rate drops to less than 29 percent.

In the more than 30 years since the War on Cancer was declared, ovarian cancer mortality rates have not significantly improved. A valid and reliable screening test—a critical tool for improving early diagnosis and survival rates—still does not exist for ovarian cancer. Behind the sobering statistics are the lost lives of our loved ones, colleagues, and community members. While we have been waiting for the development of an effective early detection test, thousands of our wives, mothers, daughters, and sisters have lost their battle with ovarian cancer.

More than three-quarters of women diagnosed with ovarian cancer will have at least one recurrence. These recurrences may indicate that the tumor cells are no longer responsive to some therapies, leaving women with fewer treatment options. The Ovarian Cancer Research Program spends almost 20 percent of its grant money studying recurrence. Almost a third is spent on understanding ovarian cancer cell biology, genetics, and molecular biology, areas that we hope will lead to a more reliable early detection test.

In 2007, a number of prominent cancer organizations released a consensus statement identifying the early warning symptoms of ovarian cancer. Without a reliable diagnostic test, we can rely only on this set of vague symptoms of a deadly disease, and trust that both women and the medical community will identify these symptoms and act promptly and quickly. Unfortunately, we know that this does not always happen. Too many women are diagnosed late due to the lack of a test; too many women and their families endure life-threatening and debilitating treatments to kill cancer; too many women are lost to this horrible disease.

SUMMARY

The Ovarian Cancer National Alliance has made commitments to work with Congress, the Administration, and other policymakers and stakeholders to improve the survival rate from ovarian cancer through education, public policy, research, and communication. Please know that we appreciate and understand that our Nation faces many challenges and that Congress has limited resources to allocate; however, we are concerned that without increased funding to bolster and expand ovarian cancer research efforts, the Nation will continue to see growing numbers of women losing their battle with this terrible disease.

On behalf of the entire ovarian cancer community—patients, family members, clinicians, and researchers—we thank you for your leadership and support of Federal programs that seek to reduce and prevent suffering from ovarian cancer. Thank you in advance for your support of \$30 million in fiscal year 2010 funding for the Ovarian Cancer Research Program.

Chairman INOUE. You know, I just can't resist this temptation but if you'll forgive me, the Ovarian Cancer Treatment Program and the Breast Cancer Treatment Program are earmarks. They were not suggested by the administration or by experts. The Congress did that. And today we're being condemned for earmarks. But—

The next witness represents the Reserve Officers Association, Colonel William Holahan.

STATEMENT OF COLONEL WILLIAM HOLAHAN, UNITED STATES MARINE CORPS (RET.), DIRECTOR, MEMBER SERVICES, RESERVE OFFICERS ASSOCIATION OF THE UNITED STATES

Colonel HOLAHAN. Mr. Chairman, Senator Cochran, we ask the subcommittee that our submitted written testimony, particularly with regard to the unfunded equipment and priorities of those Reserve components noted therein, be accepted for the record.

Chairman INOUE. It will be made part of the record.

Colonel HOLAHAN. Thank you for the opportunity to speak once again on the issue of funding for our Nation's Reserve components.

Today the United States cannot conduct extended military operations without the augmentation and reinforcement of its active component. That reinforcement must come from one of two sources: a draft, or the National Guard and Reserve.

The 700,000 men and women of our Nation's Reserve components have provided that reinforcing and augmenting force since 2001. They have saved the country from a draft. Every indication I see and hear is that they can and will continue to do so, if they are properly trained, equipped, and supported. The Congress has made great strides in increasing the funding for these important needs, but realism demands that we recognize the armed services frequently push the needs of their Reserve components to a lower priority in times when funding is tight.

The Reserve Officers Association—and I have been authorized to speak on this subject for the Reserve Enlisted Association, as well—urges this subcommittee to specifically identify appropriations for resetting of both the National Guard and the Reserve, such that it must be spent to train and re-equip the Reserve components for both their homeland defense mission and any overseas contingency operations that they may be assigned.

Each Reserve component has shared with ROA that there is a continued problem of tracking equipment specifically appropriated to the Reserves from manufacturers to a service's Reserve component. Frustrations continue with the belief that the active component either pushes out Reserve items during production, or actually redirects equipment in distribution channels before it reaches their reserve.

At the end of the day, the Nation wants an All-Volunteer Force, and it does not want a draft. The only way to achieve both of these objectives is to ensure that the Reserve and the National Guard continue to be filled with the same type of great American patriots who serve, today. To do that, you must ensure that they are fully trained, properly re-equipped, and that their families are adequately supported. And you ensure that your appropriations get where you intend that they go.

Thank you for your consideration.

Chairman INOUE. Thank you very much, Colonel Holahan.

[The statement follows:]

PREPARED STATEMENT OF WILLIAM HOLAHAN

PRIORITIES

CY 2009 Legislative Priorities are:

Providing adequate resources and authorities to support the current recruiting and retention requirements of the Reserves and National Guard.

Reset the whole force to include fully funding equipment and training for the National Guard and Reserves.

Support citizen warriors, families and survivors.

Assure that the Reserve and National Guard continue in a key national defense role, both at home and abroad.

Issues To Help Fund, Equip, and Train

Advocate for adequate funding to maintain National Defense during overseas contingency operations.

Regenerate the Reserve Components (RC) with field compatible equipment.

Fence RC dollars for appropriated Reserve equipment.

Fully fund Military Pay Appropriation to guarantee a minimum of 48 drills and 2 weeks training.

Sustain authorization and appropriation to National Guard and Reserve Equipment Account (NGREA) to permit flexibility for Reserve Chiefs in support of mission and readiness needs.

Optimize funding for additional training, preparation and operational support.

Keep Active and Reserve personnel and Operation & Maintenance funding separate.

Equip Reserve Component members with equivalent personnel protection as Active Duty.

Issues To Assist Recruiting and Retention

Support continued incentives for affiliation, reenlistment, retention and continuation in the Reserve Component.

Pay and Compensation

Provide permanent differential pay for Federal employees.

Offer Professional pay for RC medical professionals.

Eliminate the 1/30th rule for Aviation Career Incentive Pay, Career Enlisted Flyers Incentive Pay, Diving Special Duty Pay, and Hazardous Duty Incentive Pay.

Education

Continued funding for the GI Bill for the 21st Century.

Health Care

Provide Medical and Dental Readiness through subsidized preventive health care.

Extend military coverage for restorative dental care for up to 180 days following deployment.

Spouse Support

Repeal the SBP-Dependency Indemnity Clause (DIC) offset.

NATIONAL GUARD & RESERVE EQUIPMENT & PERSONNEL ACCOUNTS

It is important to maintain separate equipment and personnel accounts to allow Reserve Component Chiefs the ability to direct dollars to needs.

Key Issues Facing the Armed Forces Concerning Equipment

Developing the best equipment for troops fighting in overseas contingency operations.

Procuring new equipment for all U.S. Forces.

Maintaining or upgrading the equipment already in the inventory.

Replacing the equipment deployed from the homeland to the war.

Making sure new and renewed equipment gets into the right hands, including the Reserve Component.

Reserve Component Equipping Sources

Procurement.

Cascading of equipment from Active Component.

Cross-leveling.

Recapitalization and overhaul of legacy (old) equipment.

Congressional adds.

National Guard and Reserve Appropriations (NGREA).

Supplemental appropriation.

CONTINUED RESETTING OF THE FORCE

Resetting or reconstitution of the force is the process to restore people, aircraft and equipment to a high state of readiness following a period of higher-than-normal, or surge, operations.

Some equipment goes through recapitalization: stripping down and rebuilding equipment completely. Recapitalization is one of the fastest ways to get equipment back to units for use, and on some equipment, such as trucks, recapitalization costs only 75 percent of replacement costs. A second option is to upgrade equipment, such as adding armor. A third option is to simply extend the equipment's service life through a maintenance program.

Theater operations in Iraqi and Afghanistan are consuming the Reserve Component force's equipment. Wear and tear is at a rate many times higher than planned. Battle damage expends additional resources. New equipment suited for mountain warfare will be needed with the shift back into Afghanistan.

In addition to dollars already spent to maintain this well-worn equipment for ongoing operations, the Armed Forces will likely incur large expenditures in the future to repair or replace (reset) a significant amount of equipment when hostilities cease. It is still unknown how much equipment will be left in Afghanistan.

PERSONNEL TRAINING

When Reserve Component personnel participate in an operation they are focused on the needs of the particular mission, which may not include everything required to maintain qualification status in their military occupation specialty (MOS, AFSC, NEC).

- There are many different aspects of training that are affected:
 - Skills that must be refreshed for specialty;
 - Training needed for upgrade but delayed by mission;
 - Ancillary training missed;
 - Professional military education needed to stay competitive;
 - Professional continuing education requirements for single-managed career fields and other certified or licensed specialties required annually;
 - Graduate education in business related areas to address force transformation and induce officer retention.
- Loss, training a replacement: There are particular challenges that occur to the force when a loss occurs during a mobilization or operation and depending on the specialty this can be a particularly critical requirement that must be met:
 - Recruiting may require particular attention to enticing certain specialties or skills to fill critical billets;
 - Minimum levels of training (84 days basic, plus specialty training);
 - Retraining may be required due to force leveling as emphasis is shifted within the service to meet emerging requirements.

END STRENGTH

The ROA would like to place a moratorium on reductions to the Guard and Reserve manning levels. Manpower numbers need to include not only deployable assets, but individuals in the accession pipeline. ROA urges this subcommittee to fund to support:

- Army National Guard of the United States, 358,200.
- Army Reserve, 206,000.
- Navy Reserve, 66,700.
- Marine Corps Reserve, 39,600.
- Air National Guard of the United States, 106,756.
- Air Force Reserve, 69,900.
- Coast Guard Reserve, 10,000.

In a time of war and the highest OPTEMPO in recent history, it is wrong to make cuts to the end strength of the Reserve Components. We need to pause to permit force planning and strategy to catch-up with budget reductions.

With the Navy's requested increase by 2,500 sailors, corresponding increases need to be made in the Navy Reserve. The Navy Reserve is providing most of the individual augmentee support for the Navy in overseas operations. Five years ago was the last time the Navy evaluated its USNR requirements; such a study needs to be done again.

READINESS

Readiness is a product of many factors, including the quality of officers and enlisted, full staffing, extensive training and exercises, well-maintained weapons and authorized equipment, efficient procedures, and the capacity to operate at a fast tempo.

The Defense Department does not attempt to keep all Active units at the C-1 level. The risk is without resetting the force returning Active and Reserve units will be C-4 or lower because of missing equipment, and without authorized equipment their training levels will deteriorate.

NONFUNDED ARMY RESERVE COMPONENT EQUIPMENT

The Army National Guard and Army Reserve have made significant contributions to ongoing military operations, but equipment shortages and personnel challenges continue and if left unattended, may hamper the Reserves' preparedness for future overseas and domestic missions. To provide deployable units, the Army National Guard and the Army Reserve have cross-leveled large quantities of personnel and

equipment to deploying units, an approach that has resulted in growing shortages in nondeployed units.

Army Reserve Unfunded Requirements

The 21st Century Army Reserve mobilizes continuously with 12 percent of its force consistently deployed in support of the current contingencies. However, the Army Reserve lacks the ability to fully train Army Reserve Soldiers on the same equipment the Army uses in the field. To prepare to perform a dangerous mission, soldiers must have modern equipment and state-of-the-art training facilities. The Army Reserve has 73 percent of its required equipment on hand. Under currently programmed funding, the Army Reserve should reach 85 percent equipment on hand by fiscal year 2016 with the goal of 100 percent on hand by fiscal year 2019.

C-12 Huron Cargo Transport Airplane (7)—\$63 Million

Replace aircraft permanently transferred to Intelligence, Surveillance and Reconnaissance (ISR) mission. Seven below total authorized count. Capacity lift 5,185 lbs, distance 1,710 miles.

Communications Security (COMSEC) AKMS/Computer Sets (3648)—\$8.6 Million

Provide secure communications to (4) companies with AN/GYK-49(V)1 & AN/PYQ-10(C) sets.

Cargo Bed, Demountable PLS 8 x20 (5498)—\$109.7 Million

Transportation Support: pacing item for Medium Truck Company, 360 each.

Optical Data Entry Reader (115)—\$25.5 Million

Imaging/Reader automation to fix trailer transfer and Inland Cargo units.

Heavy/Medium Trailers (1760)—\$115.8 Million

Cargo—MTV with dropsides (M1095); flatbed—LMTV w/dropsides (M1086)

Army National Guard Unfunded Equipment Requirements

Army National Guard (ARNG) units deployed overseas have the most up-to-date equipment available. However, a significant amount of equipment is currently unavailable to the Army National Guard in the States due to continuing rotational deployments and emerging modernization requirements. Many States have expressed concern about the resulting shortfalls of equipment for training as well as for domestic emergency response operations.

Aviation Upgrade Kits—\$100.5 Million

UH-60A to UH-60L Upgrade Kits; LUH-72A S&S Mission Equipment Package.

Homeland Security Command and Control Package—\$168.4 Million

Joint Incident Site Communications and Interim Satcom Incident Site. (JISC & ISISCS); Wideband Imagery Satellite Terminals, and Full Motion Video (FMV) downlink to support state and local leaders during natural and manmade disasters.

M777A2 Lightweight 155mm Howitzer (18)—\$54 Million

To ensure readiness of Army National Guard (ARNG) Fire Support, Field Artillery units.

Transportation—\$1.15 Billion

FMTV/LMTV Cargo Trucks; HMMWV; HTV 8x8 Heavy Trucks; Tactical Trailers.

Force XXI Battlefield Command Brigade and Below (FBCB2)—\$179 Million

To ensure readiness of ARNG Combat Support and Combat Service Support (CS/CSS) units.

Also needed: To organize a second Stryker Brigade Combat Team (SBCT)

AIR FORCE RESERVE COMPONENT EQUIPMENT PRIORITIES

ROA continues to support military aircraft Multi-Year Procurement (MYP) beginning with 15 for more C-17s and 8 more C-130Js for USAir Force and its Reserve. Further, ROA supports additional funding for continued Research and Development of the next generation bomber.

Air Force Reserve Unfunded Requirements

The Air Force Reserve (AFR) mission is to be an integrated member of the Total Air Force to support mission requirements of the joint warfighter. To achieve interoperability in the future, the Air Force Reserve top priorities for nonfunded equipment are:

C-40 D multi-role airlift (3)—\$370 Million

To replace aging C-9 C's at Scott Air Force Base: mission requests exceed aircraft availability.

KC-130J Aircraft (2)—\$148 Million

These Aircraft are needed to fill the shortfall in Search and Rescue refueling capabilities.

Cyber Systems Defense—\$109 Million

Upgrade Active Duty and AF Reserve network infrastructure to ensure overall A.F. mission.

Helmet Mounted Cueing System—\$38 Million

Upgrade and enhancement to engagement systems.

Defensive Systems

Airlift Defensive Systems (16) Install ADS systems onto (16) AFRC C-5As at Lackland Air Force Base against IR missile threats.

Infra-Red Counter Measures (42) Procure and install (42) LAIRCM lite systems on AFRC C-5s. Protects high value national assets against advanced IR missile threats.

Missile Warning System (MWS) Upgrade/replacement—Improve and integrate the existing Electronic Attack (EA) for A-10 and F-16 and Electronic Protection (EP) for A-10, F-16 and HC-130.

Air National Guard Unfunded Equipment Requirements

Shortfalls in equipment will impact the Air National Guard's ability to support the National Guard's response to disasters and terrorist incidents in the homeland. Improved equipping strengthens readiness for both overseas and homeland missions and improves the ANG capability to train on mission-essential equipment.

Infra-Red Counter Measures—\$240.7 Million

Procure and install LAIRCM systems on C-5, C-17, C-130, 130, HC-130, EC-130, KC-135 a/c.

Air Defensive Systems—\$59.31 Million

Install ADS systems onto C-5, C-17, F-15 aircraft.

Missile Warning Systems—\$22.48 Million

Upgrade/replacement—Improve and integrate the existing Electronic Attack (EA) and Electronic Protection (EP) for A-10, C-130.

Rear Aspect Visual Scan Capability/Safire—\$57.2 Million

Increase the field of view on C-5, C-17 transports and add a larger window in the C-130 paratroop doors.

*Personal Protective Equipment, M4 Rifles—\$34.77 Million**Force Protection Mobility Bag Upgrades/Replacements—\$113.72 Million*

NAVY RESERVE UNFUNDED PRIORITIES

Active Reserve Integration (ARI) aligns Active and Reserve component units to achieve unity of command. Navy Reservists are fully integrated into their Active component supported commands. Little distinction is drawn between Active component and Reserve component equipment, but unique missions remain.

C-40 A Combo Cargo/Passenger Airlift (4)—\$402 Million

The Navy requires a Navy Unique Fleet Essential Airlift Replacement Aircraft. The C-40A is able to carry 121 passengers or 40,000 pounds of cargo, compared with 90 passengers or 30,000 pounds for the C-9.

KC-130J Super Hercules Aircraft Tankers (4)—\$160 Million

These Aircraft are needed to fill the shortfall in Navy Unique Fleet Essential Airlift (NUFEA). Procurement price close to upgrading existing C-130Ts with the benefit of a long life span.

P-3 Maritime Patrol Aircraft Fixes—\$312 Million

Due to the grounding of 39 airframes in December 2007, there is a shortage of maritime patrol and reconnaissance aircraft, which are flown in associate Active and Reserve crews. P-3 wing crack kits are still needed for fiscal year 2010.

F-5 Radar/Electronic Attack Block-2—\$148.3 Million

Aircraft used in adversarial training of F-18 pilots. Heightens adversary competition conditions.

C-40 Hangar, Oceana—\$31.4 Million

MARINE CORPS RESERVE UNFUNDED PRIORITIES

The Marine Corps Reserve faces two primary equipping challenges, supporting and sustaining its forward deployed forces in the Long War while simultaneous re-setting and modernizing the Force to prepare for future challenges. Only by equally equipping and maintaining both the Active and Reserve forces will an integrated Total Force be seamless.

KC-130J Super Hercules Aircraft tankers (4)—\$160 Million

These Aircraft are needed to fill the shortfall in Marine Corps Essential Airlift. Procurement price close to upgrading existing C-130Ts with the benefit of a long life span. Commandant, USMC, has testified that acquisition must be accelerated.

Light Armored Vehicles—LAV (14)—\$21 Million

A shortfall in a USMCR light armor reconnaissance company, the LAV-25 is an all-terrain, all-weather vehicle with night capabilities. It provides strategic mobility to reach and engage the threat, tactical mobility for effective use of fire power.

Training Allowance (T/A) Shortfalls—\$187.7 Million

Shortfalls consist of over 300 items needed for individual combat clothing and equipment, including protective vests, poncho, liner, gloves, cold weather clothing, environmental test sets, tool kits, tents, camouflage netting, communications systems, engineering equipment, combat and logistics vehicles and weapon systems.

MCB Vehicle Maintenance Facility—\$10.9 Million

Additional vehicle storage and maintenance: routine preventive and corrective maintenance are still performed throughout the country by Marines. Ground equipment maintenance efforts have expanded over the past few years, leveraging contracted services and depot-level capabilities.

TRANSPARENCY OF PROCUREMENT

Each Reserve Component has shared with ROA that there is a continued problem of tracking equipment specifically appropriated to the Reserves from manufacturer to a service's Reserve Component. Frustrations continue with a belief that the Active Component either pushes out Reserve items during production or actual misappropriates equipment in distribution before it reaches the Reserve.

NATIONAL GUARD AND RESERVE EQUIPMENT APPROPRIATION

Much-needed items not funded by the respective service budget are frequently purchased through this appropriation. In some cases it is used to bring unit equipment readiness to a needed State for mobilization. With the war, the Reserve and Guard are faced with mounting challenges. Funding levels, rising costs, lack of replacement parts for older equipment, etc. have made it difficult for the Reserve Components to maintain their aging equipment, not to mention modernizing and recapitalizing to support a viable legacy force. The Reserve Components benefit greatly from a National Military Resource Strategy that includes a National Guard and Reserve Equipment Appropriation.

CIOR/CIOMR FUNDING REQUEST

The Interallied Confederation of Reserve Officers (CIOR) was founded in 1948, and its affiliate organization, The Interallied Confederation of Medical Reserve Officers (CIOMR) was founded in 1947. The organization is a nonpolitical, independent confederation of national reserve associations of the signatory countries of the North Atlantic Treaty (NATO). Presently there are 16 member nation delegations representing over 800,000 reserve officers. CIOR supports four programs to improve professional development and international understanding.

Military Competition.—The CIOR Military Competition is a strenuous 3-day contest on warfighting skills among Reserve Officers teams from member countries. These contests emphasize combined and joint military actions relevant to the multinational aspects of current and future Alliance operations.

Language Academy.—The two official languages of NATO are English and French. As a non-government body, operating on a limited budget, it is not in a position to

afford the expense of providing simultaneous translation services. The Academy offers intensive courses in English and French as specified by NATO Military Agency for Standardization, which affords international junior officer members the opportunity to become fluent in English as a second language.

Partnership for Peace (PfP).—Established by CIOR Executive Committee in 1994 with the focus of assisting NATO PfP nations with the development of Reserve officer and enlisted organizations according to democratic principles. CIOR's PfP Committee, fully supports the development of civil-military relationships and respect for democratic ideals within PfP nations. CIOR PfP Committee also assists in the invitation process to participating countries in the Military Competition.

Young Reserve Officers Workshop.—The workshops are arranged annually by the NATO International Staff (IS). Selected issues are assigned to joint seminars through the CIOR Defense and Security Issues (SECDEF) Commission. Junior grade officers work in a joint seminar environment to analyze Reserve concerns relevant to NATO.

Dues do not cover the workshops and individual countries help fund the events. The Department of the Army as Executive Agent hasn't been funding these programs. Senate leadership support would be beneficial.

CONCLUSION

DoD is in the middle of executing a war and operations in Iraq and Afghanistan. The impact of these operations is affecting the very nature of the Guard and Reserve, not just the execution of Roles and Missions. Without adequate funding, the Guard and Reserve may be viewed as a source to provide funds to the Active Component. It makes sense to fully fund the most cost efficient components of the Total Force, its Reserve Components.

At a time of war, we are expending the smallest percentage of GDP in history on National Defense. Funding now reflects close to 4 percent of GDP including supplemental dollars. ROA has a resolution urging that defense spending should be 5 percent to cover both the war and homeland security. While these are big dollars, the President and Congress must understand that this type of investment is what it will take to equip, train and maintain an all-volunteer force for adequate National Security.

The Reserve Officers Association, again, would like to thank the sub-committee for the opportunity to present our testimony. We are looking forward to working with you, and supporting your efforts in any way that we can.

Chairman INOUE. Our next witness is the Secretary of the Associations for America's Defense, Ms. Elizabeth Cochran.

STATEMENT OF ELIZABETH COCHRAN, SECRETARY, ASSOCIATIONS FOR AMERICA'S DEFENSE

Ms. COCHRAN. Thank you, Mr. Chairman and Mr. Vice Chairman.

The Associations for America's Defense is very grateful to testify today, and we'd like to submit written testimony at this time.

We would like to thank this subcommittee for its stewardship on defense issues and setting an example by its nonpartisan leadership. The Associations for America's Defense is concerned that U.S. defense policy is sacrificing future security for near-term readiness. It's been suggested that the United States should focus on wars we're fighting today, not on future wars that may not occur. The Pentagon's priorities sound like money will be redirected to more immediate needs.

Erosion in the capability in the force means added risk will be faced today and tomorrow. According to the Office of Management and Budget, base defense spending, projected at \$534 billion in 2010, will stay relatively flat for the next 5 years. We disagree with placing such budgetary constraints on defense, because it can lead to readiness and effectiveness being subtly degraded, which won't be immediately evident. We support increasing defense spending to 5 percent of the gross domestic product during times of war to

cover procurement, and prevent unnecessary personnel end-strength cuts.

The Associations for America's Defense is alarmed about the fiscal year 2010 unfunded programs list, submitted by the military services, which is 87 percent lower than fiscal year 2009's request. We're concerned the unfunded requests were driven by budgetary factors more than risk assessment, which will impact national security.

As always, our military will do everything to accomplish its missions, but response time is measured by equipment readiness. Due to the DOD's tactical aircraft acquisition programs having been blunted by cost and schedule overruns, the Air Force has offered to retire 250 fighter jets in one year, which the Secretary of Defense has accepted. Until new systems are acquired in sufficient quantities to replace legacy fleets, those legacy systems must be sustained. Airlift contributions in moving cargo and passengers are indispensable to American warfighters. As the military continues to become more expeditionary, more airlifts in C-17 and C-130Js will be required. Procurement needs to be accelerated and modernized, and mobility requirements need to be reported upon.

The need for air refueling is utilized worldwide in DOD operations. But, significant numbers of tankers are old and plagued with structural problems. The Air Force would like to retire as many as 131 of the Eisenhower-era KC-135E tankers by the end of the decade. These aircraft must be replaced.

Finally, we ask this subcommittee to continue to provide appropriations for the National Guard and Reserve equipment requirements. The National Guard's goal is to make at least one-half the army and air assets available to Governors and adjutants general at any given time. Appropriating funds to Guard and Reserve equipment provides Reserve chiefs with flexibility prioritizing funding.

Once again, I thank you for your ongoing support for the Nation's armed services and the fine men and women who defend our country. Please contact us with any questions.

Thank you.

Chairman INOUE. Thank you very much, Ms. Cochran.

And I thank the panel.

[The statement follows:]

PREPARED STATEMENT OF ELIZABETH COCHRAN

INTRODUCTION

Mister Chairman and distinguished members of the Committee, the Associations for America's Defense (A4AD) is again very grateful for the invitation to testify before you about our views and suggestions concerning current and future issues facing the defense appropriations.

The Association for America's Defense is an adhoc group of 12 military and veteran associations that have concerns about national security issues. Collectively, we represent armed forces members and their families, who are serving our Nation, or who have done so in the past.

CURRENT VERSUS FUTURE: ISSUES FACING DEFENSE

The Associations for America's Defense would like to thank this subcommittee for the on-going stewardship that it has demonstrated on issues of Defense. At a time of war, its pro-defense and non-partisan leadership continues to set the example.

Emergent Risks

Members of this group are concerned that U.S. Defense policy is sacrificing future security for near term readiness. So focused are our efforts to provide security and stabilization in Afghanistan and a withdrawal from Iraq, that risk is being accepted as an element in future force planning. Force planning is being driven by current overseas contingency operations, and to allow for budget limitations. Careful study is needed to make the right choice. A4AD is pleased that Congress and this subcommittee continue oversight in these decisions.

What seems to be overlooked is that the United States is involved in a Cold War as well as a Hot war. With the United States preoccupied with the Middle East, North Korea, China, Russia, and Iran are growing areas of risk.

Korean Peninsula

Provocatively, North Korea successfully tested a nuclear weapon at full yield, unilaterally withdrew from that 1953 armistice, and continues to test-fire missiles from both its coasts. The South sent a high speed missile patrol boat into Western waters in response to a reported amphibious assault training staged by the North. South Korean and U.S. troops have been put on the highest alert level in 3 years, and the South Korean Coast Guard is escorting its fishing boats.

North Korea has 1.2 million troops, with the 655,000 South Korean soldiers and 30,000 U.S. troops stationed to the South. While not an immediate danger to the United States, North Korea is still viewed as a threat by its neighbors, and represents a destabilizing factor in Asia. Recent events may be mere posturing, but North Korea is still a failed state, where misinterpretation clouded by hubris could start a war. The North has prepositioned and could fire up to 250,000 rounds of heavy artillery in the first 48 hours of war along the border and into Seoul.

China

China remains the elephant in the war room. As the United States expends resources in the Middle East and continues to restructure the military to fight terrorism, China patiently waits for America's ability to project force to weaken.

China's armed forces are the biggest in the world and have undergone double-digit increases in military spending since the early 1990s. The Pentagon has reported that China's actual spending on military is up to 250 percent higher than figures reported by the Chinese government, and their cost of materials and labor is much lower. This year, China chose to increase its defense budget by almost 15 percent. China's build-up of sea and air military power appears aimed at the United States, according to Admiral Michael Mullen, the chairman of the U.S. Joint Chiefs of Staff.

The U.S. military strategy cannot be held hostage by international debts. While China is the biggest foreign holder of U.S. Treasuries with \$768 billion at the end of the first quarter, we can't be lulled into a sense of complacency.

Russia

Russian President Dmitry Medvedev has called for "comprehensive rearmament." Last March, in televised remarks to defense ministry officials, Medvedev proclaimed the "most important task is to re-equip the [Russian] armed forces with the newest weapons systems." Russia's defense budget could jump 30 percent this year, increasing Moscow's military might and preserving its arms-export industry, reports Peter Brookes of the Heritage Foundation. The country will aim for 70 percent of its weaponry to be "modern" by 2020, Defense Minister Anatoly Serdyukov said, according to RIA-Novosti, the state-run news agency.

Following an April meeting with President Medvedev, the Obama administration is seeking a new start with Russia. Underlying U.S.-Russian frictions are issues of NATO military expansion to countries like Georgia and Ukraine, and U.S. plans to base a missile defense system in Poland and the Czech Republic to defend against attacks from countries like Iran. Concerns have been voiced about a European military threat to Russian gas and oil fields.

Iran

While Iran lobs petulant rhetoric towards the United States, the real international tension is between Israel and Iran. Israel views Tehran's atomic work as a threat, and would consider military action against Iran. If Iran was attacked, it has threatened to "eliminate Israel." Israeli leadership has warned Iran that any attack on Israel would result in the "destruction of the Iranian nation." Israel is believed to have between 75 to 200 nuclear warheads with a megaton capacity.

Force Structure: An Erosion in Capability

Supporting the National Security Strategy requires that the United States to maintain robust and versatile military forces that can accomplish a wide variety of missions. The two major theater war (2MTW) approach was an innovation at the end of the Cold War. It was based on the proposition that the United States should prepare for the possibility that two regional conflicts could arise at the same time, so that if the United States were engaged in a conflict in one theater, an adversary in a second theater could be prevented from gaining his objectives in the other. In 1996, the United States adopted the “win-hold-win” concept—a strategy to fight and win one major regional contingency, with enough force to hold another foe at a stalemate until the first battle is won, and then to move the forces to the second theater.

The Bush Administration’s “1–4–2–1 strategy” from the 2001 Quadrennial Defense Review (QDR) called their new military strategy “1–4–2–1,” which meant: “1” Defend the United States; “4” Deter aggression in four critical regions: Europe, Northeast Asia, Southwest Asia, the Middle East; “2” Maintain the capability to combat aggression in two of these regions simultaneously; and “1” Maintain a capability to “win decisively” up to and including forcing regime change and occupation in one of those two conflicts “at a time and place of our choosing.”

A top to bottom review in 2005, suggested change to the national strategy as to mount one conventional campaign while devoting more resources to defending American territory and antiterrorism efforts.

In a speech announcing the fiscal year 2010 Defense Budget, Secretary of Defense Robert Gates stated “Our conventional modernization goals should be tied to the actual and prospective capabilities of known future adversaries—not by what might be technologically feasible for a potential adversary given unlimited time and resources . . .”

“This budget is less about numbers than it is about how the military thinks about the nature of warfare and prepares for the future,” Secretary of Defense Robert Gates testified before the Senate Armed Services Committee on May 14, 2009. Gates says that the United States should focus on the wars that we are fighting today, not on future wars that may never occur. He also asserts that U.S. conventional capabilities will remain superior for another 15 years. Anthony Cordesman, a national security expert for the Center for Strategic and International Studies, says that Gates’ plan should be viewed as a set of short-term fixes aimed at helping “a serious cost containment problem,” not a new national security policy.

War planners are often accused of planning for the last war. Secretary Gates speaks to enhancing the capabilities of fighting today’s wars. A concern arises on whether the Pentagon’s focus should be on irregular or conventional warfare, and whether it should be preparing for a full scale “peer” war. From his priorities, it sounds like Secretary Gates will be redirecting money to more immediate needs.

Each strategy permitted change to resize a force that was originally oriented to global war to a smaller force focused on smaller regional contingencies. But the erosion in the capability and the force means added risks will be faced today and tomorrow than when the 2MTW standard was established. “The danger is in the poverty of expectation, a routine obsession with danger that are familiar rather than likely,” wrote Thomas Schelling, in the Forward to: Pearl Harbor: Decision and Warning (1962).

Funding for the Future

Base defense spending, projected at \$534 billion in 2010, will stay relatively flat for the next 5 years, counting inflation, according to spending outlines by the Office of Management and Budget. “It is simply not reasonable to expect the defense budget to continue increasing at the same rate it has over the last number of years,” Secretary Gates told the Senate committee. “We should be able to secure our Nation with a base budget of more than half a trillion dollars.”

Hollow Force

The Associations for America’s Defense couldn’t disagree more by placing such budgetary constraints on the defense. A4AD members question the spending priorities of the current administration. “Fiscal restraint for defense and fiscal largesse for everything else,” commented Rep. John McHugh at a HASC hearing on the Defense Budget in May.

The result of such budgetary policy could again lead to a hollow force whose readiness and effectiveness has been subtly degraded and whose lessened efficiency will not be immediately evident. This process which echoes of the past, raises no red flags and sounds no alarms, and the damage can go unnoticed and unremedied until a crisis arises that highlights just how much readiness has decayed.

Defense as a Factor of GDP

Secretary Gates has warned that that each defense budget decision is “zero sum,” providing money for one program will take money away from another. A4AD encourages the appropriations subcommittee on defense to scrutinize the recommended spending amount for defense. Each member association supports increasing defense spending to 5 percent of Gross Domestic Product during times of war to cover procurement and prevent unnecessary personnel end strength cuts.

A Changing Manpower Structure

Secretary Gates proposed spending an extra \$11 billion to finish enlarging the Army and the Marine Corps and to halt reductions in the Air Force and the Navy. The Navy has asked for an increase in end strength of nearly 2,500 to 328,800 sailors. The Navy Reserve (USNR) on the other hand would be reduced to 65,506, a cut of 1,194. The Navy Reserve continues to be cut, and it is the main contributor to the Navy’s individual augmentees (IA) force on the ground in Iraq and, now, Afghanistan. Of the requested dollars to support 4,400 by the Navy, the Navy Reserve supplies 3,000.

A4AD supports a moratorium on further cuts including the Navy Reserve. We further suggest that a Zero Based Review (ZBR) be performed to evaluate the manning level of the USNR. The last review was done over 5 years ago, and much has changed since.

Maintaining a Surge Capability

The armed forces need to provide critical surge capacity for homeland security, domestic and expeditionary support to national security and defense, and response to domestic disasters, both natural and man-made that goes beyond operational forces. A strategic surge construct includes manpower, airlift and air refueling, sea-lift inventory, logistics, and communication to provide a surge-to-demand operation. This requires funding for training, equipping and maintenance of a mission-ready strategic reserve composed of active and reserve units. An additional requirement is excess infrastructure which would permit the housing of additional forces that are called-up beyond the normal operational force.

Dependence on Foreign Partnership

Part of the U.S. military strategy is to rely on long-term alliances to augment U.S. forces. “To succeed in any efforts the Department must harness and integrate all aspects of national power and work closely with a wide range of allies, friends and partners,” as stated in a DOD progress report. “Our strategy emphasizes the capacities of a broad spectrum of partners . . . We must also seek to strengthen the resiliency of the international system . . . helping others to police themselves and their regions.” It’s been recommended in the budget to increase funding of global partnerships efforts by \$500 million in the fiscal year 2010 base budget proposal, to support training and equipping foreign militaries to undertake counter terrorism and stability operations. Performances by allies have yet proven to be a good return on investment.

The risk of basing a national security policy on foreign interests and good world citizenship is increasingly uncertain because the United States does not necessarily control our foreign partners; countries whose objectives may differ with from own. This is more an exercise of consensus building rather than security integration. Alliances should be viewed as a tool and a force multiplier, but not the foundation of National Security.

UNFUNDED REQUIREMENTS

The fiscal year 2010 Unfunded Program Lists submitted by the military services to Congress was 87 percent less than was requested for fiscal year 2009 with requests for only \$3.44 billion versus \$29.9 billion the year before. A4AD has concerns that the unfunded requests were driven more by budgetary factors than risk assessment which will impact national security. The following are lists submitted by A4AD including additional non-funded recommendations.

Tactical Aircraft

DOD’s efforts to recapitalize and modernize its tactical air forces have been blunted by cost and schedule overruns in its new tactical aircraft acquisition programs. The Air Force has offered a plan to retire 250 fighter jets in 1 year alone, which the Secretary of Defense has accepted.

Until new systems are acquired in sufficient quantities to replace legacy fleets, legacy systems must be sustained and kept operationally relevant. The risk of the

older aircraft and their crews and support personnel being eliminated before the new aircraft are on line could result in a significant security shortfall.

Airlift

Hundreds of thousands of hours have been flown, and millions of passengers and tons of cargo have been airlifted. Their contributions in moving cargo and passengers are absolutely indispensable to American warfighters in the Global War on Terrorism. Both Air Force and Naval airframes and air crew are being stressed by these lift missions. As the U.S. military continues to become more expeditionary, it will require more airlift. Procurement needs to be accelerated and modernized, and mobility requirements need to be reported upon.

DOD should buy an additional (35) C-17s above the current 205 to ensure an adequate airlift force for the future and allow for attrition—C-17s are being worn out at a higher rate than anticipated in the Global War on Terrorism. Given the C-5's advanced age, it makes more sense to retire the oldest and most worn out of these planes and use the upgrade funds to buy more C-17s. DOD should also continue with a joint multi-year procurement of C-130Js.

The Navy and Marine Corps need C-40-A replacements for the C-9B aircraft. The Navy requires Navy Unique Fleet Essential Airlift. The C-40A, a derivative of the 737-700C a Federal Aviation Administration (FAA) certified, while the aging C-9 fleet is not compliant with either future global navigation requirements or noise abatement standards that restrict flights into European airfields.

Tankers

The need for air refueling is reconfirmed on a daily basis in worldwide DOD operations. A significant number of tankers are old and plagued with structural problems. The Air Force would like to retire as many as 131 of the Eisenhower-era KC-135E tankers by the end of the decade. DOD and Congress must work together to replace of these aircraft.

NGREA

A4AD asks this committee to continue to provide appropriations for unfunded National Guard and Reserve Equipment Requirements. The National Guard's goal is to make at least half of Army and Air assets (personnel and equipment) available to the Governors and Adjutants General at any given time. To appropriate funds to Guard and Reserve equipment provides Reserve Chiefs with a flexibility of prioritizing funding.

UNFUNDED EQUIPMENT REQUIREMENTS

[The services are not listed in priority order.]

	Amount
Air Force:	
C-17 Globemaster III transport aircraft (15)	\$3.9 billion
C-130J Super Hercules (5)	395 million
Battlefield Airborne Communications Node (2) lease and operation	180.2 million
Upgrade kits for the EC-130s/Compass Call Modifications (4)	78 million
HH-60G Pave Hawk (3) Search and Rescue	120 million
AAQ-29 Forward Looking Infra Red System—FLIR (81) HH-60G	81 million
Air Force Reserve:	
C-5A Airlift Defense system (ADS) (42)	17.3 million
C-130H LAIRCM—Large Aircraft I/R Counter Measures (6)	56.6 million
C-130J LAIRCM (2)	22 million
Missile Warning Systems and Electronic Protection, A-10, F-16	27.9 million
C-5 Structural repair	22 million
Note: USAFR has a \$1 billion MILCON backlog.	
Air National Guard:	
C-40C pax aircraft, procurement (1) and avionics upgrade	98.6 million
C-38 aircraft, replacement program	110 million
Radio, Beyond Line of Sight (BLOS) ADS TACSAT, F-15, F-16C	109.7 million
Electronic Attack Pod, A-10, F-16C	44 million
Helmet Mounted Cueing System, A-10, F-16C, HH-60G	38 million
Note: Air National Guard faces a MILCON backlog of \$2 billion to recapitalize facilities.	
Army:	
Aviation Support Equipment	36.2 million
Field Feeding	30.7 million

UNFUNDED EQUIPMENT REQUIREMENTS—Continued

[The services are not listed in priority order.]

	Amount
Force XXI Battlefield Command Brigade and Below	179 million
Information System Security COMSEC	44.8 million
Liquid Logistics Storage and Distribution	2 million
Army Reserve:	
Palletized Load System (PLS) Trailer	27.8 million
Tactical Light Truck (Ambulance HMMWV, Armament Carrier HMMWV, Troop/Cargo Carrier HMMWV)	183.8 million
Command Post (FBCB2/TOCS/UYK-128) computer set, shelter	181.4 million
Support (Antenna-OE-361(V)/Loudspeakers tactical)	13.4 million
HEMTT (Tactical Heavy wrecker)	55.9 million
Army National Guard:	
CH-47F Chinook helicopters (6) in fiscal year 10	66 million
UH-60M Black Hawk medium-lift helicopter (10) in fiscal year 10	164 million
Warfighter Information Network-Tactical (WIN-T)	1.2 billion
Communication Systems (JNN, SINCGARS, HF)	1.5 billion
Stryker combat vehicles, various configurations (549)	1.4 billion
Note: \$280 million/year is the investment necessary to effectively recapitalize MILCON.	
Navy:	
P-3 Repair/Recovery Plan, kit installation	462 million
Aviation Depot Maintenance, to fund 86 deferred airframes and 314 engines	195 million
Ship Depot Maintenance, for 20 surface ship availabilities	200 million
C-130J Super Hercules (1) to replace Blue Angels transport	64 million
Navy Reserve:	
C-40A Combo cargo/passenger airlift aircraft (4)	402 million
KC-130J Super Hercules aircraft (4)	256 million
Maritime Expeditionary Warfare Equipment	35.5 million
Maritime Prepositioning Force Utility Boats (RHIB)	6.6 million
Information Systems Security Program	5.5 million
Marine Corps:	
MTVR trailers (buys 352) to cover shortfall	28.9 million
Engineer Equipment for Logistics Support:	
TRAMs, bucket loader (93)	21 million
Forklift, Light Rough Terrain—LRTF (96)	13 million
Forklift, Extended Boom (177)	24 million
MV-22 Osprey Aircraft, Improvements, and Upgrades	17.4 million
Mountain Terrain Support Vehicles (10)	10.2 million
Tier I UAS (146) Digital Data Link upgrade kits	10.5 million
Note: Military Construction requirements are \$70.5 million.	
Marine Forces Reserves:	
KC-130Js Super Hercules tanker aircraft (2)	128 million
Light Armored Vehicles (14)	21 million
Helmet Mounted Displays (SA-HMDs) Systems	
Theater Provided Equipment Sensors	

Conclusion

A4AD is a working group of military and veteran associations looking beyond personnel issues to the broader issues of National Defense.

This testimony is an overview, and expanded data on information within this document can be provided upon request.

Thank you for your ongoing support of the Nation, the Armed Services, and the fine young men and women who defend our country. Please contact us with any questions.

Chairman INOUE. Now we have our final panel, consisting of Dr. Philip Boudjouk; the president and CEO, Ms. Sandra Raymond, Dr. George Zitnay, Captain Ike Puzon, of the Navy, Ms. Mary Hesdorffer, Dr. Jonathan Berman, vice president—Mr. George Dahlman, and General Michael Dunn.

Thank you very much.

Representing the Coalition of EPSCoR/IDeA States, Dr. Philip Boudjouk. Is that the correct pronunciation?

Dr. BOUDJOUK. Mr. Chairman, “boo-jock” is the correct pronunciation.

Chairman INOUE. Boudjouk.

Dr. BOUDJOUK. Boudjouk, thank you.

STATEMENT OF PHILIP BOUDJOUK, Ph.D., VICE PRESIDENT, RESEARCH, CREATIVE ACTIVITIES AND TECHNOLOGY TRANSFER, NORTH DAKOTA STATE UNIVERSITY; CHAIR, COALITION OF EPSCoR/IDeA STATES

Dr. BOUDJOUK. Chairman Inouye, Ranking Member Cochran, members of the subcommittee, thank you for the opportunity to testify today on the importance of maintaining and adequately funding the Department of Defense DEPSCoR program.

My name is Philip Boudjouk, and I serve as the vice president of research, creative activities, and technology transfer at North Dakota State University, and I also serve as chair of the Coalition of EPSCoR/IDeA States, a nonprofit organization representing the 21 States and two territories currently eligible to receive DOD DEPSCoR research awards.

DEPSCoR was originally authorized by section 257 of the National Defense Authorization Act of 1995 to ensure a nationwide, multi-State infrastructure to support the 6.1 basic research needs of the Department of Defense. In recent years, Congress has generously provided funding for DEPSCoR between \$15 and \$17 million, and has affirmatively rejected efforts by the previous administration to reduce the size of the program.

In the fiscal year 2009 National Defense Authorization Act, the Senate directed a federally funded Research and Development Center assessment of the DEPSCoR program to determine its value to the Department and to the American taxpayer. The Institute for Defense Analyses concluded that DEPSCoR has strengthened the nationwide basic research capacity. More importantly, the assessment determined that the DEPSCoR States’ share of nondefense—non-DEPSCoR DOD science and engineering funding increased steadily from inception of the program to today.

However, the administration’s proposed 2010 DOD budget recommends no funding for DEPSCoR. The 23 eligible DEPSCoR jurisdictions must therefore rely on Congress to ensure the DEPSCoR program is adequately funded, at a level that ensures our Nation maintains a nationwide infrastructure of DOD research capabilities.

Allowing the DEPSCoR program to go unfunded in fiscal year 2010 will not only create a critical shortfall in our national research infrastructure, but it will, likewise, have dire consequences for DEPSCoR States that otherwise may not receive an investment of DOD research funding. Therefore, we respectfully request that the DEPSCoR program at a minimum of \$20 million.

Mr. Chairman, every State has important contributions to make to our Nation’s research competitiveness, and every State has scientists and engineers that can contribute significantly to supporting the research needs of DOD.

Thank you for the opportunity to testify before the subcommittee. Chairman INOUE. I thank you very much, sir.

[The statement follows:]

PREPARED STATEMENT OF PHILIP BOUDJOUK

Chairman Inouye, Ranking Member Cochran, Members of the Subcommittee: Thank you for the opportunity to testify today on the importance of maintaining and adequately funding the Department of Defense Experimental Program to Stimulate Competitive Research (DEPSCoR)¹.

My name is Philip Boudjouk and I serve as the Vice President of Research, Creative Activities and Technology Transfer at North Dakota State University. I also currently serve as Chair of the Coalition of EPSCoR/IDeA States, a non-profit organization representing the 21 States and 2 territories currently eligible to receive Department of Defense DEPSCoR research awards.

EPSCoR States have a vast reservoir of talent and capacity. They represent 20 percent of the U.S. population, 25 percent of the research and doctoral universities, and 18 percent of the Nation's scientists and engineers. The EPSCoR program is critical to ensuring that we maintain a national infrastructure of research and engineering by providing much needed funding to these leading universities and scientists.

As you know, DEPSCoR was initially authorized by Section 257 of the National Defense Authorization Act of 1995 (Public Law 103-337) to ensure a nationwide, multi-State infrastructure to support the 6.1 basic research needs of the Department of Defense. Today, 21 States and two territories participate in DEPSCoR, receiving grants from the Department to perform research that directly responds to specific priorities identified by the Department and announced under competitive solicitations to the eligible DEPSCoR States.

At the program's peak funding level, DEPSCoR received nearly \$25 million to fund Department of Defense basic research in eligible States. In recent years, Congress has generously provided funding for DEPSCoR between \$15 million and \$17 million, and has affirmatively rejected efforts by the previous administration to reduce the size of the DEPSCoR program.

Additionally, in the fiscal year 2009 National Defense Authorization Act, the Senate directed a federally funded research and development center assessment of the DEPSCoR program to determine its value to the Department and to the American taxpayer. The Institute for Defense Analyses (IDA) was entrusted with the assessment and concluded in its study that DEPSCoR has strengthened the nationwide basic research capacity in the following areas:

- DEPSCoR awards have funded first-time investigators in defense-related basic research;
- DEPSCoR awards have contributed to publications and patents;
- DEPSCoR awards have supported graduate student and postdoctoral training;
- DEPSCoR awards have supported purchase and maintenance of cutting edge research equipment; and
- DEPSCoR awards have supported collaborations among researchers in all States.

Perhaps most importantly, the IDA assessment determined that the DEPSCoR States' share of non-DEPSCoR Department of Defense science and engineering funding increased steadily from inception of the program to today. This finding provides firm evidence that DEPSCoR is a valuable use of taxpayer dollars because it demonstrates that DEPSCoR provides a return on investment to the Department of Defense that far exceeds the funding amount provided for the program each year.

Mr. Chairman, DEPSCoR is also a valuable use of taxpayer dollars because it represents Federal research money well spent. Past DEPSCoR research has included:

- designing helicopter rotors;
- modeling sea ice predictions to aid ship and submarine navigation;
- prediction of river currents for Navy operations;
- securing critical software systems;
- developing chem.-biodefense agents;
- enhancing stored energy density for weapons;
- improving wireless communication for warfighter systems;
- determining the effect of exposure of military personnel to extreme physical and climatic conditions;
- preventing laser damage to aircraft optical guidance systems;
- increasing durability of lightweight composite materials; and

¹Alabama, Alaska, Arkansas, Delaware, Hawaii, Idaho, Kansas, Kentucky, Louisiana, Maine, Mississippi, Montana, Nebraska, Nevada, New Hampshire, New Mexico, North Dakota, Oklahoma, Puerto Rico, Rhode Island, South Carolina, South Dakota, Vermont, Virgin Islands, West Virginia, and Wyoming.

States in bold letters are eligible for the DEPSCoR program. All of the States listed above are also eligible for the EPSCoR program.

—developing small plastic air-vehicles for the Air Force.

Despite this important work, and despite the positive assessment provided to the Senate by the Institute for Defense Analyses, the administration's proposed fiscal year 2010 Department of Defense budget recommends no funding for DEPSCoR. The 23 DEPSCoR eligible jurisdictions must therefore rely on Congress once again to ensure the DEPSCoR program is adequately funded at a level that ensures our Nation maintains a nationwide infrastructure of Department of Defense research capabilities.

Mr. Chairman, every State has important contributions to make to our Nation's research competitiveness and every State has scientists and engineers that can contribute significantly to supporting the research needs of the Department of Defense. Accordingly, it is vital that we build a Department of Defense research infrastructure that leaves no State behind. Allowing the DEPSCoR program to go unfunded in fiscal year 2010 will not only create a critical shortfall in our national research infrastructure, but it will likewise have dire consequences for DEPSCoR States that otherwise may not receive an investment of Department of Defense research funding.

As the Committee considers the President's fiscal year 2010 budget proposal for the Department of Defense, the Coalition of EPSCoR/IDeA States, representing major research universities and institutions across 23 participating jurisdictions, respectfully requests that the DEPSCoR program be funded at a minimum of \$20 million. Participating DEPSCoR institutions continue to advance the basic research priorities of the Department of Defense and it is the sincere hope of our Coalition that this Subcommittee will consider robustly funding the DEPSCoR program in fiscal year 2010.

The Coalition of EPSCoR/IDeA States is grateful for this opportunity to testify before the Subcommittee. We look forward to continuing to work with the Senate to ensure the DEPSCoR program fully supports our Nation's critical research infrastructure requirements.

Thank you Mr. Chairman.

Chairman INOUE. And our next witness is the president and chief executive officer of the Lupus Foundation of America, Ms. Sandra Raymond.

Ms. Raymond?

STATEMENT OF SANDRA C. RAYMOND, PRESIDENT AND CHIEF EXECUTIVE OFFICER, LUPUS FOUNDATION OF AMERICA, INC.

Ms. RAYMOND. Thank you, Chairman Inouye, Ranking Member Cochran, and all of the subcommittee members. We thank you for the work that you are doing to serve and protect our country and the health of our servicemen and women. I'm here today to talk with you about a largely undiagnosed health issue of concern in the military and in the population at large, and that is lupus.

In April 2003, a 22-year-old female soldier was about to be deployed to Iraq. As is the practice, she was given the standard battery of vaccines, and soon after she received the shots, she died. This soldier had undiagnosed lupus, and the live viruses in the vaccine were said, by a panel of medical experts, to have caused a fatal reaction.

In people with compromised immune systems, live viruses and other triggers can cause the body to attack its own tissues and organs, and this can lead to morbidity and death.

Lupus is a chronic, life-threatening disease of the immune system. It's the prototypical autoimmune disease, and learning more about it will provide clues to understanding autoimmune diseases that affect 23 million Americans.

The disease principally affects young women in their child-bearing years, but men and children also develop lupus. It is two to three times more common among African-Americans, Hispanics,

Asian Americans and Pacific Islanders, and American Indians. This health disparity remains unexplained.

Three issues make lupus directly relevant to the DOD's medical research program.

First, vaccinations given routinely to American servicemen and women may trigger fatal reactions, especially since military doctors have no way to screen for lupus or underlying autoimmune diseases.

Second, lupus disproportionately affects minority populations and young people, those most likely to be in the military. Minorities comprise over one-third of the active duty military members; and among enlisted women the percentage in 2004 was almost 40 percent.

Third, environmental stresses are known to cause lupus. We know that genes linked to lupus are triggered by environmental, hormonal, and stress factors. These may be exacerbated by intense training, foreign deployment, exposure to chemical agents, battle, and more.

But, there is a way to insure that military personnel are protected, and that is through identification of biological markers that can detect lupus. We all know that measurement of blood pressure or cholesterol are biological markers that can tell us if we're at risk for cardiovascular disease or stroke. In lupus, scientists have now identified a number of biomarkers that are prime candidates for validation. And, once validated, an early detection test can be developed to screen for lupus. With the leadership of military lupus scientists, and academic centers across the United States, this research can get off to a running start.

While it's important that lupus remain in the peer-review program, we respectfully ask you to consider initiating what we call the Lupus Biomarker and Test Development Research Project. As part of the defense program, or the clinical investigation program of force health protection and readiness, establishing this program has the potential to save lives. Start-up costs are estimated to be \$6 million.

We thank you for the opportunity to speak today, and we look forward to working with you to address this public health issue.

Thank you.

Chairman INOUE. Thank you very much, Ms. Raymond.

[The statement follows:]

PREPARED STATEMENT OF SANDRA C. RAYMOND

Chairman Inouye, Ranking Member Cochran, and Distinguished Subcommittee Members, my name is Sandra Claire Raymond and I am the President and CEO of the Lupus Foundation of America. I want to take this opportunity to thank you for all you are doing to serve and protect our country and the health of our servicemen and women.

In April of 2003, a 22-year-old female soldier about to be deployed to Iraq was given the standard battery of vaccines and soon after these were administered she died. This soldier had undiagnosed lupus and live viruses in the vaccines triggered a fatal reaction. Lupus is a chronic and life-threatening disease that causes the immune system to become unbalanced, causing inflammation and tissue damage to virtually every organ system. It is the prototypical autoimmune disease and learning more about lupus will have broad-ranging implications for the estimated 23 million Americans suffering from autoimmune diseases. Lupus affects women, men and children, but, women in their child-bearing years are most at risk. The disease is two to three times more common among African Americans, Hispanics, Asian Amer-

icans and Pacific Islanders and American Indians. This health disparity remains unexplained. A recent study indicates that lupus annually costs the Nation an estimated \$31.4 billion in direct and indirect expenditures.

Here are the issues that are directly relevant to the DOD's medical research programs:

- Vaccinations given routinely to American Service men and women may trigger fatal reactions. Military physicians have no way to screen personnel for lupus or other autoimmune diseases prior to administering necessary vaccinations.
- Lupus disproportionately affects minorities and young people—those most likely to be in the military. Minorities comprise over one third of the active duty military members. 2004 statistics indicate that among active duty enlisted women, the minority percentage is even higher: 38.7 percent are minorities. And, again the 2004 statistics indicate that African Americans make up 18.3 percent of the military but less than 13 percent of the general population. African Americans are among those most at risk for lupus. Their disease begins earlier in life and is generally more severe. More than 90 percent of active duty military personnel are age 40 or younger and lupus strikes people between the ages of 15 and 44. In 2004, 11,000 individuals with lupus, active duty personnel and dependents, receive care through the DOD healthcare system and that number has been increasing in these last 5 years.
- Environmental stresses are known to cause lupus flares. Genes linked to lupus may be triggered by environmental, hormonal and stress factors exacerbated by intense training, foreign deployment, exposure to unaccustomed environment, chemical agents, battle and trauma.

Chairman Inouye, I want to thank you and the Congress for naming lupus as one of the diseases that can be researched under the Peer Reviewed Medical Research Program. The research projects that have been funded since 2005 have provided valuable insights into this devastating disease. However, in order to ensure that military personnel and their families are protected, there is an urgent and unmet need to validate biomarkers to detect lupus. Scientists have identified a number of biomarkers that are now ready for validation and this work will lead to an early detection test to screen for lupus. In fact, there is a network of academic medical centers across the country interested in this project and with leadership and coordination from the military lupus scientists, this project can get off to a running start. We ask that lupus remain in the congressionally directed Peer Reviewed Medical Research Program; however, in addition, we believe that lupus biomarker and test development research should originate in the DOD's Defense Health Program. With respect, we ask for \$6 million to establish this program. Thank you for providing me with this opportunity to speak today and I look forward to working with all of you to help improve the lives of our soldiers living with lupus.

Chairman INOUE. Our next witness is Dr. Zitnay, co-founder of the Defense and Veterans Brain Injury Center.

STATEMENT OF GEORGE A. ZITNAY, Ph.D., CO-FOUNDER, DEFENSE AND VETERANS BRAIN INJURY CENTER

Dr. ZITNAY. Good morning, Mr. Chairman, Vice Chairman Cochran. It's a pleasure to be with you today.

As the chairman stated, I'm the co-founder of the Defense and Veterans Brain Injury Center, and I recently retired, so I'm here today as a volunteer on behalf of the participants in the 2008 International Conference on Behavioral Health and Traumatic Brain Injury, convened at the request of the Congressional Brain Injury Task Force, chaired by Mr. Bill Pascrell and Todd Platts.

I come before you today to request \$370 million in funding for brain injury care, research, treatment, and training, through the Defense and Veterans Brain Injury Center, an affiliate of the Defense Center of Excellence in Psychological Health and TBI. As you know, TBI is the signature injury in the wars in Iraq and Afghanistan, affecting over 360,000 of our troops. Some 300,000 have also been identified as experiencing post traumatic stress disorder.

Blast-related injuries, extended deployments, all contribute to the unprecedented number of warriors suffering from TBI and psy-

chological conditions such as anxiety, depression, PTSD, and, unfortunately, suicide.

The long-term effects and consequences of TBI and PTSD will cost millions unless we start treating now, with available technology that is now currently available in the private sector.

In a report to Congress issued earlier this year, the experts at the international conference noted that the private sector—mostly academic centers of excellence across the country, and major clinics—have available the advanced technology and treatments that should be made available now to our men and women, and our wounded warriors, especially in the rural areas. They will benefit from this advanced care through the use of telemedicine and rehabilitation.

For example, new technology, and new advances in brain imaging, reveals that even the most severe—the most severe TBI patient improves, with brain stimulation. It's electrical stimulation applied to the inner brain. This helps the individual wake up. And once they wake up we can then provide rehabilitation until they gain function. We also know that neutraceuticals can also help repair brain tissue.

Our request includes \$50 million for a—DVBIC demonstration project, to utilize these advanced techniques to improve the standard of care for severe TBI patients. While many with severe TBI will never return to active duty, some may, if they get this advanced technology. But, most importantly, they will be able to live a life worth living.

DVBIC is a partnership between the DOD and the VA with the—trauma centers, and it was created by Congress to ensure the optimum care is given.

Finally, we request \$20 million for education and training of brain injury specialists. There is confusion between mild TBI and PTSD, but they are distinct conditions. TBI can be mild, as in concussion, or severe, as in unresponsive states of consciousness. Training is particularly needed in our rural areas of the country, as some of our young men and women who return home never get the chance to seek treatment, because it is too far away.

Thank you for your leadership; thank you for your support of the Defense and Veterans Brain Injury; but most of all for your care for our wounded warriors.

Chairman INOUE. Thank you very much, Dr. Zitnay.

[The statement follows:]

PREPARED STATEMENT OF GEORGE A. ZITNAY

Dear Chairman Inouye, Vice Chairman Cochran and Members of the Senate Appropriations Subcommittee on Defense: Thank you for this opportunity to submit testimony in support of funding brain injury programs and initiatives in the Department of Defense. I am George A. Zitnay, PhD, a neuropsychologist and co-founder of the Defense and Veterans Brain Injury Center (DVBIC).

I have over 40 years of experience in the fields of brain injury, psychology and disability, including serving as the Executive Director of the Kennedy Foundation, Assistant Commissioner of Mental Retardation in Massachusetts, Commissioner of Mental Health, Mental Retardation and Corrections for the State of Maine, and a founder and Chair of the International Brain Injury Association and the National Brain Injury Research, Treatment and Training Foundation. I have served on the Advisory Committees to the Centers for Disease Control and Prevention (CDC) and the National Institutes of Health (NIH), was an Expert Advisor on Trauma to the

Director General of the World Health Organization (WHO) and served as Chair of the WHO Neurotrauma Committee.

In 1992, as President of the national Brain Injury Association, I worked with Congress and the Administration to establish what was then called the Defense and Veterans Head Injury Program (DVHIP) after the Gulf War as there was no brain injury program at the time. I have since worn many hats, and helped build the civilian partners to DVBIC: Virginia NeuroCare, Laurel Highlands and DVBIC-Johnstown. I recently retired as an advisor to the Department of Defense (DOD) regarding policies to improve the care and rehabilitation of wounded warriors sustaining brain injury.

I am pleased to report that DVBIC continues to be the primary leader in DOD for all brain injury issues. DVBIC has come to define optimal care for military personnel and veterans with brain injuries. Their motto is “to learn as we treat.”

The DVBIC has been proactive since its inception, and what began as a small research program, the DVBIC now has 19 sites.¹ In 2007 your committee helped move DVBIC funding from under the auspices of the Uniformed Services University of the Health Sciences (USUHS) over to the Army’s Medical and Materiel Command at Fort Detrick. DVBIC is now the key operational component for brain injury of Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) under DOD Health Affairs.

I am here today to ask for your support for \$370 million in the Defense Appropriations bill for fiscal year 2010 for the DCoE which includes \$50 million specifically for a consortium of private sector entities to partner with DCoE and DVBIC to move the standard of care for brain injury forward, as well as \$20 million for education and training of brain injury specialists.

As you know, traumatic brain injury (TBI) is the “signature injury” of the conflicts in Iraq and Afghanistan, affecting some 360,000 service personnel and some 300,000 have experienced post traumatic stress disorder (PTSD). Blast-related injuries and extended deployments are contributing to an unprecedented number of warriors suffering from traumatic brain injury (ranging from mild, as in concussion, to severe, as in unresponsive states of consciousness) and psychological conditions such as anxiety, depression, PTSD and suicide.

The Rand Corporation, DOD, and CDC report that the long term effects and consequences of TBI, PTSD, and other psychological health issues will cost billions of dollars in care, treatment, and rehabilitation unless action is taken. The Rand Report estimates that PTSD-related and major depression-related costs could range from a 1-year cost of \$25,000 in mild cases to \$408,000 for severe cases. The total cost for TBI-related health issues is in the billions of dollars and does not include the lost productivity or the deleterious effects to quality of life. In reality, it has been well-established that the health care needs of our young service members returning from OIF/OEF are not being met and are overwhelming the current veterans’ health care system that has been primarily designed to care for elderly veterans.

In 2005, the Conemaugh International Symposium, brought together 60 of the world’s finest neuroscientists and physicians from across the United States and from 12 other nations, including representatives from the National Institutes of Health (NIH), CDC, DOD, Veterans Administration (VA), and the National Institute for Disability and Rehabilitation Research, resulting in a strong recommendation for United States Congressional action to significantly improve outcomes in wounded warriors with traumatic brain injury. In addition, the Symposium report called for the creation of Seven Centers of Excellence in TBI treatment, research and training to be located across the Nation.

A second international meeting on Disorders of Consciousness produced the Mohonk Report, in which scientists, ethicists, physicians, and family members from across the United States, as well as leading neuroscientists from Israel, Europe, and South America, collaborated to prepare an action report to Congress that focused on Improving Outcomes for Individuals with Disorders of Consciousness. The report called on Congress to fund a network of highly specialized centers, utilizing the lat-

¹Walter Reed Army Medical Center, Washington, DC; Landstuhl Regional Medical Center, Germany; National Naval Medical Center, Bethesda, MD; James A. Haley Veterans Hospital, Tampa, FL; Naval Medical Center San Diego, San Diego, CA; Camp Pendleton, San Diego, CA; Minneapolis Veterans Affairs Medical Center, Minneapolis, MN; Veterans Affairs Palo Alto Health Care System, Palo Alto, CA; Fort Bragg, NC; Fort Carson, CO; Fort Hood, TX; Camp Lejeune, NC; Fort Campbell, Kentucky; Boston VA, Massachusetts; Virginia Neurocare, Inc., Charlottesville, VA; Hunter McGuire Veterans Affairs Medical Center, Richmond, VA; Wilford Hall Medical Center, Lackland Air Force Base, TX; Brooks Army Medical Center, San Antonio, TX; Laurel Highlands, Johnstown, PA; DVBIC-Johnstown, PA.

est technology available, to significantly improve outcomes for wounded warriors living in the minimally conscious state.

A third follow-up meeting of experts, the Symposium on Severe and Minimally Conscious Wounded Warriors, occurred in the spring of 2008, in Johnstown, Pennsylvania. This meeting rendered a Feasibility Study on treating wounded warriors with disorders of consciousness which was subsequently delivered to the DVBIC for consideration.

Based upon the history and results of these international meetings, the International Conference on Behavioral Health and Traumatic Brain Injury was convened in October 2008, hosted by Congressmen Bill Pascrell and Todd Platts, co-chairs of the Congressional Brain Injury Task Force, and sponsored by the DOD, DVBIC, and numerous other groups to prepare recommendations for action and funding by the United States Congress.

The Executive Report from this meeting of over 100 international experts generated critical recommendations in the areas of Research, Education, Assessment, Family, and Treatment. The authors of the report concluded: "The over-arching goal is to provide our wounded warriors and their families with what they deserve: the best health care and support services that our state-of-the-art science and medicine have to offer. In doing so, we will create a standard of excellence in military health care, research, and training that will serve as an exemplary model for the rest of the world." The report requested from Congress a total of \$350 million in funding to achieve that goal.

On March 12, 2009 representatives of the International Conference unveiled a Report to Congress (the Paterson Report) calling for action now to improve the care of wounded warriors.

The Paterson Report noted:

- new advances in brain imaging are revealing that even those with the most severe levels of TBI have preserved brain tissue which can be used through deep brain electrical stimulation to help the individual wake up and regain function;
- new advanced technologies can help those wounded warriors with loss of sight regain some vision;
- new cognitive prostheses can help those wounded warriors with severe memory loss regain the ability to plan and remember;
- neutraceuticals can help restore parts of damaged brains; and
- new screening and early automated psychological tools and tests can help detect those at risk for PTSD and other psychological disorders.

What we need to do now is to make these advanced technologies and treatments that are available in the private sector available to our wounded warriors, and we need to offer services and clinics in our rural areas through telemedicine and tele-rehabilitation.

TREAT NOW CONSORTIUM

Our funding request includes \$50 million specifically for the work of a consortium of private sector providers (called TREAT NOW: Treatment and Research Excellence Achieved Today: Neuroscientists for Our Warriors) who have come together to improve the standard of care of wounded warriors as soon as possible.

For those warriors who have sustained the most severe TBIs, the recommendations from the Reports of the Aspen and Mohonk Meetings are not being followed. Thus, the current standard of care for these warriors is inconsistent, clinically unreliable, and not maximally effective. The exact number of these wounded warriors from Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) who suffer from severe disorders of consciousness (SDOC) is unknown. The DVBIC reports that 4 percent of the 15,000 TBI patients examined and/or treated by their Center suffer from SDOC. This is an underestimation of the true number of warriors because it does not include those seen or treated at other military hospitals and programs and the dependents of wounded warriors and veterans.

Serving under the auspices of the DCoE, the Consortium will complement, and partner with the DVBIC and the National Intrepid Center of Excellence (NICoE) in their vision and commitment to improve the current system of medical care and support for troops sustaining severe TBIs. The partners include some of the best scientists, researchers and rehabilitation specialists from around the United States. While geographically diverse, participating members are heavily invested in improving tele-health technologies. There is no project like it and DOD Health Affairs is interested in moving it forward.

Much has been accomplished by the DCoE in its efforts to improve public awareness of TBI and psychological disorders, address the stigma associated with such conditions, and help connect family, caregivers and wounded warriors with appropriate information, treatment and services.

There are concerns however about an overemphasis on psychological disorders that affects the public perception of TBI. Many in the brain injury medical and family support community do not want to see TBI becoming considered a “psychological disorder.” This concern comes from the fact that in no other health care system are psychological issues and brain injury combined—not in the DVA, NIH, or any university medical program. Brain injury specialists and family advocates want to be assured that as much focus and funding is being put into the science of brain injury rehabilitation and treatment as is being put into the psychological effects of combat. Of the 25 programs funded under the Congressionally Directed Medical Research Program with 2007 supplemental funding, only 8 were for brain injury.

We must not lose sight of the actual cause of subsequent psychological problems. TBI can lead to depression and suicide but TBI is not itself a psychological disorder. Treatments for TBI and PTSD are not only different, but can be contraindicated and make the patient worse. In working with the Wounded Warrior Project, I have heard many stories of warriors with brain injury not getting the right treatment because they were sent to a psychologist instead of a neuropsychologist and given drugs for PTSD that exacerbated the effects of TBI.

There are harmful reports like the USA Today article on April 15, 2009², in which Cols. Charles Hoge and Carl Castro argue that the DOD and DVA are overemphasizing mild TBI among troops and that the focus should be more on the symptoms rather than the cause. Citing the Hoge-Castro article in *The New England Journal of Medicine*, USA Today reports that “symptoms blamed on TBI after troops return home likely are due to depression, PTSD or substance abuse . . . and overemphasis on mild TBI keeps troops with those conditions from being properly treated . . . most troops who suffered a concussion in battle recovered within days of the injury.” This is very damaging to the efforts to improve public awareness of TBI.

A plethora of leading brain injury specialists dispute Hoge and Castro’s claims and urge caution in making changes to screening procedures. David Hovda, PhD, Director of the Brain Injury Research Center at UCLA, strongly recommended continuing screening, saying that without it, troops may develop long-term neurological problems after numerous concussions, similar to former professional football players. Research conducted at the Defense Advanced Research Projects Agency (DARPA) shows that the most common cause of TBI in combat, blast injury, causes a range of injury from mild (concussion) to severe.

I urge your Committee to recommend that DOD continue its practice of screening which is based on the best science available and offers troops the best chance at recovery.

In addition the Paterson Report recommended that the National Institutes of Health and the DOD convene a “Consensus Conference” to clearly define mild TBI and PTSD and establish specific standards for treatment. The Report recommended that definitions and treatment standards be evidence based and incorporate a thorough review of available treatment programs and outcome measures. The Report urged the Consensus Conference to strive to equitably involve all stakeholders.

The confusion has devastating effects when it results in wounded warriors not seeking treatment. DVBIC officials have reported that troops are now less likely to seek help for mild brain injury if it is considered to be a “psychological disorder.”

President Obama made a speech last week regarding health care reform and urged that we “fix what’s broken and move forward with what works.” The same should be said about improving DOD’s health system. While the increase in suicides has brought public attention to the stresses of combat, the complex issues of TBI should not get lost or overlooked. The research and treatment for TBI must remain distinct and the focus of the DVBIC must be preserved. DVBIC needs to continue to be recognized as the center of excellence in providing brain injury care and research.

\$20 MILLION FOR EDUCATION AND TRAINING BRAIN INJURY SPECIALISTS

We recommend an additional \$20 million be appropriated specifically for training medical students in brain injury diagnosis, treatment and rehabilitation. We need

²Zoroya, Gregg, “Officials: Troops Hurt by Brain Injury Focus,” USA Today, April 15, 2009.

more brain injury specialists in the medical field. More neurologists, neuropsychologists and psychiatrists and rehabilitation specialists should be educated by the Uniformed Services University for the Health Sciences.

In summary, we respectfully request \$370 million for fiscal year 2010 to enhance ongoing projects of the DCoE and to develop new initiatives to improve the care of wounded warriors and support for their families. We need to assure that our brave men and women who are injured in the course of duty are given every possible opportunity for the best medical care, rehabilitation and community reentry assistance that we as a Nation can provide.

Thank you for your consideration of this request to help improve the care of our wounded warriors.

Chairman INOUE. Our next witness is the director of legislation, Association of the United States Navy, Captain Ike Puzon.

STATEMENT OF CAPTAIN IKE PUZON, UNITED STATES NAVY (RET.), DIRECTOR OF LEGISLATION, ASSOCIATION OF THE UNITED STATES NAVY

Captain PUZON. Mr. Chairman, Mr. Vice Chairman, and the Association of the United States Navy is grateful to have the opportunity to testify today.

Our newly transitioned association is now focused on equipment, force structure, policy issues, manpower issues, for a total force.

Your unwavering support for our deployed servicemembers in Iraq and Afghanistan and the worldwide fight against terrorism is of crucial importance. AUSN would like to highlight three areas of importance.

The C-40—first, the C-40 aircraft originally listed in the unfunded list, to replace critically overused C-20G aircraft, and to replace overaged and overused C-9 transport, both are playing a vital role in Iraq and Afghanistan and worldwide contingency operations.

Second, the EF-18 Growler aircraft for U.S. Navy and U.S. Navy Reserves, specifically in the Navy Reserve, to replace aged aircraft in a Maryland-based squadron that is currently deployed to Iraq and Afghanistan.

And finally, number three, stabilization of authorized end-strength for active Navy and Navy Reserve.

In recent years, the Pentagon has recommended the repeal of separate budget requests for procurement Reserve equipment. A combined appropriations for each service does not guarantee needed equipment for National Guard and Reserve components. We do not agree with the Pentagon's position on this issue, and ask that the subcommittee continue to provide separate appropriations against National Guard and Reserve equipment.

For the foreseeable future, we must be realistic about what the unintended consequences are for a very high rate of usage for active and Reserve components. Our active duty Navy and the current Reserve members are pleased to making it—a significant contribution to the Navy's defense as operational forces. However, the reality of it all is that the added stress on the total force could pose long-term consequences for our country in terms of recruiting, retention, and family support. The Navy has a total of over 10,000 people—personnel deployed in Operation Iraqi Freedom (OIF). The Navy Reserve continues to mobilize 4,500 sailors for the support of the ongoing global war on terror (GWOT). Your Navy is engaged throughout.

We recognize that there are many issues that need address by the subcommittee. We are perplexed by the short Navy unfunded program list. History points to a larger list. Overwhelmingly, we hear that—discussions and requirements for more and better equipment for training total force is necessary.

In summary, we believe the subcommittee needs to address the following issues for total force, in the best interest of our national security: fund the C-40A for Navy Reserve and Navy, per previous supplementals, and we replace the C-9 transport and the C-20G; fund the E/F-18 Growler; increase funding for the National Guard and Reserve equipment; and establish end-strength stabilization for the Navy and Navy Reserve.

Thank you for your—opportunity.

Chairman INOUE. Thank you very much, Captain Puzon.

[The statement follows:]

PREPARED STATEMENT OF IKE PUZON

Mister Chairman and distinguished members of the Committee, the Association of the United States Navy is very grateful to have the opportunity to testify.

Our newly transitioned association looks at equipment, force structure, policy issues, and manpower issues.

We would like to thank this Committee for the on-going stewardship on the important issues of national defense and, especially, the reconstitution and transformation of the Navy. At a time of war, non-partisan leadership sets the example.

Your unwavering support for our deployed Service Members in Iraq and Afghanistan and the world-wide fight against terrorism and piracy is of crucial importance. AUSN would like to highlight some areas of emphasis.

—C-40A Aircraft to replace critically overused C-20G in Hawaii and Maryland; and, to replace over aged C-9 transports—both are playing a vital role in Iraq and Afghanistan. They are not VIP aircraft—but, can be used for such missions.

—EF/A 18 Growler aircraft for U.S. Navy and U.S. Navy Reserve—specifically to replace aged aircraft in a Maryland based squadron that is currently deployed to Iraq and Afghanistan.

—C-130J aircraft—to meet the intra-theater needs of the Geographic Commanders and Navy component commanders.

These issues are in line with all previous years Navy and Navy Reserve unfunded list.

As a Nation, we need to supply our service members (active duty and reserve) with the critical equipment and support needed for individual training, unit training, and combat.

In recent years, the Pentagon has recommended the repeal of separate budget requests for procuring Reserve Equipment. A combined equipment appropriation for each service does not guarantee needed equipment for the National Guard and Reserve Components. For the Navy Reserve, this is especially true. We do not agree with the Pentagon's position on this issue and history has proven the requirements for NGREA, and we ask this committee to continue to provide separate appropriations against NG and RE requirements.

In addition to equipment to accomplish assigned missions, AUSN believes that the Administration and Congress must make it a high priority to maintain, if not increase, the end strengths of already overworked, and perhaps even overstretched, military forces. This includes the Active Duty Navy & Navy Reserve. The Navy Reserve has always proven to be a highly cost-effective and superbly capable operational and surge force in times of both peace and war. At a minimum, the Navy Reserve should be stabilized since they are deployed with active forces in Iraq and Afghanistan.

For the foreseeable future, we must be realistic about what the unintended consequences are from a high rate of usage. History shows that a Reserve force is needed for any country to adequately meet its defense requirements, and to enable success in offensive operations. Our Active Duty Navy and the current Reserve members are pleased to be making a significant contribution to the Nation's defense as operational forces; however, the reality of it all is that the added stress on the Reserve could pose long term consequences for our country in recruiting, retention, family and employer support. This issue deserves your attention in Family Support

Programs, Transition Assistance Programs and for the Employer Support for the Guard and Reserve programs.

At the same time, the Navy has a total of over 10,000 personnel deployed in OIF/OEF theaters; Navy Reserve continues to mobilize over 4,500 Sailors in support for the on-going GWOT. Your Navy is engaged throughout the world in operations.

Care must be taken that that tremendous reservoir of operational capability be maintained and not capriciously dissipated. Officers, Chief Petty Officers, and Petty Officers need to exercise leadership and professional competence to maintain their capabilities. There is a risk that they will not be able to do so in the present model of utilization of Navy Reserve and Active Duty IA utilizations.

AUSN is perplexed by this year's Navy Unfunded Programs list provided by the Chief of Naval Operations. We fully support CNO's unfunded list. However, history points at a much larger unfunded list and the needs are there.

Specific Equipment and Funding needs of the Navy Reserve include:

—C-40 funding to replace dangerously aged C-9s. These are war fighting logistic weapons systems. 2 Aircraft were programmed for fiscal year 2009 supplemental, and 4 were programmed for fiscal year 2009 funding. The Navy did not get these funded. We have to replace aging C-9s to maintain Navy and Marine Corps engagement in the GWOT.

First:

—It is the Navy's only world-wide intra-theater organic airlift, operated by the U.S. Navy.

—Navy currently operates 9 C-40As, in three locations: Fort Worth, Jacksonville, San Diego.

—These aircraft are needed for Hawaii, Maryland, Texas and Washington units.

—A pending CNA study—substantiates the requirements for 31-35 C-40As to replace aging C-9s.

Second:

—CNO, SECNAV, & DOD have supported the requirement for C-40As.

—Commander, Naval Air Force 2007 Top Priority List stated the requirement for at least 32 aircraft.

Third:

—Current average age of remaining C-9s that the C-40 replaces is: 38 years.

—There will be no commercial operation of the C-9s or derivatives by 2011.

—C-9s can not meet the GWOT requirement, due to MC rates, and availability of only 171 days in 2006.

—Modifications required to make C-9s compliant with stage III Noise compliance, and worldwide Communications/Navigation/Surveillance/Air Traffic Management compliance—are cost prohibitive.

—There are growing concerns about the availability and Mission Capability rates of the C-20Gs at Hawaii and Maryland units.

Fourth:

—737 Commercial Availability is slipping away, if we do not act now; loss of production line positions in fiscal year 2008-09—due to commercial demand would slip to 2013, and increase in DOD, Service expenditures.

—C-130J procurement funding for 6 C-130s for the Navy Reserve.

—E/F-18 Growler procurement to replace aged and retiring EA-6B aircraft at Maryland units, and for Active Duty Navy usage. Currently the NR EA-6B unit provides 90 continuous detachments in support of OIF/OEF.

—A full range of Navy Expeditionary Command equipment.

People join the Reserve Components to serve their country and operate equipment. Recruiting and retention issues have moved to center stage for all services and their reserve components. In all likelihood the Navy will not meet its target for new Navy Reservists and the Navy Reserve will be challenged to appreciably slow the departure of experienced personnel this fiscal year. We've heard that Reserve Chiefs are in agreement, expressing concern that senior personnel could leave when equipment is not available for training. Besides reenlistment bonuses which are needed, we feel that dedicated Navy Reserve equipment and Navy Reserve units are a major factor in recruiting and retaining qualified personnel in the Navy Reserve.

Overwhelmingly, we have heard Reserve Chiefs and Senior Enlisted Advisors discuss the need and requirement for more and better equipment for Reserve Component training. The Navy Reserve is in dire need of equipment to keep personnel in the Navy Reserve and to keep them trained. We must have equipment and unit cohesion to keep personnel trained. This means—Navy Reserve equipment and Navy Reserve specific units with equipment.

THE RESERVE COMPONENT AS A WORKER POOL

Issue: The view of the Reserve Component that has been suggested within the Pentagon is to consider the Reserve as of a labor pool, where Reservists could be brought onto Active Duty at the needs of a Service and returned, when the requirement is no longer needed. It has also been suggested that an Active Duty member should be able to rotate off active duty for a period, spending that tenure as a Reservist, returning to active duty when family, or education matters are corrected.

Position: The Guard and Reserve should not be viewed as a temporary-hiring agency. Too often the Active Component views the recall of a Reservist as a means to fill a gap in existing active duty manning.

EQUIPMENT OWNERSHIP

Issue: An internal study by the Navy has suggested that Naval Reserve equipment should be transferred to the Navy. At first glance, the recommendation of transferring Reserve Component hardware back to the Active component appears not to be a personnel issue. However, nothing could be more of a personnel readiness issue and is ill advised. Besides being attempted several times before, this issue needs to be addressed if the current National Security Strategy is to succeed.

Position: The overwhelming majority of Reserve members join the RC to have hands-on experience on equipment. The training and personnel readiness of Reserve members depends on constant hands-on equipment exposure. History shows, this can only be accomplished through Reserve equipment, since the training cycles of Active Components are rarely if ever—synchronized with the training or exercise times of Reserve units. Additionally, historical records show that Reserve units with hardware maintain equipment at or higher than average material and often better training readiness. Current and future war fighting requirements will need these highly qualified units when the Combatant Commanders require fully ready units.

Reserve and Guard units have proven their readiness. The personnel readiness, retention, and training of Reserve and Guard members will depend on them having Reserve equipment that they can utilize, maintain, train on, and deploy with when called upon. Depending on hardware from the Active Component, has never been successful for many functional reasons. The AUSN recommends the Committee strengthen the Reserve and Guard equipment appropriation in order to maintain optimally qualified and trained Reserve and Guard personnel.

In summary, we believe the Committee needs to address the following issues for Navy and Navy Reservists in the best interest of our National Security:

- Fund C-40A for the Navy Reserve, per the fiscal year 2009 Supplemental; we must replace the C-9s and replace the C-20Gs in Hawaii and Maryland.
- Fund 6 C-130Js for the Navy Reserve, per the CNO unfunded list.
- Moratorium on Active Duty end-strength cuts.
- Establish an End-strength cap of 68,000 as a floor for end strength to Navy Reserve manpower—providing for surge-ability and operational force.
- Increase funding for Naval Reserve equipment in NGREA
 - E/F-18 Growler aircraft for Navy and Navy Reserve units, especially the NR unit stationed in Maryland.
 - Explosive Ordnance Disposal Equipment

We thank the committee for consideration of these tools to assist the Navy and Navy Reserve in an age of increased sacrifice and utilization of these forces.

Thank you for your ongoing support of the Nation, the Armed Services, The United States Navy, The United States Navy Reserve, and the fine men and women who defend our country.

Chairman INOUE. Our next witness represents the Mesothelioma Applied Research Foundation, Ms. Mary Hesdorffer.

STATEMENT OF MARY HESDORFFER, NURSE PRACTITIONER, MEDICAL LIAISON, MESOTHELIOMA APPLIED RESEARCH FOUNDATION (MARF)

Ms. HESDORFFER. Good morning, distinguished members of the U.S. Senate Defense Appropriations Subcommittee. Thank you for the opportunity to address you on a cruel cancer that kills our veterans.

My name is Mary Hesdorffer, I'm a nurse practitioner, and I'm the medical liaison to the Mesothelioma Applied Research Foundation.

Your subcommittee has recognized the strong connection between mesothelioma and military service. Because asbestos was heavily used all over Navy ships, millions of servicemen and shipyard workers were exposed. One study found that one-third of today's meso victims were exposed on U.S. Navy ships, or shipyards, like Pearl Harbor, Puget Sound, and Groton.

A renowned meso researcher from Lake Forest just shared with me, the other night, that the rate of veterans who have been exposed to asbestos have a sevenfold increase in mesothelioma over the normal population. Dangerous exposures continue today, and have been reported among the troops in Iraq and Afghanistan, and there's also grave concern for our first responders to 9/11. My son just returned from Iraq, and he was a responder at 9/11, so I have a deep concern over these exposures.

Asbestos is common in buildings, including the utility tunnels right below us. For all those who develop mesothelioma as a result, the only hope is that we will develop an effective treatment, yet mesothelioma has virtually received no Federal funding. Therefore, treatments have not advanced. We only have one approved treatment for this disease; it takes a life expectancy of between 6 to 9 months to, now, 12.2 months.

Your subcommittee has recognized the need and has taken the lead. For the past 2 years, you have directed DOD to spur research for meso by including it in the PR and RP. However, your leadership was thwarted this year. Thirty-eight mesothelioma research grants were submitted to the—for the review year for 2008, which demonstrates a huge interest in mesothelioma. But, while other diseases got six grants each, DOD is funding only one mesothelioma grant.

It's critically needed, our research funding. The research with—Dr. Courtney Broaddus is one of the world's top meso experts, and she told us that, without this grant, she was going to have to close her lab. This really has salvaged her career.

Going forward on an award rate of 2.6 percent is still not enough to encourage top researchers to apply, or new researchers to establish their careers in mesothelioma. The research will not advance, effective treatments will not be found. We believe that the subcommittee must make clear to DOD its intent to spur mesothelioma research by directing DOD to establish funding of \$67 million to DOD for seven new programs, including a peer-reviewed cancer research program that does not currently include mesothelioma.

It's a rapidly fatal, excruciatingly painful cancer, directly related to military service. We ask the subcommittee to appropriate DOD \$5 million for a peer-reviewed cancer research program that will boost the long-neglected field of mesothelioma research, translating directly to saving lives and reducing suffering in veterans.

Thank you.

Chairman INOUE. I thank you very much, Ms. Hesdorffer.

[The statement follows:]

PREPARED STATEMENT OF MARY HESDORFFER

Distinguished members of the U.S. Senate Defense Appropriations Subcommittee: Thank you for this opportunity to address a tragic disease that kills our veterans. My name is Mary Hesdorffer. I am a nurse practitioner with over a decade's experi-

ence in mesothelioma treatment and research, and am the Medical Liaison for the Mesothelioma Applied Research Foundation.

MALIGNANT MESOTHELIOMA

Mesothelioma is an aggressive cancer caused by asbestos. It is among the most painful and fatal of cancers, as it invades the chest, destroys vital organs, and crushes the lungs.

THE "MAGIC MINERAL"—EXPOSURES WERE WIDESPREAD

From the 1930s through the 1970s asbestos was used all over Navy ships. Millions of servicemen and shipyard workers were exposed. Many of them are now developing mesothelioma, following the disease's long latency period.

MESOTHELIOMA TAKES OUR HEROES

These are the people who served our country's defense. Heroes like Admiral Elmo Zumwalt, Jr., Chief Naval Officer during Vietnam, Commander Harrison Starn, who served from World War II through Vietnam, and thousands of servicemen like USS *Kitty Hawk* Boilerman Lewis Deets, who volunteered for Vietnam at barely 18, all struck down by mesothelioma. Last year I testified about mesothelioma patient Bob Tregget, who was exposed to asbestos aboard a nuclear submarine from 1965 to 1972. Following grueling best-available treatment, Bob was recurrent and in extreme untreatable pain. But he was hanging on, hoping the next treatment advance would come soon enough to help him. It didn't and Bob passed away a few months ago.

Almost 3,000 more Americans like Bob die each year of mesothelioma, and one study found that one-third were exposed on U.S. Navy ships or shipyards, lost through service to country just as if they had been on a battlefield.

Many more are being exposed now. Asbestos exposures have been reported among the troops in Iraq and Afghanistan. There is grave concern for the heroic first responders from 9/11, including my son, who just returned from service in Iraq. Asbestos is common in buildings. The utility tunnels in this very building have dangerous levels. Even low-dose, incidental exposures cause mesothelioma. Minnesota Congressman Bruce Vento worked near an asbestos-insulated boiler in a summer college job. He died of mesothelioma in 2000. His wife Sue Vento testified before you in 2007. For all those who will develop mesothelioma as a result of these past or ongoing exposures, the only hope is that we will develop effective treatment.

MESOTHELIOMA FUNDING HAS NOT KEPT PACE

Yet mesothelioma research has been overlooked. With the huge Federal investment in cancer research through the NCI, and \$4.8 billion spent in biomedical research through the DOD Congressionally Directed Research Program since 1992, we are winning the war on cancer and many other diseases. But for mesothelioma, the National Cancer Institute has provided virtually no funding, in the range of only \$1.7 to \$3 million annually over the course of the last 6 years, and the DOD has not invested in any mesothelioma research despite the military-service connection. As a result, advancements in the treatment of mesothelioma have lagged far behind other cancers. In fact, for decades, there was no approved treatment better than doing nothing at all. Our veterans who develop mesothelioma have an average survival of only 4–14 months.

NEW OPPORTUNITIES

But there is good news. Brilliant researchers are dedicated to mesothelioma. The FDA has now approved one drug which has some effectiveness, proving that the tumor is not invincible. Biomarkers are being identified. Two of the most exciting areas in cancer research—gene therapy and anti-angiogenesis—look particularly promising in mesothelioma. The Meso Foundation has funded \$6 million to support research in these and other areas. Now we need the Federal Government's partnership, to develop the promising findings into effective treatments.

COMMITTEE'S LEADERSHIP THWARTED

Your committee has recognized the need and taken the lead. For the past 2 years (fiscal years 2008 and 2009), you have directed DOD to spur research for this service-related cancer by including it as an area of emphasis in the Peer Reviewed Medical Research Program.

However, I have to report to you that unfortunately your leadership in acting to spur mesothelioma research has been thwarted. DOD just announced the results of the PRMRP program for fiscal year 2008. Thirty-eight mesothelioma research projects were submitted. This demonstrates the huge demand for mesothelioma research funding that we testified about and that you directed DOD to address. But while other diseases got six grants each, DOD (tentatively) funded only one researcher (Courtney Broaddus) for a mesothelioma project. This is a successful application rate of just 2.6 percent.

This is critically-needed funding. Dr. Broaddus is one of the world's top mesothelioma researchers. Indeed she was president of the International Mesothelioma Interest Group from 1999 through 2002. She and her team were surviving on three now concluded grants from the Meso Foundation. This DOD grant salvaged career in mesothelioma research. (See attached 5/24/09 email from Dr. Broaddus to Meso Foundation Executive Director Chris Hahn.) We are extremely grateful that thanks to your leadership and the DOD's awarding this one grant this renowned researcher will not have to abandon her investment and expertise in mesothelioma. But 37 other researchers put in the time, effort and expense to gather preliminary data and apply, and then were rejected. What happens to them? Going forward, a success rate of just 2.6 percent will discourage top researchers from applying in mesothelioma; they will direct their effort and expertise into other, better funded cancers. Similarly, new researchers will not establish their careers in mesothelioma either. Mesothelioma research will not advance, effective treatments will not be found, and veterans and current members exposed to asbestos through their military service will be left without hope.

A DEDICATED INVESTMENT

Since the Committee's intent to spur mesothelioma research is not being executed through the PRMRP, we believe the Committee must respond by directing DOD to establish a dedicated mesothelioma program. For 2009, Congress added dedicated funding for all of the following as new programs, in addition to the DOD's existing programs for Breast Cancer, Prostate Cancer, Ovarian Cancer, Neurofibromatosis, Tuberos Sclerosis Complex, and the Peer Reviewed Medical Research Program:

- Autism Research Program, \$8 million;
- Gulf War Illness Research Program, \$8 million;
- Amyotrophic Lateral Sclerosis Research Program, \$5 million;
- Bone Marrow Failure Research Program, \$5 million;
- Multiple Sclerosis Research Program, \$5 million;
- Peer Reviewed Lung Cancer Research Program, \$20 million;
- Peer Reviewed Cancer Research Program, \$16 million, restricted as follows: \$4 million for research of melanoma and other skin cancers as related to deployments of service members to areas of high exposure; \$2 million for research of pediatric brain tumors within the field of childhood cancer research; \$8 million for genetic cancer research and its relation to exposure to the various environments that are unique to a military lifestyle; and \$2 million for non-invasive cancer ablation research into non-invasive cancer treatment including selective targeting with nano-particles.

All of these research areas warrant attention, but mesothelioma is a rapidly fatal, excruciatingly painful cancer directly related to military service. We ask the Committee to appropriate to DOD for fiscal year 2010 \$5 million for a dedicated Mesothelioma Research Program or as a specific restriction within the Peer Reviewed Cancer Research Program. This will boost the long-neglected field of mesothelioma research, enabling mesothelioma researchers to build a better understanding of the disease and develop effective treatments. This will translate directly to saving lives and reducing suffering of veterans battling mesothelioma.

We look to the Senate Defense Appropriations Subcommittee to provide continued leadership and hope to the servicemen and women and veterans who develop this cancer after serving our Nation. Thank you for the opportunity to provide testimony before the Subcommittee and we hope that we can work together to develop life-saving treatments for mesothelioma.

Chairman INOUE. And now may I call upon the secretary treasurer of the American Society of Tropical Medicine and Hygiene, Dr. Jonathan Berman.

STATEMENT OF JONATHAN D. BERMAN, MD, Ph.D., COLONEL, UNITED STATES ARMY (RET.), SECRETARY-TREASURER, AMERICAN SOCIETY OF TROPICAL MEDICINE AND HYGIENE

Dr. BERMAN. Mr. Chairman, ranking member, I welcome the opportunity to testify before you today on behalf of the American Society of Tropical Medicine and Hygiene, ASTMH.

I commend this subcommittee for its focus on the vital issue of military infectious disease research, and the important role of that research in protecting troops deployed abroad.

I am Dr. Jonathan Berman, secretary/treasurer of ASTMH, and a retired U.S. Army colonel.

With nearly 3,500 members, ASTMH is the world's largest professional membership organization dedicated to the prevention and control of tropical diseases. We represent, educate, and support tropical medicine's scientists and clinicians. I want to talk to you today about the importance of funding for the DOD's infectious disease research and particularly malaria research.

Malaria is one of the most serious health threats facing U.S. troops serving abroad. The U.S. military has, for decades, been on the forefront of global efforts to develop new antimalarial drugs and the world's first malaria vaccine. These research efforts are appropriately aimed at protecting and treating the warfighter, but they have important civilian applications, as well. Malaria is one of the greatest infectious-disease killers, and countless lives worldwide have been saved by antimalarial medicines developed in part or primarily by the DOD.

Unfortunately, the parasite that causes malaria, like all microorganisms, is adaptive and develops resistance to drugs quickly. Until very recently, the military's first-line malaria therapeutic and prophylactic agent was mefloquine, a drug developed by military researchers to create a replacement for chloroquine, used soon after World War II.

Mefloquine came into use in the 1980s, but parasites in Southeast Asia have already developed resistance to it, and resistance is now being identified in West Africa and South America, as well. Consequently, the military no longer considers mefloquine to be a first-line treatment, and at this time the military does not have an ideal malarial prophylactic agent. Ensuring that we can protect troops from malaria in future deployments means that we must continue to develop new drugs and an effective vaccine.

Military malaria research funding represented approximately \$23 million in fiscal year 2008, the most recent fiscal year for which figures are available. This level is not commensurate with the health threat malaria poses to military operations, therefore ASTMH respectfully requests that the subcommittee increase funding for malaria research in fiscal year 2010 to \$30 million, and provide subsequent annual increases, ending up at \$77 million in funding in fiscal year 2015.

Mr. Chairman and ranking member, thank you for providing me with the opportunity to speak today on behalf of ASTMH regarding this important but often overlooked defense issue.

Chairman INOUE. Thank you very much, Dr. Berman.

[The statement follows:]

PREPARED STATEMENT OF JONATHAN D. BERMAN

Overview: The American Society of Tropical Medicine and Hygiene (ASTMH) appreciates the opportunity to submit written testimony to the Senate Defense Appropriations Subcommittee. With nearly 3,300 members, ASTMH is the world's largest professional membership organization dedicated to the prevention and control of tropical diseases. We represent, educate, and support tropical medicine scientists, physicians, clinicians, researchers, epidemiologists, and other health professionals in this field.

Because the military operates in and deploys to so many tropical regions, reducing the risk that tropical diseases present to servicemen and women is often critical to mission success. Malaria is a particularly important disease in this respect, because it is both one of the world's most common and deadly infectious diseases, and the U.S. military has a long history of deploying to regions endemic to malaria and suffering malaria casualties as a result.

For this reason, we respectfully request that the Subcommittee expand funding for the Department of Defense's longstanding and successful efforts to develop new drugs, vaccines, and diagnostics designed to protect servicemen and women from malaria while deployed abroad. Specifically, we request that in fiscal year 2010, the Subcommittee ensure that the Department of Defense spends \$30 million on malaria research and development. Furthermore, we request that the Subcommittee provide annual increases such that total military spending on malaria research is \$76.5 million in fiscal year 2015. This funding will support ongoing efforts by military researchers to develop a vaccine against malaria and to develop new anti-malaria drugs to replace older drugs that are losing their effectiveness as a result of parasite resistance. Increased malaria research will help ensure that our soldiers, sailors, airmen, and marines are protected from this deadly disease when deployed to tropical regions.

We very much appreciate the Subcommittee's consideration of our views, and we stand ready to work with Subcommittee members and staff on these and other important tropical disease matters.

ASTMH

ASTMH plays an integral and unique role in the advancement of the field of tropical medicine. Its mission is to promote global health by preventing and controlling tropical diseases through research and education. As such, the Society is the principal membership organization representing, educating, and supporting tropical medicine scientists, physicians, researchers, and other health professionals dedicated to the prevention and control of tropical diseases. Our members reside in 46 States and the District of Columbia and work in a myriad of public, private, and nonprofit environments, including academia, the U.S. military, public institutions, Federal agencies, private practice, and industry.

The Society's long and distinguished history goes back to the early 20th century. The current organization was formed in 1951 with the amalgamation of the National Malaria Society and the American Society of Tropical Medicine. Over the years, the Society has counted many distinguished scientists among its members, including Nobel laureates. ASTMH and its members continue to have a major impact on the tropical diseases and parasitology research carried out around the world.

The central public policy priority of ASTMH is reducing the burden of infectious disease in the developing world. To that end, we advocate implementation and funding of Federal programs that address the prevention and control of infectious diseases that are leading causes of death and disability in the developing world, and which pose threat to U.S. citizens. Priority diseases include malaria, Dengue fever, Leishmaniasis, Ebola, cholera, and tuberculosis.

MALARIA AND MILITARY OPERATIONS

Servicemen and women deployed from the U.S. military comprise a majority of the healthy adults traveling each year to malarial regions on behalf of the U.S. Government. For this reason, the U.S. military has long taken a primary role in the development of anti-malarial drugs, and nearly all of the most effective and widely used anti-malarials were developed in part by U.S. military researchers. Drugs that have saved countless lives throughout the world were originally developed by the U.S. military to protect troops serving in tropical regions during WWII, the Korean War, and the Vietnam War.

Fortunately, in recent years the broader international community has stepped up its efforts to reduce the impact of malaria in the developing world, particularly by reducing childhood malaria mortality, and the U.S. military is playing an important

role in this broad partnership. But military malaria researchers are working practically alone in the area most directly related to U.S. national security: drugs and vaccines designed to protect or treat healthy adults with no developed resistance to malaria who travel to regions endemic to the disease. These drugs and vaccines would benefit everyone living or traveling in the tropics, but are particularly essential to the United States for the protection of forces from disease during deployments.

Unfortunately, the prophylaxis and therapeutics currently given to U.S. servicemen and women are losing their effectiveness. During World War II, the Korean War, and Vietnam, the quinine-based anti-malaria drug chloroquine was the chemoprophylaxis and therapy of choice for the U.S. military. Over time, however, the malaria parasite developed widespread resistance to chloroquine, making the drug less effective at protecting deployed troops from malaria. Fortunately, military researchers at the Walter Reed Army Institute of Research (WRAIR) achieved the scientific breakthroughs that led to the development of mefloquine, which quickly replaced chloroquine as the military's front-line drug against malaria.

The malaria parasite has consistently demonstrated a notorious ability to quickly become resistant to new drugs, and the latest generation of medicines is no exception. Malaria parasites in Southeast Asia have already developed significant resistance to mefloquine, and resistant strains of the parasite have also been identified in West Africa and South America. In addition, there are early indications that parasite populations in southeast Asia may already be developing limited resistance to artemisinin, currently the most powerful anti-malarial available. Indeed, the most deadly variant of malaria—*Plasmodium falciparum*—is believed by the World Health Organization to have become resistant to “nearly all antimalarials in current use.” This resistance is not yet universal among the global *Plasmodium falciparum* population, with parasites in a given geographic area having developed resistance to some drugs and not others. But the sheer speed with which the parasite is developing resistance to mefloquine and artemisinin—drugs developed in the 1970s and 1980s—reminds us that military malaria researchers cannot afford to rest on their laurels. Developing new anti-malarials as quickly as the parasite becomes resistant to existing ones is an extraordinary challenge, and one that requires significant resources. Without new anti-malarials to replace existing drugs as they become obsolete, U.S. military operations in regions endemic to malaria may be compromised.

Unfortunately, our limited ability to protect forces from malaria infection is not hypothetical: overseas operations are already being impacted. A 2007 study by Army researchers found that from 2000 through 2005, at least 423 U.S. service members contracted malaria while deployed overseas, with the vast majority of these cases the result of deployments to South Korea (where malaria has recently reemerged along the demilitarized zone with North Korea), Afghanistan and, to a lesser extent, Iraq. Notably, none of these countries are thought of by experts as being especially dangerous in terms of malaria, as opposed to the many countries in Sub-Saharan Africa and Southeast Asia where malaria is much more prevalent, and where more deadly strains of the parasite thrive. For example, a 2003 peacekeeping operation in Liberia resulted in a 44 percent malaria infection rate among Marines who spent at least one night ashore.

Clearly, U.S. service members are insufficiently protected from malaria. The reasons for this are many, and include drug resistance as well as ongoing issues with compliance by soldiers who have difficulty maintaining a malaria prophylaxis regimen under combat conditions, or who have contraindications to the use of mefloquine or other drugs.¹ Regardless of the cause for continuing vulnerability to malaria, however, the outlook is the same: until a malaria vaccine is finally developed, ensuring the safety and health of U.S. troops deploying to 1 of the more than 100 countries where malaria is endemic will require the constant development of new malaria drugs, in a race against the parasite's ability to develop drug resistances.

To ensure that as many American soldiers as possible are protected from tropical and other diseases, Congress provides funding each year to support Department of Defense programs focused on the development of vaccines and drugs for priority infectious diseases. To that end, the Walter Reed Army Institute of Research and the Naval Medical Research Center coordinate one of the world's premier tropical disease research programs. These entities contributed to the development of the gold standard for experimental malaria immunization of humans, and the most advanced and successful drugs current being deployed around the world.

¹The aforementioned 2007 Army study found that of 11,725 active duty Army personnel deployed to Afghanistan during the study period, 9.6 percent had contraindications to the use of mefloquine, the Army's first-line malaria treatment.

The need to develop new and improved malaria prophylaxis and treatment for U.S. service members is not yet a crisis, but it could quickly become one if the United States were to become involved in a large deployment to a country or region where malaria is endemic, especially sub-Saharan Africa. Fortunately, a comparatively tiny amount of increased support for this program would restore the levels of research and development investment required to produce the drugs that will safeguard U.S. troops from malaria. In terms of the overall DOD budget, that malaria research program's funding is small—approximately \$23.1 million in fiscal year 2008—but very important. Cutting funding for this program would deal a major blow to the military's work to reduce the impact of malaria on soldiers and civilians alike, thereby undercutting both the safety of troops deployed to tropical climates, and the health of civilians in those regions.

FISCAL YEAR 2010 DOD APPROPRIATIONS

To protect U.S. military personnel, research must continue to develop new anti-malarial drugs and better diagnostics, and to identify an effective malaria vaccine appropriate for adults with no developed resistance to malaria. Much of this important research currently is underway at the Department of Defense. Additional funds and a greater commitment from the Federal Government are necessary to make progress in malaria prevention, treatment, and control.

In fiscal year 2008, the Department of Defense spent only \$23.1 million on malaria research, despite the fact that malaria historically has been a leading cause of troop impairment and continues to be a leading cause of death worldwide. As the 2006 Institute of Medicine report *Battling Malaria: Strengthening the U.S. Military Malaria Vaccine Program* noted, "Malaria has affected almost all military deployments since the American Civil War and remains a severe and ongoing threat." ASTMH agrees that malaria remains a severe and ongoing threat to U.S. military deployments to countries and regions endemic to malaria, and we believe that increased support for efforts to reduce this threat is warranted. A more substantial investment will help to protect American soldiers and potentially save the lives of millions of individuals around the world.

Therefore, we request that the Subcommittee take support a fiscal year 2010 Department of Defense malaria research funding level of \$30 million. Furthermore, we request that the Subcommittee provide annual increases to this account such that total military spending on malaria research is \$76.5 million in fiscal year 2015.

By way of comparison with this request, in March of 2007 the Department of Defense estimated that it would spend \$23.1 million on malaria research in fiscal year 2008. Unfortunately, neither an estimated level of fiscal year 2009 spending nor a fiscal year 2010 request is available, because the Department of Defense does not typically report these numbers. However, recent funding trends suggest that military spending on research in this vital area is falling steadily.

The role of infectious disease in the success or failure of military operations is often overlooked, but even a cursory review of U.S. and world military history underscores the fact that keeping military personnel safe from infectious disease is critical to mission success. The drugs and prophylaxis used to keep our men and women safe from malaria during previous conflicts in tropical regions are no longer reliable. Ensuring the safety of those men and women in future conflicts and deployments will require research on new anti-malaria tools. Thank you for your attention to this matter. We appreciate the opportunity to share our views, and please be assured that ASTMH stands ready to serve as a resource on this and any other tropical disease policy matters.

Our next witness is the senior vice president for public policy of The Leukemia & Lymphoma Society, Mr. George Dahlman.

STATEMENT OF GEORGE DAHLMAN, SENIOR VICE PRESIDENT FOR PUBLIC POLICY, THE LEUKEMIA & LYMPHOMA SOCIETY

Mr. DAHLMAN. Thank you very much, Mr. Chairman and Senator Cochran.

I am George Dahlman, I'm pleased to appear today on behalf of The Leukemia & Lymphoma Society, and all the thousands of blood cancer patients we represent.

As you know, there have been impressive strides in blood cancers—that's leukemia, lymphoma, myeloma, and some others—but, there is a lot of work to be done, and we believe that the public/

private partnership that's part of the DOD's congressionally directed medical research program is an important part of that effort, and should be strengthened.

The Leukemia & Lymphoma Society, along with its partners, believe that this is especially important for the Department of Defense to address. First, research in blood-related cancers has significant relevance to the Armed Forces because the incidence of these cancers is substantially higher among individuals with chemical and nuclear exposure. Higher incidences of leukemia have been substantiated in extreme nuclear incidents in both military and civilian populations, and individual exposures to chemical agents, such as Agent Orange in the Vietnam war, caused an increased risk of contracting lymphoid malignancies.

And now we're seeing the applicability of blood cancer research played out once again in Iraq and Afghanistan as U.S. service personnel face consequences of burn pits and the blood cancers that have been reported.

DOD research on blood cancers addresses the importance of preparing civilian and military exposure to the weapons being developed by several hostile nations, and aid in the research of all cancers.

Mr. Chairman, and members of the subcommittee, with all due respect to our colleagues fighting a broad range of malignancies that are represented in this program, and certainly not to diminish their significance, a cancer research program designed for application of military and national security needs would invariably begin with a strong blood-cancer research foundation. And recognizing that fact and the opportunity this research represents, a bipartisan group of 48 Members of Congress recently requested that the program be instated for \$25 million, and be expanded to all blood cancers.

Furthermore, we respectfully request that funding be dedicated to a collaborative, public/private effort between the United States Military Cancer Institute, The Leukemia & Lymphoma Society, and a blue-ribbon panel of scientific academicians.

Chairman Inouye, as the cosponsor of Senate Bill 51, which authorizes the U.S. Military Cancer Institute, surely you recognize that the USMCI has over 9 million electronic medical records detailing the health histories of servicemen and women and their families. The military also has serum and tissue specimens from these individuals stored, as a routine step in their healthcare. These records and samples together provide a unique base that can power blood cancer research relevant to the military environment and lifestyle in a way that is not possible for any other population. A joint effort, tapping the expertise of both the USMCI and The Leukemia & Lymphoma Society represents a unique opportunity to identify valuable research opportunities and state-of-the-art technology that can address significant questions on the origins and diagnosis of blood cancers.

And I would just add, Senator Inouye, it seems odd that there is this disconnect between the USMCI, on the one hand, that studies cancer, and the cancer programs that are done through the CDMRP, as part—at Fort Dietrich—these two groups do not communicate with one another.

The Leukemia & Lymphoma Society strongly endorses and enthusiastically supports an effort to pursue this project, and respectfully urges the subcommittee to include this funding in the fiscal year 2010 defense appropriations bill.

Thank you.

Chairman INOUE. Thank you very much, Mr. Dahlman.

[The statement follows:]

PREPARED STATEMENT OF GEORGE DAHLMAN

INTRODUCTION

Mr. Chairman and members of the committee, my name is George Dahlman, Senior Vice President, Public Policy for The Leukemia & Lymphoma Society. I am pleased to appear today and testify on behalf of the Society and the more than 900,000 Americans currently living with blood cancers and the 135,000 who will be diagnosed with one this year—recently some of whom have been right here in the Senate. Furthermore, every 10 minutes, someone dies from one of these cancers—leukemia, lymphoma, Hodgkin's disease and myeloma.

During its 60-year history, the Society has been dedicated to finding a cure for the blood cancers, and improving the quality of life of patients and their families. The Society has the distinction of being both the nation's second largest private cancer organization and the largest private organization dedicated to biomedical research, education, patient services and advocacy as they pertain to blood cancers.

Our central contribution to the search for cures for the blood cancers is providing a significant amount of the funding for basic, translational and clinical research. In 2009, we will provide approximately \$70 million in research grants. In addition to our research funding role, we help educate health care and school professionals as needed and provide a wide range of services to individuals with a blood cancer, their caregivers, families, and friends through our 64 chapters across the country. Finally, we advocate responsible public policies that will advance our mission of finding cures for the blood cancers and improving the quality of life of patients and their families.

We are pleased to report that impressive progress is being made in the effective treatment of many blood cancers, with 5-year survival rates doubling and even tripling over the last two decades. More than 90 percent of children with Hodgkin's disease now survive, and survival for children with acute lymphocytic leukemia and non-Hodgkin's lymphoma has risen as high as 86 percent.

Just 7 years ago, in fact, a new therapy was approved for chronic myelogenous leukemia, a form of leukemia for which there were previously limited treatment options, all with serious side-effects—5-year survival rates were just over 50 percent. Let me say that more clearly, if 8 years ago your doctor told you that you had CML, you would have been informed that there were limited treatment options and that you should get your affairs in order. Today, those same patients have access to this new therapy, called Gleevec, which is a so-called targeted therapy that corrects the molecular defect that causes the disease, and does so with few side effects. Now, 5-year survival rates are as high as 96 percent for patients newly diagnosed with chronic phase CML.

The Society funded the early research that led to Gleevec's approval, as it has contributed to research on a number of new therapies. We are pleased that we played a role in the development of this life-saving therapy, but we realize that our mission is far from realized. Many forms of leukemia, lymphoma and myeloma still present daunting treatment challenges. There is much work still to be done, and we believe that the research partnership between the public and private sectors—as represented in the Department of Defense's Congressionally Directed Medical Research Program—is an integral part of that important effort and should be further strengthened.

THE GRANT PROGRAMS OF THE LEUKEMIA & LYMPHOMA SOCIETY

The grant programs of the Society have traditionally been in three broad categories: Career Development Program grants, Translational Research Program grants, and Specialized Centers of Research Program grants. In our Career Development Program, we fund Scholars, Special Fellows, and Fellows who are pursuing careers in basic or clinical research. In our Translational Research Program, we focus on supporting investigators whose objective is to translate basic research discoveries into new therapies.

The work of Dr. Brian Druker, an oncologist at Oregon Health Sciences University and the chief investigator responsible for Gleevec's development, was supported by a Translational Research Program grant from the Society.

Our Specialized Centers of Research grant program is intended to bring investigators together to form new research teams focused on the discovery of innovative approaches to treating and/or preventing leukemia, lymphoma, and myeloma. The awards go to those groups that can demonstrate that their close interaction will create research synergy and accelerate our search for new and better treatments.

Dr. Druker is certainly a star among those supported by the Society, but our support in the biomedical field is broad and deep. Through the Society's research grant programs, we are currently supporting more than 380 investigators at 134 institutions in 34 States and 12 other countries.

Not content with these extensive efforts, the Society has launched a new Therapy Acceleration Program intended to proactively invest in promising blood cancer therapies that are in early stages of development by industry, but which may not have sufficient financial support or market potential to justify private sector investment. In addition, the Society will use this program to further facilitate the advancement of therapies in development by academic researchers who may not have the spectrum of resources or expertise to fulfill the potential of their discoveries. Directed early phase clinical trial support in this funding program will further advance new and better treatments for blood cancer treatments.

IMPACT OF HEMATOLOGICAL CANCERS

Despite enhancements in treating blood cancers, there are still significant research challenges and opportunities. Hematological, or blood cancers pose a serious health risk to all Americans. These cancers are actually a large number of diseases of varied causes and molecular make-up, and with different treatments, that strike men and women of all ages. In 2009, more than 130,000 Americans will be diagnosed with a form of blood-related cancer and almost 65,000 will die from these cancers. For some, treatment may lead to long-term remission and cure; for others these are chronic diseases that will require treatments across a lifetime; and for others treatment options are still extremely limited. For many, recurring disease will be a continual threat to a productive and secure life.

A few focused points to put this in perspective:

- Taken together, the hematological cancers are fifth among cancers in incidence and fourth in mortality.
- Over 900,000 Americans are living with a hematological malignancy in 2009.
- Almost 65,000 people will die from hematological cancers in 2009, compared to 160,000 from lung cancer, 41,000 from breast cancer, 27,000 from prostate cancer, and 52,000 from colorectal cancer.
- Blood-related cancers still represent serious treatment challenges. The improved survival for those diagnosed with all types of hematological cancers has been uneven. The 5-year survival rates are:
 - Hodgkin's disease, 87 percent;
 - Non-Hodgkin's lymphoma, 64 percent;
 - Leukemias (total), 50 percent;
 - Multiple Myeloma, 33 percent;
 - Acute Myelogenous Leukemia, 21 percent.
- Individuals who have been treated for leukemia, lymphoma, and myeloma may suffer serious adverse consequences of treatment, including second malignancies, organ dysfunction (cardiac, pulmonary, and endocrine), neuropsychological and psychosocial aspects, and poor quality of life.
- For the period from 1975 to 2005, the incidence rate for non-Hodgkin's lymphoma increased by 79 percent (increasing 2.6 percent/year).
- Non-Hodgkin's lymphoma and multiple myeloma rank second and fifth, respectively, in terms of increased cancer mortality since 1973.
- Lymphoma is the third most common childhood cancer and the fifth most common cancer among Hispanics of all races. Recent statistics indicate both increasing incidence and earlier age of onset for multiple myeloma.
- Multiple myeloma is one of the top 10 leading causes of cancer death among African Americans.
- Hispanic children of all races under the age of 20 have the highest rates of childhood leukemias.
- Despite the significant decline in the leukemia and lymphoma death rates for children in the United States, leukemia is still the leading cause of death in the United States among children less than 20 years of age, in females between the ages of 20 and 39 and males between the ages of 60–79.

—Lymphoma is the fourth leading cause of death among males between the ages of 20 and 39 and the fifth leading cause of death for females older than 80. Overall, cancer is now the leading cause of death for U.S. citizens younger than 85 years of age, overtaking heart disease as the primary killer.

POSSIBLE ENVIRONMENTAL CAUSES OF HEMATOLOGICAL CANCERS

The causes of hematological cancers are varied, and our understanding of the etiology of leukemia, lymphoma, and myeloma is limited. Extreme radiation exposures are clearly associated with an increased incidence of leukemias. Benzene exposures are associated with increased incidence of a particular form of leukemia. Chemicals in pesticides and herbicides, as well as viruses such as HIV and EBV, apparently play a role in some hematological cancers, but for most cases, no environmental cause is identified. Researchers have recently published a study reporting that the viral footprint for simian virus 40 (SV40) was found in the tumors of 43 percent of NHL patients. These research findings may open avenues for investigation of the detection, prevention, and treatment of NHL. There is a pressing need for more investigation of the role of infectious agents or environmental toxins in the initiation or progression of these diseases.

IMPORTANCE TO THE DEPARTMENT OF DEFENSE

The Leukemia & Lymphoma Society, along with its partners in the American Society of Hematology, Aplastic Anemia & MDS International Foundation, International Myeloma Foundation, Lymphoma Research Foundation, and Multiple Myeloma Research Foundation, believe biomedical research focused on the hematological cancers is particularly important to the Department of Defense for a number of reasons.

First, research on blood-related cancers has significant relevance to the armed forces, as the incidence of these cancers is substantially higher among individuals with chemical and nuclear exposure. Blood cancers are linked to members of the military who were exposed to ionizing radiation, such as those who occupied Japan after World War II and those who participated in atmospheric nuclear tests between 1945–1962. Service members who contract multiple myeloma, non-Hodgkin's lymphoma, and leukemias other than chronic lymphocytic leukemia are presumed to have contracted these diseases as a result of their military service; hence, they are eligible to receive benefits from the Department of Veterans Affairs (VA).

Secondly, in-country Vietnam veterans who contract Hodgkin's disease, chronic lymphocytic leukemia, multiple myeloma, or non-Hodgkin's lymphoma are presumed to have contracted these diseases as a result of their military service and the veterans are eligible to receive benefits from the VA.

Thirdly, the Institute of Medicine (IOM) has found that Gulf War veterans are at risk for contracting a number of blood cancers. For instance, the IOM has found sufficient evidence of a causal relationship between exposure to benzene and acute leukemias. Additionally, the IOM has found there is sufficient evidence of an association between benzene and adult leukemias, and solvents and acute leukemias. Finally, the IOM has also found there is also limited or suggestive evidence of an association between exposure to organophosphorous insecticides to non-Hodgkin's lymphoma and adult leukemias; carbamates and Benzene to non-Hodgkin's lymphoma; and solvents to multiple myeloma, adult leukemias, and myelodysplastic syndromes—a precursor to leukemia.

Furthermore, research in the blood cancers has traditionally pioneered treatments in other malignancies. Cancer treatments that have been developed to treat a blood-related cancer are now used or being tested as treatments for other forms of cancer. Combination chemotherapy and bone marrow transplants are two striking examples of treatments first developed for treating blood cancer patients. More recently, specific targeted therapies have proven useful for treating patients with solid tumors as well as blood cancers.

From a medical research perspective, it is a particularly promising time to build a DOD research effort focused on blood-related cancers. That relevance and opportunity were recognized for a 6-year period when Congress appropriated \$4.5 million annually—for a total of \$28 million—to begin initial research into chronic myelogenous leukemia (CML) through the Congressionally Directed Medical Research Program (CDMRP). As members of the Subcommittee know, a noteworthy and admirable distinction of the CDMRP is its cooperative and collaborative process that incorporates the experience and expertise of a broad range of patients, researchers and physicians in the field. Since the Chronic Myelogenous Leukemia Research Program (CMLRP) was announced, members of the Society, individual patient advocates and leading researchers have enthusiastically welcomed the oppor-

tunity to become a part of this program and contribute to the promise of a successful, collaborative quest for a cure.

In spite of the utility and application to individuals who serve in the military, the CML program was not included in January's 2007 Continuing Resolution funding other fiscal year 2007 CDMRP programs. This omission, and the program's continued absence seriously jeopardizes established and promising research projects that have clear and compelling application to our armed forces as well as pioneering research for all cancers.

Recognizing that fact and the opportunity this research represents, a bipartisan group of 45 Members of Congress have requested that the program be reconstituted at a \$25 million level and be expanded to include all the blood cancers—the leukemias, lymphomas and myeloma. This would provide the research community with the flexibility to build on the pioneering tradition that has characterized this field.

With all due respect to our colleagues fighting a broad range of malignancies that are represented in this program—and certainly not to diminish their significance—a cancer research program designed for application to military and national security needs would invariably include a strong blood cancer research foundation. DOD research on blood cancers addresses the importance of preparing for civilian and military exposure to the weapons being developed by several hostile nations and to aid in the march to more effective treatment for all who suffer from these diseases. This request clearly has merit for inclusion in the fiscal year 2010 legislation.

Furthermore, we respectfully request that funding be dedicated to a collaborative public-private effort between the U.S. Military Cancer Institute, The Leukemia & Lymphoma Society and a blue ribbon panel of scientific academicians.

The USMCI has over 9 million electronic medical records detailing the health histories of service men and women and their families. The military also has serum and tissue specimens from these individuals stored as a routine step in their health care. These records and samples, together, provide a unique base that can power blood cancer research relevant to the military environment and lifestyle in a way that is not possible for any other population.

A joint effort, tapping the expertise of both USMCI and LLS, represents a unique opportunity to identify valuable research opportunities and state-of-the-art technology that can address significant questions on the origins and diagnosis of blood cancers. For example:

- meta-analysis of the existing data may be used to gain insight into the exposure risks inherent in the military environment that may predispose the war fighter or their dependents to develop blood cancer.
- Gene profiling might be used to gauge the existing genetic risk for blood cancer in a given individual and may guide the delivery of healthcare and/or deployment decisions.
- Proteomic analysis of historically preserved serial blood samples from a military member diagnosed with blood cancer may reveal exposures related to development of the disease and drive decisions about safety precautions and protective gear.

The Leukemia & Lymphoma Society strongly endorses and enthusiastically supports this effort and respectfully urges the Committee to include this funding in the fiscal year 2010 Defense Appropriations bill.

We believe that building on the foundation Congress initiated over a 6-year period should not be abandoned and would both significantly strengthen the military's cancer program and accelerate the development of all cancer treatments. As history has demonstrated, expanding its focus into areas that demonstrate great promise; namely the blood-related cancers of leukemia, lymphoma and myeloma, would substantially aid the overall cancer research effort and yield great dividends.

Chairman INOUE. And now may I call upon the president of the Air Force Association, Lieutenant General Michael M. Dunn.

**STATEMENT OF LIEUTENANT GENERAL MICHAEL M. DUNN (RET.),
PRESIDENT/CHIEF EXECUTIVE OFFICER, AIR FORCE ASSOCIATION**

General DUNN. Thank you, Mr. Chairman.

Last but not least. Mr. Chairman, Mr. Vice Chairman, I'm honored to be with you today to talk about the fiscal year 2010 defense budget.

I represent 120,000 members of the Air Force Association, and I need to point out to this subcommittee that we are independent of

the Air Force, that the Air Force has not made any inputs, nor seen my statement or my remarks.

At this time I request my written statement be included in the record.

Chairman INOUE. Without objection.

General DUNN. Mr. Chairman, I have to tell this subcommittee I'm worried, at this point in history, about the future. The average age of Air Force aircraft is the oldest in its very short history—25 years old, one-quarter of a century. Some types of aircraft are over 50 years old, and, when they are eventually replaced, some are going to be over 90 years old.

To begin to replace the fleet, the Air Force has to buy about 165 aircraft per year, of all types. The 2010 budget request purchases only 81 aircraft, and 29 of them are unmanned aerial vehicles, and 13 are for the Air Force Academy.

This puts the Air Force on a replacement rate of about 100 years. Obviously, this is not a sustainable path. Costs to keep the fleet are rising—fleet ready—are rising, many aircraft have been grounded over the past few years, planes are breaking in unpredictable ways, and readiness rates are falling. Our men and women who serve deserve the very best we, as a Nation, can provide to them. We have to turn this around.

DOD has stated they need to rebalance the force to focus on irregular warfare (IW). The sad fact is, they have to do both—modernize and recapitalize, as well as focusing on IW.

I hope DOD is right about the future, that they won't face a strong opponent. But, the one thing certain about the future is we have been wrong over the type of opponent we will face. We did not anticipate the Japanese attacking the Hawaiian Islands in World War—to begin World War II for the United States; we did not anticipate the Korean War, Vietnam, the fall of the Soviet Union, Iraq's attack on Kuwait, 9/11, nor Operation Iraqi Freedom. To maintain that all wars in the future will be irregular wars is—well—not supported by the lessons of the past.

The decisions made by DOD and this Congress are ones we will live with for a long time. They are 30-year decisions. When the Nation terminates or delays seven aircraft production lines, the impact on our aerospace industry is devastating. And this is an industry that adds almost \$40 billion per year in positive trade balance. Engineers, design teams, and innovation will be lost, or hard or expensive to replace; tens of thousands of jobs will be lost. And these are high paying manufacturing jobs that benefit, not just local communities, but the Nation as a whole.

Mr. Chairman, I think you can see why I'm worried. This is not just about one system or another, this is about air power, our asymmetric advantage and the reason our past conflicts have so spectacular, with some of the lowest friendly casualty rates in the history of warfare. We have to nurture this capability for the future.

And thank you for your time, sir.

Chairman INOUE. Well, thank you very much, General Dunn.
[The statement follows:]

PREPARED STATEMENT OF MICHAEL M. DUNN

Ladies and gentleman of the Committee, I am honored to come before you today, representing the Air Force Association, to discuss your United States Air Force. I would like to begin my remarks by saluting our Airmen who strive every day to ensure that America's Air Force is second to none. These men and women are true heroes and we salute their dedication and determination, while also recognizing the sacrifices they make for our Nation.

To borrow a phrase from General Schwartz, the United States Air Force is truly "all in." Whether deterring potential adversaries, striking strategic targets, gathering critical intelligence, delivering humanitarian relief supplies, evacuating wounded, airlifting cargo around the globe, enabling command and control, rescuing personnel behind enemy lines, or providing close air support, the Air Force is an invaluable national asset. Just looking at operations in Iraq and Afghanistan, the Air Force has flown nearly 60,000 sorties this year alone. In the real world, this translates into Airmen doing their very best 24/7 to fight and win on the front lines along with their joint team partners.

While we are certainly proud of the Air Force's current record, this success cannot be taken for granted. The Air Force has spent the past two decades engaged in continuous combat operations and is utilizing an aircraft fleet that averages nearly a quarter of a century in age—with some planes in the inventory dating back to the Eisenhower Administration.

The most obvious problem associated with this aging fleet is that old airplanes break more often and eventually are no longer airworthy. In the time since Desert Storm the average age of the Air Force fleet has increased by nearly a decade and the availability rate has dropped in a corresponding fashion. This means that since 1991 the percentage of time an aircraft is not broken and can fly a mission has fallen from 77 percent to 65 percent. Aside from these costly maintenance challenges, a number of dramatic airworthiness issues have also afflicted the Air Force fleet. In 2000 the service grounded one third of its KC-135 air refueling aircraft because of a faulty flight control component. In 2004 the Air Force discovered that many of its C-130s had major cracks in their wings. In 2007 an F-15 broke in two while on a training flight due to structural fatigue, grounding the entire fleet for months. In 2008 the entire T-38 fleet was grounded for an extended period because of an aging control surface fixture. Most recently, half of the A-10 fleet was grounded due to wing cracks and the C-130 fleet was also grounded due to a faulty bolt found in the wings of many of the aircraft. More problems are certain to arise as the age of the fleet continues to increase.

It is also important to consider that most next generation aircraft yield tremendous operational efficiencies that dramatically offset their higher per-unit acquisition cost and yield long-term savings. This performance increase was clearly demonstrated on the first night of Desert Storm when 20 new F-117 stealth fighters took the unprecedented step of attacking 28 separate targets. On the same night it took a combined force of 41 legacy non-stealth aircraft to strike one target—4 F/A-18s to defend against enemy aircraft, 3 drones to serve as decoys, 5 EA-6B aircraft to jam enemy radar, along with 4 F-4s and 17 F/A-18s to suppress enemy surface-to-air missiles so that 4 A-6s and 4 Tornados could strike one target. The full spectrum cost imposed by these legacy aircraft was tremendous—aircraft development and acquisition funding, operations and maintenance expenses, personnel bills, base access issues, etc. Viewed from this perspective, the encompassing price of new aircraft like the F-22 and F-35 is not so high.

The global threat environment is rapidly evolving and proliferation of modern weaponry is negating the survivability of the Air Force's legacy fleet. Over 30 nations operate fighter aircraft that equal or exceed the capabilities of the F-15 and F-16, whose designs respectively date back to the 1960s and 1970s. Nations such as Russia and China are also developing 5th generation fighters that will have F-22-like capabilities and will be bought in F-35-like quantities . . . and sold to other countries. Additionally, dozens of nations operate surface-to-air missiles that can easily shoot down aircraft such as the B-1, B-52, F-15, F-16, F-18, Predator, Global Hawk, and more. It is important to remember that in the final days of Vietnam the Air Force lost 15 B-52s in 12 days during Operation Linebacker II. Air defenses have advanced markedly since then but 47 percent of the long range strike fleet is comprised of these same B-52s. Had the U.S. Air Force been called upon to engage in the recent Georgian conflict, the B-2 and F-22 were the only aircraft in the U.S. inventory that would have survived in the threat environment. U.S. national security demands a broader array of effective capabilities than just 20 B-2s and 186 F-22s.

The fiscal year 2010 budget proposal currently under consideration by Congress fails to make necessary recapitalization investments and actually exacerbates the challenges facing several key mission sets. For example, the fiscal year 2010 budget proposal ends production of the F-22 at 187 aircraft even though the stated military requirement is for 243 airframes. A fleet comprised of 187 airframes yields a force of about 100 combat-ready aircraft, no attrition/reserve inventory, and too few aircraft to engage/deter in more than one operation at a time. All known analysis undertaken to this point has concluded such a limited fleet size entails high risk. Air dominance is the precondition for all successful U.S. military combat operations—this isn't just about the U.S. Air Force—it is essential for the entire joint team.

This year's budget also discontinues C-17 acquisition at 205 aircraft even though demand for airlift is so high that the Air Force is currently flying its C-17 airframes over 1,000 hours past what was originally programmed per year. Additional developments have seen the ground component grow by 92,000 Soldiers and Marines, increased reliance on airlift, to include leased Russian aircraft, to get equipment to Afghanistan and Iraq, and a decision to relocate many units back to CONUS. Each one of these developments suggests that the need for military airlift will increase. Closing the C-17 production line at 205 aircraft risks creating a high-demand low-density mission set.

Even though existing Combat Search and Rescue (CSAR) helicopters are rapidly nearing the end of their service lives, the budget cancels their replacement program. CSAR is a moral imperative. Our current enemies do not take prisoners of war. They welcome the opportunity to torture and kill their captives, making CSAR even more critical than before. In fact, the Air Force CSAR capabilities are in such high demand in Iraq and Afghanistan that the Weapons School has been closed so that a maximum number of assets can be surged forward.

The Next Generation Bomber program was also cancelled even though the current long range strike fleet averages over 40 years in age. While elements of the force are still capable in certain threat environments, the proliferation of advanced anti-access weaponry is curtailing when and where many of the legacy assets can successfully operate. Twenty B-2s are the only long range strike assets in the Air Force inventory that can penetrate high threat environments and survive. These aircraft are approaching 20 years in age, have not been in production since 1997, and have no viable replacements to backfill losses. During the Cold War, bombers were primarily viewed as nuclear deterrence assets. However, actual combat operations have demonstrated that long range conventional strike is an incredibly important tool. Modern long range bombers can penetrate air defense systems, respond rapidly to strike fleeting targets, and operate over long distances without excessive logistical support. The tactical strike fleet, while capable, simply does not have the range and payload capabilities to fulfill many of these missions.

The Airborne Laser (ABL) program was also curtailed even though nuclear weapons proliferation, combined with advances in delivery system technology, is yielding an increasingly dangerous world. Sufficient investment in robust missile defense capabilities is essential for the security of United States and its allies.

Cumulatively, these decisions will also have a tremendous impact on the defense industrial base. This sector is an invaluable strategic partner for the United States. Whether addressing problems through innovation, delivering high-quality products that enable our forces to attain victory, or developing solutions for future challenges, the industrial base is a critical national security asset. The United States is rapidly approaching the point where it will be limited to one major heavy aircraft production line (Boeing in Seattle, WA) and one advanced fighter production facility (Lockheed Martin in Fort Worth, TX). The proposed fiscal year 2010 budget cuts rapidly accelerate the decline of this sector. The barriers to entry are extraordinarily high within the military aerospace industrial base and once the Nation loses certain core competencies, they will be exceedingly difficult and costly to regenerate. For example, low observable (stealth) design teams are incredibly skilled in a highly nuanced field that does not lend itself to dual-use applications within the civilian aerospace sector. If projects are not forthcoming to maintain this skill set, then the country will face major challenges trying to regenerate such capabilities in the future. Additionally, the military aerospace sector will have an increasingly difficult time recruiting and retaining talent amidst these challenging times. Failing to build a viable and competent workforce for the next generation will have a dramatic impact on the national security options available to the Nation for the foreseeable future.

Clearly the United States Air Force is at a strategic crossroads. The Nation cannot realistically expect Airmen to successfully engage and survive in future campaigns if it does not equip them with modern and effective equipment. One of the key lessons from history is the importance of preparing for the full spectrum of operations. This country has failed to anticipate numerous critical events—Pearl Harbor,

Berlin Blockade, Cuban Missile Crisis, Soviet Invasion of Afghanistan, fall of the Shah in Iran, end of the Cold War, Iraq's invasion of Kuwait, 9/11, etc. Events in the modern world develop rapidly and the country has to respond quickly with the forces on hand. The days of WWII-like rapid wartime industrialization are gone. Aside from rudimentary supplies, effective weapons systems can no longer be developed in a matter of months and events are often decided by the time new items are fielded. This demands that the Nation prepare for a wide variety of contingencies. Otherwise, the lives of the men and women in uniform will be placed at undue risk as they struggle to achieve their respective objectives with inadequate tools. While airpower can operate with relative impunity in current operations, such access must not be taken for granted in the future. Current legacy systems will last a few more years, but eventually they will be retired. Most of the cuts involved in this budget kill the platforms that were intended to replace these legacy systems. The Chief of Staff of the Air Force has stated he needs to buy 165 aircraft per year in order to keep the average age of the fleet the same as it is now—a quarter of a century old. This budget only buys 81 aircraft—13 of which are for the Air Force Academy and 29 of which are UAVs. That puts the Air Force on a replacement rate of over 100 years. It is important that Congress and the American people fully appreciate the full ramifications of these decisions. We risk imposing drastic limitations on the strategic options available to the country for decades into the future.

ADDITIONAL SUBMITTED STATEMENT

Chairman INOUE. The subcommittee has received testimony from the National Military and Veterans Alliance and their testimony will be made part of the record.

[The statement follows:]

PREPARED STATEMENT OF THE NATIONAL MILITARY AND VETERANS ALLIANCE

The Alliance was founded in 1996 as an umbrella organization to be utilized by the various military and veteran associations as a means to work together towards their common goals. The Alliance member organizations are: American Logistics Association; American Military Retirees Association; American Military Society; American Retirees Association; American World War II Orphans Network; AMVETS (American Veterans); Armed Forces Marketing Council; Army and Navy Union; Catholic War Veterans; Gold Star Wives of America, Inc.; Japanese American Veterans Association; Korean War Veterans Foundation; Legion of Valor; Military Order of the Purple Heart; Military Order of the World Wars; Military Order of Foreign Wars; National Assoc. for Uniformed Services; National Gulf War Resource Center; Naval Enlisted Reserve Association; Naval Reserve Association; Paralyzed Veterans of America; Reserve Enlisted Association; Reserve Officers Association; Society of Military Widows; The Retired Enlisted Association; TREA Senior Citizens League; Tragedy Assist. Program for Survivors; Uniformed Services Disabled Retirees; Veterans of Foreign Wars; Vietnam Veterans of America; Women in Search of Equity.

These organizations have over three and a half million members who are serving our Nation or who have done so in the past, and their families.

INTRODUCTION

Mister Chairman and distinguished members of the Committee, the National Military and Veterans Alliance (NMVA) is very grateful for the invitation to testify before you about our views and suggestions concerning defense funding issues. The overall goal of the National Military and Veterans Alliance is a strong National Defense. In light of this overall objective, we would request that the committee examine the following proposals.

While the NMVA highlights the funding of benefits, we do this because it supports National Defense. A phrase often quoted “The willingness with which our young people are likely to serve in any war, no matter how justified, shall be directly proportional as to how they perceive the Veterans of earlier wars were treated and appreciated by their country,” has been frequently attributed to General George Washington. Yet today, many of the programs that have been viewed as being veteran or retiree are viable programs for the young serving members of this war. This phrase can now read “The willingness with which our young people, today, are willing to serve in this war is how they perceive the veterans of this war are being treated.”

This has been brought to the forefront by how quickly an issue such as the treatment of wounded warriors suffering from Traumatic Brain Injury or Post Traumatic stress Disorder has been brought to the national attention.

In a long war, recruiting and retention becomes paramount. The National Military and Veterans Alliance, through this testimony, hopes to address funding issues that apply to the veterans of various generations.

FUNDING NATIONAL DEFENSE

NMVA is pleased to observe that the Congress continues to discuss how much should be spent on National Defense. The Alliance urges the President and Congress to increase defense spending to 5 percent of Gross Domestic Product during times of war to cover procurement and prevent unnecessary personnel end strength cuts.

PAY AND COMPENSATION

Our serving members are patriots willing to accept peril and sacrifice to defend the values of this country. All they ask for is fair recompense for their actions. At a time of war, compensation rarely offsets the risks.

The NMVA requests funding so that the annual enlisted military pay raise exceeds the Employment Cost Index (ECI) by at least half of a percent.

Further, we hope that this committee continues to support targeted pay raises for those mid-grade members who have increased responsibility in relation to the overall service mission. Pay raises need to be sufficient to close the civilian-military pay gap.

NMVA would apply the same allowance standards to both Active and Reserve when it comes to Aviation Career Incentive Pay, Career Enlisted Flyers Incentive Pay, Diving Special Duty Pay, Hazardous Duty Incentive Pay and other special pays.

The Service chiefs have admitted one of the biggest retention challenges is to recruit and retain medical professionals. NMVA urges the inclusion of bonus/cash payments (Incentive Specialty pay IPS) into the calculations of Retirement Pay for military health care providers. NMVA has received feedback that this would be incentive to many medical professionals to stay in longer.

G-R Bonuses.—Guard and Reserve component members may be eligible for one of three bonuses, Prior Enlistment Bonus, Reenlistment Bonus and Reserve Affiliation Bonuses for Prior Service Personnel. These bonuses are used to keep men and woman in mission critical military occupational specialties (MOS) that are experiencing falling numbers or are difficult to fill. During their testimony before this committee the Reserve Chiefs addressed the positive impact that bonuses have upon retention. This point cannot be understated. The operation tempo, financial stress and civilian competition for jobs make bonuses a necessary tool for the DOD to fill essential positions. The NMVA supports expanding and funding bonuses to the Federal Reserve Components.

Reserve/Guard Funding.—NMVA is concerned about ongoing DOD initiatives to end “two days pay for one days work,” and replace it with a plan to provide 1/30 of a Month’s pay model, which would include both pay and allowances. Even with allowances, pay would be less than the current system. When concerns were addressed about this proposal, a retention bonus was the suggested solution to keep pay at the current levels. Allowances differ between individuals and can be affected by commute distances and even zip codes. Certain allowances that are unlikely to be paid uniformly include geographic differences, housing variables, tuition assistance, travel, and adjustments to compensate for missing health care. The NMVA strongly recommends that the reserve pay system “two days pay for one days work,” be funded and retained, as is.

EDUCATIONAL ISSUES

MGIB-SR Enhancements

Practically all active duty and Selected Reserve enlisted accessions have a high school diploma or equivalent. A college degree is the basic prerequisite for service as a commissioned officer, and is now expected of most enlisted as they advance beyond E-6. Officers to promote above O-4 are expected to have a post graduate degree. The ever-growing complexity of weapons systems and support equipment requires a force with far higher education and aptitude than in previous years.

Both political parties are looking at ways of enhancing the GI bill. There are suggested features in legislation be suggested by both sides. At a minimum, the GI bill needs to be viewed as more than a recruiting and retention incentive. Education is

a means to help reintegrate our returning veterans into society. A recent survey by military.com, of returning military veterans, found that 81 percent didn't feel fully prepared to enter the work force, and 76 percent of these veterans said they were unable to translate their military skills into civilian proficiencies.

Transferability of educational benefits to spouses and children are another key aspect that should be included in a GI Bill enhancement. In addition, for those with existing degrees and outstanding debts, the GI Bill stipend, should be allowed to pay-off outstanding student loans.

No enhancement can be accomplished without funding. This should be viewed as an investment rather than an expense. The original GI bill provided years of economic stimulus, returning seven dollars for every dollar invested in veterans.

The National Military and Veterans Alliance asks this subcommittee to support funding for suggested GI Bill funding.

The Montgomery G.I. Bill for Selective Reserves (MGIB-SR) will continue to be an important recruiting and retention tool. With massive troop rotations the Reserve forces can expect to have retention shortfalls, unless the government provides enhances these incentives as well.

The problem with the current MGIB-SR is that the Selected Reserve MGIB has failed to maintain a creditable rate of benefits with those authorized in Title 38, Chapter 30. MGIB-SR has not even been increased by cost-of-living increases since 1985. In that year MGIB rates were established at 47 percent of active duty benefits. The MGIB-SR rate is 28 percent of the Chapter 30 benefits. Overall the allowance has inched up by only 7 percent since its inception, as the cost of education has climbed significantly.

The NMVA requests appropriations funding to raise the MGIB-SR and lock the rate at 50 percent of the active duty benefit. Cost: \$25,000,000/first year, \$1,400,000,000 over 10.

FORCE POLICY AND STRUCTURE

War Funding

The Alliance thanks the committee for the war funding amended to the Supplemental Appropriations Act 2008, H.R. 2642. While the debate on Iraqi policy is important, the Alliance would like to stress that resulting legislation should be independent and not included as language in any Defense Appropriation bill. Supporting the troops includes providing funding for their missions.

NMVA supports the actions by this subcommittee to put dollars for the War back into the Emergency Supplemental.

End Strength

The NMVA concurs with funding increases in support of the end strength boosts of the Active Duty Component of the Army and Marine Corps that have been recommended by Defense Authorizers. New recruits need to be found and trained now to start the process so that American taxpayer can get a return on this investment. Such growth is not instantaneously productive. Yet, the Alliance is concerned with continued end strength cuts to the other services: the Air Force and the Navy. Trying to pay the bills by premature manpower reductions may have consequences.

Manning Cut Moratorium

The NMVA would also like to put a freeze on reductions to the Guard and Reserve manning levels. A moratorium on reductions to End Strength is needed until the impact of an operational reserve structure is understood. Many force planners call for continuation of a strategic reserve as well. NMVA urges this subcommittee to at least fund to last year's levels.

SURVIVOR BENEFIT PLAN (SBP) AND SURVIVOR IMPROVEMENTS

The Alliance wishes to deeply thank this Subcommittee for your funding of improvements in the myriad of survivor programs.

However, there is still an issue remaining to deal with: Providing funds to end the SBP/DIC offset.

SBP/DIC Offset affects several groups. The first is the family of a retired member of the uniformed services. At this time the SBP annuity the servicemember has paid for is offset dollar for dollar for the DIC survivor benefits paid through the VA. This puts a disabled retiree in a very unfortunate position. If the servicemember is leaving the service disabled it is only wise to enroll in the Survivor Benefit Plan (perhaps being uninsurable in the private sector). If death is service connected then the survivor loses dollar for dollar the compensation received under DIC.

SBP is a purchased annuity, available as an elected earned employee benefit. The program provides a guaranteed income payable to survivors of retired military upon the member's death. Dependency and Indemnity Compensation (DIC) is an indemnity program to compensate a family for the loss of a loved one due to a service connected death. They are different programs created to fulfill different purposes and needs.

A second group affected by this dollar for dollar offset is made up of families whose service member died on active duty. Recently Congress created active duty SBP. These service members never had the chance to pay into the SBP program. But clearly Congress intended to give these families a benefit. With the present offset in place the vast majority of families receive no benefit from this new program, because the vast numbers of our losses are young men or women in the lower paying ranks. SBP is completely offset by DIC payments.

Other affected families are service members who have already served a substantial time in the military. Their surviving spouse is left in a worse financial position than a younger widow. The older widows will normally not be receiving benefits for her children from either Social Security or the VA and will normally have more substantial financial obligations (mortgages, etc). This spouse is very dependent on the SBP and DIC payments and should be able to receive both.

The NMVA respectfully requests this Subcommittee fund the SBP/DIC offset.

CURRENT AND FUTURE ISSUES FACING UNIFORMED SERVICES HEALTH CARE

The National Military and Veterans Alliance must once again thank this Committee for the great strides that have been made over the last few years to improve the health care provided to the active duty members, their families, survivors and Medicare eligible retirees of all the Uniformed Services. The improvements have been historic. TRICARE for Life and the Senior Pharmacy Program have enormously improved the life and health of Medicare Eligible Military Retirees their families and survivors. It has been a very successful few years. Yet there are still many serious problems to be addressed:

Wounded Warrior Programs

As the committee is aware, Congress has held a number of hearings about the controversy at Walter Reed Army Medical Center. The NMVA will not revisit the specifics. With the Independent Review Group and the Dole/Shalala Commission recommending the closure of Walter Reed, an emphasis needs to be placed on the urgency of upgrades at Bethesda, and the new military treatment hospital at Fort Belvoir. NMVA hopes that this committee will financially support the studies that measure the adequacy of this plan.

The Alliance supports continued funding for the wounded warriors, including monies for research and treatment on Traumatic Brain Injuries (TBI), Post Traumatic Stress Disorder, the blinded, and our amputees. The Nation owes these heroes an everlasting gratitude and recompense that extends beyond their time in the military. These casualties only bring a heightened need for a DOD/VA electronic health record accord to permit a seamless transition from being in the military to being a civilian.

Full Funding for the Defense Health Program

The Alliance applauds the Subcommittee's role in providing adequate funding for the Defense Health Program (DHP) in the past several budget cycles. As the cost of health care has risen throughout the country, you have provided adequate increases to the DHP to keep pace with these increases.

Full funding for the defense health program is a top priority for the NMVA. With the additional costs that have come with the deployments to Southwest Asia, Afghanistan and Iraq, we must all stay vigilant against future budgetary shortfalls that would damage the quality and availability of health care.

With the authorizers having postponed the Department of Defense's suggested fee increases, the Alliance is concerned that the budget saving have already been adjusted out of the President's proposed budget. NMVA is confident that this subcommittee will continue to fund the DHP so that there will be no budget shortfalls.

The National Military and Veterans Alliance urges the Subcommittee to continue to ensure full funding for the Defense Health Program including the full costs of all new programs.

TRICARE Pharmacy Programs

NMVA supports the continued expansion of use of the TRICARE Mail Order pharmacy.

To truly motivate beneficiaries to a shift from retail to mail order adjustments need to be made to both generic and brand name drugs co-payments. NMVA recommends that both generic and brand name mail order prescriptions be reduced to zero \$\$ co-payments to align with military clinics.

Ideally, the NMVA would like to see the reduction in mail order co-payments without an increase in co-payments for Retail Pharmacy.

The National Military and Veterans Alliance urges the Subcommittee to adequately fund adjustments to co-payments in support of recommendations from Defense Authorizers.

TRICARE Standard Improvements

TRICARE Standard grows in importance with every year that the Global War on Terrorism continues. A growing population of mobilized and demobilized Reservists depends upon TRICARE Standard. A growing number of younger retirees are more mobile than those of the past, and likely to live outside the TRICARE Prime network.

An ongoing challenge for TRICARE Standard involves creating initiatives to convince health care providers to accept TRICARE Standard patients. Health care providers are dissatisfied with TRICARE reimbursement rates that are tied to Medicare reimbursement levels. The Alliance is pleased by Congress' plan to prevent near-term reductions in Medicare reimbursement rates, which will help the TRICARE Program.

Yet this is not enough. TRICARE Standard is hobbled with a reputation and history of low and slow payments as well as what still seems like complicated procedures and administrative forms that make it harder and harder for beneficiaries to find health care providers that will accept TRICARE. Any improvements in the rates paid for Medicare/TRICARE should be a great help in this area. Additionally, any further steps to simplify the administrative burdens and complications for health care providers for TRICARE beneficiaries hopefully will increase the number of available providers.

The Alliance asks the Defense Subcommittee to include language encouraging continued increases in TRICARE/Medicare reimbursement rates.

TRICARE Retiree Dental Plan (TRDP)

The focus of the TRICARE Retiree Dental Plan (TRDP) is to maintain the dental health of Uniformed Services retirees and their family members. Several years ago we saw the need to modify the TRDP legislation to allow the Department of Defense to include some dental procedures that had previously not been covered by the program to achieve equity with the active duty plan.

With ever increasing premium costs, NMVA feels that the Department should assist retirees in maintaining their dental health by providing a government cost-share for the retiree dental plan. With many retirees and their families on a fixed income, an effort should be made to help ease the financial burden on this population and promote a seamless transition from the active duty dental plan to the retiree dental plan in cost structure. Additionally, we hope the Congress will enlarge the retiree dental plan to include retired beneficiaries who live overseas.

The NMVA would appreciate this Committee's consideration of both proposals.

NATIONAL GUARD AND RESERVE HEALTH CARE

Funding Improved TRICARE Reserve Select

It is being suggested that the TRICARE Reserve Select healthcare plan be changed to allow the majority of Selected Reserve participate at a 28 percent copayment level with the balance of the premium being paid by the Department of Defense.

NMVA asks the committee to continue to support funding of the TRICARE Reserve Select program.

Mobilized Health Care—Dental Readiness of Reservists

The number one problem faced by Reservists being recalled has been dental readiness. A model for healthcare would be the TRICARE Dental Program, which offers subsidized dental coverage for Selected Reservists and self-insurance for SELRES families.

In an ideal world this would be universal dental coverage. Reality is that the services are facing challenges. Premium increases to the individual Reservist have caused some junior members to forgo coverage. Dental readiness has dropped. The Military services are trying to determine how best to motivate their Reserve Component members but feel compromised by mandating a premium program if Reservists must pay a portion of it.

Services have been authorized to provide dental treatment as well as examination, but without funding to support this service. By the time many Guard and Reserve are mobilized, their schedule is so short fused that the processing dentists don't have time for extensive repair.

The National Military Veterans Alliance supports funding for utilization of Guard and Reserve Dentists to examine and treat Guardsmen and Reservists who have substandard dental hygiene. The TRICARE Dental Program should be continued, because the Alliance believes it has pulled up overall Dental Readiness.

Demobilized Dental Care

Under the revised transitional healthcare benefit plan, Guard and Reserve who were ordered to active duty for more than 30 days in support of a contingency and have 180 days of transition health care following their period of active service.

Similar coverage is not provided for dental restoration. Dental hygiene is not a priority on the battlefield, and many Reserve and Guard are being discharged with dental readiness levels much lower than when they were first recalled. At a minimum, DOD must restore the dental state to an acceptable level that would be ready for mobilization, or provide some subsidize for 180 days to permit restoration from a civilian source.

Current policy is a 30-day window with dental care being space available at a priority less than active duty families.

NMVA asks the committee for funding to support a DOD's demobilization dental care program. Additional funds should be appropriated to cover the cost of TRICARE Dental premiums and co-payment for the 6 months following demobilization if DOD is unable to do the restoration.

OTHER GUARD AND RESERVE ISSUES

Ensure adequate funding to equip Guard and Reserve at a level that allows them to carry out their mission. Do not turn these crucial assets over to the active duty force. In the same vein we ask that the Congress ensure adequate funding that allows a Guardsman/Reservist to complete 48 drills, and 15 annual training days per member, per year. DOD has been tempted to expend some of these funds on active duty support rather than personnel readiness.

The NMVA strongly recommends that Reserve Program funding remain at sufficient levels to adequately train, equip and support the robust reserve force that has been so critical and successful during our Nation's recent major conflicts.

While Defense Authorizers provided an early retirement benefit in fiscal year 2008, only those who have served in support of a contingency operation since 28 January 2008 are eligible, nearly 6 years and 4 months after Guard and Reserve members first were mobilized to support the active duty force in this conflict. Over 600,000 Reservists have served during this period and were excluded from eligibility. The explanation given was lack of mandatory funding offset. To exclude a portion of our warriors is akin to offering the original GI Bill to those who served after 1944.

NMVA hopes that this subcommittee can help identify excess funding that would permit an expanded early retirement benefit for those who have served.

ARMED FORCES RETIREMENT HOMES

Following Hurricane Katrina, Navy/Marine Corps residents from AFRJ-Gulfport were evacuated from the hurricane-devastated campus and were moved to the AFRH-Washington, D.C. campus. Dormitories were reopened that are in need of refurbishing.

NMVA urges this subcommittee to continue funding upgrades at the Washington, D.C. facility, and to continue funding to rebuild the Gulfport facility.

CONCLUSION

Mr. Chairman and distinguished members of the Subcommittee the Alliance again wishes to emphasize that we are grateful for and delighted with the large steps forward that the Congress has affected the last few years. We are aware of the continuing concern all of the subcommittee's members have shown for the health and welfare of our service personnel and their families. Therefore, we hope that this subcommittee can further advance these suggestions in this committee or in other positions that the members hold. We are very grateful for the opportunity to submit these issues of crucial concern to our collective memberships. Thank you.

CONCLUSION OF HEARINGS

Chairman INOUE. I'd like to thank all of you for your testimony this morning. The subcommittee will take all issues seriously, I can assure you. And if you do have documents to support your testimony, please submit them.

With that, the meeting will stand in recess, subject to the call of the Chair.

Thank you.

[Whereupon, at 11:40 a.m., Thursday, June 18, the hearings were concluded, and the subcommittee was recessed, to reconvene subject to the call of the Chair.]

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