



OFFICE OF THE UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-4000

APR 11 2024

PERSONNEL AND
READINESS

The Honorable Mike D. Rogers
Chairman
Committee on Armed Services
U.S. House of Representatives
Washington, DC 20515

Dear Mr. Chairman:

The Department's response to Senate Report 117-130, page 189, accompanying S. 4543, the James M. Inhofe National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2023, "Walter Reed National Military Medical Center Personnel Shortfalls," is enclosed. Senate Report 117-130, page 189, requests a report documenting the military, civilian, and contract staffing by occupational specialty at the Walter Reed National Military Medical Center (WRNMMC) as of December 31, 2022; providing a current, valid joint manning document for WRNMMC that ensures its enduring status as a world-class medical center; and identifying any personnel shortfalls and submitting a plan to address these shortfalls.

The report identifies a pervasive Military Department manning shortfall that undermines the mission of WRNMMC to be a combat casualty receiving center and sustain a viable graduate medical education program. Additionally, the report reveals that economic realities in the National Capital Region labor markets, and the impact of the post-pandemic era, hinder both civilian staff hiring and contract fill rates, despite the robust use of Office of Personnel Management recruiting and retention options. The Defense Health Agency is working with the Military Medical Departments to develop manpower models and ensure staffing through the Military Health System Human Capital Distribution Plan.

Thank you for your continued support of the health and well-being of our Service members, veterans, and their families. I am sending a similar letter to the Senate Armed Services Committee.

Sincerely,

Ashish S. Vazirani
Performing the Duties of the Under Secretary of
Defense for Personnel and Readiness

Enclosure:
As stated

cc:
The Honorable Adam Smith
Ranking Member





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PERSONNEL AND
READINESS

APR 11 2024

The Honorable Jack Reed
Chairman
Committee on Armed Services
United States Senate
Washington, DC 20510

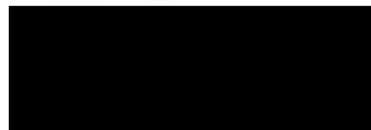
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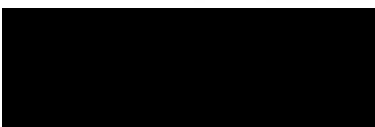
Sincerely,



Ashish S. Vazirani
Performing the Duties of the Under Secretary of
Defense for Personnel and Readiness

Enclosure:
As stated

cc:
The Honorable Roger F. Wicker
Ranking Member



Report to the Committees on Armed Services of the Senate and the House of Representatives



Walter Reed National Military Medical Center Personnel Shortfalls

April 2024

The estimated cost of this report or study for the Department of Defense is approximately \$14,000 in Fiscal Year 2023. This includes \$0 in expenses and \$14,000 in DoD labor.

I. Executive Summary

This report is in response to Senate Report 117–130, page 189, accompanying S. 4543, the James M. Inhofe National Defense Authorization Act for Fiscal Year 2023, which requests a report on Walter Reed National Military Medical Center (WRNMMC) personnel shortfalls including:

- Documenting the military, civilian, and contract staffing by occupational specialty at the WRNMMC as of December 31, 2022;
- Providing a current, validated joint table of distribution for WRNMMC that ensures its enduring status as a world-class medical center; and
- Identifying personnel shortfalls and submitting a plan to address the identified shortfalls.

WRNMMC is the premier Department of Defense (DoD) medical center offering intensive, complex specialty, and subspecialty medical services for personnel from all military services and serves as a worldwide tertiary referral center for casualty and beneficiary care.

A staffing analysis was completed using the Defense Health Agency (DHA) Joint Table of Distribution (JTD) and Defense Medical Human Resources System – Internet (DMHRSi) reports. WRNMMC is currently staffed at 79 percent of funded military and civil service authorizations and service contract positions. National medical staffing shortages in this post-pandemic period highlight the staffing challenges within the DoD. A shrinking pool of experienced nurses is resulting in increased salaries and improved benefits offered by civilian healthcare organizations and nursing contract companies, making it difficult for Federal Government pay scale structures to compete with the private sector.

DHA, in coordination with the Military Departments’ Medical Services, is developing a Human Capital Distribution Plan (HCDP) to understand, account for, and analyze the duty requirements at the medical and dental treatment facility level to ensure availability of military medical personnel to support readiness and the delivery of care. The HCDP also addresses the requirements for civilian personnel and allows for contracted efforts to meet access to care policies in the National Capital Area.

II. Background

As part of Base Realignment and Closure actions, the Walter Reed Army Medical Center and the National Naval Medical Center Bethesda merged into the WRNMMC located on the Bethesda campus. In 2013, DHA was established as an integrated Combat Support Agency that enables the Army, Navy, and Air Force Medical Service Components to provide medically ready and ready medical forces to Combatant Commands during both peacetime, and times of war. As one of America's largest and most complex health care institutions, and part of the world's preeminent military health care delivery operations, DHA supports the National Defense Strategy and Military Departments by leading an integrated, highly reliable system of medical readiness, training, and health. DHA is responsible for the delivery of health care services through our 700 military medical treatment facilities (MTFs) and robust TRICARE private sector network of providers in caring for approximately 9.6 million eligible beneficiaries composed of Uniformed Service members, military retirees, and their family members. WRNMMC strives to remain the premier DHA military medical center for education, research, and health; while becoming the facility of choice for its beneficiaries. WRNMMC also serves as a force generating platform for the next generation of clinicians in the Military Health System (MHS), as the primary training site for 53 graduate medical education training programs for the Army, Navy, and Air Force and 20 allied health programs.

When the Nation calls, WRNMMC and DHA respond to both military and civil emergencies. WRNMMC's response to the COVID-19 pandemic, when it threatened to overwhelm local medical systems and hospitals, was to reassign staff to support testing and treatment units, support the deployment of military personnel to civilian medical systems throughout the United States, and to fill requests to civil authorities. WRNMMC is proud to be the President's Hospital, and one of the Nation's casualty reception sites during times of conflict.

Our staff is the foundation of our mission and stands as an integrated body of military personnel, Government civilians, and contractors. A JTD depicts the military and Government civilian manpower requirements. DMHRSi reports are used to capture staffing data for Government and contract employees.

The current demand for health care providers continues to have a negative impact on the MHS's ability to recruit and retain personnel for its health care delivery missions. This report outlines our staffing efforts as of December 31, 2022.

III. Discussion

Several data sources were used in this report: DHA’s JTD, the DMHRSi/Alpha Roster, and the DHA Financial Management Information System. The JTD lists the authorized billets, or spaces, eligible to be filled by civilians and Service members. Contracted personnel are reflected through fill rates within each contract and accounted for within DMHRSi by name. The DMHRSi/Alpha Roster represents manpower, or faces, assigned to and who report a majority of their work hours and time, at WRNMMC. Data was reviewed based on skill type and DoD Occupational Codes (OCC CODES) to ensure accurate representation in the tables.

Military, Civilian, and Contract Staffing by Occupational Specialty

The DHA JTD, which is posted monthly, provides data summarized below.

Table 1: JTD Summary, WRNMMC (Nov 2022)

Joint Table of Distribution				
	Military	Civilian	Contractor	Total
Skill Type 1 (Physicians)	943	161	83	1187
Skill Type 2 (ANP, PA, etc.)	112	352	78	542
Skill Type 3 (Nurse)	336	858	168	1362
Skill Type 4 (Technicians / Corpsmen / Medics)	1162	538	246	1946
Skill Type 5 (Admin / Logistics)	460	1285	595	2340
Total	3013	3194	1170	7377

The JTD provides manpower requirements for each area of an MTF or headquarters. These manpower requirements are based on historical manpower requirements from the Military Departments’ Medical Activities, and on best civilian practices and national standards. In effect, the JTD provides the answer to how many medical personnel of each type are needed to complete the mission at WRNMMC.

The JTD has progressively changed as DHA has matured through transition, as DHA identified gaps in manpower requirements, and as DHA moves to cover active duty Service member (ADSM) departures.

Joint Manning Document

The Military Services supply information to the Joint Manning Documents (JMD) that inform the local WRNMMC JTD. Each Military Department’s ”Manpower Data System” of record is intended to feed the JTD. Current JTD information is based upon 2019 Service Manpower Documents provided to support the recent transition of function, which transferred 47,000 Service civilian employees to become DHA employees. DHA is updating the JTD with 2023 manpower data provided by each Service as directed by the August 8, 2022 Under Secretary of Defense for Personnel and Readiness memorandum, “Transparency of Military Medical Personnel and Clinical Readiness Data.” The Navy uses an Activity Manning

Document, the Army a Table of Distribution and Allowances, and the Air Force sources providers from their Unit Manpower Document.

The staff report is summarized below:

Table 2: DMHRSi Staff Summary, WRNMMC (including NMRTC)

Staffing Onboard	Military	Civilian	Contractor	Total	% Filled
Skill Type 1 (Physicians)	960	144	66	1170	99%
Skill Type 2 (ANP, PA, etc.)	104	308	43	455	84%
Skill Type 3 (Nurse)	288	526	107	921	68%
Skill Type 4 (Technicians / Corpsmen / Medics)	909	518	188	1615	83%
Skill Type 5 (Admin / Logistics)	203	940	558	1701	73%
Total	2464	2436	962	5862	79%

WRNMMC provides training for personnel enrolled in Graduate Medical, and Graduate Health, Education programs, including residents and students. The personnel in training are not included in these numbers. These programs and training events are a vital part of training ready medical personnel to meet DHA’s strategy and the mission of the MHS in support of the Combatant Commanders and DoD. A comparison chart of JTD to JMD by specialty is included in Appendix A.

Specialty Staffing is summarized below:

Table 3: Key Specialty Staffing, WRNMMC (Nov 2022)

	Primary Care	BH	Medicine	OB/ GYN	Surgery	Others	Total
Skill Type 1 (Physicians)	106	26	132	39	27	665	995
Skill Type 2 (ANP, PA, etc.)	23	59	19	10	12	255	378
Skill Type 3 (Nurse)	32	7	43	15	16	682	795
Skill Type 4 (Technicians / Corpsmen / Medics)	92	25	80	44	37	1,248	1,526
Skill Type 5 (Admin / Logistics)	34	30	57	22	23	1,372	1,538
Total	287	147	331	130	115	4,222	5,232

Overall, WRNMMC is staffed at 79 percent of authorizations, with Nurses (Skill Type 3) having the lowest fill rate at 68 percent, with 416 hiring actions open throughout the MTF. Higher vacancy rates are noted in the Labor and Delivery, Radiology, and Critical Care Service Lines. Military deployments also affect Radiology and Critical Care Service Lines.

The civilian health care market in the National Capital Region (NCR) has current economic forces that incentivize providers, nurses, and technicians to more lucrative pay opportunities. Health care staffing is extremely volatile, and DHA is challenged in the post-pandemic environment. Increased competition to recruit and retain nurses in the private sector, with high incomes and perquisites available, are seen as more attractive to these personnel. Additionally, there are numbers of nurses who choose to leave the profession entirely. These economic realities in the NCR labor markets hinder civilian staff hiring.

Personnel Plan

The HCDP will optimize military and civilian personnel assignments, contract requirements and the management of the Defense Health Program across the MHS. The HCDP is intended to provide MHS leaders and the DoD a holistic approach to assessing, validating, and distributing the right person, at the right location, at the right time, with the right cost to achieve great outcomes in support of readiness and our 9.6 million beneficiaries.

The HCDP applies to DHA, the Military Departments' Medical Services (U.S. Army Medical Command, U.S. Air Force Medical Services, and U.S. Navy Bureau of Medicine), and personnel, including assigned, attached, or detailed Service members, Federal civilians, and contracted full time equivalents, assigned to temporary or permanent duties (both continental United States and outside of the continental United States).

WRNMMC has a robust teaching and training mission, and provides a large platform for deploying the ready medical force. The HCDP provides the manning requirements and manpower to reveal where personnel can be re-distributed as needed across the enterprise to ensure each of these mission sets. The HCDP considers the workforce requirements for ADSM and Government service civilian personnel, the mission and location of MTFs, and the role of each MTF in casualty reception, providing the ready medical force, and teaching and training missions. With completion of the transition of MTF function from Military Department oversight to DHA, Market Directors will resource and fill key positions to more effectively manage human resources processes.

DHA uses civilian workforce recruiting and retention option available within the Office of Personnel Management (OPM) guidelines, including bonuses and incentives, loan repayments, work-hour flexibilities, and salary and pay setting options. These options require increased funding to ensure continued recruiting and retention incentives are available to attract a highly qualified civilian workforce. WRNMMC routinely offers retention and recruitment incentives as well as tuition assistance, college loan repayment, superior qualifications to the medical staff, as well as generous performance and on-the-spot or time-off awards.

DHA uses Continued Service Agreements to encourage personnel to remain in the military or civilian workforce by paying for increased training in return for continued employment. Additionally, Internal Resource Sharing Agreements are used to provide options in staffing MTFs in concert with support from the TRICARE Health Plan. These written agreements share providers, support personnel, equipment and supplies from the network into the MTF.

The Medical Q-Coded Services (MQS) contract is a 5-year contract that provides medical services supplementing clinical staff providing direct health care services in MTFs. The contract provides credentialed (privileged or non-privileged) and non-credentialed workers in Physician and Nursing Services and Ancillary Services. These contracts are designed to offer the same or better salaries to fill the gap in Government civilian and ADSM personnel authorizations.

DHA supports WRNMMC's staffing plan through civilian workforce programs, the HCDP, and through contracting actions. DHA works to promulgate all workforce flexibilities to civilian personnel hiring managers, improving the length of time to hire, and reducing the on-boarding process. DHA is working with the Military Medical Departments to develop manpower models and ensure staffing through the HCDP. DHA also supports WRNMMC through improved MQS contract actions, in an effort to reduce staff vacancies.

IV. Conclusion

WRNMMC is the premier DoD medical center, offering intensive and complex specialty and subspecialty medical services for personnel from all Military Services and serves as the military's worldwide tertiary referral center for casualty and beneficiary care, supporting the unique needs of military personnel and their families.

DHA uses civilian workforce recruiting and retention option available within the OPM guidelines, including bonuses, loan repayments, work-hour flexibilities, and salary and pay setting options. Market leaders utilize the HCDP to more effectively staff MTFs in their areas, and the MQS contract provides clinical personnel for direct health care delivery. In this post-pandemic health care staffing environment, DHA is using every flexibility and option to hire qualified, engaged personnel to care for the Nation's sons and daughters.

The HCDP for WRNMMC will provide MHS leaders a way, and the means, to provide military and civil service authorizations filled by the right person, at the time they are needed, achieving great outcomes for our beneficiaries.

Appendix

A. Skill-type Suffix Table

DoD OCC CODES. The analysis utilized DoD OCC CODES as a common measure between both sets of data. However, because DoD OCC CODES are not used by the Military Departments (which use their own Service Unique Occupation Codes (SUOC) to denote different occupations), WRNMMC Medical Expense Personnel and Reporting staff assigned these codes to each staff member on the DMHRSi/Alpha Roster. The team derived coded data by cross-referencing the SUOC data field to that of the DoD OCC CODES. The DoD OCC CODES are the **only** common occupational data-types shared between both sources of data. DoD OCC CODES are available in DHA Medical Data Mart database.

Skill-type Suffix Table

Skill Type	Skill Type Description	Skill Type Suffix	Skill Type Suffix Description	Student?
1D	Clinician	D	Dentist	No
1F	Clinician	F	Fellow-Medical	No
1N	Clinician	N	Intern-Medical	Yes
1P	Clinician	P	Physician	No
1R	Clinician	R	Resident-Medical	Yes
1S	Clinician	S	Intern-Dental	Yes
1T	Clinician	T	Fellow-Dental	No
1U	Clinician	U	Resident-Dental	Yes
1V	Clinician	V	Veterinarians	No
2A	Direct Care Professional	A	Nurse Anesthetist	No
2C	Direct Care Professional	C	Community Health Nurse (Cred)	No
2H	Direct Care Professional	H	Occ Health Nurse (Cred)	No
2M	Direct Care Professional	M	Nurse Midwife	No
2N	Direct Care Professional	N	Nurse Practitioner	No
2P	Direct Care Professional	P	Physician Assistant	No
2S	Direct Care Professional	S	Clinical Nurse Specialist	No
2W	Direct Care Professional	W	Student-Non GME/GDE	Yes
2Z	Direct Care Professional	Z	All Others in Skill Type 2	No
3C	Registered Nurse	C	Community Hlth Nurse(Non-Cred)	No
3E	Registered Nurse	E	Nurse Case Manager	No
3H	Registered Nurse	H	Occ Health Nurse (Non-Cred)	No
3R	Registered Nurse	R	Registered Nurse	No
3W	Registered Nurse	W	Student-Non GME/GDE	Yes
3Z	Registered Nurse	Z	All Others in Skill Type 3	No
4A	Direct Care Para-Professional	A	Nursing Assistant	No
4L	Direct Care Para-Professional	L	LPN/LVN	No
4W	Direct Care Para-Professional	W	Student-Non GME/GDE	Yes
4Z	Direct Care Para-Professional	Z	All Others in Skill Type 4	No
5A	Administrative/Clerical	A	Administrators	No
5C	Administrative/Clerical	C	Clerical	No
5L	Administrative/Clerical	L	Logistics	No
5M	Administrative/Clerical	M	Medical Record Auditor/Coder	No
5W	Administrative/Clerical	W	Student-Non GME/GDE	Yes
5Z	Administrative/Clerical	Z	All Others in Skill Type 5	No

B. ARMY DOD OCC SERIES

DOD OCC	Army Type 1 Provider		Delta (DMHRSi-JTD)
	DMHRSi	JTD	
130700	1	0	1
260101	0	1	-1
260102	5	9	-4
260103	2	2	0
260104	36	36	0
260105	0	1	-1
260107	5	22	-17
260109	3	0	3
260111	0	2	-2
260113	5	23	-18
260115	17	20	-3
260116	1	0	1
260117	7	13	-6
260118	26	0	26
260119	5	12	-7
260120	7	11	-4
260121	11	41	-30
260122	17	20	-3
260123	1	1	0
260125	6	72	-66
260127	7	21	-14
260128	0	4	-4
260130	9	25	-16
260131	5	8	-3
260132	12	21	-9
260133	2	1	1
260134	0	2	-2
260136	2	12	-10
260138	7	4	3
260139	3	0	3
260140	10	6	4
260141	13	11	2
260142	10	16	-6
260143	7	7	0
260144	7	9	-2
260145	2	5	-3
260146	4	7	-3
260148	12	40	-28
260149	4	8	-4
260304	2	6	-4
260305	1	1	0
260308	1	1	0
260310	0	1	-1
260311	2	0	2
260801	0	0	0
260829	2	0	2
	279	502	-223

Army Type 2 Para-Provider

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
260502	6	9	-3
260507	3	0	3
260801	2	1	1
260803	4	0	4
260804	2	1	1
260805	7	5	2
260806	0	7	-7
260809	4	0	4
260810	9	5	4
260811	0	7	-7
260814	2	0	2
260818*	7	0	7
260824	3	0	3
260825	2	0	2
260826	4	0	4
260828	5	0	5
260829	3	7	-4
260833	4	0	4
	67	42	25

280606 - Creative Arts Therapies

260811 - Physician Assistant

*Med Tech (should be a Type 4)

Army Type 3 Nursing

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
260503	8	14	-6
260507	3	4	-1
260509	4	77	-73
260510	27	0	27
260517	3	3	0
260518	97	0	97
Total	142	98	44

Army Type 4 Para-Provider

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
130000	54	123	-69
130100	23	40	-17
130200	28	32	-4
130300	3	8	-5
130400	1	2	-1
130600	33	55	-22
130700	9	15	-6
131100	19	40	-21
131200	8	15	-7
131300	14	18	-4
132200	10	0	10
132300	0	2	-2
132600	0	6	-6
133000	2	2	0
149400	1	0	1
260810	1	0	1
260818	1	3	-2
260900	1	0	1
	208	361	-153

Army Type 5 Admin/Logistics Sustainment

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
260814	0	2	-2
260824	0	2	-2
132200	0	68	-68
132500	10	14	-4
134000	6	12	-6
134100	23	37	-14
149400	0	2	-2
151200	0	1	-1
152000	0	4	-4
154200	0	1	-1
156100	0	1	-1
180000	0	1	-1
183000	0	1	-1
230100	0	1	-1
230300	0	1	-1
241100	0	1	-1
250600	0	1	-1
250700	16	7	9
260501	0	4	-4
260803	0	2	-2
260900	3	6	-3
290500	0	5	-5
132600	7	0	7
260104	2	0	2
260115	1	0	1
260119	1	0	1
260120	2	0	2
260122	1	0	1
260817	1	0	1
260818	1	0	1
270100	1	0	1
280100	1	0	1
	76	174	-98

C. NAVY DOD OCC SERIES

Navy Type 1 Providers (with Students)			
DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
260102	1	0	1
260103	4	4	0
260104	38	29	9
260107	7	5	2
260109	34	2	32
260111	0	2	-2
260113	12	4	8
260115	9	5	4
260116	2	0	2
260117	2	6	-4
260118	8	0	8
260119	3	3	0
260120	11	10	1
260121	3	8	-5
260122	2	0	2
260123	5	2	3
260124	1	1	0
260125	26	8	18
260127	16	19	-3
260128	0	2	-2
260130	14	12	2
260131	7	4	3
260132	26	7	19
260133	1	3	-2
260134	2	2	0
260135	1	0	1
260136	3	4	-1
260138	2	0	2
260139	3	0	3
260140	1	0	1
260141	2	0	2
260142	5	0	5
260143	5	0	5
260144	4	0	4
260145	1	0	1
260147	7	0	7
260148	33	49	-16
260149	5	0	5
260150	3	0	3
260304	13	4	9
260305	1	1	0
260306	0	1	-1
260307	1	0	1
260308	1	1	0
260310	2	2	0
260311	6	0	6
260804	1	0	1
260829	4	0	4
290200	0	233	-233
290500	4	0	4
Total	342	433	-91

Navy Type 2 Providers (with Students)

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
130900	2	9	-7
260104	1	0	1
260502	6	18	-12
260504	0	1	-1
260505	2	0	2
260509	1	0	1
260511	2	0	2
260514	0	2	-2
260804	0	2	-2
260805	5	13	-8
260806	0	3	-3
260809	0	3	-3
260810	1	4	-3
260811	1	7	-6
260826	1	0	1
260829	6	4	2
260833	1	0	1
290500	3	0	3
	32	66	-34

Navy Type Nurses (with Students)

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
250509	0	169	-169
260503	22	16	6
260507	3	0	3
260508	2	0	2
260509	48	0	48
260510	1	0	1
260512	5	0	5
260513	3	0	3
260517	10	0	10
260518	13	0	13
260520	1	0	1
290200	0	8	-8
290500	1	0	1
	109	193	-84

Navy Type 4 Corpsmen/Techs

DOD OCC	DMHRSi	JTD	Delta
			(DMHRSi-JTD)
101200	2	0	2
115000	1	0	1
130000	11	377	-366
130100	37	113	-76
130200	16	24	-8
130300	9	13	-4
130400	6	9	-3
130700	13	20	-7
130800	11	10	1
131100	42	77	-35
131200	12	21	-9
131300	15	42	-27
132200	5	0	5
132300	3	4	-1
132600	15	26	-11
133000	17	23	-6
133100	2	6	-4
133200	0	1	-1
155100	1	0	1
190100	1	0	1
195000	372	0	372
260818	6	7	-1
	597	773	-176

Navy Type 5 Admin/Logistics/Sustainment

DOD OCC	DMHRSi	JTD	Delta
			(DMHRSi-JTD)
101200	0	4	-4
104100	0	3	-3
105000	0	2	-2
106100	0	1	-1
110000	0	2	-2
110100	0	1	-1
112100	0	1	-1
115000	1	9	-8
120100	0	3	-3
120200	3	0	3
122100	0	3	-3
126000	1	0	1
132200	0	7	-7
140000	0	1	-1
149300	0	1	-1
150100	0	5	-5
151000	0	8	-8
151200	0	5	-5
152000	0	14	-14
152100	1	1	0
153100	0	1	-1
154200	0	2	-2
155100	22	20	2
155400	0	7	-7
156100	5	14	-9
157000	0	4	-4
162300	1	3	-2
165100	0	1	-1
165200	0	1	-1
169000	1	0	1
170200	0	1	-1
172000	0	1	-1
180000	19	51	-32
182300	1	21	-20
183000	0	28	-28
184000	3	6	-3
190100	6	0	6
195000	12	0	12
210200	0	1	-1
230100	1	0	1
240100	0	2	-2
250600	0	2	-2
250700	0	7	-7
251300	3	0	3
260501	1	0	1
260803	1	2	-1
260824	1	1	0
260900	7	23	-16
270100	0	2	-2
270300	1	2	-1
270400	1	2	-1
270700	0	1	-1
270800	0	1	-1
280200	1	2	-1
280500	0	1	-1
290500	1	0	1
	94	281	-187

D. AIR FORCE DOD OCC SERIES

AF Type 1 Providers (No Students - not on JTD)

DOD OCC	DMHRSi	JTD	Delta
			(DMHRSi-JTD)
260103	0	1	-1
260104	1	0	1
260111	0	1	-1
260113	1	1	0
260115	8	0	8
260117	1	0	1
260118	6	0	6
260119	2	0	2
260121	10	3	7
260123	0	1	-1
260127	1	0	1
260132	0	1	-1
260141	1	0	1
260142	1	0	1
260148	2	0	2
260149	1	0	1
260152	1	0	1
Total	36	8	28

Reassign JTD with staffing in DMHRSi

AF Type 2 Mid-level Providers (No Students - not on JTD)

DOD OCC	DMHRSi	JTD	Delta
			(DMHRSi-JTD)
260510	1	0	1
260805	1	0	1
260811	1	3	-2
260829	0	1	-1
al	3	4	-1

AF Type 3 RNs (No Students - not on JTD)

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
250509	0	45	-45
260510	24	0	24
260518	1	0	1
al	25	45	-20

AF Type 4 Techs (No Students - not on JTD)

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
130000	15	28	-13
131100	1	0	1
al	16	28	-12

AF Type 5 Admin/Log (No Students - not on JTD)

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
134000	0	3	-3
134100	0	1	-1
191100	1	0	1
260900	0	0	0
al	1	4	-3

E. CIVILIAN DOD OCC SERIES

Civilian Type 1 Providers

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
260109	131	158	-27
260311	5	0	5
260829	8	0	8
260301	0	9	-9
al	144	167	-23

Civilian Type 2 Providers

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
131200	1	0	1
260509	32	0	32
260801	25	33	-8
260804	5	9	-4
260805	64	77	-13
260806	0	48	-48
260810	14	19	-5
260811	20	33	-13
260812	2	0	2
260826	14	0	14
260828	24	0	24
260829	50	75	-25
260833	57	79	-22
	308	373	-65

Civilian Type 3 RNs

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
260509	526	864	-338
	526	864	-338

Civilian Type 4 Technicians

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
130000	104	201	-97
130300	5	36	-31
130400	7	11	-4
130600	110	0	110
130700	20	0	20
131100	20	40	-20
131200	38	50	-12
131300	51	54	-3
132600	36	0	36
133000	22	39	-17
133100	2	2	0
133200	5	0	5
149600	6	0	6
151000	1	0	1
180000	2	0	2
260806	4	0	4
260818	85	116	-31
	518	549	-31

Civilian Type 5 Admin/Logistics

DOD OCC	DMHRSi	JTD	Delta (DMHRSi-JTD)
130000	1	0	1
131300	1	0	1
134000	152	228	-76
134100	21	26	-5
140000	1	1	0
149600	15	26	-11
150000	0	4	-4
151000	88	140	-52
151200	3	6	-3
153100	0	4	-4
154100	9	8	1
154200	4	5	-1
155100	29	39	-10
155700	1	1	0
156200	1	1	0
157000	8	7	1
169000	2	2	0
172000	2	1	1
180000	116	147	-31
181100	2	3	-1
182200	29	46	-17
185000	1	6	-5
220700	4	4	0
240100	4	7	-3
240200	11	11	0
240300	1	2	-1
241000	3	9	-6
241400	9	11	-2
250100	4	4	0
250300	1	1	0
250400	2	2	0
250600	0	1	-1
251000	8	10	-2
251100	10	17	-7
251400	4	5	-1
260803	1	10	-9
260812	42	71	-29
260823	5	0	5
260900	110	145	-35
270100	138	183	-45
270300	2	2	0
270400	29	40	-11
270500	33	38	-5
270700	5	8	-3
270800	5	8	-3
271400	1	1	0
280100	4	6	-2
280200	13	18	-5
280700	1	1	0
	936	1316	-380

F. CONTRACTOR DOD OCC SERIES

Skill Type	JTD	(DMHRSi/Alpha Roster)	
	Contractors	Contractors	Fill Rate
Skill Type 1 (Physicians)	83	66	80%
Skill Type 2 (ANPs, PAs,...)	78	43	55%
Skill Type 3 (Nurses)	168	107	64%
Skill Type 4 (Corpsman/Medics)	246	188	76%
Skill Type 5 Admin/Logistics	595	558	94%
Totals	1170	962	82%