

Defense Health Program
Fiscal Year (FY) 2012 Budget Estimates
Exhibit R-2, DHP RDT&E Budget Item Justification

Appropriation/Budget Activity
Defense Health Program/BA: 2

DATE: February 2011
R1 Item Nomenclature: 7
Medical Products Support and Advanced Concept
Development
0604110HP

COST: (Dollars in Millions)

	2010 Actual	2011 Estimate	2012 Estimate	2013 Estimate	2014 Estimate	2015 Estimate	2016 Estimate
Total PE 0604110	262.186	160.168	167.481	143.754	103.054	74.743	77.407
CSI-Hawaii Federal Healthcare Network (TMA)	5.000	0.000	0.000	0.000	0.000	0.000	0.000
GDF-Medical Products Support and Advanced Concept Development (GDF-MPSACD)	187.680	160.168	167.481	143.754	103.054	74.743	77.407
Joint Biological Agent Identification and Diagnostic System (JBAIDS) (Army)	7.800	0.000	0.000	0.000	0.000	0.000	0.000
WWE-Medical Products Support and Advanced Concept Development (WWE-MPSACD)	61.706	0.000	0.000	0.000	0.000	0.000	0.000

A. MISSION DESCRIPTION AND BUDGET ITEM JUSTIFICATION: This Program Element (PE) funds product support and advanced concept development of medical products that are regulated by the U.S. Food and Drug Administration (FDA); the accelerated transition of FDA-licensed and unregulated products and medical practice guidelines to the military operational user, through clinical and field validation studies; prototyping, risk reduction and product transition efforts for medical information technology applications; and prototyping, risk reduction, validation, and product transition for medical training systems' technologies. The resulting advanced development portfolio is designed to address the following: areas of interest to the Secretary of Defense regarding Wounded Warriors, capabilities

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identified through the Joint Capabilities Integration and Development System (JCIDS), and the strategy and initiatives described in the Quadrennial Defense Review (QDR). Program development and execution is peer-reviewed and fully coordinated with all of the Military Services, appropriate Defense Agencies or Activities and other federal agencies, to include the Department of Veterans Affairs, the Department of Health and Human Services, and the Department of Homeland Security. This coordination occurs through the planning and execution activities of the Joint Program Committees (JPCs), established for the Defense Health Program enhanced RDT&E funding. Research supported by this PE includes accelerated transition of modeling and simulation technology for medical training/education/treatment, medical information technology development, medical products - advanced component development, and accelerated transition of medical technology, practice, guidelines, and standards.

The Defense Health Program appropriation also received Congressional Special Interest (CSI) funding for the Hawaii Federal Healthcare Network and for wounded warrior enhancement to include accelerated transition of medical technology, practice guidelines and standards, advanced technologies and logistically supportable blood products, medical products - advanced component development, and polytrauma and blast.

For FY 2010, the Army Medical Department received funding for Joint Biological Agent Identification and Diagnostic System (JBAIDS) research to explore H1N1 viral identification. Funding was appropriated in the Supplemental Appropriations Act, 2009, Title VIII (P.L. 111-32) and transferred from the Department of Health and Human Services (DHHS) to the Department of Defense for Pandemic Influenza Preparedness and Response.

The Defense Health Program appropriation also received FY 2010 funding for Wounded Warrior Enhancement to stimulate innovative research at intramural research sites. This effort included funding for operational health and performance, polytrauma and blast, psychological health and well-being for military personnel and families, rehabilitation, and traumatic brain injury.

B. PROGRAM CHANGE SUMMARY:

	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
FY12 Budget Estimate RDT&E	205.865	160.168	167.481	143.754
Reprogramming	61.706	0.000	0.000	0.000
SBIR	-5.385	0.000	0.000	0.000
FY12 Budget Submission RDT&E	262.186	160.168	167.481	143.754

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PROGRAM CHANGE SUMMARY EXPLANATION:

FY 2010: Prior Approval Reprogramming, FY 10-17 PA, from DHP Operation and Maintenance (O&M) to DHP RDT&E, PE 0604110 - Medical Products Support and Advanced Concept Development for Wounded Warrior Enhancement (WWE) program (+\$61.706 million).

SBIR Transfer from DHP RDT&E, PE 0604110 - Medical Products Support and Advanced Concept Development (-\$5.385 million) to DHP RDT&E, PE 0605502 - Small Business Innovation Research (SBIR) program (+\$5.385 million).

FY 2011: No Change.

FY 2011: No Change.

FY 2011: No Change.

C. OTHER PROGRAM FUNDING SUMMARY: None.

D. ACQUISITION STRATEGY: Work under this PE will be solicited by traditional Program Announcements resulting in contracts or other transactions. The intent is to have the majority of the work conducted by extramural entities with eventual down-select transitions into Programs of Record or directly into clinical practice. Programs of Record will be assigned to a Component Acquisition Executive.

E. PERFORMANCE METRICS:

The benchmark performance metric for transition of research supported in this PE will be the attainment of a maturity level that is typical of TRL7, or the equivalent for TRL8, such as practice guidelines and standards, which are intended for rapid transition to operational use.