

Defense Health Program
 Fiscal Year (FY) 2013 Budget Estimates
 Exhibit R-2, DHP RDT&E Budget Item Justification

Appropriation/Budget Activity
 Defense Health Program/BA: 2

DATE: February 2012
 R1 Item Nomenclature: 2
 Basic Operational Medical Research Sciences
 0601117HP

COST: (Dollars in Millions)

	2011 Actual	2012 Estimate	2013 Estimate	2014 Estimate	2015 Estimate	2016 Estimate	2017 Estimate
Total PE 0601117	31.775	0.975	3.038	6.074	11.121	11.131	11.132
CSI-Peer-Reviewed Hemorrhage Control Research (Army)	0.000	0.975	0.000	0.000	0.000	0.000	0.000
CSI-Traumatic Brain Injury/Psychological Health (TBI/PH) (Army)	2.925	0.000	0.000	0.000	0.000	0.000	0.000
GDF-Basic Operational Medical Research Sciences (GDF-BOMRS)	28.850	0.000	3.038	6.074	11.121	11.131	11.132

A. MISSION DESCRIPTION AND BUDGET ITEM JUSTIFICATION: GDF-Basic Operational Medical Research Sciences (GDF-BOMRS): This program element (PE) provides support for basic medical research directed toward greater knowledge and understanding of the fundamental principles of science and medicine that are relevant to the improvement of Force Health Protection. Research in this PE is designed to address the following: areas of interest to the Secretary of Defense regarding Wounded Warriors, capabilities identified through the Joint Capabilities Integration and Development (JCIDS), and the strategy and initiatives described in the Quadrennial Defense Review (QDR). Program development is peer-reviewed and 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, established for the Defense Health Program Research, Development, Test and Evaluation (RDT&E) funding. Research supported by this PE includes polytrauma and blast injury, rehabilitation, diagnosis and treatment of brain injury, operational health and performance, and psychological health and well-being for military personnel and families. Funds in this PE are for basic research that promises to provide important new approaches to complex military medical problems. As the research efforts mature, the most promising efforts will transition to applied research (PE 0602115HP) or technology development (0603115HP) funding.

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The Army Medical Command received FY11 DHP Congressional Special Interest (CSI) directed research funding. The strategy for the FY11 Congressionally directed research is to stimulate innovative research through a competitive, peer-reviewed research program, and focused medical research at intramural and extramural research sites. Research efforts include traumatic brain injury/psychological health research.

B. PROGRAM CHANGE SUMMARY:

	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>
FY13 Budget Estimate RDT&E	31.775	0.000	3.000	6.000
Change Proposal	0.000	0.000	0.038	0.074
Congressional Special Interest	0.000	1.000	0.000	0.000
SBIR	0.000	-0.025	0.000	0.000
FY13 Budget Submission RDT&E	31.775	0.975	3.038	6.074

PROGRAM CHANGE SUMMARY EXPLANATION:

FY 2011: No Change.

FY 2012: Congressional Special Interest increase to DHP RDT&E, PE 0601101 - Basic Operational Medical Research Sciences for Peer-Reviewed Hemorrhage Control Research (+\$1.000 million).

SBIR Transfer from DHP RDT&E, PE 0601117 - Basic Operational Medical Research Sciences (-\$0.025 million) to DHP RDT&E, PE 0605502 - Small Business Innovation Research (SBIR) program (+\$0.025 million).

FY 2013: Change Proposal for inflation adjustment to DHP RDT&E, PE 0601101 - I Basic Operational Medical Research Sciences (+\$0.038 million).

FY 2014: Change Proposal for inflation adjustment to DHP RDT&E, PE 0601101 - I Basic Operational Medical Research Sciences (+\$0.074 million).

C. OTHER PROGRAM FUNDING SUMMARY: None

D. ACQUISITION STRATEGY: Not Required

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E. PERFORMANCE METRICS:

The benchmark performance metric for transition of research conducted with Basic Medical Research Sciences funding will be the attainment of a maturity level that is typical of TRL3 or the equivalent for knowledge products.