

A single, very capable MILHEALTH serves all branches of the military

Forecasts:

- **In 2039, the 15,000 active duty officers of MILHEALTH serve all branches of the operational military, while beneficiary care is provided by the single-payer civilian Federal Health System.**
- **MILHEALTH R&D develops the Roboresponse LifeSave System, automatic post-trauma hibernation and advances in neurotechnology leading to combat stress resilience and a cure for post-stress cognitive damage.**

Following the shift to a single payer health system in the second decade of the 21st century, federal health delivery programs merged into the Federal Health System (FEDHEALTH). A free-enterprise based system, FEDHEALTH provides care for veterans, Native Americans and military beneficiaries. While some members of the Commissioned Officer Corps serve in research, direct care, and administrative billets within FEDHEALTH, the majority serve in the military health system (MILHEALTH).

MILHEALTH is the single “purple-suited” organization serving all four branches of the military plus the Coast Guard. Every military billet is related to direct operational health support, with other roles filled by civilians and contractors. MILHEALTH consists of approximately 15,000 active duty officers augmented by a surge capacity of reservists. This reduced scale meets the needs of the operational military, particularly since war requires putting far fewer humans in harm’s way. Some MILHEALTH personnel spend their careers in one or two Services, but many pursue training and certification in four or five branches, gaining expertise in land, sea, aerospace and humanitarian medical support.

Medical personnel report to the MILHEALTH Command and wear a MILHEALTH-specific uniform. (Not purple!) Those officers serving in Service-specific operational billets wear the operational uniforms of that Service, but retain their identity as members of an elite medical corps capable of meeting any and all health needs of the operational military. By 2039 MILHEALTH personnel have developed a level of cultural adaptability and psychological awareness that allow them both to integrate themselves into any type of military unit, from Army paratroopers to Navy submarine crew, and to manage the health not just of the individuals but of the unit itself.

The elite nature of MILHEALTH service, as well as the elevated education and training requirements for health technicians, has prompted the replacement of the enlisted ranks in military medicine by the commissioned Medical Support Corps, who comprise part of MILHEALTH’s 15,000 members. People can join after high school or with an associate’s degree, but must achieve a bachelor’s degree before promotion to O3.

Commanded by a four-star officer with a single staff, MILHEALTH provides training, conducts R&D, and rotates operational health personnel through Service billets. MILHEALTH maintains and commands the major operational health platforms for war and health support missions. In addition to active duty clinics, MILHEALTH maintains only four CONUS and three overseas high capacity trauma centers for casualty care. MILHEALTH also plays a role in ongoing global surveillance and global public health support, as assigned. An Assistant Secretary of Defense for Health provides civilian oversight, but it is a small post since TRICARE and other beneficiary programs have been folded into the single-payer FEDHEALTH system.

Within each Service, a three-star (two-star in the Coast Guard) Health Commander manages the MILHEALTH personnel assigned to that Service, as well as the platforms and policies relevant to their mission. This commander also ensures that service members get adequate care within the civilian health system. Almost all deployments are joint under the control of a Unified Commander with an Assistant Commander for Health on the staff.

MILHEALTH personnel receive the bulk of their professional education through the civilian system, and maintain their skills within civilian hospitals in areas with high concentrations of military members and their families. Service-specific operational health training, as well as the cultural training required to “jump” between Services and communities, is conducted in joint training centers, often in virtual settings. Medical personnel use sophisticated simulations to develop new skills and to maintain certification.

MILHEALTH maintains responsibility for a wide range of activities, including conflict injuries and stressors, disaster response, humanitarian assistance, society building, and eco-climate response. MILHEALTH owns, staffs and commands all major operational medicine capabilities, which are capable of going anywhere, anytime to do anything. Platforms (equipment, supplies, and facilities) consist of modular, interoperable plug-and-play components that have a small footprint and are easily transportable. Personnel use just-in-time virtual simulations for the latest skills update training.

A strict focus on operational health has driven MILHEALTH R&D efforts to perceive and address future health threats and challenges in preparation for future wars. These efforts have produced significant technological advances, such as the “indefinite golden hour” capability for major traumas, which is essential in the dispersed, minimal-personnel operational environment of the 2030’s. Soldiers wear a Roboresponse LifeSave system, which uses sensors, auto therapeutics and CyberSmart intelligence to detect and evaluate injuries, stabilize the damage, protect cells against ischemic, infectious and toxic damage, and in severe cases induce a low-metabolism, unconscious hibernated state. While hibernation protects the soldier’s vital tissues, the system directs an unmanned intensive support cocoon to retrieve the severely injured soldier and deliver him to a trauma facility a safe distance from the conflict for treatment hours or even days later.

MILHEALTH R&D has also focused on neurotechnology, creating mechanisms for dramatically improved training and skills development, augmented biosensing and hyperextended alertness. These research efforts also led to a bio-cognitive understanding of post-traumatic stress, as well as new therapeutic approaches to provide combat resilience and to remove post-stress cognitive damage, leading to a full recovery after combat. Forced by operational necessity to address future health challenges far in advance, MILHEALTH represents the leading edge in the advancement of medical technology.

With expertise, mobility, and flexibility, MILHEALTH in 2039 plays a central role in the rapid response to natural and manmade disasters in the homeland and in support of America’s global influence abroad.

Further Reading:

- MHS 2020, *OOTW in the 21st Century – A MHS Virtual Community of Practice*, 1998
- MHS 2025, *Toward a New Enterprise*, 1999