

INFORMATION PAPER

MCMR-MMO-S
01 April 2009

SUBJECT: Medical Left Behind Equipment (LBE) Program

1. PURPOSE. Provide an overview of the Medical LBE Program

2. Talking Points.

- USAMMA is the lead MEDCOM organization to facilitate the Medical LBE Program
- Army Sustainment Command (ASC) is the overall LBE process owner for the Army
- The Medical LBE Program is primarily focused on Role 3 Combat Support Hospitals (CSH)
- LBE-eligible units will conduct a lateral transfer of all non-deployed medical materiel sets (MMS) and equipment to an ASC property book officer prior to deployment; USAMMA assists in the transfer
- ASC will have full responsibility and accountability for storage of these LBE sets and equipment during the unit's deployment
- FORSCOM notifies USAMMA of any unit requiring LBE support at least 6 months prior to deployment
- LBE mission will require a 100% joint inventory and maintenance cycle on all equipment
- USAMMA will assist upon unit re-deployment with reintegration of equipment

3. Facts.

a. Regulatory Authority: ASC is tasked to manage the maintenance and care of deployed unit LBE in Service Support Order 07-01 Left Behind Equipment Operations dated 11 May 07. Also in May 07, FORSCOM published a Memorandum of Instruction (MOI) for LBE which intended to set forth structure and basic operational procedures for FORSCOM units deploying to OEF and OIF to account for, transfer and maintain LBE in conjunction with the ASC. Annex C to the FORSCOM LBE MOI addresses handling procedures for medical equipment and supplies. This information paper further delineates Medical LBE procedures. Viewing of Annex C is possible through the following AKO link <https://www.us.army.mil/suite/kc/9725124>

b. The Medical LBE Program is primarily limited to active duty Role 3 Combat Support Hospitals who fall in on Theater Provided Equipment (TPE) and leave their organic equipment at home station.

c. FORSCOM will notify USAMMA of any unit requiring medical LBE support at least 6 months prior to deployment. This notification period enables USAMMA to appropriately assign personnel and schedule, assess and prepare a concept of support for all respective parties.

d. USAMMA will work closely with the LBE unit, the local Army Field Support Battalion (AFSBn) or Logistic Support Element (LSE), FORSCOM and other key stakeholders to ensure mission success. USAMMA will provide a Medical Materiel and Maintenance Team (M3T) to assist in LBE program execution since the ASC does not have medical logistics or maintenance expertise.

e. LBE units shall work closely with USAMMA and their local ASC command to synchronize key dates such as an LBE site assessment (2-3 days) and the LBE mission (2-3 weeks). It is critical to plan and lock in key dates early (NLT 90 days from LBE execution) in order to de-conflict the deploying unit's other pre-deployment activities.

f. LBE units and their higher headquarters are encouraged to make contact with their USAMMA LBE point of contact at least 6 months prior to deployment by contacting the USAMMA EOC at usammaeoc@amedd.army.mil or calling DSN 343-4408 or commercial 301-619-4408.

g. USAMMA will serve as the Life Cycle Manager for Class VIII in support of ASC's LBE efforts. This relationship emphasizes USAMMA's role as the honest broker between medical units and the ASC in determination of equipment status, inventories, materiel identification, and proper handling of MMSs and medical equipment.

h. USAMMA M3Ts will consist of medical maintenance technicians as well as a mixture of government/military and contractor medical logistics experts. The M3Ts will work closely with unit LBE representatives (XO, S-4, S-3, Medical Supply Officer, Medical Maintenance Chief and PBO), the local ASC organization (AFSBn or LSE) and higher level command representatives. The primary purpose of the M3T is to assist in 100% joint inventories between the unit and the ASC property book team. In addition, the M3T will provide depot level medical maintenance expertise and resources to assist the unit in bringing all medical equipment items to 10/20 standards.

i. It is essential that USAMMA conduct an LBE site assessment at least 4 months prior to LBE program execution since the assessment will determine actual support requirements (i.e. personnel, equipment and schedule). Units and their supporting AFSBn/LSE need to plan at least 2-3 days for the LBE site assessment and up to 3 weeks for execution of the on-site LBE program.

j. The unit's 164-bed package stored at Sierra Army Depot will also be inducted into the Medical LBE program prior to deployment. This requires extensive coordination among the unit, USAMMA, ASC, and Sierra Army Depot, which underscores the need for prompt communication with USAMMA upon deployment notification.

k. Maximum use of organic and local 68A/670A medical maintenance technicians is highly encouraged prior to and during LBE operations. Every attempt should be made to ensure all medical equipment is brought to 10/20 standards prior to the M3T's arrival.

l. It is important to note that the deploying unit has the lead on determining work schedule and flow during LBE operations. However, it is imperative that any changes to schedule and workflow be coordinated between the unit, USAMMA, ASC and FORSCOM.

m. Refer to Power Point brief titled, "Medical Left Behind Equipment Program" and FORSCOM LBE MOI Annex C titled, "Medical Materiel (Class VIII) LBE Management" on the USAMMA web site <http://www.usamma.army.mil/> or <https://www.us.army.mil/suite/kc/9725124> for further details and contact information.