

as a part of discharging the overall medical mission of developing and maintaining the medical services required to support military operations both in war and peace. An additional purpose is to maintain high morale in the Armed Forces. This purpose has specific application to the family portion of the program.

2. Operation

The program is operated in military, other Federal, and in civilian medical facilities on a worldwide basis. Almost all of the medical care provided military personnel, however, is provided by military facilities. A significant—but not major—portion of the care provided the families of military personnel is obtained from civilian sources.

3. History

The origins of the Army Medical Service and the Navy Medical Department predate the Constitution. The Air Force Medical Service had its origin in the Army Medical Service. All of these services were established for the primary purpose of providing care to the active duty members of the Armed Forces. In essence, the medical care program for military personnel began with the establishment of our Armed Forces. All of the military departments have traditionally provided medical care in military hospitals and dispensaries on a space-available basis to dependents of active duty personnel. The statutory basis for this practice goes back to 1884.

In 1953 concern with the fact that 40 percent of the military dependents did not reside in the vicinity of a military hospital and hence received no military benefits, plus the remarkable expansion of health insurance and other employee benefits offered by industry, led the Secretary of Defense to establish an independent citizens advisory commission (the "Moulton Commission," headed by Dr. Harold G. Moulton of the Brookings Institution) to study and make recommendations on the dependent medical problems.

The Moulton Commission's recommendations, in turn, led to the submission by the Department of Defense of a legislative proposal which, upon enactment in 1956, became the Dependents' Medical Care Act. Under the act, dependents of active duty members of the uniformed services who do not reside with their sponsors may elect to receive medical care in uniformed services facilities (on a space-available basis) or inpatient medical care alone from civilian hospitals and physicians. Dependents residing with their sponsors may only obtain inpatient care from civilian sources if no uniformed service facilities are available.

4. Level of operations. (See table 1.)

Program: Medical care of military personnel and their families.
Department or agency, and office or bureau: Department of Defense.