Claude Moore OPPORTUNITIES

JUNE 2025 REPORT

Military Medics and Corpsmen Transitioning into Civilian Healthcare Careers

Acknowledgments

Claude Moore Opportunities would like to thank the following for their participation in planning and facilitating the summit. This report was prepared based on comments made at the summit and does not necessarily reflect the views of those listed below.

Dominion Energy Charitable Foundation

Blake Bourne
Veterans Bridge Home

Elizabeth Carter
Virginia Department of Health Professions (retired)

Keith Hall
U.S. Defense Health Agency's Military Education & Training Campus (METC)

Antwon Jacobs, MBA
Virginia Department of Veterans Services
Military Medics & Corpsmen (MMAC) Program

Art Kellerman, MD
Virginia Health Workforce Development Authority

Philmika Reid
Virginia Community College System

A Message from Dr. Bill Hazel

Claude Moore Opportunities' mission is to create and promote lifelong careers for all Virginians. To date we have primarily focused on removing barriers and creating career pathways to address Virginia's healthcare workforce shortage by promoting and supporting employer-engaged, regional sector partnerships.

Through these efforts we believe Virginia could benefit greatly if we focus on helping military medics and corpsmen successfully transition from active military service to meaningful civilian healthcare careers. Virginia has the third largest group of active service members by state and is home to over 600,000 veterans.

We shared our desire to convene thought leaders to address this critical topic with Dominion Energy Charitable Foundation, and they graciously agreed to help us fund this endeavor. On March 21, 2025, we gathered veterans, nonprofit, employer, educational, and philanthropic stakeholders together at Reynolds Community College in Richmond, VA, to discuss the challenges medics and corpsmen face. This report highlights the barriers identified during the convening and begins the process of creating a strategy to remove the barriers that medics and corpsmen face.

We recommend implementing a pilot project that could become a nationwide initiative. By convening an employer-engaged regional sector partnership to champion the initiative and developing the right tools and programs, we can engage and retain these valuable, talented individuals in Virginia as they embark on their next career journeys.

Dr. Bill Hazel

Chief Executive Officer
Claude Moore Opportunities

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Executive Summary

Successfully Transitioning Medics and Corpsmen to the Civilian World

Current Problem

- Virginia anticipates needing 19,000 more healthcare workers over the next decade.
- Virginia has the third largest population of active military service members in the country.
- Given the number of individuals separating from the military in Virginia, can we get medics and corpsmen into the civilian workforce to address the state's healthcare workforce shortage?

Key Challenges to Overcome

Challenges All Veterans Face

- Finding well-paying employment
- Adjusting to cultural change between military and civilian careers
- Obtaining a secure career/rewarding future

Additional Barriers Unique to Healthcare

- Military and civilian sectors use different terminology. This impacts the translation of job descriptions, competencies, credentials and performance measures.
- Military training and capabilities don't easily translate to civilian requirements.
- Veterans lack necessary experience with pediatric and elderly patients.
- There is a lack of bridge programs to address gaps while providing sufficient income.

Why hasn't this been solved?

- Variabilities in skill sets, branches, and locations of medics and corpsmen will not support a "one size fits all" approach.
- The problem is so complex, no one group owns the solution.

Prioritized Recommendations

The purpose of this effort is not to solve all challenges faced by veterans, but to focus on those based on the complexity and regulatory environment of the healthcare fields. We recommend the following:

- Align Veterans Services Organizations' activities to address barriers veterans face when entering the civilian workforce.
- Collaborate with industry groups to create regulatory categories and bridge programs that allow veterans to earn while they learn.
- Develop an artificial intelligence (AI)/machine learning (ML) tool that better connects medics and corpsmen with comparable civilian healthcare roles in Virginia.
- Conduct a regional employer-engaged collective impact pilot project to jointly address the region's and veterans' employment needs.

Background & Lessons Learned

Within the next decade, Virginia will need 19,000 additional healthcare workers based on a recent analysis by George Mason University's Center for Healthcare Workforce.*

Virginia has the third largest population of active service military service members in the country. The Commonwealth is also home to two of the largest military healthcare institutions, Naval Medical Center Portsmouth and the Alexander T. Augusta Military Medical Center at Fort Belvoir, which is also the home to Navy Medicine Readiness and Training Command (NMRTC Belvoir).

Given the number of individuals separating from the military in Virginia, the purpose of this initiative is to recommend strategies to help medics and corpsmen get well-paying healthcare jobs when they transition out of the military and increase the number of qualified healthcare workers in Virginia.

*Source: George Mason University Health Workforce Occupations Quarterly

Why do experienced medics and corpsmen leave healthcare when they separate from the military?

- **Veterans want interesting, well-paying jobs when they separate and most need immediate employment.** Many medics and corpsmen are unable to stay in their field unless they are willing to take a pay cut or work another full-time job while they upskill.
- **The available jobs aren't interesting to the potential candidates.** Veterans perceive that the jobs aren't intellectually stimulating and are beneath their experience and capabilities.
- **The perception is that it's too hard to translate military training and experience in the civilian world.**
  - Veterans don't know about the opportunities or how to translate their training and experience to civilian employers.
  - Employers don't know how to adequately evaluate and translate military experience and training when considering civilian job descriptions, performance measures, and competencies.
- **Some veterans lack necessary experience with civilian patient groups not typically treated in the military** (e.g., pediatric and geriatric care).
- **There are a lack of targeted bridge programs that offer meaningful employment and sufficient income.** These programs enable veterans to upskill and earn while they learn.

> **Despite their skills and training, too many veterans end up having to take lower-paying jobs, jobs they are over-qualified for, or go back to school for additional training. These men and women have all the skills employers may need. The challenge now is helping them quickly and easily secure the credentials and certifications they need to contribute to the civilian workforce and support themselves and their families.**
>
> — **Antwon Jacobs**
> Program Manager of the Military Medics and Corpsman Program at the Virginia Department of Veterans Services

Why hasn't this problem been fixed before?

- **There are many variables that don't lend themselves to a "one size fits all" solution.**
  - There are 49 academic courses of instruction in various medical specialties for enlisted medical personnel at the Defense Health Agency's Military Education & Training Campus (METC).*
  - Additional training and experience also differ by branch of service.
  - Length of service directly impacts roles (e.g., direct care, management, leadership).
  - Civilian education curricula and training programs are inconsistent.
  - Regulatory requirements differ from state to state.
- **Potential candidates are geographically dispersed and occupationally diverse, which limits the ability to create and scale a focused program.**
- **Information sharing between the military and the civilian sectors is challenging due to complicated structures and different motivators.**
- **The problem is so complex that no one group owns the solution.**

*Source: www.metc.mil

Source: Defense.gov, Jeanine Mezei

Why should we try to solve it now?

- Virginia faces a shortage of healthcare workers.
- Employers need experienced employees.
- Medics and corpsmen are highly skilled; many with leadership and managerial experience. They are ideal candidates for meaningful civilian healthcare careers.
- Although complex, the challenge is manageable if tackled on a regional basis by representative stakeholders supported with the right data and tools.
  - New AI/ML technology can help address complex cross-walking between the military and civilian sectors.
  - Education and training models are evolving to meet individuals where they are.

Source: Dvidshub.net, Master Sgt. Raymond Boyington

Recommendations

Based on lessons learned during the March convening and with subsequent research, our recommendations are as follows:

1. Encourage Veterans Services Organizations (VSOs) to align their activities addressing barriers for veterans entering the civilian workforce.
2. Create regulatory categories and bridge programs that allow veterans to earn while they learn, by collaborating with industry groups.
3. Develop AI/ML tools that better connect medics and corpsmen to civilian healthcare opportunities.
4. Conduct a pilot project using regional employer-engaged collective impact initiatives; which brings together military and civilian sectors to jointly address the region's employment needs and to develop strategies that will attract potential candidates.

RECOMMENDATIONS

Encourage Veterans Service Organizations (VSOs) to align activities addressing barriers to civilian workforce

- VSOs are uniquely suited to reach veterans early in the transition process.
- If engaged in regional workforce partnerships, VSOs can help address the cultural and language barriers veterans face when transitioning from the military to the civilian workforce.
- They are also well suited to provide career coaches and mentors to recently separated vets.
- They can facilitate conversations between the military and civilian sectors.

CASE STUDY

Veterans Bridge Home (VBH)

Founded in Charlotte, NC in 2011, VBH used a collective impact approach to help veterans navigate education, employment, housing and healthcare.

Source: https://veteransbridgehome.org/

VBH'S 2023 IMPACT REPORT

3,244 Veterans Households Served

7,862 Total Services Provided

2,628 Housing Requests

1,157 Employment Support Requests

RECOMMENDATIONS

Remove regulatory hurdles and create new certifications

- By creating new categories of healthcare positions, we can reduce the regulatory barriers that prevent medics and corpsmen from entering the civilian healthcare workforce.
- For example, Virginia could create a civilian Primary Care Medic (PC Medic) role that aligns with skills and training obtained by medics and corpsmen.
  - A PC Medic role would both reduce the burden on primary care providers and would provide medics and corpsmen with a well-paying job upon exiting the military.

Source: https://www.forbes.com/sites/arthurkellermann/2024/12/11/want-better-health-and-lower-costs-reengineer-primary-care/

CASE STUDY

Heroes for Healthcare
Milwaukee, WI

Established in 2017 to help medics and corpsmen get civilian healthcare jobs.

Source: https://www.heroesforhealthcare.org/

In March 2022, Wisconsin passed legislation championed by Heroes for Healthcare allowing veterans to work under their scope of practice while obtaining their license.

↓

Veterans can acquire their license in as little as 15 months after transitioning while earning an income.

RECOMMENDATIONS

Create bridge programs

- Bridge programs allow for participants to upskill quickly and offer credit for prior learning.
- Bridge programs are available at several Virginia community colleges. Similar programs can be tailored to medics and corpsmen.
- Other models exist that can be reviewed. A dental assistant program has already been cross-walked by Mott Community College in Michigan to offer credit for prior learning from METC courses.
- "Earn while you learn" programs and apprenticeships allow participants to upskill while earning income.

CASE STUDY

Onward to Opportunity (O2O)
Via Syracuse University

Offers online courses and career coaching, while partnering with employers to meet industry standards in training

Source: https://ivmf.syracuse.edu/article/onward-to-opportunity-o2o-impact-evaluation/

2X — **Participants are 2x more likely to leave jobs for better opportunities at the 6-month mark**

$7k — **On average, O2O participants receive a $7,000 higher starting salary**

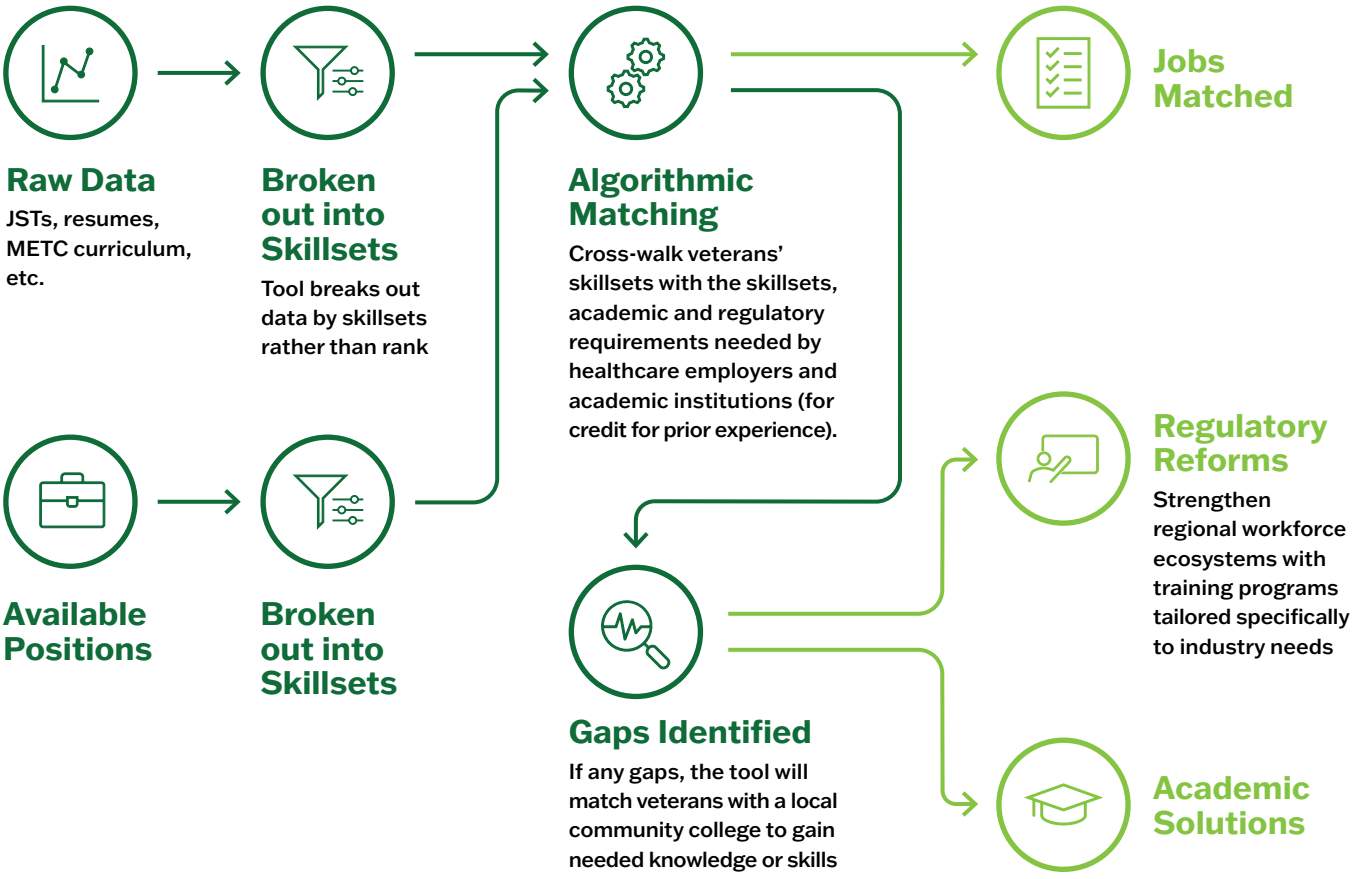
$13k — **On average, O2O participants receive a $13,000 higher salary for E-6 paygrade and below**

RECOMMENDATIONS

Develop AI/ML tools to translate military experience to civilian terms

- AI/ML tools can streamline the process of translating military training to civilian positions.
- Existing tools such as Oplign and Map My Future help match veterans' experiences to open positions.
- An AI/ML tool can identify gaps in the veteran applicant's experience vis-a-vis the advertised healthcare role. Academic courses can then be developed based on this information, often using a earn to learn model.

Source: https://oplign.com and https://mapmyfuture.com



Conduct a Regional Pilot

The Hampton Roads area (GO Virginia Region 5) is an ideal location to pilot an employer-engaged collective impact approach due to the high density of military facilities in that region. Supported by a regional organization such as the Hampton Roads Workforce Council, this pilot could involve three primary activities:

1. Convene and engage diverse regional stakeholders to establish common goals and champion high impact activities to help interested medics and corpsmen successfully transition to civilian healthcare jobs in the Hampton Roads region.

2. Develop an AI/ML tool that better connects medics and corpsmen with comparable civilian healthcare occupations in the state of Virginia. The tool should match the veteran's skillset with the skillset required by the healthcare employer.

3. Build bridge programs to meet the needs of transitioning medics and corpsmen in the region.

REGIONAL PILOT

Convene a Regional Collective Initiative

A regionally focused, employer-engaged collective initiative pulls together impacted stakeholders to jointly solve complex problems in a community.

Source: https://ssir.org/articles/entry/collective_impact#

1 Common Agenda

- Shared Vision
- Common Understanding
- Joint Approach to Agreed Upon Actions

2 Shared Measurement

- Consistent Data Collection
- Consistent Results Measurement
- Mutual Accountability

3 Mutually Reinforced Activities

- Clear Assignments
- Differentiated, Yet Coordinated Efforts
- Common Desired Results

4 Continuous Communication

- Consistent Coordination & Cadence
- Transparent & Open

5 Ownership & Organization

- Dedicated Staff
- Project Management Skills
- Centralized Repository

REGIONAL PILOT

Recommended Participants

Participants should be a cross-section of regional stakeholders that includes the military, employers, local government, educators, and community groups.

1 Military & Veterans Groups

- Local Military Medical Facilities
- Medical Education & Training Campus (METC), San Antonio, TX
- Local VA Medical Centers
- State National Guards
- Army / Navy / Marine Corp Reserves
- Local Veterans Service Organizations

2 Employers

- Health Systems & Hospitals
- Primary Care Providers
- Nursing Home, Assisted Living Facilities, & Long-Term Care Providers
- Behavioral Health Providers
- Dentistry and Oral Health Providers
- Medical Equipment & Service Providers

3 Educators & Trainers

- K-12 Schools
- Community Colleges
- Four-Year Institutions
- Post-secondary Medical Schools or Graduate Programs

4 State & Local Government

- Local Workforce Development Area Directors
- Regional Economic Development Leaders
- State Regulators (e.g., Board of Nursing)
- Department of Labor
- Community Service Boards
- Military Medics & Corpsmen (MMAC), Virginia Department of Veterans Services

5 Philanthropy & Community Non-Profits

- Local Foundations & Public Charities
- Faith-based Organizations
- Health Advocates
- National Foundations
- Tech Companies

REGIONAL PILOT

Suggested Activities

Participants will work together to establish the goals and activities to address the needs of the region.

1 Build consensus around priorities

- Identify desired goals and anticipated challenges
- Set initial priorities
- Socialize priorities and make any refinements based on feedback

2 Quantify the specific individual & employer needs in the region

- Identify stakeholders to support mapping individual and employer needs through systemic review
- Validate opportunities with larger employer ecosystems in the region

3 Identify gaps and needs to be addressed for the region

- Compare needs analysis to current regional offerings to determine career gaps
- Identify and develop programming to support remaining regional gaps
- Coordinate efforts to secure long term funding and resources

4 Develop & implement activities to address the gaps

- Assign owners and timelines to priorities
- Map a high-level implementation plan with milestones, activities, and resource needs

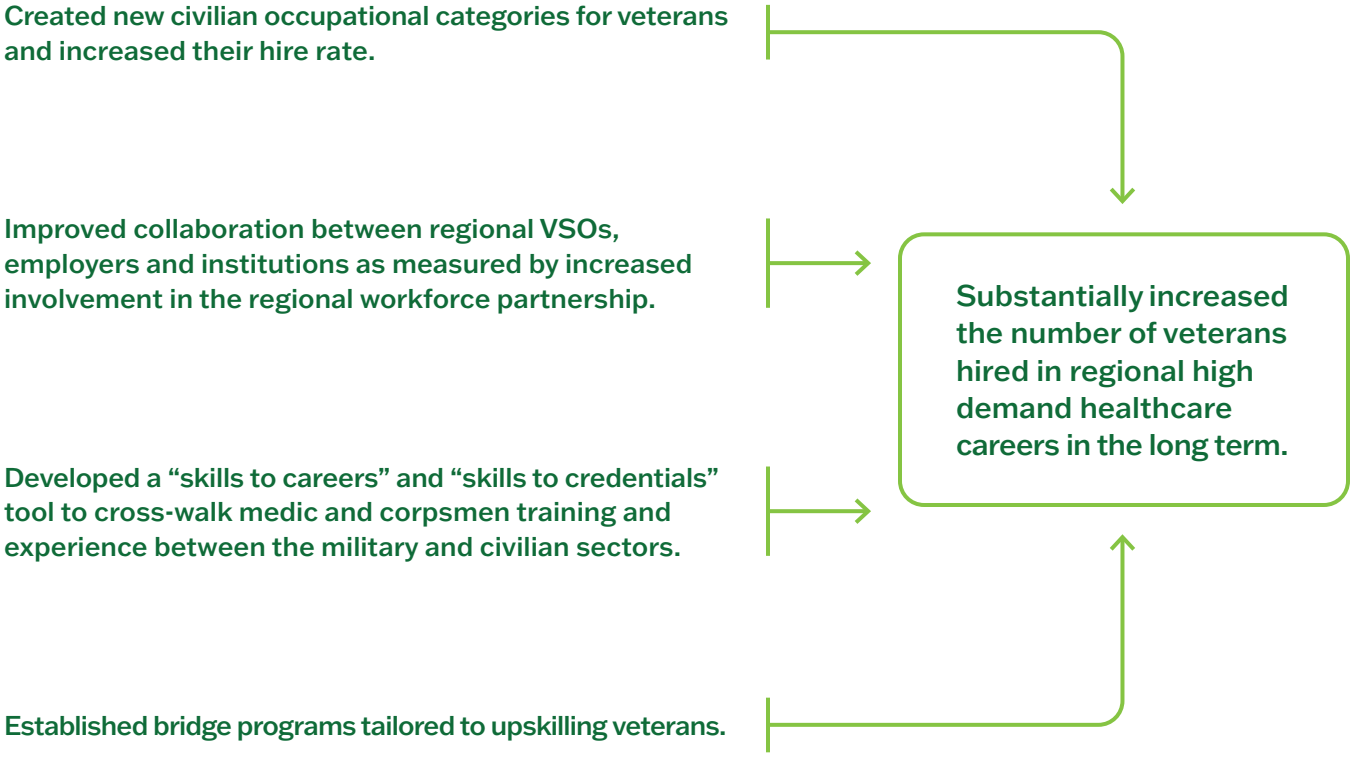
5 Measure results & capture lessons learned for continual improvement

- Establish key metrics for success
- Share results and discuss actions for refinement
- Propose a longer-term data management structure

REGIONAL PILOT

Measuring Success

Measure progress and capture lessons learned to inform future efforts. A successful pilot will result in the following:



Appendices

1. Summary of the Military Medics and Corpsmen Summit, March 2025
2. METC Degree Bridge Program overview
3. List of Military Occupation Specialties (MOS) in healthcare
4. Sample career pathway map

APPENDICES

Military Medic and Corpsmen Summit Participants | MARCH 21, 2025

Brightpoint Community College

Carilion Clinic

Claude Moore Opportunities

Commonwealth of Virginia

Defense Health Agency, Military Education & Training Campus

Dominion Energy

George Mason University/ Center for Health Workforce

George Washington University School of Nursing

Germanna Community College

Hampton Roads Workforce Council

Kaiser Permanente Community Health

Marymount University

Northern Virginia Community College

Old Dominion University

Rappahannock Area Community Services Board

Reynolds Community College

Task Force Movement

Tidewater Community College

University of Maryland Global Campus

UVA Health

Veterans Bridge Home

Veterans Administration SCOUTS
(Supporting Community, Outpatient, Urgent Care, and Telehealth Services)

Virginia Board of Nursing

Virginia Community College System

Virginia Counselors Association

Virginia Dental Association

Virginia Department of Veterans Services (MMAC)

Virginia Health Catalyst

Virginia Health Workforce Development Authority

Virginia Veterans Services Foundation

Virginia Works

Virginia's Community Colleges

APPENDICES

Summit Stats

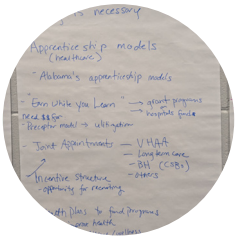
Healthcare Workforce Leaders from Across Virginia (and beyond) Convened in Richmond to Focus on Barriers and Solutions to Military Medic and Corpsmen Transition

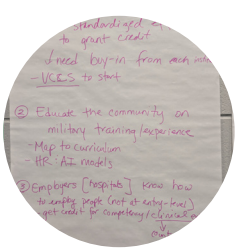
50+
SUMMIT PARTICIPANTS

15
SPEAKERS

4
BREAKOUT GROUPS

20+
POTENTIAL SOLUTIONS DISCUSSED





APPENDICES

Military Education & Training Campus (METC)

The Defense Health Agency's METC Degree Bridge Program builds academic bridge partnerships to help instructors and METC graduates expedite securing their degrees, licenses, and other credentials.

What METC Does

- The METC Degree Bridge Program allows service members to earn college credit for their military training, speeding up degree completion.
- METC partners with colleges nationwide, offering degree pathways and reducing the time and cost of earning a degree. Highlights include:
  - 96 College and University Partners
  - Partners in 32 states and District of Columbia
  - 2817 Academic Bridges Online and on Campus
  - Certificates, Diplomas, Associate, Bachelor's, Master's, and Doctorate degree bridges
  - All available from across the globe via METC's public website at **www.metc.mil**

METC Partnership Process

1. Visit **www.metc.mil**, find 1-2 compatible courses to build academic bridge pathways, and email METC.
2. Schedule a METC virtual meeting and/or tour, express which METC courses are of interest, and request curriculum plans (CPs) with the intent to view the files and gather questions prior to meeting.
3. Review CPs and program specific information outlined on the METC website and submit a list of questions that the team would like addressed during the scheduled meeting.
4. Have CPs evaluated by collegiate staff for Transfer Credits and freely ask questions via phone and email. If necessary, a second virtual meeting may be scheduled with METC program leaders.
5. Send METC Strategic Planning and Partnerships (SPP) office proposals outlining Transfer Credits for each program of interest (an example will be provided).
6. SPP sends proposals to each respective METC Course Director for review, questions, and/or acceptance. If needed, SPP hosts a follow-up teleconference or virtual meeting with specific course directors.
7. SPP notifies the college or university of acceptance ***OR*** asks that other factors or information be considered for potential credits based on input from program directors after their reviews.
8. An informal partnership is established after a proposal is accepted. The academic bridge is shared with METC staff and posted to their public website. Partners are encouraged to consider creating a bridge landing page to more effectively connect with METC graduates.

96 METC Partners

Military Occupational Specialties (MOS) in Healthcare

Army Healthcare

- Biomedical Equipment Specialist **(MOS 68A)**
- Orthopedic Specialist **(MOS 68B)**
- Practical Nursing Specialist **(MOS 68C)**
- Operating Room Specialist **(MOS 68D)**
- Dental Specialist **(MOS 68E)**
- Physical Therapy Specialist **(MOS 68F)**
- Patient Administration Specialist **(MOS 68G)**
- Optical Laboratory Specialist **(MOS 68H)**
- Medical Logistics Specialist **(MOS 68J)**
- Medical Laboratory Specialist **(MOS 68K)**
- Occupational Therapy Specialist **(MOS 68L)**
- Nutrition Care Specialist **(MOS 68M)**
- Cardiovascular Specialist **(MOS 68N)**
- Radiology Specialist **(MOS 68P)**

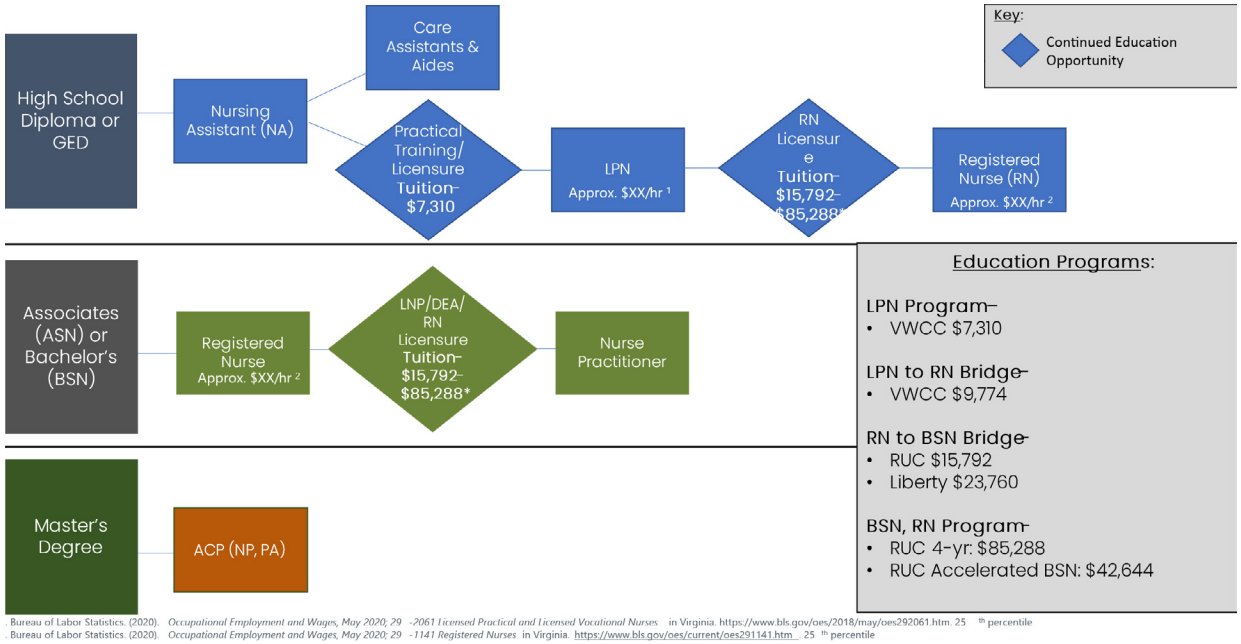
Navy Healthcare

- Hospital Corpsmen
- Physician
- Physician Assistant
- Audiology
- Dental
- Healthcare Admin
- Psychologist
- Hospital Corpsmen Advanced Tech field
- Optometry
- Naval Nurse
- Occupational Therapy
- Pharmacist
- Physical Therapy
- Podiatrist
- Radiation Health
- Dietician
- Social worker

Air Force Healthcare

- Audiologist
- Bioenvironmental Engineer
- Biomedical Laboratory Officer
- Clinical Psychologist
- Clinical Social Worker
- Dietitian
- Occupational Medicine
- Occupational Therapist
- Optometrist
- Pharmacist
- Physical Therapist
- Physician Assistant
- Podiatric Surgeon
- Public Health Officer
- Dentist
- Endodontist
- Oral and Maxillofacial Pathologist
- Oral and Maxillofacial Surgeon
- Orthodontist
- Pediatric Dentist
- Periodontist
- Prosthodontist
- Health Service Administrator /Hospital Administrator
- Adult Psychiatric Mental Health Nurse Practitioner
- Certified Nurse Midwife
- Certified Registered Nurse Anesthetist
- Critical Care Nurse
- Emergency/Trauma Nurse
- Family Nurse Practitioner
- Flight Nurse
- Mental Health Nurse
- Neonatal Intensive Care Nurse
- Obstetrical Nurse
- Operating Room Nurse
- Pediatric Nurse Practitioner
- Women's Healthcare Nurse
- Practitioner
- Clinical Nurse
- Allergist
- Aerospace Medicine Specialist/Flight Surgeon
- Anesthesiologist
- Clinical Geneticist
- Critical Care Medicine
- Dermatologist
- Diagnostic Radiologist
- Emergency Services Physician
- Family Physician
- Internist
- Neurologist
- Nuclear Medicine Physician
- Obstetrician/ Gynecologist (OB/GYN)
- Ophthalmologist
- Orthopedic Surgeon
- Otorhinolaryngologist
- Pathologist
- Pediatrician
- Preventive Medicine
- Psychiatrist
- Radiotherapist
- Surgeon
- Urologist
- Aerospace Medical Service
- Respiratory Care Practitioner
- Dental Assistant
- Dental Laboratory
- Diagnostic Imaging
- Diet Therapy
- Health Services Management
- Histopathology
- Medical Laboratory
- Medical Materiel
- Mental Health Service
- Optometry
- Pharmacy Technician
- Physical Medicine
- Public Health
- Surgical Technologist

Sample Career Pathway: Nursing



Source: Blue Ridge Partnership for Health Science Careers: https://virginiahealthcareers.org/

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cm-opportunities.org

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