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Exhibit R-2, RDT&E Budget Item Justification: PB 2014 Defense Health Program **DATE:** March 2013

APPROPRIATION/BUDGET ACTIVITY

0130: *Defense Health Program*

BA 2: *RDT&E*

R-1 ITEM NOMENCLATURE

PE 0605025HP: *Theater Medical Information Program - Joint (TMIP-J)*

COST (\$ in Millions)	All Prior Years	FY 2012	FY 2013 [#]	FY 2014 Base	FY 2014 OCO ^{##}	FY 2014 Total	FY 2015	FY 2016	FY 2017	FY 2018	Cost To Complete	Total Cost
Total Program Element	-	0.000	0.000	35.463	-	35.463	34.105	34.713	35.303	35.904	Continuing	Continuing
445A: <i>Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)</i>	-	0.000	0.000	35.463	-	35.463	34.105	34.713	35.303	35.904	Continuing	Continuing

[#] FY 2013 Program is from the FY 2013 President's Budget, submitted February 2012

^{##} The FY 2014 OCO Request will be submitted at a later date

A. Mission Description and Budget Item Justification

The Theater Medical Information Program - Joint (TMIP-J) integrates components of the Military Health System sustaining base systems and the Services' medical information systems to ensure timely interoperable medical support for mobilization, deployment and sustainment of all Theater and deployed forces in support of any mission. TMIP-J enhances the clinical care and information capture at all levels of care in Theater, transmits critical information to the Theater Commander, the evacuation chain for combat and non-combat casualties, and forges the theater links of the longitudinal health record to the sustaining base and the Department of Veterans Affairs. TMIP-J is the medical component of the Global Combat Support System. TMIP-J provides information at the point of care and to the Theater tactical and strategic decision makers through efficient, reliable data capture, and data transmission to a centralized Theater database. This delivers TMIP-J's four pillars of information support through the electronic health record, integrated medical logistics, patient movement and tracking, and medical command and control through data aggregation, reporting and analysis tools for trend analysis and situational awareness. TMIP-J fulfills the premise of "Train as you fight" through the integration of components which are identical or analogous to systems from the sustaining base. TMIP-J adapts and integrates these systems to specific Theater requirements and assures their availability in the no- and low- communications settings of the deployed environment through store and forward capture and transmission technology.

TMIP-J RDT&E is reported under the program element 0605013 through FY 2013 inclusive, but will be reported under new program element 0605023 for FY 2014 and out.

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Exhibit R-2, RDT&E Budget Item Justification: PB 2014 Defense Health Program					DATE: March 2013
APPROPRIATION/BUDGET ACTIVITY 0130: <i>Defense Health Program</i> BA 2: <i>RDT&E</i>			R-1 ITEM NOMENCLATURE PE 0605025HP: <i>Theater Medical Information Program - Joint (TMIP-J)</i>		
B. Program Change Summary (\$ in Millions)	FY 2012	FY 2013	FY 2014 Base	FY 2014 OCO	FY 2014 Total
Previous President's Budget	0.000	0.000	0.000	-	0.000
Current President's Budget	0.000	0.000	35.463	-	35.463
Total Adjustments	0.000	0.000	35.463	-	35.463
• Congressional General Reductions	-	-			
• Congressional Directed Reductions	-	-			
• Congressional Rescissions	-	-			
• Congressional Adds	-	-			
• Congressional Directed Transfers	-	-			
• Reprogrammings	-	-			
• SBIR/STTR Transfer	-	-			
• Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)	-	-	35.463	-	35.463
 <u>Change Summary Explanation</u>					
FY 2012: No Change					
FY 2013: No Change					
FY 2014: Realignment from DHP RDT&E, PE 0605013-Information Technology Development (-\$35.463 million) to DHP RDT&E, PE 0605025-Theater Medical Information Program – Joint (TMIP-J) (+\$35.463 million) for Theater Medical Information Program – Joint (TMIP-J).					

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Exhibit R-2A, RDT&E Project Justification: PB 2014 Defense Health Program										DATE: March 2013		
APPROPRIATION/BUDGET ACTIVITY 0130: Defense Health Program BA 2: RDT&E					R-1 ITEM NOMENCLATURE PE 0605025HP: Theater Medical Information Program - Joint (TMIP-J)				PROJECT 445A: Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)			
COST (\$ in Millions)	All Prior Years	FY 2012	FY 2013 [#]	FY 2014 Base	FY 2014 OCO ^{##}	FY 2014 Total	FY 2015	FY 2016	FY 2017	FY 2018	Cost To Complete	Total Cost
445A: Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)	-	0.000	0.000	35.463	-	35.463	34.105	34.713	35.303	35.904	Continuing	Continuing
[#] FY 2013 Program is from the FY 2013 President's Budget, submitted February 2012 ^{##} The FY 2014 OCO Request will be submitted at a later date												
A. Mission Description and Budget Item Justification												
The Theater Medical Information Program - Joint (TMIP-J) integrates components of the Military Health System sustaining base systems and the Services’ medical information systems to ensure timely interoperable medical support for mobilization, deployment and sustainment of all Theater and deployed forces in support of any mission. TMIP-J enhances the clinical care and information capture at all levels of care in Theater, transmits critical information to the Theater Commander, the evacuation chain for combat and non-combat casualties, and forges the theater links of the longitudinal health record to the sustaining base and the Department of Veterans Affairs. TMIP-J is the medical component of the Global Combat Support System. TMIP-J provides information at the point of care and to the Theater tactical and strategic decision makers through efficient, reliable data capture, and data transmission to a centralized Theater database. This delivers TMIP-J’s four pillars of information support through the electronic health record, integrated medical logistics, patient movement and tracking, and medical command and control through data aggregation, reporting and analysis tools for trend analysis and situational awareness. TMIP-J fulfills the premise of "Train as you fight" through the integration of components which are identical or analogous to systems from the sustaining base. TMIP-J adapts and integrates these systems to specific Theater requirements and assures their availability in the no- and low- communications settings of the deployed environment through store and forward capture and transmission technology.												
TMIP-J RDT&E is reported under the program element 0605013 through FY 2013 inclusive, but will be reported under new program element 0605023 for FY 2014 and out.												
B. Accomplishments/Planned Programs (\$ in Millions)									FY 2012	FY 2013	FY 2014	
Title: Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)									0.000	0.000	35.463	
Description: Complete Increment 2 Release 3 (I2R3) development/integration and conduct operational testing/operational assessment.												
FY 2014 Plans: Complete I2R3 development/integration and conduct operational testing/operational assessment. I2R3 includes the following: Theater Framework modernization and development, successful integration of Elmmune information exchange with AHLTA-Theater, and a Mobile Computing Capability (MCC) framework that contains independent services capable of running												

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B. Accomplishments/Planned Programs (\$ in Millions)										FY 2012	FY 2013	FY 2014
simultaneously on the mobile device passing data to authorized MCC application components also residing on the same mobile device. Includes International Travel Medicine requirements within MSAT.												
Accomplishments/Planned Programs Subtotals										0.000	0.000	35.463
C. Other Program Funding Summary (\$ in Millions)												
Line Item	FY 2012	FY 2013	FY 2014 Base	FY 2014 OCO	FY 2014 Total	FY 2015	FY 2016	FY 2017	FY 2018	Cost To Complete	Total Cost	
• BA-1, 0807793HP: <i>MHS Tri-Service Information</i>	0.000	0.000	55.407		55.407	61.612	65.309	67.142	69.056	Continuing	Continuing	
• BA-3, 0807721HP: <i>Replacement/Modernization</i>	0.000	0.000	2.425		2.425	2.550	2.593	2.637	2.682	Continuing	Continuing	
Remarks												
D. Acquisition Strategy												
Evaluate and use the most appropriate business, technical, contract and support strategies and acquisition approach to minimize costs, reduce program risks, and remain within schedule while meeting program objectives. Strategy is revised as required as a result of periodic program reviews or major decisions.												
E. Performance Metrics												
Each program establishes performance measurements which are usually included in the MHS IT Annual Performance Plan. Program cost, schedule and performance are measured periodically using a systematic approach. The results of these measurements are presented to management on a regular basis in various as part of the Integrated Product and Process Development (IPPD) process, In Process Reviews (IPRs), or other reviews to determine program effectiveness and provide new direction as needed to ensure the efficient use of resources. Performance metrics for specific projects may be viewed at the OMB Federal IT Dashboard website.												