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**Exhibit R-2, RDT&E Budget Item Justification:** PB 2016 Defense Health Program **Date:** February 2015

<b>Appropriation/Budget Activity</b> 0130: Defense Health Program I BA 2: RDT&E	<b>R-1 Program Element (Number/Name)</b> PE 0605025HP I Theater Medical Information Program - Joint (TMIP-J)
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COST (\$ in Millions)	Prior Years	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	FY 2017	FY 2018	FY 2019	FY 2020	Cost To Complete	Total Cost
Total Program Element	0.000	23.783	22.042	22.100	-	22.100	22.140	22.180	22.619	23.071	Continuing	Continuing
445A: Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)	0.000	23.783	22.042	-	-	-	-	-	-	-	Continuing	Continuing
445B: Operational Medicine Support	0.000	-	-	22.100	-	22.100	22.140	22.180	22.619	23.071	Continuing	Continuing

**Program MDAP/MAIS Code:**  
**Project MDAP/MAIS Code(s):** M07

**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.

Operational Medicine Support (OpMedSpt): Due to the unique nature of the operational environment, the Military Health System must modernize the following capabilities: medical command and control (MC2); medical situational awareness (MSA) (aggregation of operational medical data at a classified level, denying the enemy access to data which could reveal operational plans); Defense blood management; assemblage management; and data interoperability with the pending EHR solution and operational allies. The clinical needs of the operational community are to be met by the pending EHR solution, but there are functional needs, outside the capture of clinical data, to inform decision making regarding the ability of the MHS to meet the needs of the medically ready force, to support the joint warfighter and share data with line systems. It will support mission delivery and execution through the maximization of information technologies, driving standards compliance to ensure non-EHR capabilities will effectively consume the data created through the use of the pending EHR solution in the operational environment, and to allow the solution to share data with these other capabilities, eliminating the need for one to one interfaces, their limitations and cost. Along with the need to modernize those non-clinical capabilities, this enterprise's risk mitigation strategy also supports ongoing missions and clinical needs in the operational environment until sufficient testing of pending solutions can be accomplished in environments indicative of the operational environments, tactical, mobile and dismounted. TMIP-J (MSAT, TMDS, DCAM, TRAC2ES,

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<b>Appropriation/Budget Activity</b> 0130: <i>Defense Health Program I BA 2: RDT&amp;E</i>	<b>R-1 Program Element (Number/Name)</b> PE 0605025HP / <i>Theater Medical Information Program - Joint (TMIP-J)</i>
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AHLTA-T, MCC (formerly AHLTA-Mobile), Single Sign On, MMM, SAMS, and TC2) is the “umbrella” system for these solutions and the functional capabilities they support and achieves Full Operational Capability (FOC) in FY15. While the modernization of the operational environment clinical solutions (AHLTA-T, MCC (AHLTA-Mobile) and TC2) is planned to take place under the auspices of the pending EHR solution, there is currently no such plan for the non-EHR capability modernization activities. The Operational Medicine project was created to ensure the MHS is able to meet the needs of the joint warfighter, line and higher level headquarters for MC2, MSA, Defense blood management and assemblage management.

<b>B. Program Change Summary (\$ in Millions)</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>FY 2016 Base</b>	<b>FY 2016 OCO</b>	<b>FY 2016 Total</b>
Previous President's Budget	35.463	22.042	22.100	-	22.100
Current President's Budget	23.783	22.042	22.100	-	22.100
Total Adjustments	-11.680	-	-	-	-
• Congressional General Reductions	-	-			
• Congressional Directed Reductions	-	-			
• Congressional Rescissions	-	-			
• Congressional Adds	-	-			
• Congressional Directed Transfers	-	-			
• Reprogrammings	-7.791	-			
• SBIR/STTR Transfer	-3.889	-			

**Change Summary Explanation**

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).

FY 2014: Realignment from Defense Health Program, Research, Development, Test and Evaluation (DHP RDT&E), PE 0605025-Theater Medical Information Program – Joint (TMIP-J) (-\$3.889 million) to DHP RDT&E PE 0605502-Small Business Innovation Research (SBIR) Program (+\$3.889 million).

FY 2014: OMNIBUS Prior Approval Reprogramming (FY 14-11 PA) from Defense Health Program, Research, Development, Test and Evaluation (DHP RDT&E), PE 0605025-Theater Medical Information Program – Joint (TMIP-J) (-\$7.791 million) to DHP Procurement, PE 0807721/R&M CoPath Plus (+\$7.791 million).

FY 2016: No Change.

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Exhibit R-2A, RDT&E Project Justification: PB 2016 Defense Health Program										Date: February 2015		
Appropriation/Budget Activity 0130 / 2					R-1 Program Element (Number/Name) PE 0605025HP / Theater Medical Information Program - Joint (TMIP-J)				Project (Number/Name) 445A / Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)			
COST (\$ in Millions)	Prior Years	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	FY 2017	FY 2018	FY 2019	FY 2020	Cost To Complete	Total Cost
445A: Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)	-	23.783	22.042	-	-	-	-	-	-	-	Continuing	Continuing
Project MDAP/MAIS Code: M07												
A. Mission Description and Budget Item Justification												
<p>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.</p> <p>TMIP-J RDT&amp;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.</p>												
B. Accomplishments/Planned Programs (\$ in Millions)									FY 2014	FY 2015	FY 2016	
Title: Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)									23.783	22.042	-	
Description: Complete Increment 2 Release 2 (I2 R2) and Increment 2 Release 3 (I2 R3) development/integration and conduct operational testing/operational assessment.												
FY 2014 Accomplishments:												
Completed Increment 2 Release 2 (I2 R2) and Increment 2 Release 3 (I2 R3) development/integration and conduct operational testing/operational assessment.												
Completed testing and release to the Service Infrastructure Program Offices I2 R2 Service Packs that will include AHLTA-Theater first release of the Aeromedical Evacuation capability, TMIP Composite Health Care System Cache (TC2) updates.												

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<b>Exhibit R-2A, RDT&amp;E Project Justification:</b> PB 2016 Defense Health Program								<b>Date:</b> February 2015			
<b>Appropriation/Budget Activity</b> 0130 / 2				<b>R-1 Program Element (Number/Name)</b> PE 0605025HP / Theater Medical Information Program - Joint (TMIP-J)				<b>Project (Number/Name)</b> 445A / Theater Medical Information Program - Joint (TMIP-J) (Tri-Service)			
<b>B. Accomplishments/Planned Programs (\$ in Millions)</b>								<b>FY 2014</b>	<b>FY 2015</b>	<b>FY 2016</b>	
<p>Completed development and integration of I2 R3 that will include International Classification of Diseases (ICD-10) for TMIP-J, a modernization of the TMIP Framework, Mobile Computing Capability (MCC) and enhancements to the TC2 graphical user interface released in I2 R2.</p> <p><b>FY 2015 Plans:</b> Completed system integration and testing for Increment 2 Release 3 (I2R3) and held a successful I2R3 Test Readiness Review in First Quarter of FY 2015.</p> <p><b>FY 2016 Plans:</b> No funding programmed.</p>											
<b>Accomplishments/Planned Programs Subtotals</b>								23.783	22.042	-	
<b>C. Other Program Funding Summary (\$ in Millions)</b>											
<u>Line Item</u>	<u>FY 2014</u>	<u>FY 2015</u>	<u>FY 2016</u> <u>Base</u>	<u>FY 2016</u> <u>OCO</u>	<u>FY 2016</u> <u>Total</u>	<u>FY 2017</u>	<u>FY 2018</u>	<u>FY 2019</u>	<u>FY 2020</u>	<u>Cost To</u> <u>Complete</u>	<u>Total Cost</u>
• BA-1, 0807793HP: MHS Tri-Service Information	44.581	54.496	55.731	-	55.731	57.530	59.316	60.442	61.651	Continuing	Continuing
• BA-3, 0807721HP: Replacement/Modernization	4.838	-	-	-	-	-	-	-	-	Continuing	Continuing
• BA-3, 0807744HP: Theater Medical Information Program - Joint (TMIP-J)	-	3.145	-	-	-	-	-	-	-	Continuing	Continuing
<b>Remarks</b>											
<b>D. Acquisition Strategy</b>											
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.											
<b>E. Performance Metrics</b>											
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.											

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Appropriation/Budget Activity 0130 / 2					R-1 Program Element (Number/Name) PE 0605025HP / Theater Medical Information Program - Joint (TMIP-J)				Project (Number/Name) 445B / Operational Medicine Support			
COST (\$ in Millions)	Prior Years	FY 2014	FY 2015	FY 2016 Base	FY 2016 OCO	FY 2016 Total	FY 2017	FY 2018	FY 2019	FY 2020	Cost To Complete	Total Cost
445B: Operational Medicine Support	-	-	-	22.100	-	22.100	22.140	22.180	22.619	23.071	Continuing	Continuing
A. Mission Description and Budget Item Justification												
This initiative supports executive directives and legal mandates to ensure "...every Soldier, Sailor, Airman and Marine will have a comprehensive, life-long medical record..."(Source: Special report of the Presidential Advisory Committee on Gulf War Veterans' Illness, 1997) and "The Secretary of Defense shall establish a system to assess the medical condition of members of the Armed Forces...who are deployed" (Source: Title 10; Section 1074f (1997): Medical tracking system for members deployed overseas). It also supports the June 21, 2013 acquisition decision memorandum from the Undersecretary of Defense for Acquisition, Technology and Logistics to "...focus on the goal of acquiring a replacement for the DoD legacy Military Health System (MHS) clinical systems including but not limited to...the EHR component of the Theater Medical Information Program with the objective of fielding a modernized replacement by 2017."												
B. Accomplishments/Planned Programs (\$ in Millions)									FY 2014	FY 2015	FY 2016	
Title: Operational Medicine Support									-	-	22.100	
Description: It will support mission delivery and execution through the maximization of information technologies, driving standards compliance to ensure non-EHR capabilities will effectively consume the data created through the use of the pending EHR solution in the operational environment, and to allow the solution to share data with these other capabilities, eliminating the need for one to one interfaces, their limitations and cost. Along with the need to modernize those non-clinical capabilities, this enterprise's risk mitigation strategy also supports ongoing missions and clinical needs in the operational environment until sufficient testing of pending solutions can be accomplished in environments indicative of the operational environments, tactical, mobile and dismounted. TMIP-J (MSAT, TMDS, DCAM, TRAC2ES, AHLTA-T, MCC (formerly AHLTA-Mobile), Single Sign On, MMM, SAMS, and TC2) is the "umbrella" system for these solutions and the functional capabilities they support and achieves Full Operational Capability (FOC) in FY15. While the modernization of the operational environment clinical solutions (AHLTA-T, MCC (AHLTA-Mobile) and TC2) is planned to take place under the auspices of the pending EHR solution, there is currently no such plan for the non-EHR capability modernization activities. The Operational Medicine project was created to ensure the MHS is able to meet the needs of the joint warfighter, line and higher level headquarters for MC2, MSA, Defense blood management and assemblage management.												
FY 2014 Accomplishments: Not applicable. This initiative was previously reported under TMIP-J funding profile but is being pulled out separately for the FY 2016 budget submission for transparency. Funding for this initiative begins in FY 2016.												
FY 2015 Plans:												

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<b>Appropriation/Budget Activity</b> 0130 / 2	<b>R-1 Program Element (Number/Name)</b> PE 0605025HP / Theater Medical Information Program - Joint (TMIP-J)	<b>Project (Number/Name)</b> 445B / Operational Medicine Support	
<b>B. Accomplishments/Planned Programs (\$ in Millions)</b>		<b>FY 2014</b>	<b>FY 2015</b>
Not applicable. This initiative was previously reported under TMIP-J funding profile but is being pulled out separately for the FY 2016 budget submission for transparency. Funding for this initiative begins in FY 2016.			
<b>FY 2016 Plans:</b> Modernize the following capabilities: medical command and control (MC2); medical situational awareness (MSA) (aggregation of operational medical data at a classified level, denying the enemy access to data which could reveal operational plans); Defense blood management; assemblage management; and data interoperability with the pending EHR solution and operational allies. While the clinical needs of the operational community are to be met by the future EHR solution, there are functional needs, outside the capture of clinical data, to inform decision making regarding the ability of the MHS to meet the needs of the medically ready force, to support the joint warfighter and share data with line systems.			
<b>Accomplishments/Planned Programs Subtotals</b>		-	22.100
<b>C. Other Program Funding Summary (\$ in Millions)</b>			
<b>Line Item</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>FY 2016 Base</b>
• BA-3, 0807744HP: Theater Medical Information Program - Joint (TMIP-J)	-	-	1.494
			<b>FY 2016 OCO</b>
			-
			<b>FY 2016 Total</b>
			1.494
			<b>FY 2017</b>
			2.413
			<b>FY 2018</b>
			2.689
			<b>FY 2019</b>
			2.850
			<b>FY 2020</b>
			2.907
			<b>Cost To Complete</b>
			Continuing
			<b>Total Cost</b>
			Continuing
<b>Remarks</b>			
<b>D. Acquisition Strategy</b>			
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.			
<b>E. Performance Metrics</b>			
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.			