Exhibit R-2, RDT&E Budget Item Justification: FY 2018 Defense Health Agency											Date: May 2017	
Appropriation/Budget Activity 0130: *Defense Health Program I* BA 2: *RDT&E*					**R-1 Program Element (Number/Name)** PE 0605045DHA *I Joint Operational Medicine Information System (JOMIS)*							
COST ($ in Millions)	**Prior Years**	**FY 2016**	**FY 2017**	**FY 2018 Base**	**FY 2018 OCO**	**FY 2018 Total**	**FY 2019**	**FY 2020**	**FY 2021**	**FY 2022**	**Cost To Complete**	**Total Cost**
Total Program Element	0.000	42.005	22.140	87.511	-	87.511	22.619	23.071	23.532	24.003	Continuing	Continuing
447A: *Joint Operational Medicine Information System (JOMIS)*	0.000	42.005	22.140	87.511	-	87.511	22.619	23.071	23.532	24.003	Continuing	Continuing

Program MDAP/MAIS Code: 521

A. Mission Description and Budget Item Justification

The JOMIS Program will modernize, deploy, and sustain the DoD's operational medicine information systems using MHS GENESIS, while developing and fielding new theater capabilities that enable comprehensive health services to meet Warfighter requirements for military medical operations. JOMIS - MHS GENESIS is intended to function in constrained, intermittent, and non-existent communications environments while providing access to authoritative sources of clinical data. The JOMIS Program is declared Joint Interest for capability requirements to be executed under the Joint Capabilities Integration and Development System (JCIDS), with oversight by the Joint Staff J8 (Force Structure, Resources and Assessments) and the Joint Requirements Oversight Council (JROC).

The JOMIS Increment 1 Program is planned to deliver the MHS GENESIS Electronic Health Record (EHR) to meet the healthcare and dental documentation requirements validated by the JCIDS approved Theater Medical Information Requirements (TMIR) Capabilities Development Document (CDD) signed February 28, 2017. JOMIS Increment 1 is planned to deliver MHS GENESIS to replace/retire the legacy AHLTA-T and TC2 systems (under TMIP-J). The JOMIS Increment 1 Program is pre-Milestone B.

B. Program Change Summary ($ in Millions)

	FY 2016	FY 2017	FY 2018 Base	FY 2018 OCO	FY 2018 Total
Previous President's Budget	0.000	22.140	22.180	-	22.180
Current President's Budget	42.005	22.140	87.511	-	87.511
Total Adjustments	42.005	0.000	65.331	-	65.331
• Congressional General Reductions	-	-			
• Congressional Directed Reductions	-	-			
• Congressional Rescissions	-	-			
• Congressional Adds	-	-			
• Congressional Directed Transfers	-	-			
• Reprogrammings	42.005	-			
• SBIR/STTR Transfer	-	-			
• Departmental Decision	0.000	0.000	65.331	-	65.331

Change Summary Explanation
FY 2016: Reprogramming from DHMSM to JOMIS.

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FY 2017: No change.

FY 2018: Reprogramming from JOMIS PROC to JOMIS RDT&E.

Exhibit R-2A, RDT&E Project Justification: FY 2018 Defense Health Agency		Date: May 2017

Appropriation/Budget Activity 0130 I 2	R-1 Program Element (Number/Name) PE 0605045DHA I *Joint Operational Medicine Information System (JOMIS)*	Project (Number/Name) 447A I *Joint Operational Medicine Information System (JOMIS)*

COST ($ in Millions)	Prior Years	FY 2016	FY 2017	FY 2018 Base	FY 2018 OCO	FY 2018 Total	FY 2019	FY 2020	FY 2021	FY 2022	Cost To Complete	Total Cost
447A: *Joint Operational Medicine Information System (JOMIS)*	0.000	42.005	22.140	87.511	-	87.511	22.619	23.071	23.532	24.003	Continuing	Continuing

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B. Accomplishments/Planned Programs ($ in Millions)	FY 2016	FY 2017	FY 2018
Title: Joint Operational Medicine Information System (JOMIS)	42.005	22.140	87.511

Description: Goals of the JOMIS program include: meet existing and emerging operational medicine requirements in the theater, fully leverage the EHR solution configuration for care in theater, and provide two-way information flow between garrison and theater. Benefits of this program include the delivery of uniform clinical information across both garrison and theater environments through the use of an enterprise-level EHR system, enhancements to the clinical care and information captured at all levels of care in operational environments, transmission of critical information to the combatant commander, the evacuation chain for combat and non-combat casualties, and full interoperability of the theater data with the complete longitudinal health record for delivery to the sustaining base and the Department of Veterans Affairs.

FY 2016 Accomplishments:
In conjunction with funding programmed under Operational Medicine Support Initiative in Program Element 0605025DHA, the start up of JOMIS is pending. So far, accomplishments include: DHMSM EHR (MHS Genesis) Product Evaluation in support of JOMIS Increment 1, the stand-up of the Operational Medicine Government Approved Lab Testing Facility, and the initiation of Test Risk Reduction and Integration activities using the MHS Genesis Product at the Testing Facility.

FY 2017 Plans:

Exhibit R-2A, RDT&E Project Justification: FY 2018 Defense Health Agency		Date: May 2017
Appropriation/Budget Activity 0130 *I* 2	**R-1 Program Element (Number/Name)** PE 0605045DHA *I Joint Operational Medicine Information System (JOMIS)*	**Project (Number/Name)** 447A *I Joint Operational Medicine Information System (JOMIS)*

B. Accomplishments/Planned Programs ($ in Millions)	FY 2016	FY 2017	FY 2018
In continuation with FY16 and in conjunction with the Operational Medicine Support Initiative in PE 0506025DHA, FY17 plans include: establishing Operational Medicine Government Approved Lab (OM GAL) and began early engineering analysis activities for Increment 1, developing draft enterprise architecture products for JOMIS Increment 1, cybersecurity planning for Increment 1, establishing accreditation boundary and RMF requirements; establish Joint Cyber WIPT for JOMIS Increment 1, executing the engagement plan with Services and Combatant Commands for the development of the Training & Deployment Plan and early user adoption analysis activities, developing draft Increment 1 TEMP document, initiating Development Evaluation Framework (DEF), nominating JITC as the Lead Operational Test Agency, and establishing the Joint Testing WIPT with participation from JITC and Service OTAs. Plans also include supporting the development of the Information Systems (IS) Capability Development Document (CDD) for Theater Medical Information Requirements (TMIR). Approval from the Received Joint Requirements Oversight Council (JROC) was received in February 2017. *FY 2018 Plans:* In Fy18, plans include continuing the development of acquisition plans & documents to support a "MS B like" event, establishing the cost, performance and schedule baseline for Increment 1. This requires the planning and execution of technology maturation including piloting theater unique capabilities for healthcare delivery; conducting risk reduction activities including systems engineering trade-offs and early analysis activities for the performance of the MHS GENESIS product on tactical hardware and infrastructure in the Operational Medicine Test Lab, Ft Detrick; developing and receiving approval of a Joint Test Management & Evaluation Plan (TEMP) for the execution of development test, operational test and cyber security testing in conjunction with the Services; and initiating Development Test (DT) in Operational Medicine Test Lab, Ft Detrick (dependent of receipt of MHS GENESIS configuration from the DHMSM Program in NLT 2QFY18).			
Accomplishments/Planned Programs Subtotals	42.005	22.140	87.511

C. Other Program Funding Summary ($ in Millions)

Line Item	FY 2016	FY 2017	FY 2018 Base	FY 2018 OCO	FY 2018 Total	FY 2019	FY 2020	FY 2021	FY 2022	Cost To Complete	Total Cost
• BA1 0807746DHA: *JOMIS*	0.200	11.136	13.545	-	13.545	31.549	36.216	42.651	43.415	Continuing	Continuing
• BA3 0807746DHA: *JOMIS*	0.000	2.413	8.326	-	8.326	75.688	75.150	73.605	75.077	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.

Exhibit R-2A, **RDT&E Project Justification:** FY 2018 Defense Health Agency		**Date:** May 2017
Appropriation/Budget Activity 0130 *I* 2	**R-1 Program Element (Number/Name)** PE 0605045DHA *I Joint Operational Medicine Information System (JOMIS)*	**Project (Number/Name)** 447A *I Joint Operational Medicine Information System (JOMIS)*

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.