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Exhibit R-2, RDT&E Budget Item Justification: PB 2020 Defense Health Agency **Date:** February 2019

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 2018	FY 2019	FY 2020 Base	FY 2020 OCO	FY 2020 Total	FY 2021	FY 2022	FY 2023	FY 2024	Cost To Complete	Total Cost
Total Program Element	62.914	65.047	78.136	59.902	-	59.902	49.260	50.199	48.436	0.000	Continuing	Continuing
447A: Joint Operational Medicine Information System (JOMIS)	62.914	65.047	78.136	59.902	-	59.902	49.260	50.199	48.436	0.000	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 2018	FY 2019	FY 2020 Base	FY 2020 OCO	FY 2020 Total
Previous President's Budget	87.511	78.136	59.902	-	59.902
Current President's Budget	65.047	78.136	59.902	-	59.902
Total Adjustments	-21.483	0.000	0.000	-	0.000
• Congressional General Reductions	-	-	-	-	-
• Congressional Directed Reductions	-	-	-	-	-
• Congressional Rescissions	-20.000	-	-	-	-
• Congressional Adds	-	-	-	-	-
• Congressional Directed Transfers	-	-	-	-	-
• Reprogrammings	-	-	-	-	-
• SBIR/STTR Transfer	-2.464	-	-	-	-
• Navy Medical IT add to JOMIS	0.981	-	-	-	-

Change Summary Explanation

Increase to the JOMIS, RDT&E, Project Code 0605045 will primarily fund the integration of MHS GENESIS with the legacy TMIP-J components not replaced by MHS GENESIS, system test and evaluation activities, and supporting systems engineering/program management

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Exhibit R-2A, RDT&E Project Justification: PB 2020 Defense Health Agency										Date: February 2019		
Appropriation/Budget Activity 0130 / 2					R-1 Program Element (Number/Name) PE 0605045DHA / Joint Operational Medicine Information System (JOMIS)				Project (Number/Name) 447A / Joint Operational Medicine Information System (JOMIS)			
COST (\$ in Millions)	Prior Years	FY 2018	FY 2019	FY 2020 Base	FY 2020 OCO	FY 2020 Total	FY 2021	FY 2022	FY 2023	FY 2024	Cost To Complete	Total Cost
447A: Joint Operational Medicine Information System (JOMIS)	62.914	65.047	78.136	59.902	-	59.902	49.260	50.199	48.436	0.000	Continuing	Continuing

A. Mission Description and Budget Item Justification

The purpose of the Department of Defense (DoD) Joint Operational Medicine Information Systems (JOMIS) Program is to modernize, deploy, and sustain the DoD’s operational medicine information systems using MHS GENESIS Electronic Health Record (EHR), while developing and fielding new theater capabilities that enable comprehensive health services to meet Warfighter requirements for military medical operations. JOMIS 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) and the oversight of the Joint Requirements Oversight Council (JROC).

The goals of the JOMIS Increment 1 Program are to:

- Meet existing and emerging operational medicine requirements in the theater
- Fully leverage MHS GENESIS for medical care in Theater
- Provide two way information flow between garrison and theater environments in support of a longitudinal health record

Anticipated benefits of the JOMIS Increment 1 Program include:

- Delivery of uniform clinical information across both garrison and theater environments through the use of MHS GENESIS EHR
- Enhancements to the clinical care and information captured at all levels of care in tactical environments
- Transmission of critical information to the combatant commander, the evacuation chain for combat and non-combat casualties

B. Accomplishments/Planned Programs (\$ in Millions)	FY 2018	FY 2019	FY 2020
Title: Joint Operational Medicine Information System (JOMIS)	65.047	78.136	59.902
Description: Specific contribution to mission delivery: JOMIS Increment 1 Program will serve as the primary tactical system to meet the needs of the Warfighter by enabling the provision of coordinated healthcare services. MHS GENESIS is planned to provide for key capabilities in Healthcare Services & Documentation (including Blood Management and Dental Services and Documentation. The JOMIS Increment 1 Program will also integrate MHS GENESIS for interoperability with existing Theater system capabilities for Medical Logistics, Patient Movement and Evacuation, Medical Situational Awareness and Medical Command & Control.			
FY 2019 Plans: FY19 RDT&E:			

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Appropriation/Budget Activity 0130 / 2	R-1 Program Element (Number/Name) PE 0605045DHA / <i>Joint Operational Medicine Information System (JOMIS)</i>	Project (Number/Name) 447A / <i>Joint Operational Medicine Information System (JOMIS)</i>	
B. Accomplishments/Planned Programs (\$ in Millions)		FY 2018	FY 2019
<ul style="list-style-type: none"> - Continue software development, configuration, and other activities related to Military Health Systems (MHS) Genesis and Theater Medical Information Program-Joint (TMIP-J) Gold Disk integration. - Conduct cybersecurity requirements (Initial Authority to Test (IATT), Red Team Assessments, Authority to Operate (ATO), and annual reviews). - Support Department of Defense Healthcare Management System Modernization (DHMSM) Program Management Office (PMO) for Contractor Testing and Development Test (DT) of MHS Genesis Gold Disk. <p>FY19 O&M:</p> <ul style="list-style-type: none"> - Continue support of Program Management Office (PMO). - Continue program management support from the Air Force, Army, Marine Corps, and Navy. - Continue operation and maintenance of Operational Medicine (OM) Government Approved Laboratory (GAL) Testing Facility. - Continue sustainment activities for all TMIP-J legacy systems prior to delivery of JOMIS. <p>FY 2020 Plans:</p> <p>FY 20 RDT&E:</p> <ul style="list-style-type: none"> - Continue software development, configuration, and other activities related to Military Health Systems (MHS) Genesis and Theater Medical Information Program-Joint (TMIP-J) Gold Disk integration. - Begin Developmental Test (DT) activities. - Support Department of Defense Healthcare Management System Modernization (DHMSM) Program Management Office (PMO) for Contractor Testing and DT of MHS Genesis Gold Disk. - Continue OM GAL efforts to support planning activities, user readiness, user training, and change management activities for the Initial Operating Capability (IOC) sites. - Continue engineering and program management support from the Air Force, Army, Marine Corps, and Navy. <p>FY20 Procurement:</p> <ul style="list-style-type: none"> - Support Operational Medicine (OM) Government Approved Laboratory (GAL) infrastructure: Software (SW) maintenance, hardware (HW) procurement/refresh/maintenance; includes additional operational medicine (OpMed) Mobile & Theater Blood requirements. <p>FY20 O&M:</p> <ul style="list-style-type: none"> - Prepare analyses and acquisition documentation in support of Test and Evaluation Authority to Proceed (ATP) Milestone Event. - Continue decomposition into Requirements Definition Package (RDP) to inform JOMIS Increment 1 and the delivery of future increments capability. - Continue support of Program Management Office (PMO). 			

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B. Accomplishments/Planned Programs (\$ in Millions)		FY 2018	FY 2019
<ul style="list-style-type: none"> - Operate and maintain OM GAL Testing Facility. - Fund sustainment of TMIP-J legacy systems prior to delivery of JOMIS. - Continue engineering and program management support from the Air Force, Army, Marine Corps, and Navy. 			
FY 2019 to FY 2020 Increase/Decrease Statement: Reflects the program's updated strategy and timeline.			
Accomplishments/Planned Programs Subtotals		65.047	78.136
C. Other Program Funding Summary (\$ in Millions) N/A			
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.			