



MHS GENESIS DEPLOYMENT IS FULL STEAM AHEAD

Despite challenges wrought by the pandemic, Wave NELLIS successfully launched MHS GENESIS Saturday, September 26 across 10 sites in California and Nevada. Positive feedback to date includes news from the Marine Corps, which saw an opportunity to use MHS GENESIS to administer flu vaccines. It was an ideal opportunity to test the new EHR's mass immunization process. MHS GENESIS enabled quick and easy completion of immunization appointments.

Wave NELLIS included delivery of new telehealth capabilities, including tele-ICU support at Nellis AFB. The success of this capability is directly attributable to the DOD-VA partnership, which now allows VA clinicians based in Minnesota to provide tele-ICU support to patients at Nellis AFB. Additional virtual health capabilities will be delivered across the Military Health System in early 2021.

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PEO DHMS WELCOMES DATA SERVICES PROGRAM

PEO DHMS adopted its newest program this summer, EIDS. The program transferred to PEO DHMS from DHA's J-6/CIO SDD. The EIDS mission is to support the strategic goals of the MHS and facilitate informed decision-making through the delivery of information services and data in a timely, relevant and actionable manner. The program embraces simplified data access techniques and delivers first-class data platforms for advanced analytics.

DOD maintains one of the most robust longitudinal health data records in existence. In order to better leverage this data for improved patient outcomes, smoother business operations and proper planning for the future, EIDS recently completed a game-changing project. They migrated vital data and applications to a single, authoritative data source in the cloud. Now that the data is consolidated, they are working to provide data mapping of all information in order to enable better data analytics and more reliable discovery. A project of this magnitude normally requires a minimum of 18-months, but EIDS completed the data migration in just 93 calendar days, a remarkable triumph hailed by many in the health data industry.

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The USCG deployed MHS GENESIS to four pilot sites in late August. Their successful deployment is a major milestone in building a single, common EHR across the three federal departments. Click [here](#) to read more.

EIDS WINS G2XCHANGE DISRUPTIVE TECH AWARD



The EIDS program office was awarded the 2020 Fed Health IT Disruptive Tech Award for providing positive disruption to support the mission of the DOD and federal government.



MESSAGE FROM THE ACTING PROGRAM EXECUTIVE OFFICER



Welcome to the autumn issue of the PEO DHMS newsletter. I am thrilled to return as the acting program executive officer and look forward to continued work with the FEHRM program as we deliver the single, common record to our service members, veterans and their families.

Please join me in celebrating the USCG's first MHS GENESIS deployment. Their first four sites went live Saturday, August 29, making the new EHR a truly federal record. Despite the challenges of COVID-19 in 2020, our DHMSM® program office and its USCG counterparts demonstrated an unwavering commitment to the goal of a successful MHS GENESIS Go-Live.

Just one year out from Wave TRAVIS, our team continues delivering new, robust capabilities to the MHS. Our latest block release on Monday, August 7, included much-anticipated capabilities, including referral management and dental module improvements. This monumental upgrade aligns with the continuous capability delivery model, rather than waiting for a tech refresh cycle to bring new capabilities to sites already operating on the new EHR.

"Our partnership with VA remains strong as we work together to ensure the overall success of the single, common, federal EHR."

HOLLY JOERS, ACTING PROGRAM EXECUTIVE OFFICER, PEO DHMS

We recently deployed MHS GENESIS to Wave NELLIS sites on Saturday, September 26, and will soon complete another major deployment in the coming months. Our partnership with the VA remains strong as we work together to ensure the overall success of the single, common, federal EHR.

As you saw on page 1, FedHealthIT named our EIDS team as the recipients of the Disruptive Tech award! Their work to improve how we harness data and augment our clinical and business intelligence will transform the way we do business across the MHS.

I appreciate your engagement in PEO DHMS programs and look forward to continued work with you.

— Holly S. Joers, Acting Program Executive Officer, PEO DHMS

MHS GENESIS DEPLOYMENT IS FULL STEAM AHEAD

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With each successive Wave deployment, the MHS GENESIS team refines and improves the overall deployment process. While it is still early days, all signs point to Wave NELLIS resulting in a smoother transition and faster return to normal operational tempo. The team hopes to see the trend continue next month through Wave PENDLETON.

DHMSM deployed Capability Block 3 in August, their most ambitious upgrade to date. The delivery included an integrated speech recognition solution that provides a consistent, personalized approach to clinical documentation. Block 3 also included a clinical decision support tool that helps providers make the most appropriate treatment decisions to reduce patient radiation exposure and cost. Other features include new and improved user-facing dental functionalities, streamlined referral processing and reporting, and updates to support the VA's delivery of the new EHR. In addition, the block enabled the ability to schedule appointments by location, search across multiple locations and schedule multiple appointments at once within multiple locations.

MHS GENESIS is currently live and operational across 18 sites, including MTFs and reserve component locations. The new EHR enables positive clinical benefits through improved efficiencies for clinicians and providers at these facilities. Patient health and safety is the highest priority. Deploying a single, common, federal EHR across the DOD, VA and USCG health systems will enable more efficient, safe, highly reliable patient-centered care across three federal departments.

PEO DHMS WELCOMES DATA SERVICES PROGRAM

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Migrating the population health data to the cloud is only a building block. According to Chris Nichols, EIDS program manager, "The program is already on phase 2, integrating and partnering with clinicians in the field to drive impactful change as well as cleaning up the data to make it more useful." He remarked in a recent interview, "This project is the beginning of us developing a proper dictionary for data. It's also the beginning of our ability to understand the data sources and fully leverage them to impact effective and efficient research along with data analytics that benefit patients and business management. We've laid the groundwork for deep insights and unimagined positive outcomes for patients, providers and researchers within DOD and potentially around the world."

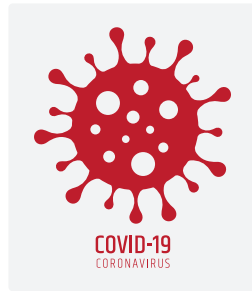
PEO DHMS is excited to expand its services to transform the delivery of healthcare for service members, veterans and their families as well as other federal partners. Enhanced data analytic capabilities will directly impact care by supporting the future of federal health data management and sharing. It is the first major step toward the creation of a federal digital health hub, ensuring the highest levels of sustainability and reliability.



MHS COVID-19 RESPONSE CONTINUES

Operational Medicine

MHS is more in demand than ever as the national fight against COVID-19 continues. To support the pandemic response, PEO DHMS' JOMIS program office released the initial version of its MedCOP capability in June. The new capability provides leaders, spanning from tactical to strategic levels, with advanced decision-support tools, real-time medical information sharing, and a shared medical dashboard, enabling them to manage enterprise-wide health services that support the full range of military operations. The ability to see this real-time, actionable data is what's known as MedC2 and MedSA. MedC2 supports commanders' decision-making ability to regulate medical forces and functions while MedSA supports senior medical leaders with visibility relating to people, supplies and equipment. Although MedCOP has similar capabilities to MSAT, it provides additional MedC2 and MedSA support not offered via MSAT. MedCOP also enables leaders to better manage resources across the DOD and United States throughout the pandemic. This fall, JOMIS will release an unclassified MedCOP version (known as MedCOP Low) to provide the DOD with improved COVID-19 reporting at domestic sites and immediate MedSA support. JOMIS will release the full classified version (MedCOP High) globally later this year and deploy it across the combatant commands.



Together, within two weeks, the teams developed and trained users for the MHS Population Health Portal, a tool used to identify COVID-19 patients at Blood Donor Centers and MTFs and to request patients consider donating their plasma.

Telehealth

To support DOD's COVID-19 response, DHMSM provided medical devices and equipment to selected sites and implemented 47 MHS GENESIS configuration changes, including:

- creating virtual ambulatory clinic locations to support and track COVID-19 activities at all MHS GENESIS sites;
- implementing electronic visits through the MHS GENESIS Patient Portal, allowing patients to submit electronic-based questionnaires in lieu of in-person clinic visits; and
- configuring the portal to share COVID-19 lab results.

MHS GENESIS and MedCOP improve the delivery of care for all patients, including those fighting the coronavirus. PEO DHMS will continue to support the MHS' COVID-19 response by deploying new capabilities to support MHS GENESIS users as well as the operational medicine community.

Convalescent Plasma

As an essential resource in treating critically ill patients, DOD is well on its way to meet its goal to collect 10,000 units of COVID-19 convalescent plasma to support the development of an effective treatment against the coronavirus by fall 2020. This effort extends to several teams throughout the DHA and MHS. In collaboration with the DHA Health Care Operations team and the Strategy and Analytics team, the EIDS program office assisted in writing MTF guidance.



JOMIS DEVELOPS NEW THEATER BLOOD APPLICATION

Development of a Theater Blood prototype application for use in no- and low-communications environments is underway. JOMIS is working closely with the [Armed Services Blood Program Office](#) and other members of the blood community to develop this capability. JOMIS anticipates rapid development using many of the same agile methods and sprint cycles employed to develop MedCOP. The prototype will specifically focus on donor management, inventory management and transfusion.





DMIX EXPANDS USER COMMUNITY AND CREATES STAND-ALONE JLV WEB ACCESS

DOD's JLV can now display patient health records from more than 200 community partner organizations through the joint health information exchange, thus improving access to patient medical histories. Adding more community partners provides better breadth in a patient's health history, delivering important information for providers. JLV now possesses a stand-alone web access capability for MHS GENESIS users. This feature will ensure providers can always access critical patient information. While all MHS GENESIS users have access to JLV from within MHS GENESIS, MTFs are encouraged to provision staff with access to this stand-alone capability. For details on setting up accounts for your MTF, visit the [DMIX page](#) on milSuite.



TRAINING RESOURCES AND CONTACT INFORMATION

Find training resources, points of contact and more through the details in this section.



MHS GENESIS

Visit the [MHS GENESIS Training page](#) on milSuite

Approximately four to five months prior to Go-Live at your site, you will receive an email detailing your CBT assigned courses, including a link to JKO where you will enroll in these courses. Following completion of your CBTs, your manager will enroll you in ILT courses.

Please contact your manager or onsite training coordinator with additional questions regarding roles and responsibilities. For an introduction to MHS GENESIS, you may access MHS GENESIS training resources and 100-Level courses on JKO without enrollment.

JLV BY THE NUMBERS

VA	DOD
USER ACCESS (# of users with access to JLV)	
330,252	101,353
PATIENT SELECTS	
1,923,454	200,710



Joint Longitudinal Viewer

Visit the [DMIX page](#) on milSuite or click the Help (?) icon in JLV to visit the Information Portal



Operational Medicine

Access [Operational Medicine CBT Courses](#) on JKO



Data Analytics

[DHA Survey Portal Training](#) on Health.mil

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**COVID-19
SAFE PRACTICES**



WEAR A MASK
IN PUBLIC



KEEP A SAFE
SOCIAL DISTANCE



WASH YOUR
HANDS OFTEN



GLOSSARY

ACRONYM GLOSSARY

AFB – Air Force Base

CBT – Computer-based training

CIO – Chief information officer

DHA – Defense Health Agency

DHMSM – DoD Healthcare Management System Modernization

DMIX – Defense Medical Information Exchange

DOD – Department of Defense

EHR – Electronic health record

EIDS – Enterprise Intelligence and Data Solutions

FEHRM – Federal Electronic Health Record Modernization

ILT – Instructor-led training

JKO – Joint Knowledge Online

JLV – Joint Longitudinal Viewer

JOMIS – Joint Operational Medicine Information Systems

J-6 – Joint Staff Command, Control, Communications and Computers/Cyber

MedC2 – Medical command and control

MedCOP – Medical Common Operating Picture

MedSA – Medical situational awareness

MHS – Military Health System

MSAT – Medical Situational Awareness in Theater

MTF – Military treatment facility

PEO DHMS – Program Executive Office, Defense Healthcare Management Systems

SDD – Solution Delivery Division

USCG – United States Coast Guard

VA – Department of Veterans Affairs