

DOD AND VA GO LIVE WITH MHS GENESIS AT FEDERAL HEALTH CARE CENTER, FINAL DOD SITE



Former NASA astronaut and retired Navy Captain James A. Lovell, left, signs a banner celebrating Lovell FHCC's Go-Live, with help from Lovell FHCC Deputy Director Navy Captain Chad McKenzie, center, and Lovell FHCC Director Dr. Robert Buckley, right; staff signed the banner at the Go-Live Celebration March 8.

The U.S. Department of Defense and Department of Veteran's Affairs launched the federal electronic health record (which DOD calls MHS GENESIS) at the Captain James A. Lovell Federal Health Care Center in North Chicago, Ill., March 9. This marks the first joint deployment of the federal EHR at a combined VA and DOD facility and the completion of DOD's baseline MHS GENESIS deployment to all garrison hospitals and clinics throughout the globe.

"I am extremely proud of how the DOD and VA worked together to make this deployment successful! Our combined team provides the best health care technology to our Service members, veterans, and their families," said Mr. Chris Ruefer, acting program executive officer for the Program Executive Office, Defense Healthcare Management Systems. "Completing DOD deployment is a huge accomplishment in support of that mission."



Using MHS GENESIS, Dr. Amanda Tower, gynecology physician, reviews health questions with Commander Monica Knapp, clinical director, Primary Care, and Lovell FHCC patient on March 9.

PHOTO BY MEAGHAN JOHNSON

As the only fully integrated, jointly run VA and DOD health care system in the country, Lovell FHCC provides health care to approximately 75,000 patients each year, including veterans, Service members, and their families, and 30,000 annual Navy recruits. The joint deployment ensures all patients who visit the facility will receive coordinated care through a single fully integrated EHR system. The federal EHR also improves the ability for VA and DOD to coordinate care and share data with each other and the rest of the U.S. health care system.

The new, modernized federal EHR improves patient health outcomes and veteran's benefit decisions. It bolsters cybersecurity and streamlines capabilities from multiple legacy systems.

With this deployment, MHS GENESIS is now live at all 138 DOD military treatment facilities commands and over 3,600 DOD hospitals and clinics. MHS GENESIS has over 190,000 active users, inclusive of doctors, nurses, patient administrators, and other care providers, and reaches 9.6 million eligible beneficiaries.

DOD completed overseas deployments with October 2023's Go-Live across the Pacific Rim to Waves OKINAWA and SOUTH KOREA and January 2024's installation to Wave GUAM (see photos, page 8). DOD first deployed MHS GENESIS to four sites in the Pacific Northwest in 2017, before beginning wave deployments in the fall of 2019. The U.S. Coast Guard and National Oceanic Atmospheric Administration also deployed the federal EHR, with National Security Agency planning to deploy in 2024.



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MESSAGE FROM THE ACTING PROGRAM EXECUTIVE OFFICER



Chris Ruefer

Welcome to the first 2024 edition of The Scope. I am thrilled to report that we successfully went live with MHS GENESIS to the Federal Health Care Center, our final DOD site. MHS GENESIS is now live at all garrison DOD hospitals and clinics, including 138 parent MTFs. It now reaches over 190,000 active users.

While this is just the start of our journey toward modernizing health care and advancing data sharing for Service members, veterans, and their families – the end of the beginning – it is a tremendous accomplishment. Thank you and congratulations to everyone that made this possible, including DHMS' program personnel, the Defense Health Agency, our vendor partners, and thousands of pay-it-forward volunteers.

In this issue, you'll also read about the great work of our Joint Operational Medicine Information Systems and Enterprise Intelligence and Data Solutions program management offices. JOMIS held an open house and VIP Day, where developers and experts demonstrated solutions through real-world scenarios using experiences of fictional Service members.

EIDS PMO released its third iteration of the Defense Health Agency Reserve Health Readiness Program that supports 800,000 remote component Service members and DOD civilians. In addition, EIDS continues to enable legacy systems to decommission through the Health Information Archive.

I hope you enjoy this issue and look forward to another highly successful and productive year ahead.

– *Chris Ruefer, Acting Program Executive Officer, PEO DHMS*

PEO DHMS CELEBRATES A DECADE AT PENTAGON



Mr. Chris Miller, PEO DHMS' first program executive officer, delivered the keynote speech.

PEO DHMS celebrated its 10-year anniversary, highlighting its upcoming completion of MHS GENESIS deployment --- the system providing one federal electronic health record to garrison Department of Defense locations for all Service members, retirees, veterans, and families. The celebration was held February 29 at the Pentagon, with a simultaneous livestream at PEO DHMS headquarters in Arlington, Va.

"It took an incredible team across the DOD to make this happen," said Chris Miller, DHMS' first Program Executive Officer, crediting past and present DHMS program personnel, Pentagon leadership, and other external stakeholders for the program's success. "You all really inspired me."

Mr. Miller and Ms. Holly Joers, outgoing PEO DHMS Program Executive Officer, described the program's journey, from its early years of evaluating products and aligning stakeholders to its successful MHS GENESIS wave deployments since 2019. Ms. Joers noted that, while MHS GENESIS carried the headlines throughout most of the past 10 years, DHMS' success extends to operational medicine, interoperability, and data management.



Mr. Chris Miller, Ms. Holly Joers, and Mr. Bill Tinston spoke during the 10-year anniversary ceremony.

More than 100 supporters attended, with distinguished guests at the Pentagon including past DHMS PEO's Mr. Miller, Ms. Joers, and Bill Tinston, all delivering remarks; several senior DOD leaders; and current and retired general officers.

"I'm filled with pride about what we accomplished these last 10 years, and even more so when I think about what is to come," said Ms. Joers.

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PEO DHMS CELEBRATES A DECADE (CONT.)



DHMSM Program Manager Col Christina Sheets, with past DHMSM Program Managers Craig Schaefer (left) and John Windom (right).



PEO presented attendees a DHMS coin along with the program.



Cori Hughes, DHMS' Program Integration Director, with Ken Johns, JOMIS Deputy Program Manager.



Attendees celebrated at a social gathering near the PEO DHMS headquarters in Arlington, Va.



Retired Maj Gen Lee Payne and FEHRM Director Bill Tinston celebrated DHMS' achievements.

JOMIS

JOMIS VIP Day

More than 100 military officers representing five U.S. branches, end users, and other stakeholders gathered December 14 for the JOMIS Open House and VIP Day as JOMIS Program Manager Sandra McIntyre and several subject matter experts demonstrated modernized operational medicine solutions through a real-world scenario.

They depicted how JOMIS' modernized health care solutions work together to save the lives of American and allied Service members, and emphasized the importance of stakeholder participation and feedback as JOMIS continues to assess, analyze, and test these solutions.



JOMIS Deputy Program Manager Ken Johns addressed staff at the JOMIS annual holiday gathering on December 13, a day before JOMIS VIP Day.

“We cannot do these projects without all of you... they will not work without you, and the relationship between us (you and JOMIS) can never really end.”



Ms. Sandra McIntyre
JOMIS Program Manager

JOMIS Products in Action

JOMIS developers and experts demonstrated JOMIS' solutions through real-world scenarios, using the experiences of three fictional American Service members after two were injured when an explosive device detonated near an American guard tower and entry control point.

In the demo, Army Special Operations Medic SSG Rick Kelly and a Quick Reaction Force team responded to evaluate and treat the wounded. The medic used an Android handheld device loaded with BATDOK™ to monitor vital signs and track treatment decisions.

The VIP Day audience watched as the presentation displayed BATDOK™ screens that fictional SSG Kelly would see when treating the injured Service members.

The scenario next shifted to Laura Lakey, a Navy petty officer, who took the brunt of the blast and suffered the most severe injuries. Subject matter experts



demonstrated how SSG Kelly used his BATDOK™ device to transfer Lakey's vitals and other medical data to other medical personnel who began treating her in a Role 2 aid station.

JOMIS SMEs continued the story of Petty Officer Lakey as she received a blood transfusion and medical staff prepared her for evacuation to a Role 3 hospital. The presentation displayed screens from applications

like Theater Blood-Mobile and Medical Common Operating Picture, showing Lakey's status and journey through the OpMed Roles of care toward a full recovery.

JOMIS demonstrated how modernized health care delivery solutions meet the needs of users and patients across the full spectrum of military operations and operational medicine environments.

When medics and other onsite personnel must triage and quickly treat injured

JOMIS (CONT.)

patients, JOMIS' Operational Medicine Care Delivery Platform helps provide and document point-of-injury, en-route, trauma, surgical, and routine care.

In the VIP Day example, SSG Kelly used BATDOK™ to triage and quickly treat Lakey and her fellow Service members and document her care in transport to the Role 2 Forward Resuscitative Surgical Detachment. At the Role 2 site, medical professionals used Trauma Advanced Care to further treat and stabilize her for evacuation to a Role 3 facility, where providers use MHS GENESIS-Theater to document care.

The Survey Says

VIP Day surveys included the following comments:

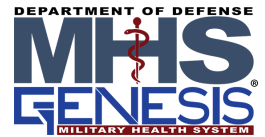
“Connected a lot of dots and provided a great summary of the applications and how they will work together.”

“Fantastic to interact with the SMEs and see products working together as part of a broad theater system.”

More than 90 percent of the stakeholders attending found the JOMIS demonstrations informative or very informative, and 98 percent said they were likely or very likely to return for a similar event in the future.

DHMSM

What's new in MHS GENESIS? DHMSM released several recent capability upgrades, highlighted below.



February 2024

Bridge Breast Milk Acquisition

Decreases risk of breast milk products being given to incorrect infants with new breast milk barcoding capability. Staff now use barcodes to label breast milk and the barcode system enhances documentation of the amount of milk given and better facilitates storage tracking, thawing, as well as combining and separating bottles. Additionally, it supports the feeding of multiple siblings.

OB Blood Loss Calculator

Alleviates the need to manually enter data into Excel spreadsheets outside the electronic health record and calculates OB-measured blood loss more efficiently and safely. It also supports a military treatment facility-specific inventory worklist, improving efficiencies in inventory management. Clinicians can use the Maneuver Battle Lab calculator and the worklist to have improved efficiencies and accuracy in electronically quantifying and documenting MBL.

MHS GENESIS Valor Net Teleradiology Interface

Improves access to prior imaging studies, reports, order details, and patient clinical information in MHS GENESIS. Allows providers to click on Online Worklist and Results within MHS GENESIS instead of in a separate application. Allows MHS GENESIS to forward radiology results directly to MTFs. Optimizes review process, expedites patient care, and supports patient safety.

PowerChart Inpatient All Cause Readmission

Streamlines the capture of data to identify, track, and manage patients at high risk of readmission through the use of new templates and tools. Staff set up and manage a Readmission Prevention Worklist and then track interventions using the Readmission Prevention and the Discharge Intervention Validation. These tools facilitate continuity of care and promote use of caregiver time for patient education and scheduling appropriate follow-up appointments. This new feature mitigates the Healthcare Effectiveness Data and Information Set (HEDIS®) All Cause Readmission Measure by ensuring effective management of the health and well-being of Service members and their beneficiaries following discharge.

Patient Portal Ability to Refill

Enables beneficiaries to renew their medications online.

MHS Video Connect 1.3.10.0 Platform Upgrade

Offers schedulers the capability to view failed notifications. Provides schedulers with updated patient contact information and patient profile data upon notification of failure. Decreases no shows and prevents confusion with failed notifications of rescheduled appointments by facilitating communication of the reschedule through alternative means.

The latest training resources are available on the MHS GENESIS Information Portal at <https://www.milsuite.mil/book/community/spaces/mhsgenesis>.

January 2024

United States Coast Guard PowerChart Touch

Enables USCG users to connect to PCT using DHA Azure on their mobile devices. This capability improves clinicians' ability to view and update patient charts on an iPhone or iPad.

Medical Education and Training Campus

Provides METC trainees with MHS GENESIS training using the MHS GENESIS Pharmacy Training Platform and the Healthcare Administration Specialist Platform. Trainees can execute pharmacy and HAS platform business operations using production-like data with varied patients and pre-built encounters in various points of care.

Bronchoscopy (Group 1)

Supports the bronchoscopy perioperative nurse unit redesign, which allows users to follow a standard enterprise workflow. This capability affects the perioperative units at Brooks Army Medical Center only; PeriOp units at other MTFs will be upgraded in the future.

November 2023

Patient Portal Modernization

Modernizes individual patient portal components, with 34 enhanced capabilities and the flexibility to continue to improve the patient experience.

MHS GENESIS Individual Longitudinal Exposure Record

Pulls information about a Service member's critical exposure to hazardous substances from Individual Longitudinal Exposure Record into PowerChart. This improves the clinician's access to exposure information, makes exposures information available from the Service member's electronic health record, and improves a clinician's knowledge of the patient when providing care.

Right of First Refusal Humana

Securely delivers medical referrals from the Managed Care Support Contractor directly into MHS GENESIS, which enables referral management coordinators to process referrals more efficiently. Benefits include:

- Expediting the processing of right of first refusal referrals
- Saving 35,000 working hours annually in manual entry of ROFR referrals
- Eliminating the need to check the MCSC portal for ROFR offers
- Supporting the Defense Health Agency strategic priority of building a modernized, integrated, and resilient health care delivery system by facilitating the recapture of knowledge, skills, and abilities
- Reducing human input errors
- Improving the view of clinical currency opportunities for clinicians and their clinical teams to be able to maintain the competencies needed for wartime preparedness
- Supporting the capability for Graduate Medical Education platforms to obtain the diversity of specialty cases for residents and fellows in training

MIP Product Spotlight: Reserve Health Readiness Program

To ensure rapid response and success for DOD's missions that utilize remote and reserve Service members to support global contingencies, leaders rely on real-time readiness data provided by the Reserve Health Readiness Program.

This third iteration of the DHA RHRP provides the DOD a modernized all-encompassing readiness data program that supports roughly 800,000 remote component Service members and DOD civilians. It replaces an inefficient manual entry process and reduces errors.

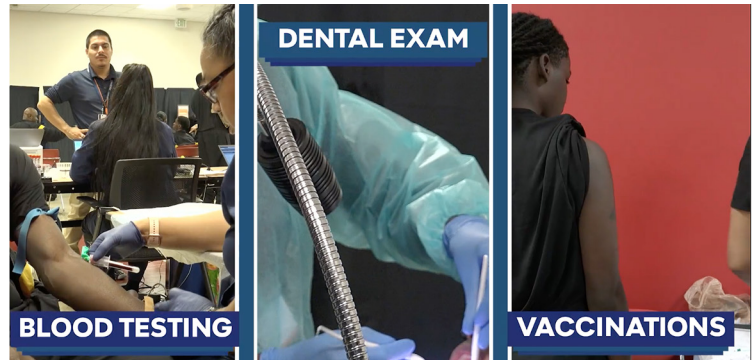
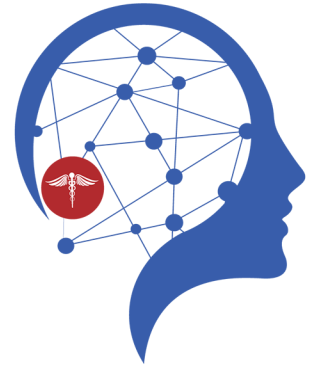
EIDS began this mission in support of the RHRP program management office in 2022, becoming the lead integrator for all Service readiness systems, the Corporate Dental System, Spectacle Request & Transmission System, and Defense Occupational & Environmental Health Readiness System, while driving technical implementation to achieve go-live on March 1, 2023. This reduced dependency on an external contract saves the DOD millions going forward.

By mid-2023, in the RHRP-3 phase, RHRP upgraded to centralize all inputs and automatically pass information to the Service readiness systems (Aeronautical Services Information Management System, Medical Operational Data System, Medical Readiness Reporting System), so users no longer have to synthesize information from multiple systems outside of RHRP.

Next, EIDS will reduce reliance on any proprietary commercial systems, centralizing readiness information tracking/management and continuing its work to add and optimize interfaces between the Service readiness systems. Future innovations like the RHRP Readiness Dashboard and mobile health assessment capabilities will provide Service members the tools they need to ensure mobilization and arm commanders with the picture they require to prepare, plan and execute.

The on-going mission of RHRP is to continually improve quality, speed, and efficiency of readiness data gathering and availability.

For further information: <https://www.health.mil/Military-Health-Topics/Health-Readiness/Reserve-Health-Readiness-Program>



Successful Joint PEO-DHA Data Summit

EIDS, in collaboration with DHA, hosted an MHS Joint Data Summit in San Antonio, Tex., December 13-15, 2023, leading joint enterprise data conversations. The event brought together leaders, stakeholders, and subject matter experts from more than 12 organizations including J5, J8, J6 Solution Delivery Division, Health Informatics, DHMSM, JOMIS, and EIDS to synergize data initiatives and align data priorities for 2024. The data summit, with over 200 attendees, provided a unique opportunity to foster collaboration, share insights, and explore innovative strategies to leverage data for better decision making. The teams actively engaged in pushing forward the necessary discussions driving enterprise data ingestion, sharing, and analytics.

Joint Data Summit a Success

December 13th-15th, 2023



EIDS (CONT.)

Health Information Archive and Legacy System Decommissioning

The HIA acts as the user interface for MTF users to access legacy MHS electronic health record systems to fulfill legal medical record access and point-of-care clinical use cases. The MHS Information Platform enables the decommissioning of legacy systems replaced by MHS GENESIS through the HIA.

Over the last three years, the HIA became the modern requisite secure location for Composite Health Care System, Essentris®, Anesthesia Reporting Monitoring Device, Surgical Scheduling System, AHLTA, Enterprise Blood Management System Transfusion, Workload Management System for Nursing Internet, and Coagulation Clinic site instances decommissioned at various global MTFs.

As a health data repository and records management application, the HIA provides clinicians direct access to point of care, historic medical

records, legal records, and more. As the single source of patient longitudinal historical medical records, the HIA preserves legacy data within the MIP for clinical, analytical, or research needs. Any MHS GENESIS user can explore HIA data at <https://hia.health.mil>.

EIDS partners with the DHA Chief Information Officer, Solution Delivery Division, legacy system sites, and several other internal DHA organizations to establish the integrated longitudinal historical patient record.

DHA, with EIDS' assistance, completely decommissioned ARMD, S3, and WMNSi, and partially decommissioned Essentris® and CHCS, with planned completion in 2025. The HIA will continue to grow in capacity and usage through socialization, training, and use insights. EIDS looks forward to building this enterprise solution to improve Service member medical readiness and patient outcomes,

DOD AND VA GO LIVE WITH MHS GENESIS AT FEDERAL HEALTH CARE CENTER, FINAL DOD SITE (CONT.)

Wave GUAM and Wave PACIFIC Go-Live Photos



U.S. Naval Hospital Okinawa staff gathered to celebrate MHS GENESIS Go-Live.



PHOTOS BY TREY SAVITZ



The 57th Medical Group, South Korea, promoted the launch of MHS GENESIS through banners, posters, and flyers at Osan Air Base.



PHOTO BY TREY SAVITZ

Col Thomas Cantilina, DHA Chief Health Informatics Officer and Captain Kathleen Cooperman, Commanding Officer of U.S. Naval Hospital Okinawa celebrate Go-Live.

MS. HOLLY JOERS WINS PINNACLE DOD EXECUTIVE OF THE YEAR AWARD

Congratulations to Ms. Holly Joers, outgoing program executive officer for PEO DHMS, for receiving the 2023 Pinnacle Award for DOD Executive of the Year. The award recognizes outstanding oversight and management of the DHMS portfolio, specifically MHS GENESIS implementation across the DOD.

Ms. Joers is renowned across the Federal Health Information Technology arena for optimizing outcomes by connecting data throughout the continuum of care. Under her leadership, stateside MHS GENESIS deployment activities accelerated each year, culminating with two complex, high-visibility deployments in the National Capital Area and completion of deployment to all U.S.-based garrison facilities in 2023.



DHMS deployed MHS GENESIS to 73 parent MTFs, 1,800 total sites, and nearly 100,000 users from January 2022 to August 2023, the period of performance for this award. This deployment required configuring an off-the-shelf commercial EHR to meet the Military Health System’s unique needs. She orchestrated development of enterprise standards ensuring 9.6 million DOD beneficiaries access a secure, reliable longitudinal record wherever care is sought.

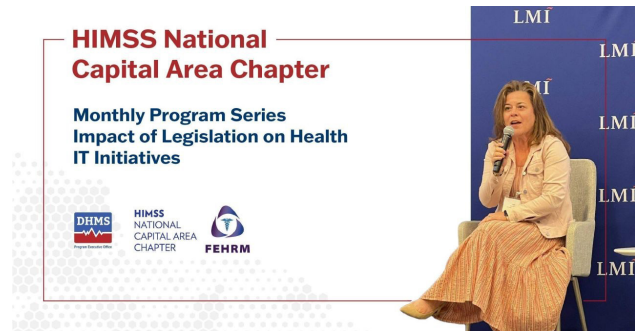
Under Ms. Joers’ leadership, DHMS released three major system upgrades and many smaller upgrades, bringing improvements to vaccination delivery, medical readiness, oncology, pharmacy, and the patient experience.

MS. CORI HUGHES JOINS HIMSS CHAPTER PANEL

“The Impact of Legislation on Health IT Initiatives” was the theme for the November 16, 2023 Healthcare Information and Management Systems Society National Capital Area Chapter panel held in Tysons Corner, Va. The panel discussed how changes in legislation affect program priorities.

“Legislation and current events play a large role in health IT,” said panelist Ms. Cori Hughes, director of program integration for PEO DHMS and the Federal Electronic Health Record Modernization office. “Administering and tracking health care records for our Service members and veterans requires working with our country’s leaders to ensure we develop standards and processes that support delivery of an enterprise system.”

Ms. Hughes was joined by Dr. John Scott, acting director, data and analytics for the Department of Veterans Affairs, and Mr. John Rancourt, director of interoperability division, Office of the National Coordinator for Health Information Technology. Also participating was Mr. Jude Soundar, Microsoft U.S. Government Affairs health director, who moderated the event.



STATE OF THE FEDERAL EHR

Mr. Ruefer and Dr. Caban, chief data scientist for EIDS PMO, spoke November 14, 2023 at the State of the Federal EHR. Mr. Ruefer discussed DOD's progress with MHS GENESIS deployment and system optimization while Dr. Caban discussed innovation toward data-driven outcomes.

"We're 100% committed to the greater success of the project across the federal sector. We're actively sharing what we've learned so far with all our federal partners." said Mr. Ruefer.

Federal Electronic Health Record Modernization (FEHRM) Office

The State of the Federal EHR



Mr. Chris Ruefer
Acting Program Executive Officer
PEO Defense Healthcare
Management Systems



Dr. Jesus Caban
Chief Data Scientist for the Enterprise
Intelligence and Data Solutions (EIDS)
Program Management Office



AFCEA

Dr. Caban joined other senior leaders, including Mr. Terry Dover, DHMSM assistant program manager, on January 30 and 31 for a discussion during the data and AI breakout session at the 16th Annual Armed Forces and Communications and Electronics Association Health IT Summit held in Bethesda, Md.

AFCEA Health IT Summit

January 30th-31st, Bethesda, MD



Dr. Jesus Caban



Mr. Terry Dover



AMSUS

Dr. Caban presented at the Association of Military Surgeons of the United States' Annual Meeting on February 14. Dr. Caban joined in a panel discussion, "Transforming DOD Health Care Through Digital Innovation and Solutions." JOMIS' LT Jonathan Correia and LT Col Phi Tran presented three posters highlighting the role of digital health, the Theater Blood Mobile application, and Joint Trauma System Clinical Practice Guidelines.

AMSUS

AMSUS Annual Meeting

February 12-15, 2024

Gaylord National Resort,
National Harbor, MD



2023 YEAR IN REVIEW

See the 2023 [Year in Review](#) to read about DHMS' accomplishments in fiscal year 2023.

G L O S S A R Y

AI: Artificial Intelligence

ARMD: Anesthesia Reporting Monitoring Device

ASIMS (Air Force): Aeromedical Services Information Management System

BATDOK™: Battlefield Assisted Trauma Distributed Observation Kit

CHCS: Composite Health Care System

COAG: Coagulation Clinic

DHA: Defense Health Agency

DHMS: Defense Healthcare Management Systems

DHMSM: DOD Healthcare Management System Modernization

DOD: Department of Defense

EHR: Electronic Health Record

EBMS-T: Enterprise Blood Management System Transfusion

EIDS: Enterprise Intelligence and Data Solutions

FEHRM: Federal Electronic Health Record Modernization

FHCC: James A. Lovell Federal Health Care Center

HAS: Healthcare Administration Specialist

HI: Health Informatics

HIA: Health Information Archive

HCD: Health Care Delivery

IT: Information Technology

JOMIS: Joint Operational Medicine Information Systems

MBL: Maneuver Battle Lab

MCSC: Managed Care Support Contractor

MedCOP: Medical Common Operating Picture

METC: Medical Education and Training Campus

MHS: Military Health System

MIP: MHS Information Platform

MODS (Army): Medical Operational Data System

MRRS (Navy, Marine Corps, Coast Guard): Medical Readiness Reporting System

MTF: Military Treatment Facility

NOAA: National Oceanic and Atmospheric Administration

OCONUS: Outside the Continental United States

OMDS: Operational Medicine Data Service

OpMed: Operational Medicine

OpMed CDP: Operational Medicine Care Delivery Platform

PCT: PowerChart Touch

PEO DHMS: Program Executive Office Defense Healthcare Management Systems

PeriOp: Perioperative

PEO: Program Executive Office

PMO: Program Management Office

RHRP: Reserve Health Readiness Program

ROFR: Right of First Refusal

S3: Surgical Scheduling System

SDD: Solution Delivery Division

TAC: Trauma Advanced Care

TBLD-M: Theater Blood-Mobile

USCG: United States Coast Guard

US MEPCOM: United States Military Entrance Processing Command

VA: Department of Veterans Affairs

WMNSi: Workload Management System for Nursing Internet