



UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-4000

PERSONNEL AND
READINESS

The Honorable Jack Reed
Chairman
Committee on Armed Services
United States Senate
Washington, DC 20510

AUG - 1 2023

Dear Mr. Chairman:

The Department's response to section 716 of the National Defense Authorization Act for Fiscal Year 2022 (Public Law 117-81), "Establishment of Department of Defense System to Track and Record Information on Vaccine Administration," is enclosed.

The report summarizes the Department's current and future systems that track and record vaccine administration records for Service members, as well as how that data is synchronized within the Department of Defense to be used by civilian and military medical providers. Additionally, this report provides an overview of how the Department is streamlining immunization reporting leveraging its new electronic health record system, Military Health System GENESIS.

Thank you for your continued strong support for the health and well-being of our Service members. I am sending a similar letter to the House Armed Services Committee.

Sincerely,

//Signed

Gilbert R. Cisneros, Jr.

Enclosure:
As stated

cc:
The Honorable Roger F. Wicker
Ranking Member



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**PERSONNEL AND
READINESS**

The Honorable Mike D. Rogers
Chairman
Committee on Armed Services
U.S. House of Representatives
Washington, DC 20515

AUG - 1 2023

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Thank you for your continued strong support for the health and well-being of our Service members. I am sending a similar letter to the Senate Armed Services Committee.

Sincerely,

//Signed

Gilbert R. Cisneros, Jr.

Enclosure:
As stated

cc:
The Honorable Adam Smith
Ranking Member

Report to the Committees on Armed Services of the Senate and the House of Representatives



Establishment of Department of Defense Systems to Track and Record Information on Vaccine Administration

August 2023

The estimated cost of this report or study for the Department of Defense (DoD) is approximately \$4,000. This includes \$0.00 in expenses and \$4,000 in DoD labor.

Department of Defense Vaccine Administration and Record Keeping

This report is in response to section 716 of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2022 (Public Law 117–81), which requests that the Department of Defense (DoD) establish a system to track and record information on vaccine administration for Service members.

In accordance with the law, the Defense Health Agency (DHA) works in coordination with the Enterprise Intelligence and Data Solutions program management office, Program Executive Office, and Defense Health Management Systems, to ensure all requirements outlined in section 716 of the NDAA for FY 2022 are met including: processes for vaccine administration, processes for tracking, recording and reporting vaccines administered to Service members (including transfers by a non-DoD provider), processes for storing information related to administration of vaccines in the electronic health record, processes for collecting medical information of beneficiaries under the TRICARE program, and gaps or challenges related to vaccine administration.

Once fully deployed at the end of calendar year 2023, DoD's new electronic health record system, Military Health System (MHS) GENESIS, will be the authoritative system for vaccine tracking. MHS GENESIS is capable of tracking medication lot numbers, as well as reasons for refusals and exemptions from patients to providers for taking a certain medication. MHS GENESIS also captures adverse reactions to medications, including vaccinations.

Current State

Currently, DoD documents administration of vaccines and evidence of immunization for all Service members and beneficiaries in multiple electronic systems including; Armed Forces Health Longitudinal Technology Application (AHLTA), Aeromedical Services Information Management System (ASIMS), Medical Protection System (MEDPROS), Medical Readiness Reporting System (MRRS), and MHS GENESIS.

AHLTA is used for its immunization module and for Current Procedural Terminology codes used for clinical notes. ASIMS is used by the Air Force to track readiness metrics, including immunizations for active duty Service members.

Similar to ASIMS for the Air Force, the Army uses MEDPROS, which captures immunization records for active duty, reserve, and National Guard members. The Navy, Marine Corps, and the Coast Guard use MRRS. ASIMS and MEDPROS specifically capture the vaccine administered, the date it was given, dosage, bodily injection location, health care worker administering or documenting, and the vaccine lot number. MRRS captures all this information as well except the bodily injection location. Currently, no legacy readiness systems in use by DoD provide granularity to record site facility location as to receipt of the immunization, however, this is resolved by the new electronic health record, MHS GENESIS.

DoD continues deployment of MHS GENESIS that is used by each of the Military Departments, as well as the Coast Guard. As of July 2023, MHS GENESIS has been deployed at over 80

percent of military medical treatment facilities and is able to capture patient vaccine data during individual encounters, as well as for large groups who are being administered the same vaccine, at the same location by the same providers. MHS GENESIS also captures the specific vaccine administered, the date it was given, dosage, bodily injection location, the vaccine lot number, and the facility where it was given. MHS GENESIS also allows the tracking of the vaccine through the supply chain for better stock management and recall alerts.

As an additional note, MEDPROS and MRRS only capture Service member information while AHLTA, ASIMS, and MHS GENESIS capture immunizations to all beneficiaries to receiving them in the direct care system.

Data Synchronization

Once vaccination data is captured in AHLTA and MHS GENESIS, the data is sent to the Services' Individual Medical Readiness (IMR) systems.

In AHLTA, the system pulls data from the Defense Enrollment Eligibility Reporting System (DEERS) when a patient is seen and data has been sent from ASIMS, MEDPROS, or MRRS. In MHS GENESIS, the system pulls data from DEERS and AHLTA, then uses the MHS Information Platform (MIP) to push data to ASIMS, MEDPROS, and MRRS.

Additional Notes

While we have improved visibility of all immunizations given within the direct care system, and some visibility through the Pharmacy Data Transaction Service of those immunizations given in private sector care, there is still a significant gap for visibility of immunizations given in the private sector.

Currently, immunizations administered in the private sector are reported through each Military Service's IMR systems which are automatically fed into a Service member's medical record.

Additionally, Service members immunized outside of the direct care system, are required to report that immunization to either their primary care provider, or through their Military Service's IMR system.

Future State

Following the full deployment of MHS GENESIS at the end of calendar year 2023, DoD will simplify and streamline reporting for each of the Military Services and the Coast Guard.

MHS GENESIS will be used to document vaccinations and immunizations given to active duty, reserve, and National Guard Service members and their eligible dependents. The operational component, which is still under development, MHS GENESIS Theater and operational modules will be used in the same way to document vaccinations in operational environments.

Leveraging MHS GENESIS as a joint service solution will allow for data transfers to uniformly happen using the MIP.

Once fully deployed, MHS GENESIS will allow for seamless communication with Health Information Exchanges, including the Centers for Disease Control and Prevention's Immunization Gateway that will give military health care providers visibility to select vaccinations and immunizations administered to Service members in the private sector. While we do not share real-time immunization information for Service members for operational security purposes, we do have the ability to share real-time immunization data for TRICARE beneficiaries to be used by civilian health care providers.

Conclusion

Today, the Departments of the Army, Navy, and Air Force have operational systems that capture a wide variety of patient health data related to our Nation's Service members, including immunization records. The data these systems capture are designed to ensure the Armed Forces have a medically ready force capable of deploying at a moment's notice to defend our Nation's interests.

Moving forward, as the Departments of the Army, Navy, and Air Force continue to operationalize a shared service model of patient care under the DHA, immunization records for our Service members will be recorded and stored in DoD's new electronic health record system, MHS GENESIS.