DHSS Program Management

Contingency Tracking System (CTS) Interface Control Document (ICD) describing the  
Data Exchange to the MDR  
Baseline

Approved Version  
  
April 12, 2012



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Preface

This document describes the interface that provides the Contingency Tracking System (CTS) from the Defense Manpower Data Center (DMDC). The files are sent to DHSS and loaded into the Military Health System (MHS) Data Repository (MDR).

This document is under DHSS project configuration control. Changes to this document will be made by document change notice (DCN) or by complete revision.

Questions on proposed changes concerning this plan should be addressed to:

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Abstract

The Defense Health Services Systems (DHSS) Program Executive Office manages the Military Health System (MHS) Data Repository (MDR) as the core repository for MHS clinical, beneficiary population, enrollment, costing and workload data. The MDR collects, catalogues, and organizes data files from several systems. This document is the Interface Control Document (ICD) that specifies the Contingency Tracking System (CTS) data exchange from the Defense Manpower Data Center’s (DMDC) to the MDR.

**Keywords:** Defense Enrollment and Eligibility Reporting System, Defense Health Services Systems, Defense Manpower Data Center, Interface Control Document, MHS Data Repository, DHSS, DMDC, ICD, MDR

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# Introduction

## Document Identification

This document describes the interface that provides the Contingency Tracking System (CTS) records to the MHS Data Repository (MDR), the data warehouse managed by the Defense Health Services Systems (DHSS) Program Executive Office.

## Scope

This document describes and identifies the parameters and specifies the file layout of the CTS file that the DHSS Program Executive Office receives from the Defense Manpower Data Center (DMDC).

## System Overview

DEERS is the Department of Defense's (DoD) authoritative source for uniformed services personnel information, and is managed by the DMDC, Monterey, California. It is used as a data source by the MHS for military health care beneficiary information. Beneficiary population data is essential for the DHSS product line to provide informational services.

In addition to the CTS data feed, DHSS currently receives the following three extracts from DEERS:

* VM-6 DEERS Extract
* Reservist Beneficiary
* Separatee Extract

On a monthly basis, DMDC will provide a file of all completed Overseas Contingency Operations (OCO) deployment events from DMDC’s Contingency Tracking System Deployment File. This file will contain one record for each event with the following data elements: EDIPI, Begin Date of Deployment, End Date of Deployment. Each monthly file will be a complete refresh dating back to September 11, 2001.

## Reference Documents

DHSS Program Office, *EIDS Information Support Plan (ISP),* dated 15 October 2010.

EIDS Program Office, *CEIS Operational Requirements Document (ORD)*, Falls Church, VA, December 1997.

## Operational Agreement

This ICD provides the technical specification for an interface between DMDC and the DHSS Program Executive Office regarding the monthly CTS files. It is the responsibility of the source system Program Office (i.e., DMDC) to notify DHSS of any potential or planned changes to data feed formats or contents as soon as these potential changes are known in order to minimize adverse impacts on DHSS receiving systems. When required, the ICD will be modified by the data receiver (i.e., DHSS Program Executive Office), and a copy of the revised ICD will be sent to the data sender (i.e., DMDC).

Appendix A delineates the CTS data elements that are sent to the DHSS Program Executive Office under this ICD.

Should problems occur with the interface, DHSS data production support personnel will contact DMDC. Should there be systemic data problems recognized during MDR processing, DHSS members will coordinate with their counterparts in DMDC.

# Data Specification

## Identification of Data Exchanges

This ICD addresses the following data feed from DMDC to DHSS:

* Contingency Tracking System (CTS) records file.

This ICD will be changed *only* if the interface changes from the interface file format or file content specified herein.

## Precedence and Criticality of Requirements

CTS data that is reliable is necessary for the MHS to make knowledge-based decisions. The MDR provides this information to MHS decision-makers. Updates are required for effective performance of MHS operations. An inability to obtain this data could have an adverse impact on the ability of MHS managers to oversee MHS operations.

## Communications Methods

DHSS receives the CTS file monthly from DMDC West (Monterey, California) via a teleprocessing connection called Connect:Direct. This Connect:Direct transmission leverages the Secure+ feature which is FIPS 140-2 compliant. The files are received at the Feed Nodes of the main host, an IBM multi-node computing platform located at the Defense Enterprise Computing Center-Denver (DECC) Oklahoma City (OKC). The CTS file is processed within the DHSS enclave, and stored within the MDR’s catalogue. CTS records file is limited to users with access to MDR at this time.

## Performance Requirements

There are no unique performance requirements for this data. The data needs to be provided according to a regularly scheduled time frame.

## Security and Integrity

The MDR and the DMDC Mainframe both maintain active ATO accreditations under the DHSS Datamarts System (DDS) and NPS DREN accreditation boundaries respectively.

The data exchanged in this interface does not contain Protected Health Information (PHI) information. However, because the aggregate data being transmitted to DHSS is becoming part of a database that does contain sensitive data, it will be protected in accordance with the protection standards mandated for all "Sensitive Unclassified Systems" by the requirements of DoD Directive 8500.1 and DoD Instruction 8500.2. These standards help ensure compliance with the following Federal laws:

* Privacy Act of 1974
* U.S. Code, Title 10, Section 1102, Medical Quality Assurance Records
* U.S. Code, Title 10, Section 1030, Fraud and Related Activity in Connection with Computers
* Computer Security Act of 1987
* Health Insurance Portability and Accountability Act (HIPAA)

### Data Integrity and Quality

Data integrity and quality of raw data files that DHSS receives involve processes that answer the following questions:

1. Did DHSS catch the files?
2. Are the files readable and complete?
3. Do the record counts within the files agree with other sources of what should have been received?
4. Are the data field values within the records accurate within reason?

Answering the first 3 questions involves automated and accepted assessment methods that have matured over the last 10 years. In the case of raw CTS records file, DHSS has implemented the following processes with respect to the questions:

1. DHSS validates that it receives at least one CTS file from DMDC each month; in the event a transmission is missed, DHSS Operations will request a re-harvest from DMDC.
2. Automated methods insure the file is readable and the file is complete.
3. CTS record counts can be measured in terms of what was received on a monthly basis. DHSS has no other source to validate the count, and therefore assumes DMDC transmitted all records for the previous month.

In the case of CTS records, users accept the data field values for what they are. There is no requirement at this point to “improve” the reliability of the data.

**Appendix A: CTS File Layout**

**A.1 File Format**

The Contingency Tracking System (CTS) data records are sent from the Defense Manpower Data Center’s (DMDC) monthly to the MDR. The CTS feed arrives via Connect:Direct to the MDR’s Feed Nodes.

**A.2 Record Layout**

Table A‑1 describes the record layout of each CTS record. The records are constructed of fixed length fields. The MDR uses the data extract as delivered to process and develop the necessary data required to support DHSS data requirements.

**A.3 File Operational Context**

The CTS file provides a listing of military personnel assigned to a contingency deployment event that has been completed.

Table A‑1 CTS Data Elements

| Field # | Field Name  (logical name) | Field Length | Position | Data Type | Value Range | Functional Description – Baseline Definitions |
| --- | --- | --- | --- | --- | --- | --- |
| 1 | EDIPN | 10 | 1-10 | Character | None | Electronic Data Interchange (EDI) Person Number (PN) is a unique number associated with a specific individual that has an association with the Department of Defense (DoD). |
| 2 | Start Date | 8 | 11-18 | Date | None | The calendar date that the deployment began. Format: YYYYMMDD. |
| 3 | Stop Date | 8 | 19-26 | Date | None | The calendar date that the deployment ended. Format: YYYYMMDD. |

**Appendix B: Acronyms**

|  |  |
| --- | --- |
| **CCB** | Configuration Control Board |
| **CTS** | Contingency tracking System |
| **CEIS** | Corporate Executive Information System |
| **COB** | Coordination Of Benefits |
| **DCN** | Document Change Notice |
| **DECC** | Defense Enterprise Computing Center |
| **DEERS** | Defense Enrollment and Eligibility Reporting System |
| **DHSS** | Defense Health Services Systems |
| **DMDC** | Defense Manpower Data Center |
| **DoD** | Department of Defense |
| **EDIPN** | Electronic Data Interchange Person Number |
| **EIDS** | Executive Information/Decision Support |
| **HIPAA** | Health Insurance Portability and Accountability Act |
| **ICD** | Interface Control Document |
| **ISP** | Information Support Plan |
| **MDR** | MHS Data Repository |
| **MHS** | Military Health System |
| **OKC** | Oklahoma City |
| **ORD** | Operational Requirements Document |
| **PHI** | Protected Health Information |
| **TMA** | TRICARE Management Activity |
| **TSM** | Tivoli Storage Manager |
| **VM-6** | VSAM MDR 2006 |
| **VPN** | Virtual Private Network |