



Defense
Healthcare
Management
Systems

FY2020
ANNUAL REPORT

MOVING FORWARD

WELCOME

COVID-19 upended almost every facet of daily life, and it continues to impact how we interact with the world around us. We turned our homes into offices, schools and telemedicine facilities, but we continued to move forward and endure in the face of this pandemic because that's who we are as a nation. The Program Executive Office, Defense Healthcare Management Systems (PEO DHMS) persisted in our mission to deliver a modernized electronic health record (EHR), working harder than ever to ensure continued capability delivery.

Despite myriad challenges, we efficiently delivered big capabilities to the Military Health System (MHS) this year while maintaining our overall schedule to finish deployment of MHS GENESIS, the DOD's new EHR, by the end of calendar year 2023. We never stop working, innovating or transforming health IT for our customers and partners. We commit to delivering quality health care IT and the data to support it wherever and whenever needed.

Inside this report, you'll read about PEO DHMS, our program office responses to COVID-19, as well as how we've continued on our path to deploy MHS GENESIS, to military sites around the country. 2020 was a defining year for the United States, but what stands out is how we all rose to meet the moment and persevere.



We dedicate this year's Annual Report to the true heroes of 2020, frontline health care workers. Their incredible determination and sacrifice saved countless lives and remains a defining measure of America's response to this crisis. We are all immensely grateful.



HOLLY JOERS

Acting Program Executive Officer



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PURPOSE

DRIVING PATIENT-CENTERED CARE THROUGH MODERN SOLUTIONS



Our health IT journey began with MHS GENESIS, DOD's new EHR. It laid the foundation. This year, PEO DHMS began taking the next steps. While we achieved significant enhancements to health care delivery through effective collaboration, the best organizations constantly seek opportunities to raise the bar and move forward.

OVERVIEW

Before the pandemic struck our nation, we took time to gather and reexamine our purpose and goals. Put simply, our purpose is to drive patient-centered care through modern solutions. It's not about IT. It's about people. We strive every day to improve the lives of providers and patients through innovative health IT solutions. Throughout this report, you'll read how we make this happen as we pursue four new goals:

- Accelerate Health Care Improvements
- Enhance Patient Experience Through Seamless Transition of Care
- Continuously Deliver Capability
- Become a World-Class Technology Organization



It's not about IT. It's about people.

Ensuring we meet the need of the patient determines our success. The health and safety of our most important asset – our people – is our highest priority.

A LOOK BACK

"We're building a health IT system that not only supports informed clinical decision-making at the moment of need, but adheres to the Defense Department's (DOD) strict cybersecurity requirements. We set the standards that the private sector must match in order to work within our system, driving the commercial sector to improve their cybersecurity requirements."



Mr. Bill Tinston (right) appears on Washington Post Live to discuss MHS GENESIS implementation.



U.S. Air Force Major General Lee Payne (left) and Mr. Bill Tinston (right) spoke about MHS GENESIS and Wave TRAVIS with Federal News Network.

"As we look at the exciting changes on the horizon, we see how MHS GENESIS plays a huge role in transforming not only the Military Health System, but health care IT as a whole."

"We are delivering a state-of-the-market EHR system, transforming operational medicine, evolving the ongoing DOD-Veterans Affairs (VA) partnership, and driving the commercial health care market toward improved interoperability and cybersecurity. These changes will modernize and improve health care across military, veteran and private sector communities. I look forward to achieving more together in the coming years."



At the AFCEA Bethesda Health IT Summit 2020, Mr. Bill Tinston (right) discusses making IT something you never have to think about.



Mr. Bill Tinston appeared twice on Government Matters highlighting MHS GENESIS deployment.

"It's been a few months since we quarantined, but our work continues as we seek opportunities to advance capabilities across the Military Health System. The pandemic has not and will not deter our mission. No part of this has been easy, but our commitment to doing the hard work ensures we remain flexible and can provide the right tools at the right time to support our providers and clinicians. We remain true to our promise to deliver a single, common record for service members, veterans, and their families."

LEADERSHIP CHANGES

Earlier this year, we said farewell to program executive officer Bill Tinston as he transitioned to lead the Federal Electronic Health Record Modernization (FEHRM) program office. Since coming aboard in March of 2019, Mr. Tinston was instrumental in carrying out our mission to deliver a modernized electronic health record for service members, veterans and their families. He also oversaw the deployment of MHS GENESIS at military treatment facilities across the Pacific Northwest and California.

Following Mr. Tinston's departure, Ms. Holly Joers rejoined the team as Acting Program Executive Officer. Ms. Joers served alongside Mr. Tinston as deputy program executive officer before serving as the interim deputy director for the FEHRM. Her knowledge of acquisition, contracting and program management as well as her energy and desire for results ensures we continue to move forward, advancing health care delivery and providing IT "you don't have to think about."



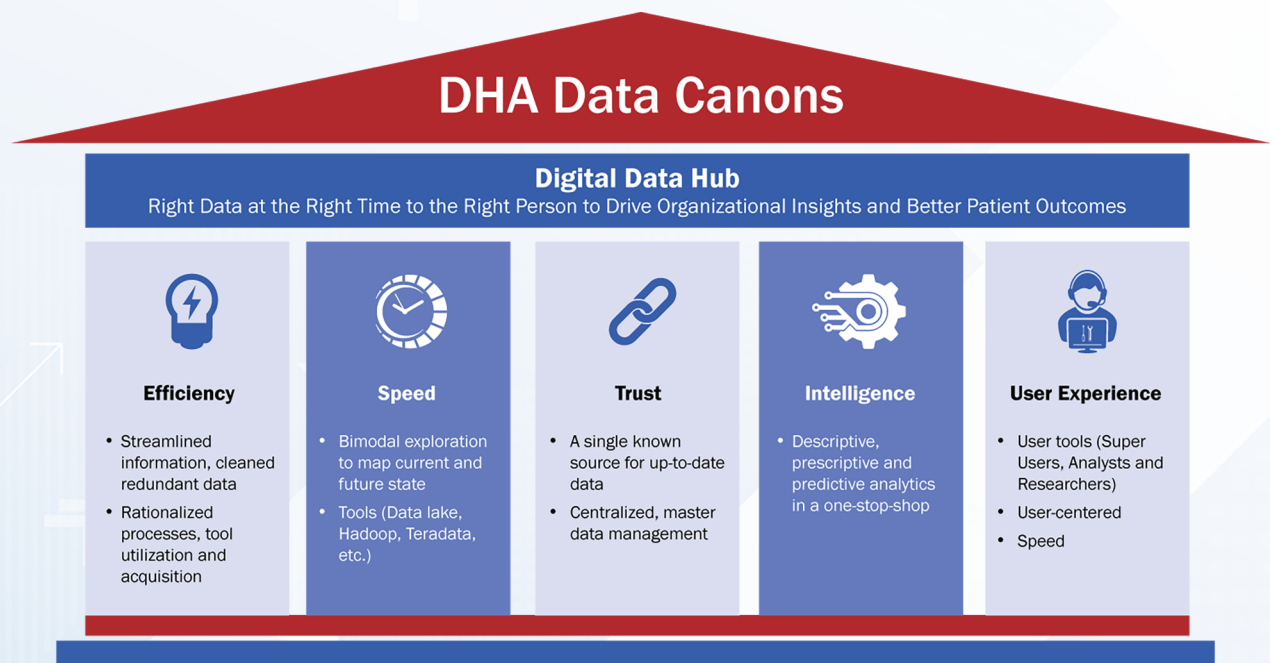
In November 2019, Ms. Holly Joers, pictured here with Mr. Bill Tinston, received the DOD Distinguished Civilian Service Award.

MOVING FORWARD WITH DATA ANALYTICS

We adopted our newest program this summer, Enterprise Intelligence and Data Solutions (EIDS). The program transferred to PEO DHMS from the Defense Health Agency's Solution Delivery Division. The EIDS mission is to support the strategic goals of the MHS and facilitate informed decision-making through the delivery of robust 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.



We are excited to expand our services to transform the delivery of health care for service members, veterans and their families. Enhanced data analytic capabilities will directly impact care by supporting the future of federal health data management and data sharing. This first major step toward creating a federal health data hub ensures the highest levels of sustainability and reliability.



SNAPSHOT

The **Program Executive Office, Defense Healthcare Management Systems (PEO DHMS)** oversees three program offices that acquire, deliver and support IT and services that enable data sharing and modernization of the electronic health record.



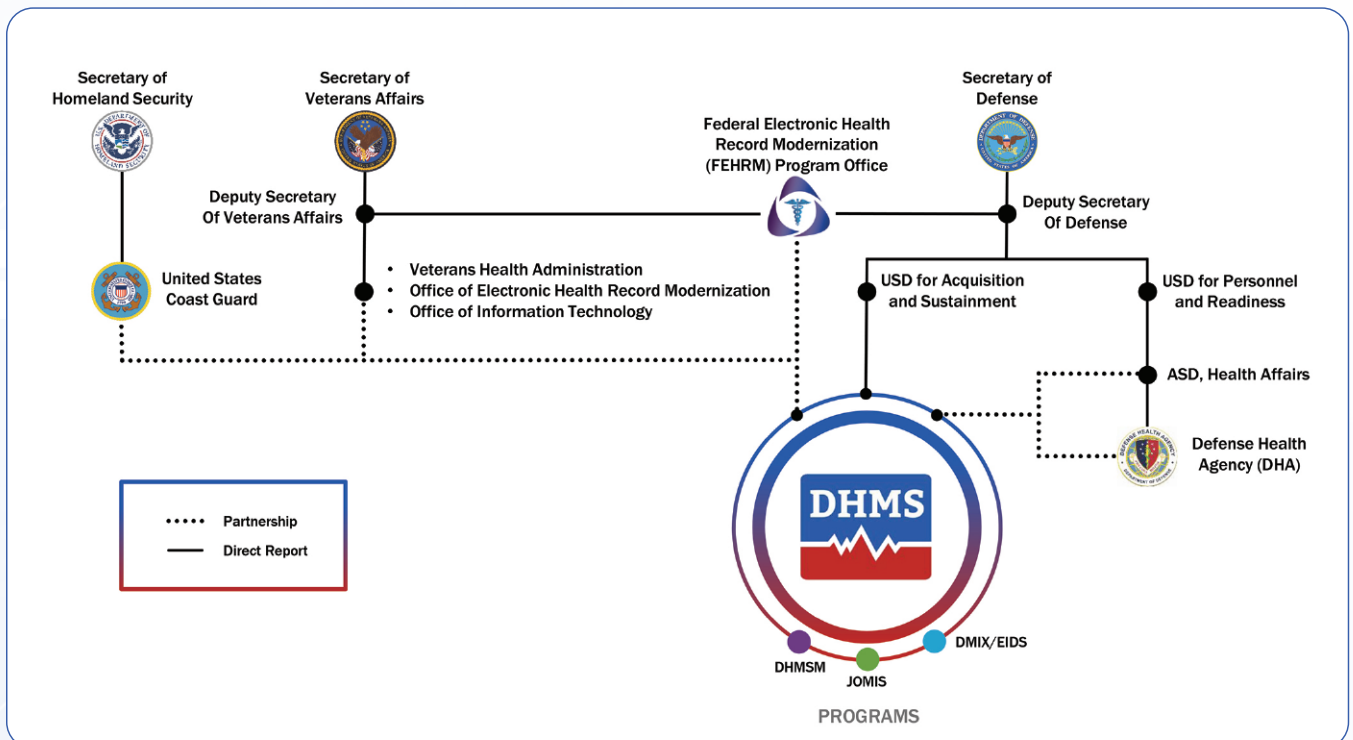
The **DoD Healthcare Management System Modernization (DHMSM[®])** program office oversees the deployment of MHS GENESIS as well as the operations and sustainment of the Joint Longitudinal Viewer (JLV).



Enterprise Intelligence and Data Solutions (EIDS) supports the strategic goals of the MHS and facilitates informed decision-making through the delivery of robust information services and data in a timely, relevant and actionable manner.



The **Joint Operational Medicine Information Systems (JOMIS)** program office provides health IT capabilities to meet existing and emerging operational medicine requirements.



GOAL

ACCELERATE HEALTH CARE IT IMPROVEMENTS



PEO DHMS accelerated health IT improvements by delivering new tele-health capabilities and launching an updated mass vaccination solution through work at Twentynine Palms.

MASS VACCINATION SUCCESS AT TWENTYNINE PALMS



The Robert E. Bush Naval Hospital at Marine Corps Air Ground Combat Center Twentynine Palms, CA conducted a mass vaccination screening using the MHS GENESIS Mass Vaccination process on Monday, September 28, 2020. The hospital screened the records of 700 active duty Marines, identifying 79 that required specific vaccination updates. Providers quickly adapted to the new workflow process throughout the day, ending the day at a 4 minute and 45 second per patient vaccination process rate with one patient processed in 1 minute and 53 seconds. At the end of this cycle, no additional administrative effort was required.

Unlike legacy vaccine procedures that require batch loading of data into immunizations, the MHS GENESIS Mass Vaccination process is immediately viewable in the Patient Portal, and updates readiness systems frequently throughout the day. This tremendous first-day success provided critical preparation for the first Mass Vaccination Event. Today, mature sites using MHS GENESIS execute at a 1 minute 45 second rate per patient.

DOD and the United States Coast Guard (USCG) will use the mass vaccination module configured within MHS GENESIS to administer the COVID-19 vaccine.

Additionally, Cerner (part of the Leidos Partnership for Defense Health) is making the mass vaccination capability available to all of its commercial clients, showcasing just one of many benefits that arise from public-private partnerships.



The **MHS GENESIS Patient Portal** is a secure website that allows patients to access their health information, manage appointments and exchange messages with their care team.

NEW TELE-ICU CAPABILITY



Wave NELLIS included delivery of new telehealth capabilities, including tele-ICU (intensive care unit) support at Nellis Air Force Base (AFB). The partnership between DOD and VA directly contributes to the capability's success, which now allows Minnesota-based VA clinicians to provide tele-ICU support via MHS GENESIS to patients at Nellis AFB. Additional virtual health capabilities are planned across the MHS throughout 2021.

Using a non-recording camera, health practitioners interface with patients and “provide real-time advice regarding patient care with access to the patient’s electronic medical records, radiology imaging, labs, current vital signs and vital sign trends,” according to Maj. (Dr.) Matthew Fain, 99th Medical Group critical care unit director, staff pulmonologist and intensivist.

By providing consistent, high-quality care, the tele-ICU system proves effective at preventing unforeseen complications throughout a patient’s stay. As emphasized by the pandemic, there is no more crucial form of delivering quality care right now than telemedicine. Wave NELLIS’s deployment ensures continued quality of care provided by medical practitioners, regardless of a patient's geographic location.

GOAL

ENHANCE PATIENT EXPERIENCE THROUGH SEAMLESS TRANSITION OF CARE



PEO DHMS partnered with VA and FEHRM to expand joint health information exchange (HIE) partnerships, launch MHS GENESIS at USCG sites, and help VA prepare for their first Go-Live in October.

DOD AND VA LAUNCH NEW JOINT HIE



In April 2020, the FEHRM program office launched the joint HIE, an enhanced network of community health care providers across the United States who agree to share clinical information with DOD and VA providers. In October 2020, the joint HIE expanded significantly by connecting to the CommonWell Health Alliance.

Prior to the joint HIE initiative, each department maintained individual connections to their own separate partners. Now, DOD and VA providers can quickly and securely exchange EHR data with a shared set of community health care providers.

With each on-boarded partner, the amount of patient information deepens, making it easier and more efficient for health care providers to understand their patient's needs. Since the joint HIE went live in April, the number of patients found via the joint HIE rose from less than 700,000 to roughly 4 million each in the federal and private sectors.

Thanks to the joint HIE, a patient's information is available to providers at all medical facilities that partner with DOD and VA. What does that mean? Picture this.

Sergeant George Washington, a resident of Mount Vernon, Virginia, might break his leg while skiing in the Colorado Rocky Mountains. Emergency services transport him to the emergency department at Valley View Hospital in Glenwood Springs, Colorado. There, clinicians can access all of Sgt. Washington's medical records from providers he visited in DOD because Valley View Hospital is part of the CommonWell Health Alliance.

DOD AND VA LAUNCH NEW JOINT HIE (CONT.)

Since the clinicians at Valley View Hospital will have access to Sgt. Washington's health data, he won't need to provide them with information about his health history, allergies, prescriptions, illnesses, lab and radiology results, immunizations, past medical procedures or medical notes. The joint HIE puts all of this information at the provider's fingertips.

When Sgt. Washington returns to Virginia, he will have his follow-up appointments and physical therapy at his home military treatment facility (MTF), Fort Belvoir Community Hospital. The records from his time at Valley View Hospital in Colorado will be available via JLV for the clinicians at Fort Belvoir. Again, Sgt. Washington will not need to provide paper records to his doctors at his home MTF.

And it doesn't stop there...the benefits of this new system continue into Sgt. Washington's retirement. When Sgt. Washington retires, his VA providers will see all his medical records from the DOD and the private sector.

The ability to share critical health information between clinicians helps minimize the number of times service members, veterans and their families need to share their health histories, undergo duplicative tests or manage printed health records. The joint HIE, and the recent CommonWell expansion, will enhance both operational readiness and beneficiary access to high quality care.



MHS GENESIS DEPLOYMENT IS FULL STEAM AHEAD



MHS GENESIS deployed to the first USCG sites in late August. The successful deployment to the USCG sites is a major milestone in building a single, common federal EHR.

At the onset of the pandemic, the DHMSM program office refocused deployment activities, suspending only those that directly affect health care providers, while supporting existing MHS GENESIS sites, assessing opportunities to advance capabilities, and pursuing greater efficiencies in health IT delivery. DHMSM also deployed MHS GENESIS to Wave NELLIS sites in California and Nevada. The team used a virtual command center for these deployments to reduce the number of personnel in meeting spaces while ensuring a seamless launch of MHS GENESIS to MTFs. The command center provides extensive, daily support during Go-Live events.

As of September 30, 2020, MHS GENESIS is live and operational across 18 MTF commands. 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 EHR across DOD, VA and USCG health systems will enable more efficient, safe and highly-reliable patient-centered care across three federal departments.

GOAL

CONTINUOUSLY DELIVER CAPABILITY



PEO DHMS continuously delivered capabilities to MHS personnel throughout the pandemic, enabling more informed decision-making as well as solutions for COVID-19 testing and reporting.

DHMSM RESPONDS TO COVID-19



We consistently deliver a suite of capabilities to successfully support our military forces, including the current COVID-19 response. Throughout the COVID-19 pandemic, the DHMSM program office continued adding capabilities to MHS GENESIS which enhanced provider support. In April, we:

- Approved MHS GENESIS content and configuration updates to support COVID-19, implementing more than 25 specific configuration changes to support clinicians at MHS GENESIS sites.
- Delivered medical equipment supplies to MHS GENESIS sites in the Pacific Northwest facilities, including hospital beds, medical devices, medical device peripherals and other equipment.
- Delivered workstations on wheels to Walter Reed and Fort Belvoir and ordered laboratory devices for COVID-19 testing at multiple MHS GENESIS locations.
- Created a virtual ambulatory clinic location at each MTF currently using MHS GENESIS to support and track COVID-19 activities associated with: primary care; laboratory, radiology and pharmacy orders; in-clinic medicine administration; and mass vaccination.
- Identified a short-term solution to support COVID-19 monitoring and reporting, enabled e-visits via MHS GENESIS Patient Portal; and created two new emergency department order sets for evaluation and admission to streamline care coordination.

We remain agile and adaptable to support the military's COVID-19 response efforts. While we temporarily suspended specific deployment activities due to social distancing requirements and travel restrictions, the team remains active and engaged in developing new capabilities to support MHS GENESIS users and the operational medicine community.

JOMIS DEVELOPS NEW MEDICAL COMMON OPERATING PICTURE



MEDCOP

This year, the JOMIS program office developed a new, comprehensive medical command and control and medical situational awareness capability, the Medical Common Operating Picture (MedCOP). This new capability provides leaders—spanning from tactical to strategic—with advanced decision-support tools, real-time health surveillance and medical operations visibility, enabling them to manage enterprise-wide health services that support the full range of military operations. MedCOP supports the DOD's COVID-19 response and fulfills a need identified by DOD and combatant command leaders for a complete medical common operating picture to track warfighter readiness.

Through the use of agile methodologies based on a continuous feedback loop between the user community and the development team, JOMIS produced an initial version of MedCOP just two months after contract award, and a fully deployable version in less than six months. MedCOP is JOMIS' first new capability developed fully using agile development and delivery principles.



The Medical Common Operating Picture

(MedCOP) capability provides leaders, spanning from tactical to strategic, with advanced decision support tools, real time health surveillance and medical operations visibility, enabling them to manage enterprise wide health services that support the full range of military operations.



MHS GENESIS ENTERPRISE UPDATES



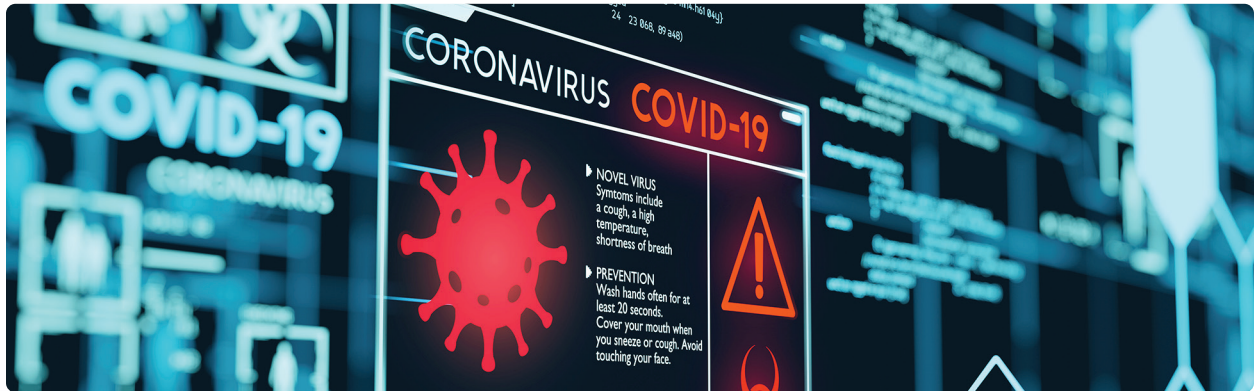
DHMSM deployed Capability Block 3 in August, the most ambitious upgrade to date, delivering a significant block of capabilities supporting both DOD and VA requirements. Capability Block 3 includes an integrated speech recognition solution that provides a consistent, personalized approach to clinical documentation and a clinical decision support tool that helps providers make the most appropriate treatment decision to reduce patient radiation exposure and cost. Other features include new and improved user-facing dental functionalities, streamlined referral processing and reporting, and the ability to schedule appointments by location, search across multiple sites and schedule multiple appointments at once within multiple locations.



MHS GENESIS integrates inpatient and outpatient records, replacing select legacy DOD health care systems and connecting medical and dental information across the continuum of care.



EIDS PANDEMIC REGISTRY



In early April, the EIDS team stood up the COVID-19 registry that continues to pull COVID-19 patient data – including those related to vaccinations – from MHS GENESIS and all relevant legacy systems. The data is updated no less than daily and distributed to both the Centers for Disease Control and Prevention (CDC) and DOD’s analytics tool every day.

In its vaccine project effort, the MHS Information Platform (MIP) team set up a data connection between DOD’s Clinical Data Repository and MIP to allow for an automated transfer of COVID-19 vaccine data. We built on this change, streamlined and automated the data flow, thus reducing processing time by four hours and improving updates from five to seven days per week. The team leverages improved vaccine data input/output processes to automate the registry as much as possible, working with Service Immunization Record Systems to automate and schedule their data extracts for us to eliminate manual processes and improve end-to-end processing time.

After establishing the registry in the spring of 2020, we recognized the increasing importance of health informatics and patient data. In response to that awareness, the COVID-19 registry will be included in a larger capability moving forward to encompass future pandemics and associated analytics, creating a more complete pandemic registry.

GOAL

BECOME A WORLD-CLASS
TECHNOLOGY ORGANIZATION



PEO DHMS is becoming a world-class tech organization by harnessing data in new, profound ways.

HARNESSING THE POWER OF THE CLOUD



In February 2020, DHA approached EIDS to move vital data from traditional data storage facilities to the cloud. Our work to create the MIP made our team the obvious choice for this massive data migration project.

Since DOD maintains one of the most robust longitudinal health data records in existence, employed daily by more than 200,000 MHS users, this was not going to be a simple 'lift and shift' data migration. This game-changing project migrated vital data and applications to a single, authoritative data source in the cloud.

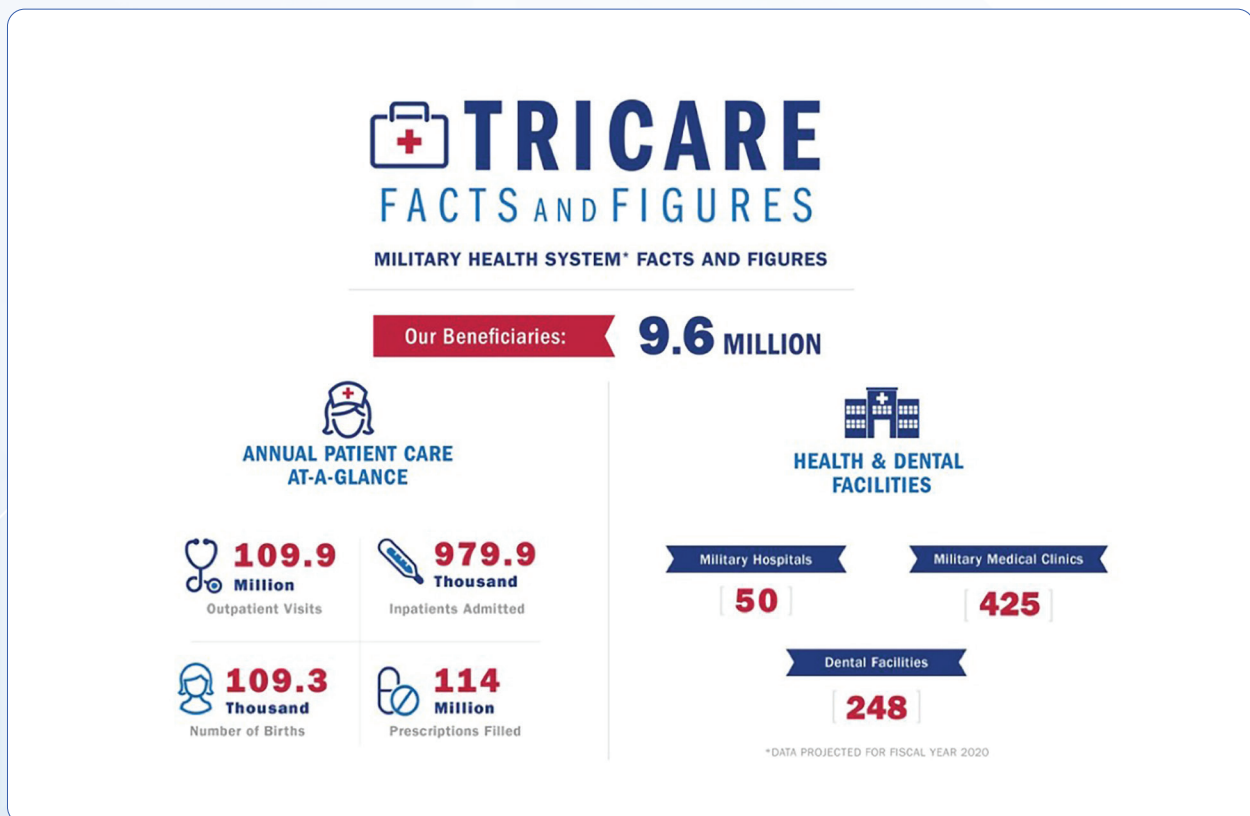
A project of this magnitude normally requires a minimum of 18 months, but EIDS completed the data migration in just 93 days—a remarkable triumph hailed by many in the health data industry. To the EIDS program, migrating the population health data to the cloud is only a building block. Post-migration, the EIDS team continues to integrate and partner with clinicians in the field to drive change while making the data more valuable.

With consolidation, we enable better data analytics and more reliable discovery, driving better outcomes for patient care, business operations and more. Leveraging data as a strategic asset offers major positive impacts for DOD and our partners. This project is the beginning of a proper data dictionary and an understanding of data sources, while simultaneously leveraging them, thereby impacting effective and efficient research along with data analytics that benefit patients and business management. We've laid the groundwork for deep insights and as-yet, unimagined positive outcomes for patients, providers and researchers within DOD and potentially around the world.

HARNESSING THE POWER OF THE CLOUD (CONT.)

Following cloud migration, overall efficiency increased, with better value and better outcomes. Consolidating the data allows us a better focus on resources and provides a window to the future through predictive and prescriptive analytics.

During the pandemic response, EIDS' work positioned DHA to focus its response. By merging data to a common platform, we are meeting providers' needs and addressing the nation's response to COVID-19. We ensure the right data is available nationally to the CDC and other federal partners – but importantly – we adapt and respond to the needs of the nation, not just DOD. This health data delivery system supports the future of federal health data management and data sharing.



ABOUT US

AWARDS, LEADERSHIP, ENGAGEMENT



CD PWR<500
Frq 2.0 MHz
1800 mm
AO 100%

AWARDS

DOD Distinguished Service Award and FCW Federal 100 Award

The Distinguished Civilian Service Award is the highest recognition the Defense Department can give, and is presented to a small number of civilian employees whose careers reflect exceptional devotion to duty and significant contributions of broad scope in policy, scientific, technical or administrative fields that increase effectiveness and efficiency.

The Federal Computer Week (FCW) Magazine's Federal 100 Awards recognize government and industry leaders who play pivotal roles in the federal government IT community.



HOLLY JOERS

2020 FedHealthIT Innovation Award

This event recognizes and honors the federal health innovation, technology and the consulting community to celebrate programs nominated and selected by their peers for driving innovation and results across VA, Centers for Medicare and Medicaid Services, the MHS, and the Department of Health and Human Services.



G2Xchange 2020 Disruptive Tech Program Award

From artificial intelligence (AI) and the internet of things (IoT) to robotic process automation (RPA) and application programming interfaces (APIs) to cloud computing and the focus on security in DevSecOps, emerging technology solutions, products, and processes offer opportunities to support the federal mission and modernization mandate.



FedHealthIT100

The FedHealthIT100 honors those individuals recognized for driving change and advancement in the federal health information technology and consulting market. Nominated and chosen by their peers, some common themes among those selected include the desire and willingness to challenge conventional wisdom, go above and beyond, drive innovation, and to give back to the larger federal health IT and consulting community.



LANCE SCOTT

LEADERSHIP

As acting program executive officer of PEO DHMS, Holly Joers oversees the DOD EHR modernization, including the operational, data exchange and interoperability initiatives. Specifically, she provides direction to DHMSM, EIDS and JOMIS.



HOLLY JOERS
Acting Program Executive Officer,
PEO DHMS
August 2020 September 2020

Mr. Bill Tinston serves as the director of the FEHRM program office. In this role, he oversees the FEHRM's efforts in implementing a single, common federal EHR with the DOD, VA and USCG. He is responsible for managing an organizational structure that enables joint decision-making and drives federal solutions for optimizing EHR implementation and operation.



BILL TINSTON
Director, FERM
October 2019 August 2020

Mr. Craig Schaefer serves as the DHMSM program manager. In this role, he provides acquisition leadership and management expertise to support the deployment of the state-of-the-market EHR, MHS GENESIS.



CRAIG SCHAEFER
Program Manager, DHMSM
October 2019 September 2020

LEADERSHIP (CONT.)



DAVID NORLEY
Program Manager, JOMIS
October 2019 - September 2020

David Norley is the JOMIS program manager. He directs the acquisition, development and deployment of integrated operational medicine information systems to the deployed community. He also oversees the sustainment and development of existing products in the Theater Medical Information Program-Joint (TMIP-J) portfolio.



CHRIS NICHOLS
Program Manager, EIDS
June 2020 - September 2020

Mr. Chris Nichols serves as the EIDS program manager. In his role, Mr. Nichols is responsible for delivering secondary data solutions around a digital health hub model; rationalizing legacy data capabilities; orchestrating integration for systems such as MHS GENESIS; and providing enterprise clinical intelligence to include clinical support applications, readiness reporting, research, 'big data' techniques, and dashboards for the entire MHS and other federal partners.



CAPT. KAREN MATTHEWS
Military Deputy Program
Executive Officer, PEO DHMS
October 2019 - June 2020

U.S. Navy Capt. Karen Matthews provides clinical and business direction in health care information management/information technology principles as well as functional representation during interactions with internal and external stakeholders. She oversees the EHR deployment and change management strategies with senior service leadership across the DHA, the Assistant Secretary of Defense, Health Affairs and clinical and business leaders across the MHS.

ENGAGEMENT

Follow us on social media:



@DoD_EHR

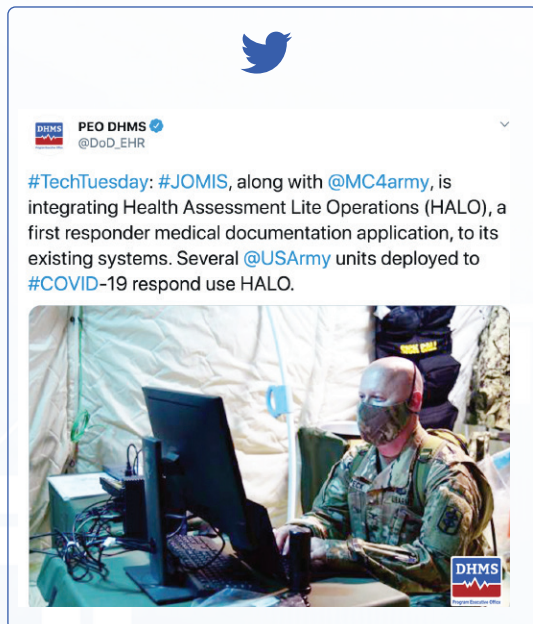


Defense Healthcare Management Systems



Program Executive Office, Defense Healthcare Management Systems
(PEO DHMS)

Most liked of 2020:



ACRONYMS

AFB: Air Force Base

DHA: Defense Health Agency

DHMSM: DoD Healthcare Management System Modernization

DOD: Department of Defense

EHR: Electronic Health Record

EIDS: Enterprise Intelligence and Data Solutions

FCW: Federal Computer Week

FEHRM: Federal Electronic Health Record Modernization

FY: Fiscal Year

HIE: Health Information Exchange

JLV: Joint Longitudinal Viewer

JOMIS: Joint Operational Medicine Information Systems

MedCOP: Medical Common Operating Picture

MIP: MHS Information Platform

MHS: Military Health System

MHS GENESIS: DOD's Modernized Electronic Health Record

MTF: Military Treatment Facility

PEO DHMS: Program Executive Office, Defense Healthcare Management Systems

TMIP-J: Theater Medical Program Information-Joint

USCG: United States Coast Guard

VA: Department of Veterans Affairs