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**Exhibit R-2, RDT&E Budget Item Justification:** PB 2022 Defense Health Agency **Date:** May 2021

<b>Appropriation/Budget Activity</b> 0130: <i>Defense Health Program I BA 2: RDT&amp;E</i>	<b>R-1 Program Element (Number/Name)</b> PE 0605045DHA I <i>Joint Operational Medicine Information System (JOMIS)</i>
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COST (\$ in Millions)	Prior Years	FY 2020	FY 2021	FY 2022 Base	FY 2022 OCO	FY 2022 Total	FY 2023	FY 2024	FY 2025	FY 2026	Cost To Complete	Total Cost
Total Program Element	177.045	41.902	46.214	52.948	-	52.948	-	-	-	-	Continuing	Continuing
447A: <i>Joint Operational Medicine Information System (JOMIS)</i>	177.045	41.902	46.214	52.948	-	52.948	-	-	-	-	Continuing	Continuing

**Program MDAP/MAIS Code:** 521

**A. Mission Description and Budget Item Justification**

The Joint Operational Medicine Information Systems (JOMIS) Portfolio Program will acquire solutions to modernize, deploy, and sustain the Department of Defense's (DoD) operational medicine (OpMed) information systems (IS) capabilities. OpMed systems provide commanders and medical professionals with integrated, timely, and accurate information to make critical command and control and medical decisions. These operational systems will function in constrained, intermittent, and non-existent communications environments while providing access to authoritative sources of clinical data. The JOMIS Program is a declared Joint Interest for capability requirements executed under the Adaptive Acquisition Framework.

JOMIS will pursue efforts that allow it to sunset costly and difficult to maintain legacy systems in conjunction with functional Subject Matter Experts (SME), Service representatives, Combatant Commanders (CCMD), and the Defense Health Agency's (DHA) Joint Chiefs of Staff (J6) Solutions Delivery Division and Cyber Divisions. The Theater Medical Information Requirement Information Systems Capabilities Development Document (TMIR IS CDD) and the Joint Requirements Oversight Council Memorandum (JROCM) signed February 28, 2017 document the knowledge management capabilities required to enable the following health care functions: Health Care Delivery (HCD), Medical Logistics (MedLOG), Medical Command and Control (MedC2), Medical Situational Awareness (MedSA) and Patient Movement.

**B. Program Change Summary (\$ in Millions)**

	<u>FY 2020</u>	<u>FY 2021</u>	<u>FY 2022 Base</u>	<u>FY 2022 OCO</u>	<u>FY 2022 Total</u>
Previous President's Budget	41.902	46.214	52.948	-	52.948
Current President's Budget	41.902	46.214	52.948	-	52.948
Total Adjustments	0.000	0.000	0.000	-	0.000
• Congressional General Reductions	-	-			
• Congressional Directed Reductions	-	-			
• Congressional Rescissions	-	-			
• Congressional Adds	-	-			
• Congressional Directed Transfers	-	-			
• Reprogrammings	-	-			
• SBIR/STTR Transfer	-	-			

**Change Summary Explanation**

FY 2021: Realignment of funding to BA 08 (Software and Digital Technology Pilot Program).

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<b>Exhibit R-2A, RDT&amp;E Project Justification:</b> PB 2022 Defense Health Agency										<b>Date:</b> May 2021		
<b>Appropriation/Budget Activity</b> 0130 / 2					<b>R-1 Program Element (Number/Name)</b> PE 0605045DHA / <i>Joint Operational Medicine Information System (JOMIS)</i>				<b>Project (Number/Name)</b> 447A / <i>Joint Operational Medicine Information System (JOMIS)</i>			
<b>COST (\$ in Millions)</b>	<b>Prior Years</b>	<b>FY 2020</b>	<b>FY 2021</b>	<b>FY 2022 Base</b>	<b>FY 2022 OCO</b>	<b>FY 2022 Total</b>	<b>FY 2023</b>	<b>FY 2024</b>	<b>FY 2025</b>	<b>FY 2026</b>	<b>Cost To Complete</b>	<b>Total Cost</b>
447A: <i>Joint Operational Medicine Information System (JOMIS)</i>	177.045	41.902	46.214	52.948	-	52.948	-	-	-	-	Continuing	Continuing

**A. Mission Description and Budget Item Justification**

The purpose of JOMIS is to modernize, deploy, and sustain the DoD’s OpMed IS while developing and fielding new theater capabilities that enable comprehensive health services to meet Warfighter requirements for military medical operations. JOMIS is intended to function in constrained, intermittent, and non-existent communications environments while providing access to authoritative sources of clinical data.

There are technological and business challenges to the OpMed mission including aged technology, inefficient design standards, overreliance on obsolete code, lack of automation, different deployment methods by Services that impacts standard user adoption, inefficient and overly-bureaucratic acquisition methods, and the lack of unified functional user input. To mitigate these challenges, JOMIS has planned the following actions:

Translate the TMIR IS CDD into a modern Portfolio Capability Roadmap that can be abstracted down to needs statements, personas, and user stories that can inform leading-edge design practices

- Construct program governance that can be achieved through external consultancy and resource investment into an Operational Medicine Functional Champion (OMFC) to create a high achieving team that envisions the future of OpMed capabilities as they are integrated with DoD and Federal medical data landscapes
- Leverage experiential learning on current innovative projects that provide ample opportunities to explore modern software delivery methods that can create and endure software delivery environments that evolve with the OpMed mission
- Take advantage of industry and DoD best practices to evolve and perfect development methods (e.g., Agile and Development Security Operations) which will facilitate the ability to “continuously integrate” and “continuously deliver” capability throughout the software development life cycle

**B. Accomplishments/Planned Programs (\$ in Millions)**

	<b>FY 2020</b>	<b>FY 2021</b>	<b>FY 2022</b>
<b>Title:</b> Joint Operational Medicine Information System (JOMIS)	41.902	46.214	52.948
<b>Description:</b> Description: Specific contribution to mission delivery: The JOMIS Portfolio Program will acquire solutions to modernize, deploy, and sustain the DoD’s OpMed IS capabilities. OpMed systems provide commanders and medical professionals with integrated, timely, and accurate information to make critical command and control and medical decisions. These operational systems will function in constrained, intermittent, and non-existent communications environments while providing access to authoritative sources of clinical data.			
<b>FY 2021 Plans:</b> FY 2021 Plans:			
<ul style="list-style-type: none"> <li>• Document Capabilities Need Statements (CNS) and User Agreements (UA) with the Program Executive Office (PEO)</li> <li>• Transform the legacy CDD to a modern concept</li> </ul>			

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<b>Appropriation/Budget Activity</b> 0130 / 2	<b>R-1 Program Element (Number/Name)</b> PE 0605045DHA / <i>Joint Operational Medicine Information System (JOMIS)</i>	<b>Project (Number/Name)</b> 447A / <i>Joint Operational Medicine Information System (JOMIS)</i>		
<b>B. Accomplishments/Planned Programs (\$ in Millions)</b>		<b>FY 2020</b>	<b>FY 2021</b>	<b>FY 2022</b>
<ul style="list-style-type: none"> <li>• Develop User Engagement Concept of Operations (CONOPS)</li> <li>• Develop Test and Evaluation and Cyber Integration CONOPS</li> <li>• Gather lessons learned from experiential learning</li> <li>• Ensure approved and modernized delivery model</li> <li>• Develop Strategic Research CONOPS</li> <li>• Create legacy sunset plan</li> <li>• Consolidate functional area documentation</li> <li>• Develop program-level integration CONOPS</li> <li>• Create Program-level metrics</li> </ul> <p><b>FY 2022 Plans:</b> FY 2022 Plans:</p> <ul style="list-style-type: none"> <li>• Execute OpMed Capability Roadmap</li> <li>• Acquire Continuous Integration/Continuous Delivery platform to ensure stable, cyber-secure infrastructure for development, testing, training, and production</li> <li>• Initiate development of Operational Medicine Data Service (OMDS)</li> <li>• Acquire software and application development services through Multi-award Contract</li> <li>• Execute Healthcare Delivery development plan including development of MHS GENESIS-Theater, Health Assessment Lite Operations (HALO), and Theater Blood Management system</li> </ul> <p><b>FY 2021 to FY 2022 Increase/Decrease Statement:</b> Reflects the program's updated strategy and timeline.</p>				
<b>Accomplishments/Planned Programs Subtotals</b>		41.902	46.214	52.948
<b>C. Other Program Funding Summary (\$ in Millions)</b>				
N/A				
<b>Remarks</b>				
<b>D. Acquisition Strategy</b>				
<p>In FY21 JOMIS received approval of a new Acquisition Strategy from its Milestone Decision Authority (MDA). The FY21 Overarching Portfolio Acquisition Strategy allows JOMIS to acquire solutions across all five Healthcare functions as described in the TMIR IS CDD. Further, the Portfolio Acquisition Strategy allows JOMIS to utilize the Adaptive Acquisition Framework and the Software Pathway of Acquisition to continuously enhance existing capabilities and deliver new capabilities prioritized by the OpMed Functional Community. The Portfolio Acquisition Strategy ensures that the JOMIS Program will evaluate and use the most appropriate business, technical, contract and support strategies, and acquisition approaches to minimize costs, reduce program risks, and remain within the schedule while meeting program objectives.</p>				