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**Exhibit R-2, RDT&E Budget Item Justification:** PB 2024 Defense Health Agency **Date:** March 2023

<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 2022	FY 2023	FY 2024 Base	FY 2024 OCO	FY 2024 Total	FY 2025	FY 2026	FY 2027	FY 2028	Cost To Complete	Total Cost
Total Program Element	137.200	51.016	18.082	18.731	0.000	18.731	21.984	23.014	24.273	24.758	Continuing	Continuing
477A: <i>Joint Operational Medicine Information System (JOMIS)</i>	137.200	51.016	18.082	18.731	0.000	18.731	21.984	23.014	24.273	24.758	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 2022</u>	<u>FY 2023</u>	<u>FY 2024 Base</u>	<u>FY 2024 OCO</u>	<u>FY 2024 Total</u>
Previous President's Budget	52.948	18.082	18.731	0.000	18.731
Current President's Budget	51.016	18.082	18.731	0.000	18.731
Total Adjustments	-1.932	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	-1.932	-			

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<b>Exhibit R-2A, RDT&amp;E Project Justification:</b> PB 2024 Defense Health Agency										<b>Date:</b> March 2023		
<b>Appropriation/Budget Activity</b> 0130 / 2					<b>R-1 Program Element (Number/Name)</b> PE 0605045DHA / Joint Operational Medicine Information System (JOMIS)			<b>Project (Number/Name)</b> 477A / Joint Operational Medicine Information System (JOMIS)				
<b>COST (\$ in Millions)</b>	<b>Prior Years</b>	<b>FY 2022</b>	<b>FY 2023</b>	<b>FY 2024 Base</b>	<b>FY 2024 OCO</b>	<b>FY 2024 Total</b>	<b>FY 2025</b>	<b>FY 2026</b>	<b>FY 2027</b>	<b>FY 2028</b>	<b>Cost To Complete</b>	<b>Total Cost</b>
477A: Joint Operational Medicine Information System (JOMIS)	137.200	51.016	18.082	18.731	0.000	18.731	21.984	23.014	24.273	24.758	Continuing	Continuing

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

The purpose of JOMIS is to modernize, deploy, and sustain the DoD’s OpMed IS 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 2022</b>	<b>FY 2023</b>	<b>FY 2024 Base</b>	<b>FY 2024 OCO</b>	<b>FY 2024 Total</b>
<b>Title:</b> Joint Operational Medicine Information System (JOMIS)	51.016	18.082	18.731	0.000	18.731
<b>Description:</b> 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 2023 Plans:</b>					
• Continue to execute OpMed Capability Roadmap					

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<b>B. Accomplishments/Planned Programs (\$ in Millions)</b>	<b>FY 2022</b>	<b>FY 2023</b>	<b>FY 2024 Base</b>	<b>FY 2024 OCO</b>	<b>FY 2024 Total</b>
<ul style="list-style-type: none"> <li>• Continue development of Operational Medicine Data Service (OMDS) and will deliver first Minimum Viable Capability Release (MVCR)</li> <li>• Continue new Healthcare Delivery (HCD) capability development, system integration and testing activities including development of MHS GENESIS-Theater and Theater Blood Management system</li> <li>• Complete development of MedCOP EUCOM dashboard in accordance with Operational Medicine Functional Champion priority</li> <li>• Conduct Test Planning of new interfaces, patches, and Minimum Viable Capability releases (MVCR)</li> </ul> <p><b>FY 2024 Base Plans:</b></p> <ul style="list-style-type: none"> <li>• Continue to execute OpMed Capability Roadmap</li> <li>• Continue development of Operational Medicine Data Service (OMDS) additional MVCR</li> <li>• Continue new Healthcare Delivery (HCD) capability development, system integration and testing activities including development of MHS GENESIS-Theater and Theater Blood Management system.</li> <li>• Conduct Test Planning of new interfaces, patches, and Minimum Viable Capability releases (MVCR).</li> </ul> <p><b>FY 2024 OCO Plans:</b> N/A</p> <p><b>FY 2023 to FY 2024 Increase/Decrease Statement:</b> No significant changes other than inflation adjustment.</p>					
<b>Accomplishments/Planned Programs Subtotals</b>	51.016	18.082	18.731	0.000	18.731

<b>C. Other Program Funding Summary (\$ in Millions)</b> N/A
<b>Remarks</b> n/a

**D. Acquisition Strategy**

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.