

Dr. Lauren Thompson, Director, DoD/VA IPO

Ms. Aimee Scanlon, Acting Program Manager, DMIX PMO

Dr. Brian Jones, Branch Chief, User Integration, DHA



2016 Defense Health Information Technology Symposium

2016 Defense Health Information Technology Symposium

Achieving Interoperability Among DoD, VA, and Private Sector Partners



“Medically Ready Force...Ready Medical Force”

Learning Objectives

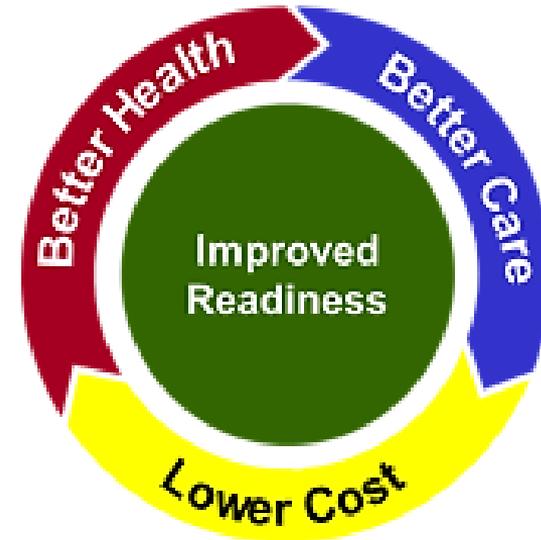
- Address interoperability goals from the DoD perspective
- Provide an update on current DoD data sharing initiatives
- Discuss establishing seamless medical data sharing among the DoD, VA, and private sector partners
- Identify interoperability challenges between the DoD, VA, and private sector partners and efforts to improve

Agenda

- Mission and organization
- Interoperability overview
- DoD interoperability journey
- Joint Legacy Viewer (JLV) demonstration

Value of Health IT

Achieving interoperability is essential to the Department of Defense and Department of Veteran Affairs' ability to efficiently improve healthcare for active duty military, Veterans, and beneficiaries. Today, we will discuss the Departments' efforts to achieve interoperability, as well as the challenges and benefits of creating a seamless electronic health record (EHR).



Mission and Organization



“Medically Ready Force...Ready Medical Force”

Program Executive Office Defense Healthcare Management Systems (DHMS) Mission



Defense Health Agency

2016 Defense Health Information Technology Symposium

To efficiently improve healthcare for the active duty military, Veterans, and beneficiaries by:

- Establishing seamless medical data sharing between DoD, the VA, and the private sector
- Modernizing the electronic health record (EHR) for the Military Health System



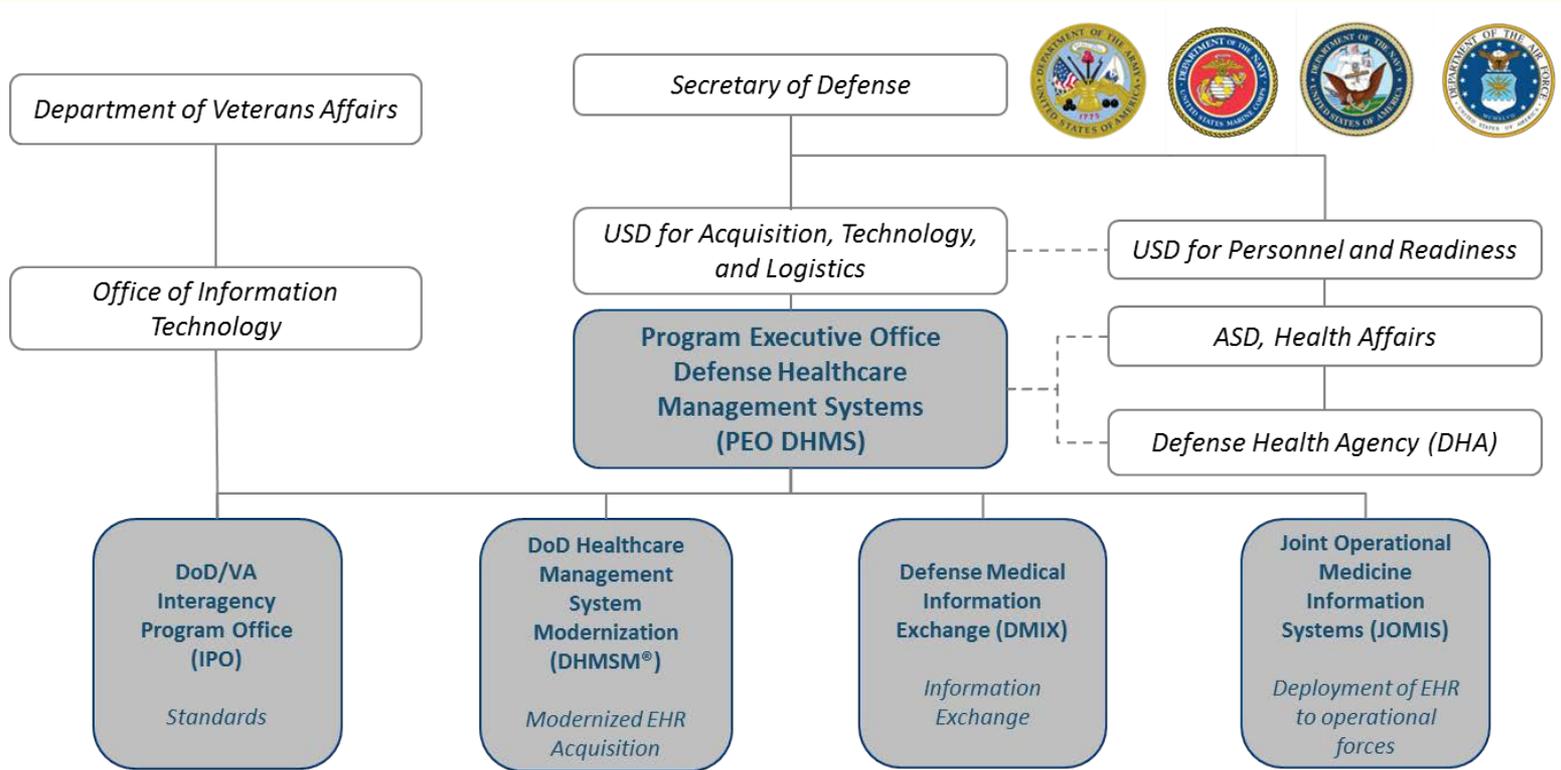
“Medically Ready Force...Ready Medical Force”

PEO DHMS Alignment



Defense Health Agency

2016 Defense Health Information Technology Symposium



“Medically Ready Force...Ready Medical Force”

DoD/VA Interagency Program Office

The DoD/VA Interagency Program Office (DoD/VA IPO) leads and coordinates the adoption of and contribution to national health data standards to ensure interoperability among DoD, VA, and private sector partners.



“Medically Ready Force...Ready Medical Force”

Department of Defense

1,230+ Care Locations

Includes care locations on ships and submarines

9.4M Eligible Beneficiaries, 7.5M Enrollees*

Primarily cares for the younger, active duty population and their families

98M Annual Visits*

60% Private Sector Care

**Source: 'Evaluation of the Tricare Program: Access, Cost, and Quality; Fiscal Year 2016 Report to Congress'*

Department of Veterans Affairs

1,400+ Care Locations

Includes care locations in each state

22M Eligible Beneficiaries, 9M Enrollees

Primarily cares for a population that has long-term medical claims

6.74M Annual Visits**

60% Private Sector Care

***Source: VA Benefits & Health Care Utilization Pocket Card at <http://www.va.gov/vetdata/docs/pocketcards/fy2016q3.pdf>*

Interoperability Overview



“Medically Ready Force...Ready Medical Force”

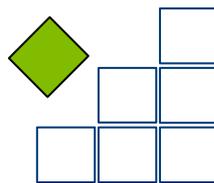
What is Interoperability?

Interoperability: The ability of two or more systems or components to exchange information and to use the information that has been exchanged

For interoperability, data needs to conform to standards for three distinct aspects:



Terminology



**Content
Structure**



**Exchange
Methods**

“Medically Ready Force...Ready Medical Force”

The Nationwide Interoperability Roadmap



Defense Health Agency

2016 Defense Health Information Technology Symposium

3 Year Agenda (2015 – 2017)

Use a common clinical data set to improve health and healthcare quality

6 Year Agenda (2018 – 2020)

Expand Interoperable health IT and users to improve health and lower cost

10 Year Agenda (2021 – 2024)

Achieve a nationwide learning health system

Core technical standards and functions

Certification to support adoption and optimization of health IT products & services

Privacy and security protections for health information

Supportive business, clinical, cultural, and regulatory environments

Rules of engagement and governance

“Medically Ready Force...Ready Medical Force”

The Way Forward

Today



Paper records



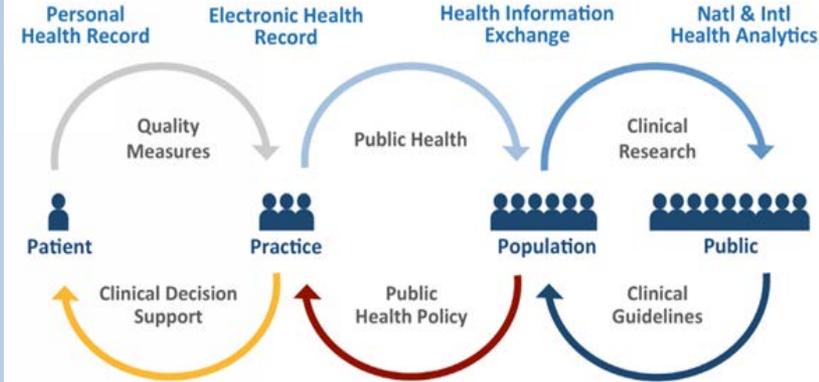
PDF Files



Bi-directional exchanges

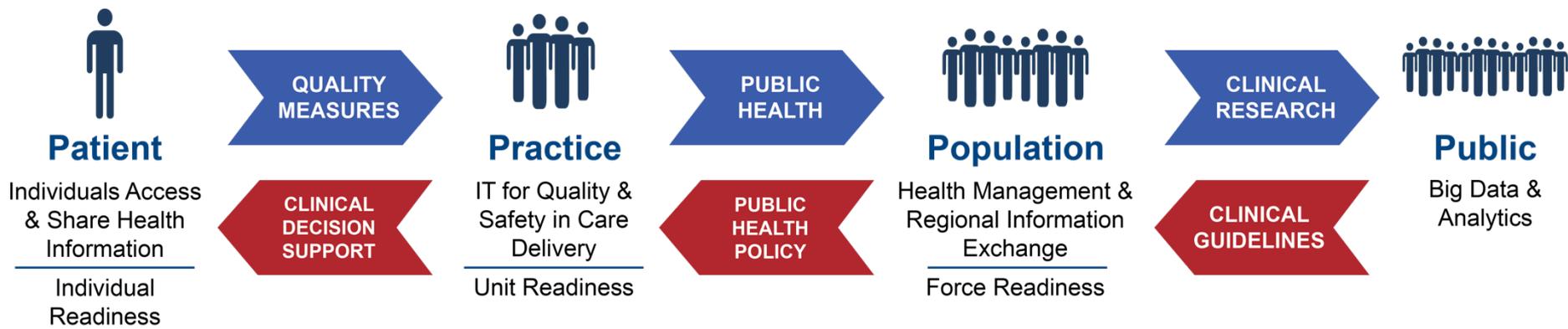


Tomorrow



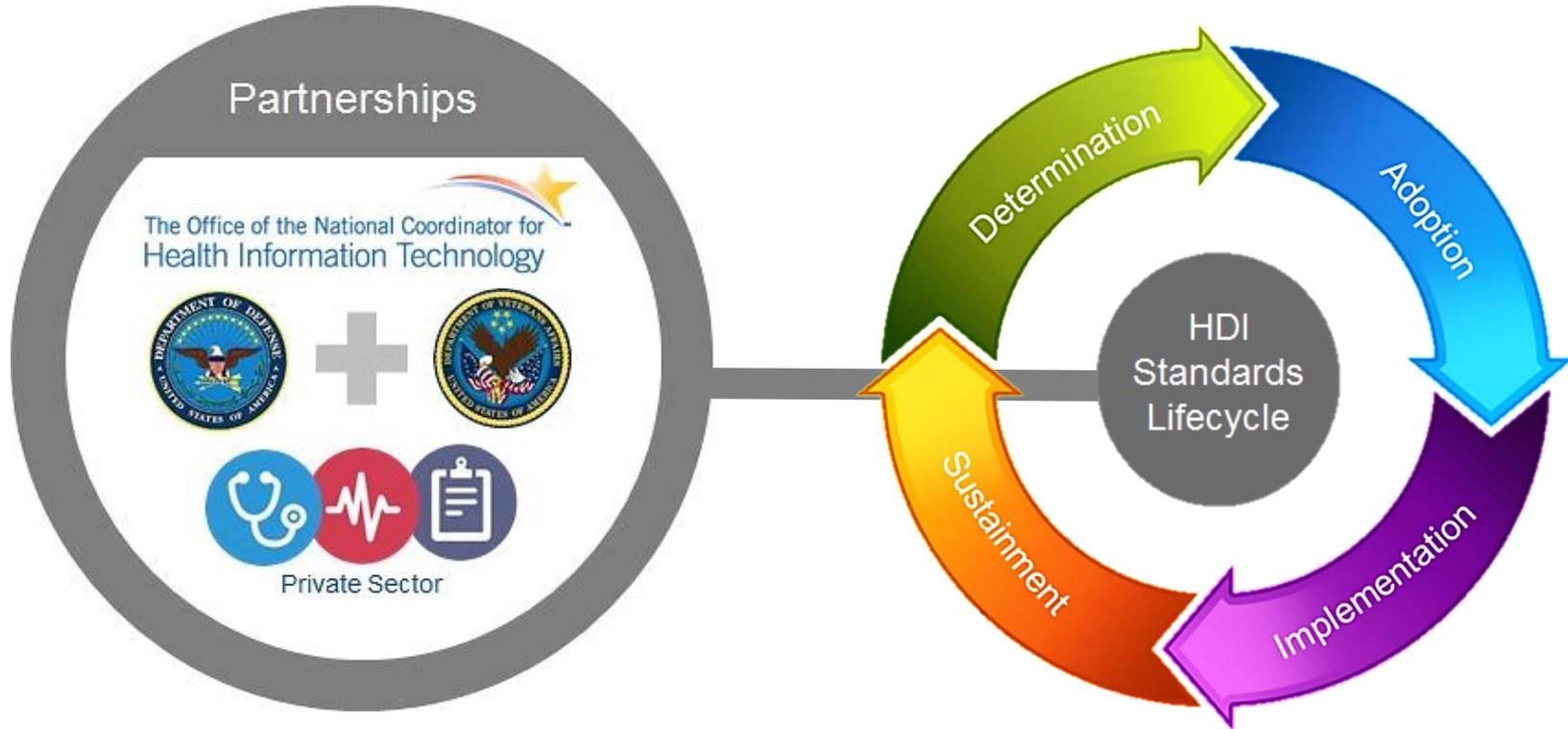
Future health information exchange supports national health IT ecosystem

Value of Interoperability



“Medically Ready Force...Ready Medical Force”

Interoperability



“Medically Ready Force...Ready Medical Force”

DoD Interoperability Journey



“Medically Ready Force...Ready Medical Force”

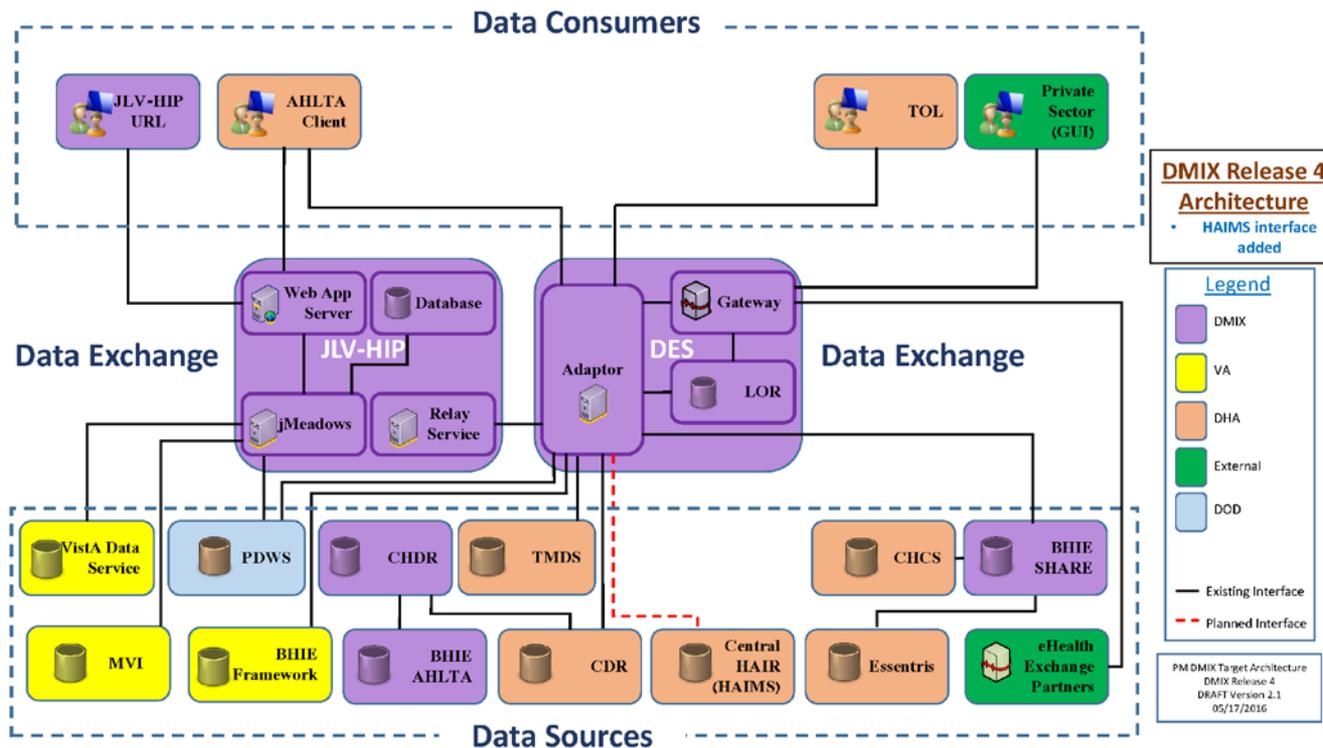
DMIX PMO Mission

The Defense Medical Information Exchange (DMIX) Program Management Office (PMO) focuses on data-sharing efforts with DoD, VA, and private sector partners to enable healthcare providers access to more health information than ever before in a timely manner, thus improving clinical decision-making for better patient care.



“Medically Ready Force...Ready Medical Force”

Health Data Sharing



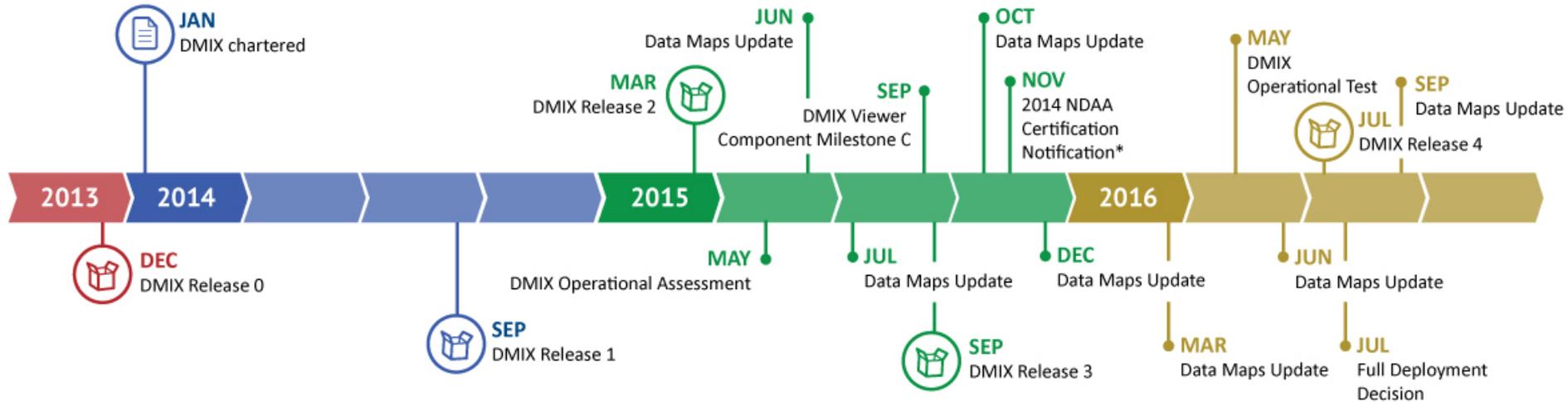
“Medically Ready Force...Ready Medical Force”

DMIX PMO Interoperability Journey



Defense Health Agency

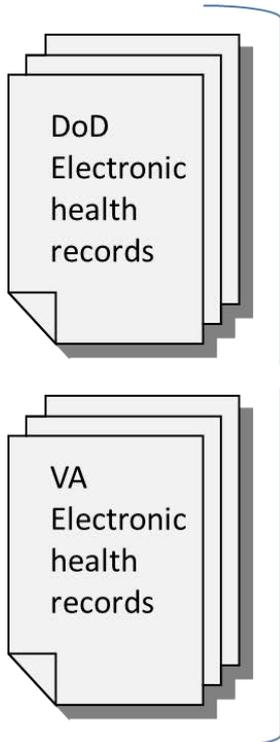
2016 Defense Health Information Technology Symposium



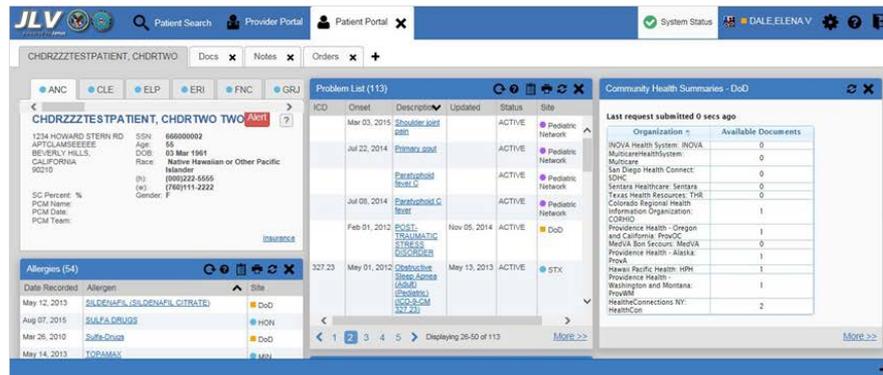
* Dec 2013: NDAA 2014 Requirements -- "Systems ... shall be computable in real time and comply with the existing national data standards." The electronic health record systems are interoperable "with an integrated display of data, or a single electronic health record."

"Medically Ready Force...Ready Medical Force"

Health Data Sharing In Joint Legacy Viewer



IPO Technical Standards



The screenshot shows the JLV interface for a patient named CHDRZZZTESTPATIENT, CHDR TWO TWO. The patient's information includes SSN, age, DOB, race, and contact details. A problem list table is visible with columns for ICD, Onset, Description, Updated, Status, and Site. An allergies table is also shown with columns for Date Recorded, Allergen, and Site.

| ICD | Onset | Description | Updated | Status | Site |
|--------|--------------|---|--------------|--------|-------------------|
| | Mar 03, 2015 | Shoulder joint pain | | ACTIVE | Podiatric Network |
| | Jul 22, 2014 | Paternal joint pain | | ACTIVE | Podiatric Network |
| | | Paronychia nail | | ACTIVE | Podiatric Network |
| | Jul 08, 2014 | Paronychia G nail | | ACTIVE | Podiatric Network |
| | Feb 01, 2012 | POST-TRAUMATIC STRESS DISORDER | Nov 05, 2014 | ACTIVE | DOD |
| 327.23 | May 01, 2012 | Disruptive Social Anxiety (Anxiety) ICD-9-CM 317.21 | May 13, 2013 | ACTIVE | STX |

| Date Recorded | Allergen | Site |
|---------------|----------------------------|------|
| May 12, 2013 | SILICONE SILORHAFIL OTRATE | DoD |
| Aug 07, 2015 | SULFA DRUGS | HON |
| Mar 26, 2010 | Sulfis Shox | DoD |
| May 14, 2013 | TOPAMAX | May |

Health Information Portal (JLV) displays patient information to include:

- Allergies
- Medications
- Immunizations
- Vital signs
- Lab Results
- Family history & more

25 Data Domains

7.4 M Unique Patients

Joint Legacy Viewer (JLV) Demonstration



“Medically Ready Force...Ready Medical Force”

Joint Legacy Viewer User Feedback



Defense Health Agency

2016 Defense Health Information Technology Symposium

*“...we were going to have to **deny a PTSD claim** because we **could not confirm** the Veteran **served in Afghanistan**. The [Service Treatment Record] seemed to show all sorts of training but nothing [about] an IED [in Afghanistan]. The Veteran was rapidly discharged...and his DD214 didn't show Afghanistan service....**I pulled up JLV and found the treatment surrounding the evacuation from Afghanistan in JLV.**”*

-Authorization Quality Review Specialist,
VBA Regional Office, Portland, OR

*“JLV is a tool to **improve the value of healthcare** we provide to our beneficiaries **by preventing extra [unnecessary] tests** that are done because we don't have [the information readily] available.”*

-Chief Medical Informatics Officer
Naval Medical Center San Diego

JLV supports the daily work of more than
190,000 users throughout DoD & VA
(as of 28 June 2016)

“Medically Ready Force...Ready Medical Force”

Key Takeaways

- Working jointly benefits patients and providers
- Objectives and timelines must be transparent
- Develop and prioritize requirements jointly
- Perform test activities simultaneously to ensure the application functions as designed and expected for all users
- Design single, integrated training products with Department-specific addendums



“Medically Ready Force...Ready Medical Force”

Questions?

Learn more:

-  www.health.mil/dhms
-  www.milsuite.mil/book/groups/mhs-genesis
-  @DoD_EHR
-  Defense Healthcare Management Systems

Evaluations



Defense Health Agency

2016 Defense Health Information Technology Symposium

Please complete your evaluations

“Medically Ready Force...Ready Medical Force”

Contact Information

- **Dr. Lauren Thompson**
 - Director – DoD/VA IPO
 - lauren.c.thompson5.civ@mail.mil
- **Ms. Aimee Scanlon**
 - Acting Program Manager – DMIX PMO
 - aimee.b.scanlon.civ@mail.mil
- **Dr. Brian Jones**
 - Branch Chief – User Integration, DHA
 - brian.j.jones84.civ@mail.mil