

Theater Medical Information Program – Joint (TMIP-J)

Executive Summary

- The Army Test and Evaluation Command (ATEC) conducted an FOT&E to validate the Theater Medical Information Program - Joint (TMIP-J) Block 2 Release 1 and Clinical Data Repository (CDR) interface from December 18, 2008, to January 15, 2009, primarily at the Defense Health Information Management System (DHIMS) offices located in Falls Church, Virginia.
- The CDR successfully processed all randomly selected medical encounter records from TMIP-J Block 2 Release 1 in accordance with the business rules established by the Military Health System. However, some of these records did not process on the first attempt. The CDR successfully processed the retransmitted records. It appears that the TMIP-J Block 2 configuration encountered the same capacity limitation associated with the CDR that has occurred with the previously fielded configuration.

System

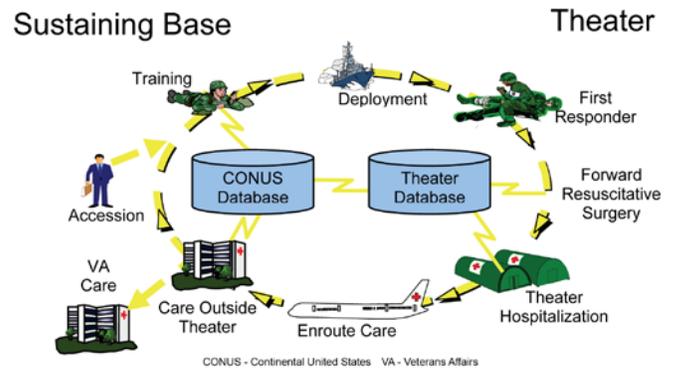
- TMIP-J is a multi-Service Major Automated Information System that integrates software from the sustaining base medical applications into a multi-Service system for use by deployed forces.
- Examples of integrated applications include the Armed Forces Health Longitudinal Technology Application, Composite Health Care System, and Defense Medical Logistics Standard Support.
- TMIP-J provides the following medical capabilities required in the theater:
 - Electronic health record
 - Medical command and control
 - Medical logistics
 - Patient movement and tracking
- The Services provide their own infrastructure (networks and communications) and fund the computer hardware to host the TMIP-J software.

Activity

ATEC conducted an FOT&E to validate the TMIP-J Block 2 Release 1 and CDR interface from December 18, 2008, to January 15, 2009, primarily at the DHIMS offices located in Falls Church, Virginia.

Assessment

- The CDR successfully processed 100 randomly selected medical encounter records from TMIP-J Block 2 Release 1 in accordance with the business rules established by the Military



- TMIP-J consists of two blocks. Block 1 received a limited fielding approval in early 2003 to meet urgent and compelling wartime requirements and is currently deployed. Block 2 is being developed in multiple incremental releases, the first of which began limited fielding in early 2009.

Mission

- Combatant Commanders, Joint Task Force Commanders, and their medical support staff equipped with TMIP-J can make informed and timely decisions regarding the planning and delivery of health care services in the theater.
- Military health care providers equipped with TMIP-J can electronically document medical care provided to deployed forces to support the continuum of medical care from the theater to the sustaining base.

Prime Contractors

- Science Applications International Corporation (SAIC), Falls Church, Virginia
- Northrop Grumman, Chantilly, Virginia
- Akimeka LLC, Kihei, Maui, Hawaii

- Health System. However, 13 of these records did not process on the first attempt. They required retransmission, possibly due to a capacity limitation associated with the CDR, which was also present in TMIP-J Block 1, the previous release.
- Because TMIP-J Block 2 Release 1 demonstrated many improvements over the previous release, this pre-existing limitation was not sufficient to preclude fielding the new release. However, if extensive retransmissions occur, it will affect operational efficiency.

DOD PROGRAMS

Recommendations

- Status of Previous Recommendations. All previous recommendations have been satisfactorily addressed.
- FY09 Recommendation.
 1. The DHIMS Program Management Office should develop a Plan of Actions and Milestones (POA&M) to reduce

the number of retransmissions required with the goal of improving operational efficiency and minimizing the risk that a record update will be missing from the CDR when needed. ATEC should monitor the implementation of the POA&M.