

**Defense Health Program  
Fiscal Year (FY) 2007 Budget Estimates  
Operation and Maintenance  
Exhibit OP-5, Information Management**

**I. Description of Operations Financed:** This Sub-Activity Group provides for the Information Management/Information Technology resources dedicated to the operations and maintenance of Defense Health Program (DHP) facilities. This program includes the following:

**Tri-Service IM/IT**

The O&M portion of the Centrally-managed IM/IT Program funds the costs of program management, system and infrastructure sustainment, annual software licensing fees, and software and hardware maintenance fees. The MHS centrally-managed, IM/IT program includes the following major Acquisition Category I (ACAT I) IT initiatives: 1) Armed Forces Health Longitudinal Technology (AHLTA - formerly CHCS II), included in the Military Computer-Based Patient Record (MCPR) initiative, integrates patient data from different times, providers and sites of care and will contain a Service member's life-long medical record of all illnesses and injuries of the patient, care and inoculations received and exposure to different hazards; 2) Theater Medical Information Program (TMIP), a seamless, interoperable medical system, designed to support theater health services across all echelons of care; 3) Defense Medical Logistics Standard System (DMLSS) is designed to support cataloging, customer logistics, hospital facility operations, property accounting, maintenance of biomedical devices, purchasing and contracting, and inventory management; 4) Executive Information/Decision Support (EI/DS) provides decision support information used by managers, clinicians, and analysts to manage the business of healthcare within the MHS. The Central IM/IT Program also contains funding for ACAT III initiatives such as the following: the Defense Medical Human Resources System (internet), the Patient Accounting System (PAS), Defense Blood Standard System (DBSS), TRICARE On Line (TOL), Enterprise Wide Scheduling and Registration (EWS-R), the Defense Occupational and Environmental Health Readiness System - Industrial Hygiene (DOEHS-IH), and Patient Safety Reporting (PSR). In addition to these ACAT I and ACAT III initiatives, the Tri-Service Infrastructure Management Program Office (TIMPO) manages the associated implementation of three basic components: (1) a wide area network (WAN), deployed to all TRICARE regions, providing communication support for all medical information systems; (2) a local area network (LAN), which will provide unified backbone networks within military treatment facilities; and (3) centralized network management, to include capacity planning, configuration management and security integration. A joint DoD/VA sharing initiative, the Joint Electronic Health Record Interoperability (JEHRI), is also included in the Central IM/IT Program for the DoD portion of this effort.

**Service Medical IM/IT**

Resources required to support non-centrally managed, Service Medical Information Management/Information Technology Programs. Includes Service Medical funded support for Functional Area Applications (Tri-Service and Service Unique); Communications and Computing Infrastructure to include Information Assurance (IA), long haul/wide area communications, office automation and video-teleconferencing, and other related technical activities.

**II. Force Structure Summary:**

This program funds the costs of the development, deployment, and sustainment of automated information systems in support of military medical readiness and promoting quality healthcare services to members of the armed forces, their families, and others entitled to DoD healthcare.

Defense Health Program  
Fiscal Year (FY) 2007 Budget Estimates  
Operation and Maintenance  
Exhibit OP-5, Information Management

III. Financial Summary (\$ in Thousand):

A. Sub- Activity Group

	FY 2006				FY 2007 <u>Estimate</u>
	FY 2005 <u>Actual</u>	Budget <u>Request</u>	<u>Appropriation</u>	Current <u>Estimate</u>	
1. Service Medical IM/IT	380,083	366,102	377,191	377,191	376,220
2. Tri-Service IM/IT	<u>571,550</u>	<u>475,452</u>	<u>478,815</u>	<u>488,142</u>	<u>528,679</u>
Total	951,633	841,554	856,006	865,333	904,899

**Note:**

FY 2005 actuals include \$1.361 million for Hurricane Katrina/Tsunami (Public Laws 108-324, 109-62) supplemental funding.

B. Reconciliation Summary:

	Change FY 2006/2006	Change FY 2006/2007
<b>Baseline Funding</b>	<b>841,554</b>	<b>865,333</b>
Congressional Adjustments (Distributed)	14,452	n/a
Congressional Adjustments (Undistributed)	0	n/a
Adjustments to Meet Congressional Intent	0	n/a
Congressional Adjustments (General Provisions)	0	n/a
<b>Subtotal Appropriated Amount</b>	<b>856,006</b>	<b>865,333</b>
Fact-of-Life Changes	0	n/a
<b>Subtotal Baseline Funding</b>	<b>856,006</b>	<b>865,333</b>
Anticipated Supplemental	9,327	0
Reprogrammings	n/a	n/a
Price Changes	n/a	18,465
Functional Transfers	n/a	0
Program Changes	n/a	<u>21,101</u>
<b>Current Estimate</b>	<b>865,333</b>	<b>904,899</b>

(\$ in Thousands)

C. Reconciliation of Increases and Decreases:

	<u>Amount</u>	<u>Totals</u>
<b>FY 2006 President's Budget Request</b>		<b>841,554</b>
<b>1. Congressional Adjustments</b>		<b>14,452</b>
a. Distributed Adjustments	14,452	
1) Automated Clinical Practice Guidelines	1,400	
2) Medical Records Conversion at Walter Reed Army Medical Center	1,000	
3) Army Medical Department Enterprise Resource Planning	1,500	
4) Clinical Coupler Integration	2,800	
5) HealthEForces Program	4,200	
6) Information Therapy Program	1,500	
7) Integrated Clinical Informations Systems Collaboration	1,500	
8) Interactive Internet at Walter Reed Army Medical Center	2,000	
9) Maternal-Fetal Health Infomatics & Outreach Program	1,000	
10) DoD Trauma Registry & Research Database	3,400	
11) U.S. Air Force Medical Services Database	1,800	
12) U.S. Air Force Digital Health Record	1,000	
13) 1% Congressional Reduction.	-8,648	
b. Undistributed Adjustments	0	
c. Adjustment to Meet Congressional Intent	0	
d. General Provisions	0	
<b>FY 2006 Appropriated Amount</b>		<b>856,006</b>

Defense Health Program  
Fiscal Year (FY) 2007 Budget Estimates  
Operation and Maintenance  
Exhibit OP-5, Information Management

	<u>Amount</u>	(\$ in Thousands)	<u>Totals</u>
<b>C. Reconciliation of Increases and Decreases:</b>			
<b>2. War-Related and Disaster Supplemental Appropriations</b>			<b>9,327</b>
a. Department of Defense Appropriations Act, 2006 (Public Law 109-148)			
1) Avian Flu	5,000		
2) Hurricanes in the Gulf of Mexico	4,327		
<b>3. Fact-of-Life Changes</b>			<b>0</b>
a. Functional Transfers			
1) Transfers In	0		
2) Transfers Out	0		
b. Technical Adjustments			
1) Increases	0		
2) Decreases			
c. Emergent Requirements			
1) Program Increases			
a) One-Time Costs	0		
b) Program Growth	0		
2) Program Reductions			
a) One-Time Costs	0		
b) Program Decreases	0		
<b>Baseline Funding</b>			<b>865,333</b>
<b>4. Reprogrammings (Requiring 1415 Actions)</b>			<b>0</b>
a. Increases	0		
b. Decreases	0		
<b>Revised FY 2006 Estimate</b>			<b>865,333</b>
<b>Less: Item 2, War-Related and Disaster Supplemental Appropriations, and Item 4,</b>			<b>-9,327</b>
<b>5. Reprogrammings</b>			
<b>Normalized Current Estimate for FY 2006</b>			<b>856,006</b>
<b>6. Price Change</b>			<b>18,465</b>
<b>7. Functional Transfers</b>			<b>0</b>
a. Transfers In	0		
b. Transfers Out	0		
<b>8. Program Increases</b>			<b>56,791</b>
a. Annualization of New FY 2007 Program			
b. One-Time FY 2007 Costs			
1) Reverse 1% Congressional Reduction.	8,833		
c. Program Growth in FY 2007			
1) Sustainment growth in support of Armed Forces Health Longitudinal Technology Application.	9,227		
2) Maintenance costs for cache licenses and continued legacy system conversion for the Enterprise Wide Scheduling and Registration program.	13,954		
3) Sustainment increases for the deployed Coding and Compliance Editor and the Charge Master Based Billing modules.	3,328		
			<b>47,958</b>

Defense Health Program  
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Operation and Maintenance  
Exhibit OP-5, Information Management

		(\$ in Thousands)	
	<u>Amount</u>		<u>Totals</u>
<b>C. Reconciliation of Increases and Decreases:</b>			
4) Increased sustainment associated with the deployment of Patient Safety Reporting.	993		
5) Increased sustainment support for reporting tools capabilities within the Executive Information/Decision Support program.	2,528		
6) Additional sustainment requirement associated with Defense Occupational and Environmental Health Readiness System (DOEHRS) -Industrial Hygiene (IH).	1,631		
7) Funding for Service medical information assurance program to include intrusion detection, firewalls, proxy servers, Department of Defense Information Technology Security Certification and Accreditation Process, and public key infrastructure.	5,675		
8) Sustainment increases in the Tri-Service Infrastructure Management Program Office (TIMPO) due to the deployment of additional IM/IT applications in FY 2006.	5,909		
9) Adjustments to various IM/IT support and program activities such as the Defense Medical Logistics Standard Support and Defense Blood Standard System.	4,644		
10) Reflects Foreign Currency Fluctuation.	69		
<b>9. Program Decreases</b>			<b>-26,363</b>
a. One-Time FY 2007 Costs		<b>-23,593</b>	
1) Automated Clinical Practice Guidelines	-1,430		
2) Medical Records Conversion at Walter Reed Army Medical Center	-1,021		
3) Army Medical Department Enterprise Resource Planning	-1,532		
4) Clinical Coupler Integration	-2,860		
5) HealthEForces Program	-4,289		
6) Information Therapy Program	-1,532		
7) Integrated Clinical Informations Systems Collaboration	-1,532		
8) Interactive Internet at Walter Reed Army Medical Center	-2,043		
9) Maternal-Fetal Health Informatics & Outreach Program	-1,021		
10) DoD Trauma Registry & Research Database	-3,473		
11) U.S. Air Force Medical Services Database	-1,839		
12) U.S. Air Force Digital Health Record	-1,021		
b. Program Decreases in FY 2007		<b>-2,770</b>	
1) Department management direction for Defense Information Systems Agency realignment	-2,770		
<b>FY2007 Budget Request</b>			<b>904,899</b>

Defense Health Program  
Fiscal Year (FY) 2007 Budget Estimates  
Operation and Maintenance  
Exhibit OP-5, Information Management

**IV. Performance Criteria and Evaluation Summary:**

**V. Personnel Summary:**

	<u>FY 2005</u>	<u>FY 2006</u>	<u>FY 2007</u>	<u>Change</u> <u>FY 2006/2007</u>
<u>Active Military End Strength (E/S)</u>				
Officer	158	158	158	0
Enlisted	<u>428</u>	<u>364</u>	<u>364</u>	<u>0</u>
Summary	586	522	522	0
<u>Civilian End Strength</u>				
US Direct Hire	1,285	1,250	1,251	1
Foreign National Direct Hire	<u>18</u>	<u>11</u>	<u>11</u>	<u>0</u>
Total Direct Hire	1,303	1,261	1,262	1
Foreign National Indirect Hire	<u>39</u>	<u>28</u>	<u>28</u>	<u>0</u>
Total Civilians	1,342	1,289	1,290	1
(Reimbursable included above memo)	0	0	0	0
<u>Active Military Average Strength (A/S)</u>				
Officer	149	158	158	0
Enlisted	<u>349</u>	<u>396</u>	<u>364</u>	<u>-32</u>
Total Military	498	554	522	-32
<u>Civilian FTEs</u>				
US Direct Hire	1,238	1,252	1,254	2
Foreign National Direct Hire	<u>15</u>	<u>11</u>	<u>11</u>	<u>0</u>
Total Direct Hire	1,253	1,263	1,265	2
Foreign National Indirect Hire	<u>40</u>	<u>30</u>	<u>31</u>	<u>1</u>
Total Civilians	1,293	1,293	1,296	3
(Reimbursable included above memo)	0	0	0	0
Annual Civilian Workyear Cost (\$000's)	101,317	93,145	95,544	
Average Civilian Salary (\$000's)	78.358	72.038	73.722	

**VII. OP 32 Line Items as Applicable (Dollars in Thousands - see next page):**