



# The BEAT

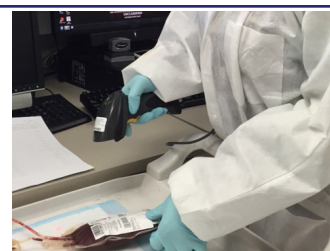
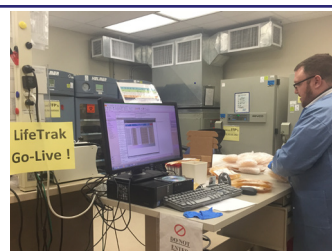


THE NEWSLETTER OF THE SOLUTION DELIVERY DIVISION

## IN THIS ISSUE

- Blood Donor Management System Fully Deployed ..... 1
- SDD At-A-Glance ..... 2
- Leadership Message ..... 2
- TOL Releases Prescription Refill Enhancements ..... 3
- Health Information Technology Awards ..... 3
- Giving Back with the Combined Federal Campaign ..... 4
- Joint DoD/VA Analysis Presented at ISDS Conference ..... 4
- Meeting the Standards ..... 5
- Did You Know? ..... 5

## Blood Donor Management System Fully Deployed



EBMS provides blood product management solutions allowing real-time sharing of information across military treatment facilities.

Blood donation and transfusion play a vital role in our military's health care system. Blood product availability is one of the most critical components of military readiness.

The Enterprise Blood Management System (EBMS) is comprised of the Blood Management Blood Blank/Transfusion service (BMBB/TS) and the Blood Donor Management System (BDMS). As of February 2016, BDMS is now live at 20 Blood Donor Centers (BDCs) worldwide. EBMS replaced the legacy DoD system, Defense Blood Standard System (DBSS) which, since 1991, provided automated support for military blood product management and transfusion services.

BDMS manages the blood donations for the Armed Services Blood Program (Army, Navy, Air Force, Service Blood Programs and Armed Services Blood Program Office) including blood donor registration, screening, blood products, and associated record keeping for military and civilian blood donors.

"The implementation of BDMS included successfully training over 400 end users, completing system installation activities,

and migration of each site's DBSS legacy data into the new system", stated Sandra Attidore, BDMS Project Manager.

BMBB/TS has been implemented at 60 military treatment facilities (MTFs) and manages the blood product transfusion data for Armed Services Blood Program through automated operations which provide MTF staff the capability to manage specimens, orders, blood products, derivative and testing, as well as manage supply with an easy-to-use inventory overview screen with real-time updates.

EBMS provides blood product management solutions allowing real-time sharing of information across BDCs and MTF and provides an effective "arm-to-arm" blood product management solution our military medical community expects.

COL Michael Greenly, Program Manager, EHR Core Program Office, lauds the efforts of his EBMS team, "The EBMS team advances the mission of providing the latest technology for the greatest benefit to providers caring for our more than 9.4 million beneficiaries", said Greenly.



# SDD AT-A-GLANCE



## SDD Portfolio

- The SDD portfolio delivers the functional benefits of information technology to drive health care to health
- Global reach in all military treatment facilities (MTF)
  - 63 hospitals, 5,519 beds
  - 413 medical clinics
  - 375 dental clinics

## Direct Impact to MTF Operations

- 9.4M beneficiaries with clinical data
- 95K+ active users, 125K+ end-user devices
- 150K+ new encounters daily
- Process nearly 25K requisitions and \$13M+ in medical supplies and pharmaceuticals daily
- Near real-time global medical surveillance
- Support patient safety, nutrition services, blood programs, occupational health, and more

## Clinical EHR Solutions

- AHLTA – outpatient EHR
- Essentris® – inpatient EHR
- CHCS – appointing and ancillary
- Secure Messaging and TOL Patient Portal
- EHR Sustainment – transition to new, modernized EHR
- HAIMS – artifacts and imagery
- EBMS – blood product management

## Business & Administrative Solutions

- DMHRSi – medical human resources
- DMLSS – medical logistics
- ESSENCE – syndromic medical surveillance
- JCCQAS – credentialing
- iMEDCONSENT – patient consent
- S3 – surgical scheduling
- PSR - patient safety
- eIRB – research support
- CCE – medical coding assistance

## Message from SDD Division Chief

Solution Delivery Division (SDD) provides this edition of The BEAT with much pride. February 2016 marked a significant milestone for our Enterprise Blood Management System (EBMS) team completing full deployment of the Blood Donor Management System (BDMS) to 20 Blood Donor Centers worldwide!



COL Richard A. Wilson,  
Division Chief, SDD

EBMS is also comprised of the Blood Management Blood Bank/Transfusion Service (BMBB/TS) which was fully deployed at 60 military treatment facilities in 2015. Together, BDMS and BMBB/TS will now replace the legacy DoD system, the Defense Blood Standard System.

Inside, I invite you to read about the new TRICARE Online enhanced Prescription Refill feature. Beneficiaries can now access their pharmacy and prescription refill status, 24 hours a day, 7 days a week. Read about this new TRICARE pharmacy benefit in this month's Feature Story.

Congratulations are in order for three of our SDD team members who are the recipients of the Health Information Technology awards for Employee of the Quarter and Service Member of the

Quarter, 1st Quarter, Fiscal Year 2016. The award recognition appropriately reflects the endless hours they have spent serving the SDD mission and our brave service members. Congratulations Team!

Since the late 1940's, the Federal workplace has been supporting charitable organizations through internal fundraising efforts. The Defense Health

Agency worked closely with the Combined Federal Campaign to raise more than \$288,000, exceeding their projected goals! Read about this outstanding achievement in this month's Branch Spotlight.

On October 1, 2015, the International Classification of Diseases, Tenth Revision (ICD-10) code sets replaced ICD-9 code sets to report medical diagnoses and inpatient procedures in the Military Health System and in the nation. We define this new classification and clinical terminologies system in our Meeting the Standards column.

Thank you for your interest in our products and services and your support as we strive for premier health care documentation for those who serve this great nation.

Visit [SDD News Subscriber](#) page to register for topics of interest.

# TOL Releases Prescription Refill Enhancements



Did you know you can refill prescriptions using TRICARE Online (TOL)? TOL now offers an enhanced Prescription Refill feature that allows

beneficiaries to order their prescription refills at their preferred military hospital or clinic pick-up location quickly and easily. You can now access your pharmacy and prescription data as well as the status of your refills, which lets you know when your prescription is ready to be picked up 365x24x7.

TOL email and text notifications are now also available for refill requests. Your TOL account will display a notification

message confirming your request and telling you when you can pick up your refill(s). You can also schedule alerts by email and text to remind you when your prescription needs to be refilled, and prompt you if you forget to pick-up a prescription. TOL also offers a convenient link to the TRICARE Mail Order Pharmacy if you prefer to schedule home delivery. According to Jim Copeland, TOL Project Manager, "User feedback has been positive regarding the enhanced TOL prescription refill module. Patients are pleased with the convenience and ease of the new capabilities. Nearly 14,000 refills have been requested using TOL on a weekly basis since the deployment on 15 January."

Refilling a prescription is easy! To refill an active prescription using TOL follow the simple steps below:

1. Go to [www.tricareonline.com](http://www.tricareonline.com) and click "Log In".
2. Log in with your DS Logon Premium (Level 2), DoD CAC or DFAS myPay credentials. If you do not have DS Logon credentials, click "Register".
3. Click 'Rx Refill' option on the TOL home page or top navigation bar to request one or more refills.
4. Confirm your primary military treatment facility (MTF) or select a different MTF from the drop-down box.
5. Select your prescription(s) to refill, choose a "Pharmacy Pick-up Location" and click "Submit" to refill your request.
6. Request refills for your family members by selecting the "Request Refill by Rx Number" option. Enter up to six prescription numbers. Choose Pharmacy pick-up location, then submit your refill request.

You can also refill your prescription(s) by calling the 1-800 number on the bottle.

If you have any questions or concerns, please call the MTF Pharmacy Staff directly. For more information about the TRICARE pharmacy benefit, visit [www.tricare.mil/pharmacy](http://www.tricare.mil/pharmacy).



## HIT EMPLOYEE OF THE QUARTER

The HIT Employee of the Quarter Award recognizes the significant contributions HIT personnel make to improve the Defense Health Agency and/or the Military Health System enterprise. We recognize the following Solution Delivery Division (SDD) award recipient, who was selected as both the Civilian Category II and the Overall HIT Employee of the Quarter for the 1st Quarter, FY16.

**Dwayne Humphries (Cat II)**

## HIT SERVICE MEMBER OF THE QUARTER

The HIT Service Member of the Quarter Award recognizes enlisted personnel, company grade officers and field grade officers who performed their military duties in an outstanding manner, provided exemplary service to their community and demonstrated commitment to self-improvement during a particular period. We recognize the following award recipients for their commitment to excellence, willingness to serve and dedication to the SDD mission.

**LT Inga Keithly**

**MSgt Julie Stewart**

**TSgt Brian Harrison**

# Branch SPOTLIGHT

## Giving Back with the Combined Federal Campaign



DHA worked with partners to raise more than \$288,000 to support the 2015 Combined Federal Campaign.

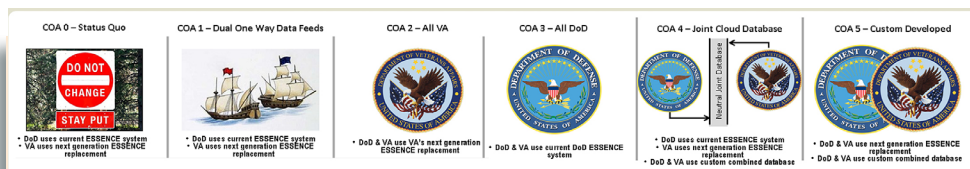
with charity and helping others. The Defense Health Agency (DHA) worked closely with CFC coordinators to raise more than \$288,000 to support the 2015 campaign! DHA managers combined forces with Navy’s Bureau of Medicine and Surgery and held several key events throughout the year to raise money. The campaign kicked off in October 2015 where several local charities were able to share their mission of their organizations. Special events throughout the year were held, which included a Lunchtime Gallery Show, Chili Cook-off, and a Silent Auction. DHA participated in Breast Cancer Awareness Month by highlighting organizations such

as Susan G. Komen and the Breast Cancer Research Foundation to raise funds and awareness.

At the CDC Award Ceremony, which encompasses the entire National Capitol Area, DHA was awarded “Most Outstanding Campaign” and “E-giving” awards in the medium size organization category. DHA will now be moving into the DoD/CFC wide contest for several additional categories. Additionally, several of the DHA CFC volunteers have been nominated for the CFC “Hero” awards. Huge congratulations to everyone who was involved with such a great cause!

The Combined Federal Campaign’s (CFC) mission is to promote and support philanthropy by encouraging federal employees to get involved

## Joint DoD / VA Analysis Presented at ISDS Conference



Joint Team presented two alternative collaborative bio surveillance solutions at 2015 International Society for Disease Surveillance Conference.

Mr. Robert Bell, Solution Delivery Division, together with Julie Pavlin, Uniformed Services University, and Mark Holodniy, Veterans Health Administration, teamed to perform an analysis on collaborative bio-surveillance solutions within the Department of Defense (DoD) and Veterans Affairs (VA). This analysis was presented at the 2015 International Society for

Disease Surveillance Conference on 9 December in Denver, CO.

The objective was to achieve a more cost-effective model for implementing collaborative syndromic surveillance across the DoD and VA. Currently the agencies use two different systems; The DoD utilizes the Electronic Surveillance

System for the Early Notification of Community-based Epidemics (DoD ESSENCE) and the VA, a next generation ESSENCE replacement.

As a result of the analysis, the team presented two alternatives; Use current surveillance systems while establishing dual one-way data feeds, or, create a custom, cloud-based and joint data repository. The agencies will pursue these alternatives to improve syndromic bio-surveillance efforts in the future.

**DoD and VA teams conduct analysis and present alternatives for collaborative bio surveillance solutions.**



# Meeting the Standards

Promoting a Bridge to Worldwide Interoperability

## Use of Clinical Classification and Terminology Systems in the MHS

	ICD-9-CM	ICD-10-CM	SNOMED CT
<b>Coronary Heart Disease</b>	V173 Family history of ischemic heart disease	Z82.49 Family history of ischemic heart disease and other diseases of the circulatory system	53741008 Coronary arteriosclerosis (disorder)
<b>Respiratory acidosis</b>	276.2 Acidosis	E87.2 Acidosis	12326000 Respiratory acidosis

### Why are classification systems and clinical terminologies important?

Neither a clinical terminology nor a classification can, by itself, serve all of the purposes for which health information is currently used or will be used in the future. Terminologies and classifications are designed for distinctly different purposes and to satisfy diverse user data requirements. Multiple terminologies as well as classification systems are necessary to capture and effectively use the breadth and depth of clinical data in an EHR.

### What is an example of a classification system and its use?

The International Classification of Diseases, Tenth Revision (ICD-10) is a classification system that is used by 153 countries worldwide. On October 1, 2015 ICD-10 code sets replaced ICD-9 code sets in MHS systems and in the nation.

ICD codes are standardized medical diagnosis and procedure codes used for billing and health insurance reimbursement, automated decision support and government statistical reports on national morbidity and mortality.

### What is an example of a clinical terminology and its use?

Systematized Nomenclature of Medicine - Clinical Terms (SNOMED CT) is a

systematically organized computable collection of medical terminology useful for clinical collaboration across specialties and sites of care. It contributes to the improvement of the quality and safety of health care and provides effective access to information required for decision support and consistent reporting and analysis.

### How are ICD-10 and SNOMED CT related?

Although designed for distinctly different reasons, relating them by creating a map (above) can make data reuse possible. Maps allow clinical information captured at a very granular level and encoded in SNOMED CT to be aggregated for administrative reporting purposes in ICD-10 and statistical analysis. The National Library of Medicine recommends mapping from SNOMED CT to ICD-10 (granular → aggregated).

ICD -10 would be enough if a researcher wanted to know how many patients with a diagnosis of heart attack died in a year. But, SNOMED CT is needed to learn what muscle of the heart was involved.

The MHS new EHR will be deployed with enhanced data exchange capabilities using both ICD-10 and SNOMED CT.

Ms. Nancy Orvis, [nancy.j.orvis.civ@mail.mil](mailto:nancy.j.orvis.civ@mail.mil).

# DID YOU KNOW?

## Tri-Service Workflow Standardization Supports Better Patient Care

The Tri-Service Workflow (TSWF) team develops and implements a family of integrated workflow solutions and training programs that support the Military Health System Quadruple Aim by reducing unwarranted variations of care through leveraging a standardized workflow and documentation platform.

This platform integrates evidence-based medicine throughout the care delivery and documentation process. The TSWF team is currently working on 42 + concurrent projects ranging from new development to ongoing sustainment, while simultaneously conducting boots on ground and virtual training sessions. In addition, the team creates and maintains dynamic training content, hosts a website and acts as a liaison to medical end-users.

To view these resources or to schedule training, please visit [www.TSWF-MHS.com](http://www.TSWF-MHS.com).

