



# Defense Health Agency

## **ADMINISTRATIVE INSTRUCTION**

**NUMBER 089**  
May 9, 2017

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J3/HCO/CSD

**SUBJECT:** Electronic Health Record (EHR) Utilization and Work Flow Standardization in the National Capital Region Medical Directorate

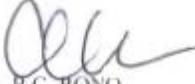
**References:** See Enclosure 1

1. **PURPOSE.** This Defense Health Agency-Administrative Instruction (DHA-AI), based on the authority of References (a) and (b), and in accordance with the guidance of References (c) through (i), establishes the Defense Health Agency's (DHA) procedures to require strict compliance with Reference (d) and applicable Service guidance to ensure the use of Military Health System (MHS) GENESIS and approved workflows upon deployment.
2. **APPLICABILITY.** This DHA-AI applies to all DHA personnel, to include: assigned, attached, or detailed Service members, federal civilians, contractors (when required by the terms of the applicable contract), and other personnel assigned temporary or permanent duties at DHA, to include regional and field activities (remote locations) and the National Capital Region Medical Directorate activities (centers, clinics, and medical treatment facilities (MTFs)).
3. **POLICY IMPLEMENTATION.** It is DHA's policy, pursuant to Reference (d), that the DoD Health Record will be created, used, maintained, and stored to ensure the maintenance of a complete and accurate health record for beneficiaries and/or Service members. Additionally, as MHS GENESIS is deployed, DHA will use the EHR as stated in the procedures section of this DHA-AI.
4. **RESPONSIBILITIES.** See Enclosure 2.
5. **PROCEDURES.** See Enclosure 3.
6. **RELEASABILITY.** **Not cleared for public release.** This DHA-AI is available to users with

Common Access Card authorization on the DHA SharePoint site:  
<http://www.health.mil/dhapublications>.

7. EFFECTIVE DATE. This DHA-AI:

- a. Is effective upon signature.
- b. Will expire 10 years from the date of signature if it has not been reissued or cancelled before this date in accordance with DHA-Procedural Instruction (DHA-PI) 5025.01 (Reference (c)).

  
For R.C. BONO  
VADM, MC, USN  
Director

Enclosures

1. References
2. Responsibilities
3. Procedures

Glossary

ENCLOSURE 1

REFERENCES

- (a) DoD Directive 5136.01, “Assistant Secretary of Defense for Health Affairs (ASD(HA)),” September 30, 2013
- (b) DoD Directive 5136.13, “Defense Health Agency (DHA),” September 30, 2013
- (c) DHA-Procedural Instruction 5025.01, “Publication System,” August 21, 2015
- (d) DoD Instruction 6040.45, “DoD Health Record Life Cycle Management,” November 16, 2015
- (e) DoD Instruction 6040.43, “Custody and Control of Outpatient Medical Records,” June 10, 2004
- (f) DoD Instruction 5015.02, “DoD Records Management Program,” February 24, 2015
- (g) DHA-Administrative Instruction 071, “Incident Response Team (IRT) and Breach Response Requirements,” September 15, 2015
- (h) DoD Instruction 6040.42, “Medical Encounter and Coding at Military Treatment Facilities,” June 10, 2004
- (i) DoD Instruction 1332.18, “Disability Evaluation System (DES),” August 5, 2014

ENCLOSURE 2

RESPONSIBILITIES

1. DIRECTOR, DHA. The Director, DHA, will:

a. Ensure that the enterprise electronic systems supporting the DoD Health Record are managed and sustained in accordance with Reference (f).

b. Ensure that DHA representatives on the Functional Champions Leadership Group (FCLG), Functional Advisory Council, Health Records Working Group, and the Standardization Integrated Product Team, and their representatives review existing Service-level instructions and regulations in light of pending guidance under development in those committees.

2. DIRECTOR, DHA HEALTH INFORMATION TECHNOLOGY (HIT) DIRECTORATE/J6. The Director, DHA HIT/J6, will:

a. Ensure that J-6 representatives knowledgeable of the legacy electronic medical record systems deployed in DoD facilities are available to the policy development team as needed.

b. Ensure that change management and configuration management operations are coordinated jointly with representatives from the Military Services in order to implement changes uniformly and inform end users of any updates.

3. DIRECTOR, DHA OPERATIONS/J3. The Director, DHA Operations/J3, will:

a. Coordinate with the Program Executive Office (PEO), Defense Health Management Systems, to ensure that appropriate PEO and/or contracting representatives able to detail the contractual and technical capabilities of the MHS GENESIS electronic medical record system are available to the policy development team.

b. Develop procedural guidance as soon as practicable upon publication and/or approval by the FCLG for work flow standardization.

c. Develop and issue implementation and procedural guidance in accordance with Reference (d) to specify documentation management procedures that support the DoD Health Record in MHS GENESIS.

ENCLOSURE 3

PROCEDURES

1. MHS GENESIS

a. MTFs are required to use MHS GENESIS and approved workflows as the official system of record in accordance with all of its capabilities immediately upon implementation at the facility.

b. If existing Service or OSD policy is in conflict with the agreed-upon workflows in MHS GENESIS, then the workflow of MHS GENESIS will be used, and the Service or OSD will change its policy to conform to the MHS GENESIS workflow, unless the result would be a potential patient safety issue.

c. Conflict Resolution

(1) If there is a potential patient safety issue, an impediment to workflow, or degradation of related workflows, temporarily mitigate the immediate concern, report the issue to enterprise governance, and follow enterprise governance adjudication of the issue once returned.

(2) Reporting to enterprise governance does not replace or supersede current patient safety and quality reporting forums. All potential and actual patient safety events will feed current safety reporting mechanisms.

2. MHS GENESIS PATIENT ADMINISTRATION WORKFLOWS

a. Work flow standardization products and publications will be developed with representation from the Military Services and the DHA, under the oversight of the Medical Operations Group (MOG) and with coordination with the FCLG.

b. Service representatives on all policy work groups will review existing Service-level instructions and regulations and, when necessary, initiate procedures to coordinate and/or deconflict them with the pending guidance.

c. Implementation and Procedural Guidance will be published in the form of DHA-Interim Procedures Memoranda, DHA-PIs, and/or DHA-Procedural Manuals in accordance with Reference (d).

d. Additional reference materials such as flow charts and tables of allowable entries in medical record fields (for example, appointment types) will be approved by the MOG and coordinated with the FCLG prior to being distributed and/or made available in DHA reference libraries.

## GLOSSARY

### PART I. ABBREVIATIONS AND ACRONYMS

DHA	Defense Health Agency
DHA-AI	Defense Health Agency-Administrative Instruction
EHR	Electronic Health Record
FCLG	Functional Champions Leadership Group
MHS	Military Health System

### PART II. DEFINITIONS

These terms and their definitions are for the purposes of this DHA-AI.

DoD Health Record. Includes the medical and dental care documentation, including mental health care documentation, that has been recorded on that individual. Information may be maintained within the DoD health care system, each of which is a specific subset of the information in the DoD Health Record or the Service Treatment Record (STR), non-Service Treatment Record, and Occupational Health Civilian Employee Treatment Record (OHTR). Inpatient records are also a part of the DoD Health Record for an individual. Certain documents from an inpatient record are also included in the STR and OHTR. Administrative documents created to communicate copies of information contained in the health records to non-health care related activities are not part of the DoD Health Record.

MHS GENESIS. The MHS EHR.

MHS GENESIS Approved Workflow. Business processes that have been reviewed by Subject Matter Experts; all updates made in accordance with the Change Control Board, and the authoritative version of these artifacts are stored on a single consolidated repository.