



Department of Veterans Affairs- Department of Defense

Joint Executive Committee

Annual Joint Report Fiscal Year 2023

A handwritten signature in black ink, reading "Tanya J. Bradsher".

**Tanya Bradsher
Deputy Secretary
Department of Veterans Affairs**

A handwritten signature in black ink, reading "Ashish S. Vazirani".

**Ashish S. Vazirani
Performing the Duties of the Under Secretary of
Defense for Personnel and Readiness
Department of Defense**

The estimated cost of this report or study for the Department of Veterans Affairs (VA) and the Department of Defense (DoD) is approximately \$48,000 for Fiscal Year 2023. This estimated cost includes \$0 in expenses and \$48,000 in VA-DoD labor.

VA-DoD
Joint Executive Committee
Membership List
(As of February 8, 2023)

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Deputy Secretary of Veterans Affairs

Under Secretary for Health

Under Secretary for Benefits

Assistant Secretary for Congressional and
Legislative Affairs

Assistant Secretary for Enterprise
Integration

Assistant Secretary for Human Resources
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Assistant Secretary for Information and
Technology

Assistant Secretary for Management and
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General Counsel, Office of General Counsel

Principal Executive Director, Office of
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Deputy Director, Federal Electronic Health
Record Modernization Office

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Invited Participants

Assistant Secretary of Labor for Veterans'
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SECTION 1 – INTRODUCTION

The Department of Veterans Affairs (VA) and Department of Defense (DoD) Joint Executive Committee is pleased to submit the VA-DoD Joint Executive Committee Fiscal Year (FY) 2023 Annual Joint Report, covering the period from October 1, 2022, to September 30, 2023, to Congress as required by 38 U.S.C. § 8111(f). The Annual Joint Report provides Congress with information about the collective accomplishments of the two Departments, and our partners where applicable, and highlights current efforts to improve joint coordination and resource sharing. This report does not contain recommendations for legislation.

The Joint Executive Committee provides senior leadership with a forum for collaboration and resource sharing between VA and DoD and invited participants. In accordance with 38 U.S.C. § 320, the Deputy Secretary of Veterans Affairs and the Under Secretary of Defense for Personnel and Readiness co-chair the Joint Executive Committee. The Joint Executive Committee consists of the leaders of the Health Executive Committee, Benefits Executive Committee, Transition Assistance Program Executive Council, Information and Technology Executive Committee, Federal Electronic Health Record Modernization Executive Committee, additional Independent Working Groups, and other senior leaders designated by each Department, in addition to invited participants from other departments or agencies necessary to maximize joint coordination and resource sharing. See Appendix A for details on the executive committees, working groups, and areas of oversight that provide support to the Joint Executive Committee and its governance structure.

The Joint Executive Committee works to remove barriers and challenges that impede collaborative efforts; asserts and supports mutually beneficial opportunities to improve business practices; provides high-quality cost-effective services for VA and DoD beneficiaries; and facilitates opportunities to improve resource utilization. Through a joint strategic planning process, the Joint Executive Committee recommends the strategic direction for joint coordination and sharing efforts between VA and DoD and oversees the implementation of those efforts.

The VA-DoD Joint Executive Committee FY 2023 Annual Joint Report links accomplishments to the following five strategic goals established in the FY 2022-2027 VA-DoD Joint Executive Committee Joint Strategic Plan: (1) Health Care Collaboration; (2) Integrate Benefits and Services Delivery; (3) Enhance the Transition and Post-Separation Experience; (4) Modernize Shared Business Operations; and (5) Strengthen Interoperability and Partnership. These goals are supported by the annual Joint Operating Plan, which identifies current Joint Executive Committee priorities, objectives, and action plans to allow more flexible execution. This approach clarifies the connection between strategic planning and outcomes achieved through VA and DoD coordination, collaboration, and sharing efforts.

SECTION 2 – ACCOMPLISHMENTS

This section highlights the FY 2023 accomplishments of the Joint Executive Committee, Health Executive Committee, Benefits Executive Committee, Transition Assistance Program Executive Council, Information and Technology Executive Committee, Federal Electronic Health Record Modernization Executive Committee, and Independent Working Groups. The report also acknowledges some planned activities for FY 2024.

GOAL 1 – Health Care Collaboration

Goal Statement: Provide a patient-centered health care system that delivers excellent quality, access, satisfaction, and value consistently across VA and DoD.

Priority 1.A. Environmental Exposures/Individual Longitudinal Exposure Record

The Health Executive Committee's Deployment Health Working Group jointly developed and deployed the VA and DoD Individual Longitudinal Exposure Record web-based application to full deployment capability in June 2023. Since the initial release in 2019, and with an accelerated development plan, VA and DoD expanded the Individual Longitudinal Exposure Record capabilities, functionalities, and available data sources 6 months earlier than initially planned. Currently, 588 VA and 16,138 DoD public health, clinical/medical care, and occupational and environmental health care providers have active Individual Longitudinal Exposure Record accounts in support of patient care to address exposure related concerns. VA has fully implemented the Individual Longitudinal Exposure Record into its claims adjudicators processes, and now over 12,000 Veterans Benefits Administration staff have access to the Individual Longitudinal Exposure Record. The Individual Longitudinal Exposure Record improves the quality and quantity of information centrally available for Service member and Veteran health care and supports force health protection efforts and health care policy.

The Individual Longitudinal Exposure Record addresses a need to link Service members and Veterans to their deployment locations and associated environmental exposure data, health care data, and health effects information across their time in service.

During FY 2023, the Individual Longitudinal Exposure Record team completed four major and seven minor updates with no significant system defects or issues. The Individual Longitudinal Exposure Record continues to maintain a high user approval rating and usage continues to increase. In FY 2023, there were more than 3.7 million queries made to the Individual Longitudinal Exposure Record by providers. Currently, 98.6 percent of all Veterans Health Administration facilities have at least one trained Individual Longitudinal Exposure Record user. In FY 2020, the number of individual deployment records available to the Individual Longitudinal Exposure Record was 17 million. Today, that number has expanded to 25.1 million. In addition, the location, exposure, and health assessment data sets available to Individual Longitudinal Exposure Record have grown to over 44 million. This quantity enables users of the Individual Longitudinal Exposure Record to generate exposure summaries for 6.3 million Service members and Veterans.

Capability

In its current full deployment capability, the Individual Longitudinal Exposure Record includes an interface with the Gulf War Registry and the Defense Occupational and Environmental Health Readiness System-Hearing Conservation, which provides the following functionalities:

- Compiles data from multiple, disparate locations, exposure, and health-related databases.
- Provides exposure summary data to inform the medical encounter and/or treatment.

- Supports the ability to build cohorts to aid epidemiology, health surveillance, and health research.
- Provides exposure summary data to inform claims and benefits adjudication.
- Easily accessible to targeted user community.
- Provides clinicians with more detail and highlights exposure-related risks based on an individual's occupational specialty.
- Provides researchers with an embedded analytical tool to construct cohorts for comparative analytics.

Continued Focus

Beyond full deployment capability, the Individual Longitudinal Exposure Record development team will continue to expand the Individual Longitudinal Exposure Record by developing interfaces to new data sources based on Joint Executive Committee priorities and emerging functional legislative requirements. Section 744 of the National Defense Authorization Act for FY 2023 (Public Law 117–263) and Section 803 of the Sergeant First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics Act of 2022 (Public Law 117–168) (hereafter referred to as the PACT Act), included provisions to provide Veterans with access to the Individual Longitudinal Exposure Record and Service members and Veterans with a means to update their Individual Longitudinal Exposure Record exposure records. Because the Individual Longitudinal Exposure Record is an aggregator of other systems of records, implementation of the law has been difficult. VA and DoD continue to work through a plan of actions and milestones to develop Veteran and Service member access and a process to update information. VA and DoD continue to implement semiannual outreach and education programs to increase the number of Individual Longitudinal Exposure Record users and system awareness.

Integration into the Electronic Health Record

The Individual Longitudinal Exposure Record team is working closely with the Joint VA and DoD Federal Electronic Health Record Modernization team to integrate the Individual Longitudinal Exposure Record information into the electronic health record to facilitate clinical workflows.

VA and DoD recognize that growing the Individual Longitudinal Exposure Record userbase and developing interfaces with the electronic health record are critical milestones in improving exposure health care and research. Through stakeholder engagements, VA and DoD will continue to improve existing functionality and expand data system interfaces into Individual Longitudinal Exposure Record future developments to achieve an elevated functional and accessible system for broader VA and DoD-wide use. In its fully deployed capability, the Individual Longitudinal Exposure Record system will continue to provide information to support transparency on deployment-related exposures between Federal departments, beneficiaries, Congress, and other stakeholders.

Priority 1.B. Military Medical Provider Readiness – Veteran Access

VA and DoD continue to implement the Military Medical Provider Readiness initiative to match VA patient clinical specialty access to health care demand with available DoD facility clinical

specialty capacity. Led by the Joint Executive Committee's Health Executive Committee the goal is to explore and identify opportunities for increased collaboration between VA and DoD that are mutually beneficial for improving access, quality, safety, clinical readiness of providers and cost effectiveness of health care provided to beneficiaries.

In FY 2023, the Health Executive Committee approved the re-scoping and re-naming of the Military Medical Provider Readiness initiative, to the Military Medical Provider Readiness-Veteran Access initiative. The name change more appropriately captures the intent of the initiative that seeks to improve the readiness of the military providers while simultaneously offering more access to care options for Veterans. The re-scoped Military Medical Provider Readiness-Veteran Access efforts will develop instructional guidance that will allow current and future resource sharing locations to identify potential opportunities to align VA patient contributions supporting military provider readiness skills and DoD's contributions supporting VA patient access to health care needs.

The Military Medical Provider Readiness-Veteran Access team completed key FY 2023 milestones supporting the selection of exploratory locations that match the DoD identified knowledge, skills, and ability clinical readiness service needs with VA access to care priority needs. The Military Medical Provider Readiness-Veteran Access team will continue to monitor and tabulate the locations efforts throughout FY 2023 and into FY 2024, and report on its findings accordingly.

Priority 1.C. Opioid Safety and Awareness

VA and DoD developed an integrated approach to opioid safety, pain management, and Opioid Use Disorder treatment. As the nation faces an epidemic of prescription medication overuse, abuse, and diversion, VA and DoD continue aligning their respective policies, strategies, and clinical practices in their health care systems in response to these challenges.

In FY 2023, the Health Executive Committee continued to evaluate and synchronize respective VA and DoD strategies for addressing lessons learned from the COVID-19 pandemic, specifically its negative impact on patient access to face-to-face encounters and the provision of pain management care in VA and DoD medical treatment facilities. Functional restoration programs have proven to be an effective treatment adjunct for many people with chronic pain conditions and can reduce or eliminate the use of opioids in the treatment plan. Functional restoration programs are relatively resource intensive for sponsoring military treatment facilities, requiring multi-disciplinary clinical teams to provide an average of 5 weeks of outpatient therapy appointments. Functional restoration programs are not universally available across DoD and VA facilities; therefore, patients either lack access to these programs at their local facility or must travel long distances to access a functional restoration program. VA's Pain Empowerment Anywhere Program in Tampa, Florida, is a working model of a virtual functional restoration program that can accommodate enrollees from VA and DoD.

The Health Executive Committee designed a multi-year project involving DoD utilization and preliminary evaluation of the VA Pain Empowerment Anywhere Program in Tampa, Florida, to assess barriers, benefits, and outcomes from the joint utilization of this virtual functional restoration program. The project also includes a qualitative satisfaction assessment from

referring DoD providers and the referred DoD patients. At the conclusion of the project, the Health Executive Committee will report findings and recommendations regarding DoD replication or continued joint utilization of VA's Pain Empowerment Anywhere Program in Tampa. In February 2023, the planned rollout of the evaluation project was placed on hold as the DoD worked to address several questions and concerns, including the referral process for a virtual intradisciplinary program, the potential VA per-patient charge to DoD, and DoD's ability to reimburse for specific components of a Pain Empowerment Anywhere Program (for example, Recreation Therapy). The Health Executive Committee are working to address the current questions and concerns to re-start this effort.

The Health Executive Committee continued to focus on strengthening the alignment of VA and DoD pain management and opioid safety practices, policies, and education resources. The Joint Pain Education Project pain management curriculum and modules were expanded and reformatted to allow self-study. The complete set of web-based, self-paced pain education modules with expanded pain topics was released in June 2023. This effort standardized the pain management curriculum to improve complex patient and provider education and training. In 2023, the Drug Enforcement Administration enacted a new one-time, 8-hour training requirement for all Drug Enforcement Administration-registered practitioners on treating and managing patients with opioid or other substance use disorders. The Health Executive Committee is reviewing the Joint Pain Education Project curriculum to identify specific modules that would allow DoD and VA practitioners to meet this new Drug Enforcement Administration training requirement.

Lastly, the Health Executive Committee concluded their multi-year project to align strategic planning and implementation of an integrated path forward to increase Service member and Veteran access to standardized Opioid Use Disorder treatment protocols, with an emphasis on support during transition from the DoD health care system to the VA health care system. This effort will allow critical decision points in the use of opioids in the management of chronic pain. It also provides clear and comprehensive evidence-based recommendations incorporating current information and practices for practitioners throughout VA and DoD health care systems.

Priority 1.D. Sexual Trauma Health Care Assistance

The Sexual Trauma Working Group was formally established as a Joint Executive Committee Independent Working Group by General Objective 6 in the VA-DoD Joint Strategic Plan for FY 2019-2021. In FY 2023, the Joint Executive Committee identified three priorities, including Sexual Trauma Health Care Assistance, Sexual Trauma Benefits Assistance, and Sexual Trauma Transition Assistance, in support of three separate Joint Executive Committee strategic goals. The working group continues to provide the structure for VA and DoD to coordinate policy; standardize and streamline processes on transition of treatment of Service members who report experiencing sexual assault and/or sexual harassment during military service; assist Veterans in filing sexual trauma-related disability claims; ensure plans are implemented to process sexual trauma-related claims efficiently and effectively; and facilitate communication and collaboration between the Departments.

In FY 2023, a primary focus of the Sexual Trauma Working Group continued to be coordinating implementation of Section 538 of the William M. (Mac) Thornberry National Defense

Authorization Act for FY 2021 (Public Law 116-283), which requires VA and DoD to jointly develop, implement, and maintain a standard of coordinated care for Service members who experience sexual trauma during military service. This includes planning for provision of information in various specified venues to members of the Armed Forces about VA's military sexual trauma-related services and benefits; development of transition assistance systems to allow for connections between DoD Sexual Assault Response Coordinators and Veterans Health Administration Military Sexual Trauma Coordinators; and annual training and other efforts to educate Sexual Assault Response Coordinators about VA services. In FY 2023, specific accomplishments related to the implementation of Section 538 included:

- Finalized development of an informational poster describing VA health care services and other benefits available to current and former Service members (including National Guard and Reserve) for dissemination throughout DoD. Key stakeholders collaborated on development of the poster, including Military Sexual Trauma survivors and advocates, representatives from Veterans Health Administration, Veterans Benefits Administration, the DoD Sexual Assault Prevention and Response Office, the Defense Health Agency, and the DoD Family Advocacy Program. This resource includes a scannable Quick Response code as well as web links to enable Service members to access additional information at their convenience and when in a private setting. DoD is in the process of disseminating the poster across the enterprise, including areas such as the Family Advocacy Program offices, offices of mental health care providers, areas where sexual assault prevention staff post other notices, and high traffic areas.
- Increasing collaboration and cross training among VA and DoD staff who are key touch points for providing information to sexual trauma survivors about services available, including and especially to individuals who are eligible for Military Sexual Trauma-related health care from VA but may not be eligible for other VA services.
 - As part of this effort, the DoD Sexual Assault Prevention and Response Office developed and hosted an annual virtual training for DoD Sexual Assault Prevention and Response personnel about sexual trauma services available from DoD and VA. The most recent training was held May 24-25, 2023, and included presenters from the Veterans Health Administration, Veterans Benefits Administration, and DoD. Approximately 2,150 staff attended the overall training, and 378 attended the session focused on coordinated care. In addition, the training remains available on demand for those interested. The DoD Sexual Assault Prevention and Response Office will continue to deliver this training annually and integrate it into Sexual Assault Prevention and Response Training and Education Center core curriculums.
 - On March 15, 2023, the Veterans Health Administration Military Sexual Trauma program staff provided training to VA Liaisons for Healthcare about VA health care services available to current and former Service members who experienced sexual trauma during military service as part of the national VA Liaison Virtual Training Series. VA Liaisons for Healthcare are stationed onsite at DoD installations, and support other installations virtually, to help coordinate a personalized transition of care for Service members from the DoD to VA system of care. They, therefore, play

a pivotal role in connecting Service members who have experienced sexual trauma with the health care they need.

- The Veterans Benefits Administration also provides training on sexual trauma and the disability compensation claims process to DoD personnel who are responsible for connecting survivors to medical and mental health resources and facilitating contact with VA personnel. This training includes providing annual training regarding Veterans Benefits Administration Military Sexual Trauma-related benefits and processes to DoD's Sexual Assault Prevention and Response Office. Veterans Benefits Administration also has incorporated Veterans Health Administration and DoD presenters into its annual National Military Sexual Trauma Training Symposium to further educate Veterans Benefits Administration Military Sexual Trauma Outreach Coordinators and other field personnel.
- Development, coordination, and submission to Congress of two Joint Progress Reports on Coordination of Support for Survivors of Sexual Trauma.

It should be noted that VA and DoD use different language for sexual trauma during military service. DoD uses the terms "sexual assault, intimate partner sexual abuse, and sexual harassment" while VA uses "military sexual trauma." As a result, the working group established the umbrella term "sexual trauma" to capture the terms used by VA and DoD to promote clarity of the working group's intent without seeking to change the language used by VA and DoD. The term "sexual trauma" includes unwanted sexual contact and/or sexual harassment experienced by a Service member during military service. The term "military sexual trauma" is specific to VA and is described in 38 U.S.C. § 1720D(a)(1) as "a physical assault of a sexual nature, battery of a sexual nature, or sexual harassment which occurred while the former member of the Armed Forces was serving on duty, regardless of duty status or line of duty determination (as that term is used in section 12323 of title 10)." This treatment authority does not authorize health care related to sexual assault and harassment outside of military service, although enrolled Veterans who have such experiences can receive health care and treatment under a separate authority.

Priority 1.E. Telehealth

The VA and DoD Health Executive Committee develops and promotes strategic opportunities to coordinate and share telehealth-related services and resources between VA and DoD. VA and DoD leverage telehealth to overcome traditional barriers to health care and enhance the accessibility, capacity, and quality of health care for Service members, Veterans, their Families, and their Caregivers.

In FY 2023, the Health Executive Committee completed a telehealth and virtual health environmental scan report. This report identified and cross-walked key elements of each Department's telehealth-related infrastructure, documenting barriers to develop large scale interdepartmental telehealth capabilities. The scan confirmed that gaps in telehealth developmental stages exist between VA's mature capability and DoD's emerging capability. There are several DoD-specific planning issues that need to be addressed before investing in a systematic expansion of inter-departmental telehealth/virtual health.

Based on the environmental scan findings, the Health Executive Committee is conducting a review of synchronous telehealth emergency procedures of VA and DoD and identifying any procedural gaps that may impact the safety of patients participating in inter-departmental synchronous telehealth care. In FY 2023, both Departments completed a workflow review and analysis of these procedures. In FY 2024, the Health Executive Committee will develop joint recommendations for emergency procedures for inter-departmental synchronous telehealth services.

Priority 1.F. Whole of Government Approach to Suicide Prevention

Suicide is a complex problem with no single cause and no single solution. Given the multiple factors that may lead to suicide death, preventing suicide requires a comprehensive public health approach that harnesses the full breadth of the Federal Government in close coordination with States, Territories, Tribes, and local governments, as well as collaboration with industry, academia, communities and community-based organizations, families, and individuals. Reducing suicide cannot be accomplished singularly through reactive policy change, rather it requires a long-term strategic vision and commitment designed to create and implement systemic changes in how we support Service members, Veterans, and their Families across the full continuum of risk and wellness. This effort requires a whole of government approach and VA and DoD are committed to ensuring their efforts align and contribute to the greater mission of saving lives.

VA and DoD stood up and charted the Joint Suicide Prevention and Associated Mental Health Working Group that reports directly to the Joint Executive Committee. The purpose of Joint Suicide Prevention and Associated Mental Health Working Group is to improve, collaborate, and track clinical and non-clinical suicide prevention efforts across VA and DoD, with a particular focus on learning management system efforts to reduce Service members and Veteran suicide and on applicable joint suicide prevention efforts. More specifically, the Joint Suicide Prevention and Associated Mental Health's mission includes advancing lethal means safety collaborative efforts, implementing Section 102 of the Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019 (Public Law 116-171) (hereafter referred to as the Hannon Act), and advancing efforts to modernize the Veterans Crisis Line Military Crisis Line operations and produce effective communications across organizations.

VA and DoD have been steadfast in their continued efforts toward completion of Section 102 of the Hannon Act, which includes the review of risk-related information gathered and shared between organizations on individuals who died by suicide within a year of separation from Service between 2016 and 2020 (over a 5-year period). The efforts of this Working Group have led to the creation of a data dictionary, identified risk factors (names, definitions, and attributes about data elements that are being used or captured in a database, ensures universal understanding of variables), and the establishment of data sharing agreements. The communication methods between VA and DoD that existed over the years included in Section 102 of the Hannon Act, as they pertain to risk, a test of the data dictionary with identified cases and the development of a coding schedule and final report outline.

Progress on the Veterans' Crisis Line and Military Crisis Line efforts has been largely the result of collaborative engagements between Veterans' Crisis Line staff, Defense Information Systems Agency, and the Defense Suicide Prevention Office. Efforts have included:

- Enhancement of 988 call routing (operating procedures and infrastructure updates).
- Strategic communications planning.
- Resolution of overseas calling procedures (installation lines and cell phones).
- Development of a mobile application.
- Establishment of a technical working group to address document routing and configuration, cybersecurity, and overseas architectural changes to better insulate and protect 988 Veterans' Crisis Line/Military Crisis Line capabilities.

Of specific note, the Veterans' Crisis Line and Military Crisis Line Mobile App development came out of a clearly defined problem space that was identified by Veterans' Crisis Line staff, the Defense Suicide Prevention Office staff, Defense Information Systems Agency, and Veterans Health Administration Strategic Investment Management. Service members and Veterans who are outside the continental United States and on some DoD bases/installations cannot dial 988 + 1 to reach the Veterans' Crisis Line and Military Crisis Line. Development of the mobile application will allow for increased ease of access and clear, simple, and correct communication about how to reach crisis care anywhere in the world for Service members and U.S. Veterans. A Veterans' Crisis Line and Military Crisis Line Mobile Application also will provide the ability for Service members and Veterans to access the crisis lines from a personal device or Government funded equipment anywhere in the world, which is not currently the case. To date, discovery, research, and data analysis related to metrics of this app have been completed with the VA Office of Information and Technology Product Engineering Services. In addition, a technical solution is in development with the VA Office of Information and Technology Unified Communication over the next several months with rigorous testing scheduled prior to implementation.

GOAL 2 – Integrate Benefits and Services Delivery

Goal Statement: Deliver comprehensive benefits and services through an integrated beneficiary-centric approach that anticipates and addresses the needs of stakeholders, provides excellent customer service, and is transparent.

Priority 2.A. Communication of Benefits and Services

In FY 2023, the Benefits Executive Committee coordinated and facilitated expansion of access to benefits, services, and resources information. The expansion provides enhanced opportunities with face-to-face and virtual engagements between VA, DoD, and other partners to enhance support of benefits and resources information to Service members, Veterans, and their Families, and Caregivers.

The Benefits Executive Committee launched the Caregiver Resource Directory, the first electronic platform to increase access to information resources and benefits for the Families and Caregivers of Active Duty Service members and transitioning Service members, and Veterans. This effort was accomplished with additional support from our partners at the Department of

Labor Veterans' Employment and Training Service, the American Red Cross Military Veterans Caregiver Network, and the Elizabeth Dole Foundation, along with several other organizations and stakeholder groups.

Further, the Benefits Executive Committee collaborated with the Veterans Benefits Administration and Department of Labor Veterans' Employment and Training Service to perform a complete review and update the Transition Assistance Program curricula. This effort provided updated information and content to comply with the Military to Civilian Readiness Pathway to increase knowledge and access to resource benefits and services and enhance seamless transition from DoD to other Federal agencies. These tools support over 200,000 transitioning Service members annually, including those Service members who require additional support based on participation in the Integrated Disability Evaluation System and recently transitioned Veterans. The expanded services include virtual and in-person events with Off Base Transition Training, coupled with career opportunities with VA and other Federal and non-Federal agencies.

The Committee augmented the PACT Act communication campaign by carrying out a joint communications effort related to the launch of disability claims processing under the newly established PACT Act. This collaboration also included a series of hiring and benefits fairs that supported the PACT Act and highlighted opportunities for transitioning Veteran Service members and Veterans to seek employment as future claims processors in VA. DoD supported VA by including messaging about the PACT Act in the Leave and Earning Statements of the more than 1 million Active Duty Service members and 700,000 DoD civilians. DoD also hosted VA for two PACT Act and Veteran Benefits Fairs at the Pentagon giving in-person access its 23,000 employees. These two events included on-site claims agents and toxic exposure screenings. To further underscore the importance of these events, they were attended by VA and DoD senior leaders. The PACT Act and hiring initiatives were extremely successful.

Priority 2.B. Dual Compensation

By law, Service members with a VA disability rating cannot receive VA compensation payments and military pay concurrently, which includes Drill and Active-Duty pay. Service members must decide to waive military pay or VA disability compensation pay. With the Benefits Executive Committee's support, VA and DoD continue to pursue improvements to the adjustment process for Veterans who choose to waive either pay to reduce improper payments resulting in Service member and Veteran debt.

In Q1 FY 2023, the Benefits Executive Committee modified the monitoring progress of return to Active Duty cases, directing the tracking all cases to completion, creating better accountability. With support from DoD, VA approved the Active Service Pay Rule and the Office of Financial Management completed final costing for the Active Service Pay Rule. Further, the Benefits Executive Committee partnered with the VA Office of Information and Technology to complete an analysis of Self-Service platforms to allow Veterans to report the first party to VA of their return to Active Duty status and determined that the platform would benefit Veterans. Finally, the group submitted a VA Information Technology Process Request, which is called VIPR, to determine the level of effort, time, cost, and prioritization of work of implementing an online capability.

In FY 2023, VA conducted an automated batch process—which leverages data from the DoD to match names with Active Duty orders—for Veterans who returned to Active Duty. In FY 2023, VA completed the FY 2022 Drill Pay adjustments, batch processing 110,938 cases, and completing 76,486 via automation, while the remainder required manual processing. In FY 2023, VA also completed Return to Active-Duty adjustments, from October 1, 2022, through September 30, 2023, matching 19,607 cases by completing 13,825 cases via automation and 5,631 via manual processing. VA continues to work the remaining 151 cases to reduce overpayments and reduce Service member and Veteran debt.

Priority 2.C. Extension of Certain Morale, Welfare and Recreation Privileges to Certain Veterans and their Caregivers

Section 621 of the John S. McCain National Defense Authorization Act for FY 2019 (Public Law 115–232) authorized the extension of commissary, exchange, and certain Morale, Welfare and Recreation retail facility privileges to Veterans awarded the Purple Heart, Veterans who are Medal of Honor recipients, Veterans who are former Prisoners of War, Veterans with service-connected disabilities, and Caregivers for Veterans. This benefit became effective on January 1, 2020, with VA and DoD reporting successful implementation on time with no major issues.

In FY 2023, the Benefits Executive Committee focused on addressing direction from the Joint Executive Committee co-chairs to identify options to provide installation and benefits access to the small population of Veterans with a service-connected disability rating of zero percent who served for 2 years or less and Veterans who do not qualify for a Veterans Health Identification Card and to identify a permanent credentialling solution for installation and benefit access. By the end of FY 2023, the Joint Executive Committee approved the permanent solution for installation and benefit access.

The solution deployment is contingent on a data exchange between VA and DoD, which is the focus of the Committee’s efforts in FY 2024. Also, in FY 2023, VA and DoD leadership directed that a communications plan be developed and executed prior to implementing the final credentialling solution to ensure security personnel; Morale, Welfare and Recreation; and resale personnel are trained, and that the Veteran population is aware of installation access processes and Morale, Welfare and Recreation; exchange; and commissary benefits access.

Priority 2.D. Joint Plan to Modernize External Digital Authentication

The Information Technology Executive Committee worked throughout FY 2023 to finalize multiple analyses of possible long-term solutions for the common unique identifier for users of the Federal Electronic Healthcare Record. VA and DoD Chief Information Officers jointly closed out the analysis of the Federal Unique Identifier, based on a subset of the Federal Agency Smart Credential Number, and agreed to conduct an in-depth analysis of the Electronic Data Interchange Personal Identifier, also known as the DoD ID number. The Defense Manpower Data Center conducted an analysis of the Electronic Data Interchange Personal Identifier solution; the analysis and recommendations have been submitted for consideration with the Information and Technology Executive Committee.

In support of the effort to modernize DoD Self-Service Logon, the major accomplishment being tracked by the Joint Executive Committee for FY 2023 was the closeout of the effort to upgrade Multifactor Authentication capabilities within DoD Self-Service Logon. This upgrade effort was completed in October 2022. VA and DoD continue to coordinate to determine a long-term plan for VA's use of DoD Self-Service Logon.

DoD continued to support the go-lives of the DoD-managed Federal electronic health record deployment sites throughout FY 2023, including deployment waves at Fort Drum, New York; Portsmouth Naval Base, Virginia; Walter Reed National Military Medical Center, Maryland; Fort Belvoir, Virginia; Wright-Patterson Air Force Base, Ohio; Landstuhl Army Medical Center, Germany; Royal Air Force Lakenheath, United Kingdom; U.S. Naval Hospital Okinawa, Japan; and Allgood Army Community Hospital, South Korea.

Priority 2.E. Military Personnel Data Transmission

The sharing of personnel, eligibility, usage, and payment data between VA and DoD is understood to be critical for the administration of benefits and services on behalf of current and former Service members, as well as their Families. The Information Technology Executive Committee helps to ensure access to authoritative data calibrated to the moments that matter in the journeys of Service members and Veterans. It also promotes and ensures the use of data in evidence-based policy making within and between VA and DoD.

The Information Technology Executive Committee, is unique in that it supports all executive committees and is responsible for the technical aspects of the current and future framework for bi-directional sharing of non-clinical personnel data including contact, demographics, eligibility, benefit usage, and military payments, as is necessary, to enable the following joint mission capabilities: Applicant Eligibility and Entitlement for Benefits; VA Benefit Usage; Dual Compensation; Military-to-Civilian Transition; Proactive Outreach and Communications; and Joint Data Analytics.

Servicemembers' Group Life Insurance

The Supporting Families of the Fallen Act (Public Law 117-209) was passed in October 2022 and included a section increasing the maximum coverage for Servicemembers' Group Life Insurance from \$400,000 to \$500,000. Under the auspices of the Benefits Executive Committee, VA and DoD worked together to develop updated requirements to implement this change within the Servicemembers' Group Life Insurance Online Enrollment System. Coordination was made with the Services and the Service Pay Centers to ensure all requirements were covered. Updates to Servicemembers' Group Life Insurance Online Enrollment System were implemented on March 1, 2023. The updates increased the coverage for all eligible Service members and allow them to go into Servicemembers' Group Life Insurance Online Enrollment System to certify coverage at the new amount or certify coverage at a lower amount.

PACT Act Data Sharing

Medals and Awards Data Sharing. In support of the implementation of the PACT Act, VA and DoD reviewed the process by which Medals and Awards data is provided by DoD to VA. During FY 2023, DoD provided a refresh of all Medals and Awards data to VA to support PACT

Act implementation. DoD also committed to supporting VA with regular updates of Medals and Awards data submitted to the Defense Manpower Data Center by the Services. DoD also continues to support VA with the ability to look up all Medals and Awards submitted by the Services on an individual look-up basis. Finally, VA requested five additional awards to be included with the Service reporting requirements, and DoD added these awards to the reporting requirements in September 2023.

Military Pay Data Sharing. In support of the implementation of the PACT Act, VA and DoD reviewed the process by which Military Pay Data is provided by DoD to VA. This data is used in conjunction with Deployment and Medals and Awards data to show service in a country covered under the PACT Act. DoD corrected an issue with Military Pay Data reporting and refreshed missing data required by VA.

Deployment Data Sharing. VA and DoD updated the sharing of military deployment data with VA to better match the deployment data being shared with the Individual Longitudinal Exposure Record. DoD provided VA with a refresh of all deployment data submitted by the Services per DoD Instruction 6490.03, "Deployment Health," June 19, 2021, and committed to providing regular updates of the deployment data as it is received by the Services. DoD also coordinated with the Navy and Marine Corps to report their deployment data to VA. VA made significant progress during FY 2023 modernizing its internal processes to automate receipt and use of military deployment data in benefits delivery processes.

Support for the PACT Act will continue to be a priority in FY 2024.

Priority 2.F. Service Treatment Record Electronic Sharing Enhancements

The Benefits Executive Committee further improved on its efforts to regularly transfer Service Treatment Records between VA and DoD using existing technological system interfaces in a timely manner. During FY 2023, DoD decreased the number of late and loose-flowing Service Treatment Records documents transferred to VA by a quarterly average of 30 percent. This trend corresponded with a decrease in the quarterly average of impacted Veterans by 39 percent compared to FY 2022. Both metrics represent new record lows for the transfer of late and loose-flowing Service Treatment Record documents between VA and DoD after historic decreases in FY 2023.

In addition, VA implemented new automation functionality to flag claims closed within a year that had loose or late flowing service treatment records from DoD requiring manual review by VA to determine any impact on the closed claim. This functionality was implemented during FY 2023 and allows VA to quickly identify which claims need review due to late flowing documents. The insights from the automation project contributed to the continued reduction in late or loose flowing documents due to increased accountability surrounding the Service Treatment Records transfer process.

The bi-directional Service Treatment Records transfer initiative for the future transfer of historical Service Treatment Records digitized by VA to DoD systems continued to advance in FY 2023. DoD completed the pre-registration of Veterans relating to the historical files during FY 2023 and VA and DoD performed production pilots of the end-to-end transfer process.

Production pilots revealed a need for automating the batch transfer of Service Treatment Records files back to DoD through the bi-directional interface to alleviate bandwidth constraints, and VA began development of the automation capability with a targeted implementation of Q1 FY 2024. To support the sustainment of the new interface and demonstrate both Departments' commitment to the ongoing transfer of Service Treatment Records in both directions, the Benefits Executive Committee drafted, staffed, and coordinated a VA-DoD new memorandum of agreement. VA and DoD signed the memorandum of agreement, "Electronic Storage, Access, and Retrieval of Military Service Treatment Records," in FY 2023.

Priority 2.G. Sexual Trauma Benefits Assistance

Given the scope and complexity of Sexual Trauma efforts across VA and DoD, initiatives and accomplishments of the Sexual Trauma Working Group, including Sexual Trauma Benefits Assistance, have been consolidated and documented under Priority 1.D. Sexual Trauma Health Care Assistance. Please reference Priority 1.D. of this report for the information.

GOAL 3 – Enhance the Transition and Post-Separation Experience

Goal Statement: Provide a comprehensive, holistic, timely and personalized approach to ensure transitioning Service members and Veterans have access to the highest quality care, benefits programs, job training, and post-service placement services at the right time in their transition.

Priority 3.A. Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019

Section 102 of the Hannon Act requires a 5-year (FY 2016-2020) retrospective, joint VA and DoD review of records of former Service members who died by suicide within 1 year of their release from Active Duty. To accomplish this, the records are grouped by year and examined for specific items, including a demographic evaluation and review for specific training, fitness, and evaluation records for the presence of risk factors. The Joint Executive Committee co-chairs established a working group to manage and track this effort and streamline cross-agency collaboration. The working group was awarded \$2.05M in Joint Incentive Funding to contract suicide experts to assist in completing the congressional report. In conjunction with subject matter experts from the Uniformed Services University of the Health Sciences, VA and DoD staff have aggregated the data needed for review, completed a data dictionary (to guide the evaluation of data), are writing a draft report, and plan to send the final report to our congressional partners on or around August 27, 2024. Key aspects and facts of the report will include, but will not be limited to:

1. The number of cases in which there was an indication of suicide risk within the 365 days leading up to transitioning out from being a member of the Armed Forces.
2. The number of cases in which there was communication of the risk to VA by their DoD counterparts.
3. An indication of what services, medical or otherwise, were furnished within these cases by VA and DoD.

Priority 3.B. Military-to-Civilian Readiness Framework

Military-to-Civilian Readiness

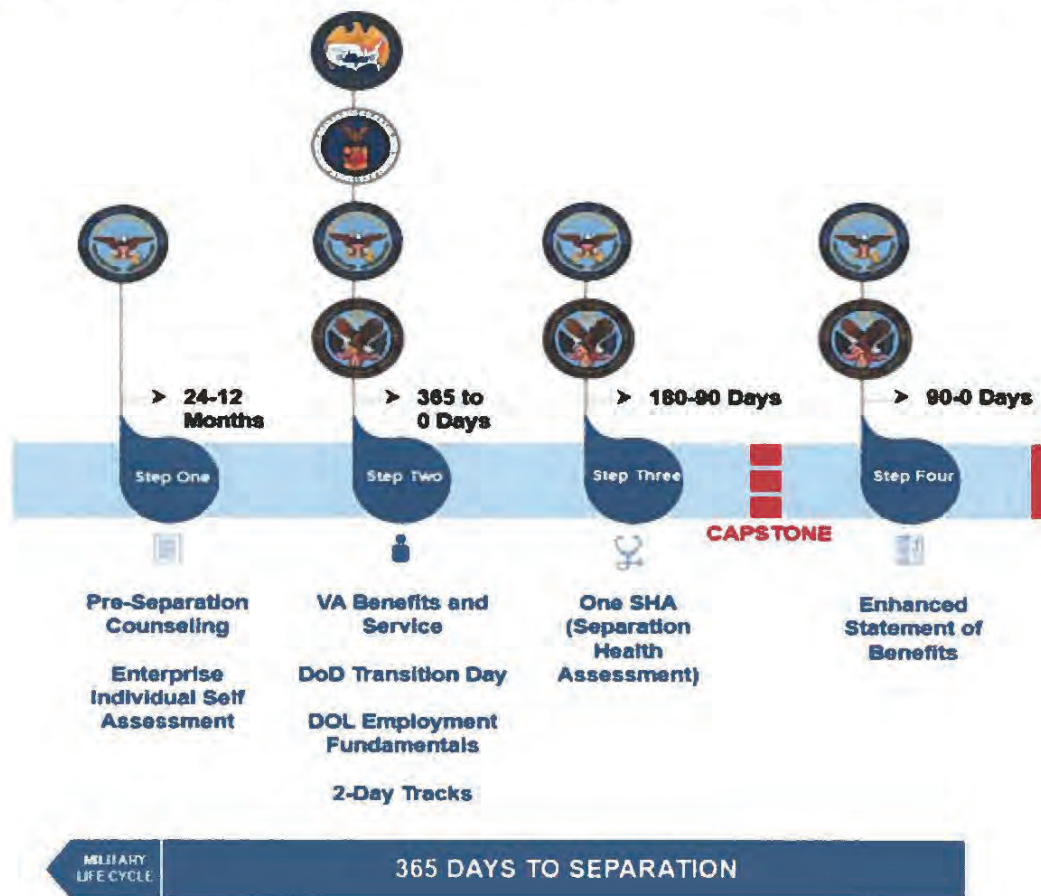
The Joint Executive Committee approved the Military to Civilian Readiness Pathway in September 2019, which aligns the myriad of disparate transitional activities under one overarching umbrella during the critical 365 days prior to active-duty separation and extends 365 days post-separation. The Military to Civilian Readiness Pathway incorporates several components of Executive Order 13822, “Supporting our Veterans During Their Transition from Uniformed Service to Civilian Life;” Executive Order 13861, “National Roadmap to Empower Veterans and End Suicide;” Executive Order 14058, “Transforming Federal Customer Experience and Service Delivery to Rebuild Trust in Government;” and Sections 522 and 552 of Public Law 115–232. The model includes five steps¹ across multiple life domains that are critical to support successful Service member-to-Veteran transitions, their Families, and Caregivers:

- 1) Enterprise Individual Self-Assessment, Initial Counseling, and Pre-Separation Counseling Brief.
- 2) Transition Assistance Program.
- 3) Separation Health Assessment process and eligibility for benefits 30 days prior to separation.
- 4) Enhanced Statement of Benefits at post separation.
- 5) Post-separation programs.

The Military to Civilian Readiness Pathway aligns various components of transition, is complementary to current transition support programs, and coalesces more than 24 different transition activities that are owned and executed by various Federal departments and agencies under one framework. The all-encompassing pathway ensures transitioning Service members and recently separated Veterans are: (1) informed and educated about all VA and DoD benefits and services; (2) equipped with the tools needed to succeed and reintegrate into their communities; and (3) enabled to achieve sustainable economic well-being.

¹ Figures 1 and 2 depict the six steps of the Military to Civilian Readiness Pathway.

Figure 1: Military to Civilian Readiness Pathway Pre-Transition Touchpoints Steps 1-4.



Step 1: Enterprise Individual Self-Assessment, Initial Counseling, and Pre-Separation Counseling Brief

The Military to Civilian Readiness Pathway models interagency support, while ensuring a holistic and integrated transition. At the first touchpoint, the Service member completes the Enterprise Individual Self-Assessment tool, which is administered before the Transition Assistance Program Initial Counseling and the Pre-Separation Counseling Brief to provide a baseline self-assessment. At Capstone (90 days prior to transition), the Enterprise Individual Self-Assessment is administered for a second time to re-evaluate Service members mitigated risk and to establish a continuum of support for novel and unresolved matters, including an evaluation of Service members transition-related factors across nine life domains.²

The DoD Enterprise Individual Self-Assessment was developed as part of the Military to Civilian Readiness Pathway in collaboration with the Transition Assistance Program interagency partners and Military Services. The Transition Assistance Program Executive Council approved

² The nine life domains include: (1) social and relational; (2) sense of belonging; (3) employment; (4) housing; (5) hope; (6) financial; (7) resiliency; (8) physical health awareness; and (9) mental health awareness.

the Enterprise Individual Self-Assessment tool as the instrument to meet Executive Order 13822 and the Public Law 115–232 requirements. The Enterprise Individual Self-Assessment is the final remaining Joint Action Plan initiative to close, with future metrics linked to Readiness Standards.

Phase I of the Enterprise Individual Self-Assessment pilot launched March 1, 2023, and runs through February 29, 2024. Depending on the success of the pilot's assessment and lessons learned, the FY 2024 limited scope Phase II of the Enterprise Individual Self-Assessment pilot will be administered to address adjustments in advance of a full implementation of the Enterprise Individual Self-Assessment in FY 2025.

Step 2: Transition Assistance Program

To meet the congressionally mandated Transition Assistance Program and other ancillary transition functions, VA, DoD, Department of Labor, and the Small Business Administration, along with other interagency partners, provide transitioning Service members, Veterans, Family members and Caregivers with a variety of interactive courses, one-on-one engagements and learning opportunities. In FY 2023, 183,523 individuals attended Transition Assistance Program courses. In addition, DoD supports an online learning system, Transition Online Learning, where Service members, Veterans, Family members, and Caregivers have unlimited access to the entirety of the Transition Assistance Program curricula and resource guides.³

Transition Assistance Program Curricula

The Transition Assistance Program consists of five core curriculum and four 2-day tracks shared among the Transition Assistance Program interagency partners. These courses are developed and maintained through the interagency partnerships to ensure continuity, consistency, relevance, and to reduce redundancy across the curricula. VA, DoD, Department of Labor, and the Small Business Administration collaborate through an annual evaluation process by which the Transition Assistance Program curricula is reviewed and approved through the Transition Assistance Program governance structure. Each agency is responsible for the delivery or facilitation of its curriculum.

VA Benefits and Services Curriculum

VA provides a full day of content focused solely on the benefits and services earned by the Service member due to military service and provided by VA. During FY 2023, the Transition Assistance Program VA Benefits and Services course was briefed to 163,407 transitioning Service members. In addition, in FY 2023, there were 357,891 individual touchpoints with Service members, military spouses, caregivers, and survivors across all of VA's transition assistance offerings available at over 300 military installations worldwide. During FY 2023, VA Benefits and Services exceeded its 90 percent target with a satisfaction rating of 94.5 percent.

DoD Curricula and Tracks

DoD provides three core curricula and one track: (1) The Managing Your Transition;

³ <https://www.tapevents.mil/courses> under “Core Requirements”, “All Courses” or “Transition Tracks” selections.

(2) Military Occupational Code Crosswalk; and (3) Financial Planning for Transition curricula, which are generally provided together in 1 day and create what is commonly referred to as “DoD Day.” DoD also developed and maintains the 2-day education track, Managing Your Education. In FY 2023, 178,559 transitioning Service members attended DoD Day, while 29,285 attended the education track. Delivery of the curricula is the responsibility of the Military Services to implement as best fits each Service’s culture, while maintaining adherence to statutory mandates.

Department of Labor Curricula and Tracks

Department of Labor Veterans’ Employment and Training Services provides three courses focused on employment. Employment Fundamentals of Career Transition is a full day courses, mandatory for all transitioning Service members. Department of Labor also provides two of the 2-day career tracks; one for career exploration and vocational training named Career and Credential Exploration, and one for general employment named Employment Workshop.

In FY 2023, the Department of Labor conducted 15,720 instructor-led Transition Assistance Program courses, with a total of 242,984 participants. During FY 2023, the Department of Labor Transition Assistance Program workshops received a 96.4 percent customer satisfaction rating. In addition, 52,971 Service members accessed Department of Labor courses within DoD’s Transition Online Learning platform, which included 34,899 participants in Employment Fundamentals of Career Transition, 4,251 participants in Department of Labor’s Employment Workshop, 1,961 participants in the Vocational Workshop: Career and Credential Exploration, and 11,860 participants in Wounded Warrior and Caregiver Employment Workshop.

Released in April 2022, the Wounded Warrior and Caregiver Employment Workshop is an alternative to attending the traditional Transition Assistance Program named Employment Fundamentals of Career Transition, which is a mandatory Department of Labor 1-day session focused on the needs of wounded, ill, and/or injured transitioning Service members and those going through the Integrated Disability Evaluation System process. This eLearning curriculum is offered at the DoD Transition Online Learning platform. Throughout the eLearning, participants are offered the opportunity to meet with a virtual instructor to answer any questions they might have on the curriculum. A total of 15,720 transitioning Service members completed the Wounded Warrior and Caregiver Employment Workshop in FY 2023.

Transition Employment Assistance for Military Spouses and Caregivers curriculum is a series of employment workshops that extend Transition Assistance Program to assist military spouses and Caregivers as they plan and prepare for their job search in pursuit of their employment goals. Transition Employment Assistance for Military Spouses and Caregivers was released in October 2021 and is provided in classrooms on installations by request and available virtually and instructor led. In FY 2023, 2,075 participants attended the Transition Employment Assistance for Military Spouses and Caregivers workshop.

Small Business Administration Track

The Small Business Administration provides curriculum, as well as the facilitators, to conduct the track for entrepreneurship. The Boots to Business class delivers Service members an introductory understanding of business ownership. In FY 2023, the Small Business Administration trained a total of 20,553 individuals in Boots to Business. Boots to Business

classes included 15,110 in-person attendees and 5,433 individuals (2,968 synchronous online/2,475 DoD Learning Management System) who attended virtual classes.

Step 3: Separation Health Assessment in the Military to Civilian Readiness Framework

VA and DoD are committed to improving the separation examination process to meet the requirements of transitioning Service members efficiently, effectively, and with minimum duplication of efforts. In collaboration with subject matter experts from VA, DoD, and the Services, the Separation Health Assessment Working Group leads this effort in alignment with the broader objectives of the Military to Civilian Readiness Pathway.

Step 4: Enhanced Statement of Benefits Post-Separation

In September 2020, the Joint Executive Committee approved the concept for an enhanced individualized statement of benefits at discharge. The Enhanced Statement of Benefits will provide transitioning Service members and/or Veterans with a modernized tool that will create a personalized VA-DoD-Department of Labor enterprise-wide benefits and services statement based on the individual's certificate of discharge (DD Form 214) and personal inputs in one centralized application. The Enhanced Statement of Benefits will be provided post-discharge to complement the Pre-Separation Counseling Resource Guide provided to transitioning Service members pre-discharge, with a goal of listing eligible VA, DoD, and Department of Labor post-separation benefits tailored to the individual. Phase One will include VA-specific post-separation benefits, with additional phases adding DoD and the Department of Labor post-separation benefits. FY 2023 activities included the development of the minimum viable product for an acceptable solution and the associated functions, requirements, and contextual documentation required to move forward with acquisition planning in FY 2024. The FY 2023 activities also included multiple Human Centered Design sprint sessions to ensure the minimal viable product was informed by Veterans.

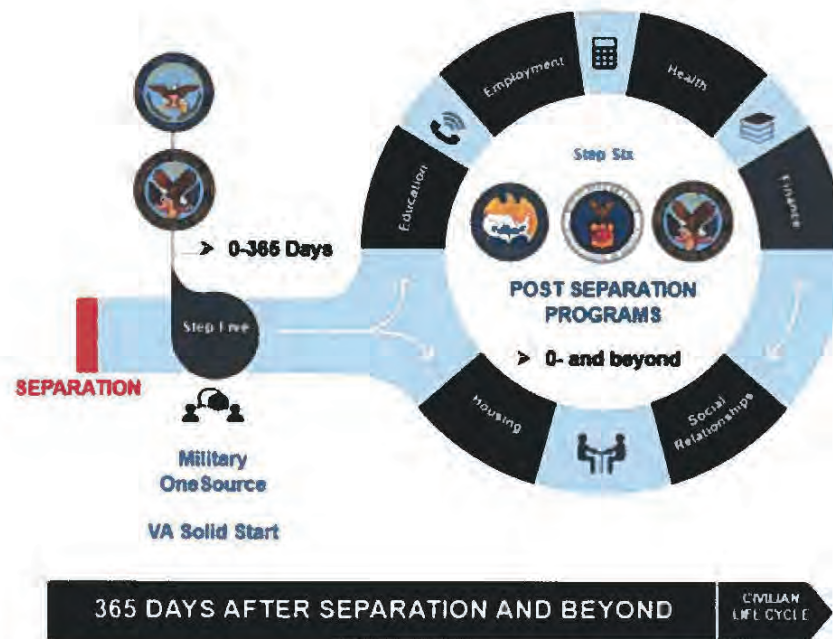
Step 5: Post-Separation Programs

VA Solid Start

VA Solid Start program launched on December 2, 2019, as part of the Military to Civilian Readiness Pathway, to make early, consistent, and caring contact with newly separated Veterans. VA Solid Start proactively calls all eligible Veterans at three key stages (90-, 180-, and 365-days post-separation) during their first year after separation from Active Duty. Using data provided by DoD, VA Solid Start provides priority contact to Veterans meeting certain risk factors during their last year of Active Duty, thus helping to lower the barrier to accessing high quality mental health care at VA. VA Solid Start representatives address challenges the Veteran may be facing at the time of the call by connecting the Veteran with the appropriate VA benefit and/or partner resources for assistance. These representatives receive special training to recognize the signs of crisis and, when needed, can provide a direct transfer to the Veterans Crisis Line for additional support.

In FY 2023, VA Solid Start successfully connected with 175,306 recently separated Veterans, achieving a successful connection rate of 71.2 percent. As a subset of this group, VA Solid Start successfully connected with 31,430, or 82.4 percent, of eligible priority Veterans, helping to ensure continuity of mental health care.

Figure 2: Military to Civilian Readiness Pathway Post-Transition Touchpoints Step 5.



DoD Military OneSource

The Military OneSource program provides support 365 days after separation as part of the Military-to-Civilian Readiness Framework and Executive Order 13822, and later enacted in Section 577 of Public Law 115-232. This expansion allowed Military OneSource to: (1) conduct direct outreach to transitioning Service members; (2) create a new transitioning Service member case type; and (3) receive peer support warm handovers from Transition Assistance Program.

In FY 2023, Military OneSource provided 223,661 connections to Veterans during the 365-day post-separation period. Military OneSource conducted email outreach to 100 percent of transitioning Service members who opted-in for contact to inform them of the availability of Military OneSource's 24/7 call center and website services. Furthermore, in FY 2023, Military OneSource assisted 5,178 cases of all types for transitioning Service members.

Overall, Military OneSource assisted 7,339 cases for eligible transitioning Service members and their Families. The top three case types were: (1) non-medical counseling; (2) tax services; and (3) work-life. While the most common reason for seeking non-medical counseling was for relationship issues, 27 percent of transitioning Service members and their Families sought non-medical counseling for reasons outside the scope of Military OneSource's short-term, solution-focused counseling. In these cases, Military OneSource consultants facilitated connections to other helping agencies, including mental health care providers.

Department of Labor Off-Base Transition Training

In January 2021, Section 4303 of the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020 (Public Law 116–315, amending Public Law 112–260) directed the Secretary of Labor to provide the Transition Assistance Program to Veterans, and their spouses, at locations other than Active Duty military installations for 5 years (January 2021-2026). As a result, Department of Labor Veterans' Employment and Training Services implemented an Off-Base Transition Training pilot program, which incorporates lessons learned from the original Off-Base Transition Training pilot held 2013-2015. In addition to virtual instructor-led workshops, the pilot is initially taking place in classrooms in five States: California, Texas, North Carolina, Pennsylvania, and Massachusetts. In FY 2023, 4,850 participants attended a total of 1,966 separate in-person workshop modules and 851 participants attended a total of 254 separate virtual workshop modules.

Priority 3.C. Separation Health Assessment Enhancements

During FY 2023, the Joint Executive Committee continued supporting enhancements to the Separation Health Assessment. Key objectives of a VA-DoD agreement signed in 2022 remained front and center, including continuity of health care, both mental and physical; improvements to transition support; increased knowledge of health effects from military service; and supporting Service member's eligibility for VA disability benefits and services.

Service members are required to meet statutory and policy requirements for a Separation Health Assessment before they transition from Active Duty service. To ensure the Service member's health care needs are addressed before separating, DoD screens for medical retainability and provides final documentation in the Service Treatment Record that VA can use to help determine service connections in evaluating future disability claims.

If a Service member applies for VA disability compensation benefits under the Benefits Delivery at Discharge program—a program that provides Service members with the opportunity to apply for VA disability compensation benefits between 180 and 90 days prior to separation—VA will perform the Separation Health Assessment after receiving a copy of the Service Treatment Record. Once VA completes the Separation Health Assessment, DoD must receive a copy for review and inclusion in the Service Treatment Record before the Service member separates. Each step of the process requires functional and technical planning, development, testing, and implementation within and across VA and DoD.

Also, in FY 2023, Service members filing claims for VA Benefits Delivery at Discharge, and those referred to VA and DoD Integrated Disability Evaluation System, began using the new Separation Health Assessment form. Now available as the VA Disability Benefits Questionnaire at VA.gov, the new form's initial launch caps a multi-year effort by VA and DoD clinicians to establish common content, comprising both subjective patient histories and objective clinical evaluations. Clinical subject matter experts and specialty groups covering audiology, mental health, women's health, environmental and occupational exposure, traumatic brain injury, vision, and dental health, identified baseline elements for inclusion in the new form. Further collaborative efforts produced high-value improvements that address suicide and violence risk screenings, reporting of exposures to occupational and

environmental hazards, and the communication of resources for survivors of sexual trauma in the military. DoD will launch the agreed upon Separation Health Assessment content as DD Form 3146, replacing DD Forms 2807-1 and 2808. Use and acceptance of the new form by VA and DoD will minimize instances where Service members seeking VA Benefits Delivery at Discharge need to complete more than one Separation Health Assessment prior to separation, which will improve those Service members' separation experiences and increase efficiency of VA and DoD.

In FY 2023, VA and DoD implemented the fully electronic availability of extracts from Service Treatment Records to replace manual information-sharing processes and physical delivery of the Service Treatment Record by the Service member. Functional tests by VA and the Military Services will assess the timeliness of the Military Services' electronic delivery of Service Treatment Records to VA, and VA's electronic delivery of completed Separation Health Assessments to the Military Services. Testing will continue in FY 2024. Full implementation of VA and DoD electronic process will alleviate the burden on separating Service members to submit the Service Treatment Record with claims for VA Benefits Delivery at Discharge, eliminate the time and cost of transferring physical records, and expedite processes.

Priority 3.D. Sexual Trauma Transition Assistance

Please reference Priority 1.D. Sexual Trauma Health Care Assistance for a consolidated overview of the efforts and accomplishments of the Sexual Trauma Working Group regarding Sexual Trauma Transition Assistance. Information concerning sexual trauma-related efforts, services and initiatives has been consolidated to better reflect the extensive, coordinated efforts by VA and DoD to connect current and former Service members with health care services and other benefits to assist in their recovery.

Priority 3.E. Transition Experience for Service Members and Veterans

In addition to the current Transition Assistance Program curriculum training, interagency partners have ongoing efforts to enhance the transition process and/or the content for Service members, which foster programmatic improvements for successful post-transition experiences. There are a number of additional programs, pilots, and studies working in tandem to enhance the transition and post-transition experience for Service members, Veterans, and their Families.

DoD SkillBridge

On May 1, 2023, the DoD SkillBridge realigned under the Office of the Under Secretary of Defense for Personnel and Readiness within the Military-Civilian Transition Office to increase synergy across transition and reintegration programs. DoD SkillBridge provides an opportunity for Service members to gain valuable civilian work experience through specific industry training, apprenticeships, or internships during the last 180 days of service. SkillBridge connects transitioning Service members with industry partners in real-world job experiences.

As part of the DoD SkillBridge realignment, Military-Civilian Transition Office conducted a 90-day strategic assessment of internal approval processes, customer service responsiveness, employer training plans, Service member and provider grievances, and information technology

platform efficiencies for evidence-based data outcomes. Subsequent to the strategic assessment, Military-Civilian Transition Office launched an enhanced DoD SkillBridge website refresh, streamlined employer application criteria and reviews, reestablished live bi-weekly prospective partner info webinars with on-the-spot Q&A sessions, and initiated employer outreach engagements. In FY 2024, Military-Civilian Transition Office will codify DoD SkillBridge reformations in DoD policy and operational procedures.

Since 2019, when SkillBridge was centralized by the Office of the Secretary of Defense, more than 4,000 employer partners and over 25,000 transitioning Service members have taken advantage of employment skills training, internships, and apprenticeships.

Military Life Cycle Training Modules

To increase an understanding and focus on certain topics, Transition Assistance Program interagency partners have developed Military Life Cycle modules. These short courses provide information that would be beneficial at any time in a Service member's journey, from initial entry into military service through separation and beyond. Currently, there are 145 courses available that focus on topics specifically relevant to the transitioning Service member, Families, and Caregivers. The Military Life Cycle modules are available as in-person instruction, as well as through the Transition Assistance Program Transition Online Learning platform. Available Military Life Cycle modules include:

- Reserve Component Dual Payments
- Social and Emotional Health Resources
- Survivor and Casualty Assistance Resources
- VA Benefits 101
- VA Education Benefits
- VA Home Loan Guaranty Program
- VA Life Insurance Benefits
- Vet Centers
- Community Integration Resources
- VA Education and Training Benefits for Spouses and Dependents
- Mental Health for Families
- Disability Compensation
- Other than Honorable
- Transitioning into Federal Employment
- Apprenticeships

VA Women's Health Care Services Transition Training

To encourage transitioning female Service members learning about women's VA health care services and to increase enrollment, the VA-DoD Joint Executive Committee approved the Women's Health Transition Training Pilot Program in September 2017. Based on the success, the Joint Executive Committee approved the permanent program in July 2019. As such, the Transition Assistance Program Executive Council developed and launched the Women's Health Transition Training Program as a permanent web-based training in February 2021. This web-

based course is self-paced and accessible at anytime from anywhere to all Service women and women Veterans.

In FY 2023, over 371 total attendees including Service members, Veterans, family members, Caregivers, and others participated in the web-based training with the data showing high levels of satisfaction with their experience. Of those who enrolled in the training and responded to course evaluation questions about the improved awareness of VA services, approximately 78 percent indicated that the program would influence them to enroll in VA health care and 95 percent believe they have the necessary information to start the enrollment process for VA health care.

Network of Support Pilot

The Sergeant Daniel Somers Veterans Network of Support Act of 2019, now part of the Veterans Comprehensive Prevention, Access to Care, and Treatment Act of 2020 (Public Law 116–214) (hereafter referred to as the Veterans COMPACT Act), was signed into law on December 5, 2020. The Veterans COMPACT Act calls for a pilot program that allows Veterans to designate up to 10 individuals to receive information on specified services and benefits from VA. The intent of the program is to provide each Veteran with a “network of support” made up of selected friends and family members who can help them better understand and apply for the benefits they have earned. The Network of Support pilot was launched in December 2021 and ran through December 2023. Throughout FY 2023, VA collaborated with DoD’s sister Network of Support Program to ensure interoperability and data sharing. In addition, VA obtained White House Office of Management and Budget approval for a more robust post pilot survey that was launched in December 2023. The additional required Congressional Report is under development and will be provided to Congress by December 2024.

Post-Separation Transition Assistance Program Outcome Study

The Post Separation Transition Assistance Program Assessment Outcome Study was first executed in 2019. The purpose of the multi-year study is to analyze the effect of participation in the Transition Assistance Program on the long-term outcomes of Veterans in the broad life domains of employment, education, health and social relationships, financial, overall satisfaction, and well-being. The Post Separation Transition Assistance Program focuses on Transition Assistance Program and Veterans’ long-term outcomes from a holistic perspective. The second report was published in June 2021,⁴ and the next reports are scheduled for release in Q1 FY 2024.

The Veterans’ Employment and Training Service Transition Assistance Program Evaluation

The Department of Labor Veterans’ Employment and Training Service Transition Assistance Program Evaluation study focuses on the Transition Assistance Program’s long-term effectiveness by examining how data can inform current or future Transition Assistance Program strategies, such as identifying factors that can predict positive employment outcomes. The study

⁴ The 2021 Longitudinal Survey Report: <https://benefits.va.gov/TRANSITION/docs/2021-longitudinal-report.pdf>.

was completed in FY 2023. The final report is available at Evaluation of the Transition Assistance Program Impact Study Report.⁵

Department of Labor Transition Assistance Program Evaluation and Employment Navigator Study

The Transition Assistance Program Evaluation and Employment Navigator study seeks to evaluate the impact of Department of Labor's portion of the mandatory Transition Assistance Program initiative as a vehicle for preparing and training eligible separating Service members to successfully transition into the civilian labor force, and the role of Employment Navigators on their employment outcomes. At the end of FY 2023, Department of Labor is leveraging data from the National Directory of New Hires and is analyzing that information. This study is comprised of two outcome analysis:

- Transition Assistance Program Effectiveness Outcome Analysis—this long-term outcome study will analyze Transition Assistance Program participants' employment outcomes to assess how well the program prepares and trains eligible separating Service members to successfully transition into the civilian labor force. This study will examine the timing of Transition Assistance Program courses before separation from the military and possible correlations between military occupation and employment outcomes.
- Employment Navigator Outcome Analysis—this study will compare the employment outcomes of transitioning Service members who have used employment services provided through the Employment Navigator and Partnership Pilot program and those who have not.

Navigating Military Transition Human Center Design Study

To fulfill the intent of Executive Order 14058, "Transforming Federal Customer Experience and Service Delivery to Rebuild Trust in Government," Deputy Secretaries from Departments of Veterans Affairs, Defense, Labor, Education, Housing and Urban Development, as well as General Services Administration and the Office of Management and Budget, formally committed their agencies to create integrated solutions using Human Centered Design that will measurably improve the Experience of Navigating Military Transition. In addition, representatives from the Office of Personnel Management and the Small Business Administration have signed on to support.

Beginning in October 2021, cross-agency partners embarked on a discovery research initiative that explored how customers currently experience military transition. That research yielded seven key insights, four customer personas, a map of the transition journey, and identification of four key areas of opportunity for improvement: (1) navigating the transition process; (2) planning for life after the military; (3) right-sizing and timing curriculum content; and (4) selecting, organizing, and presenting personalized resource connections.

During FY 2023, representatives from nine Federal agencies and five military service branches launched the first of three Human Centered Design sprints that focused on improving the

⁵ Evaluation of the Transition Assistance Program Impact Study Report:
https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/TAP/TAP%20Impact%20Study%20Report_508.pdf.

customer experience. Cross-agency partners in the first sprint landed on developing a digital solution to expose and consolidate data aggregation from multiple agencies and deliver the right information and resources at the right time based on the Service member's life goals. Throughout the sprint, the team improved and validated this concept through multiple rounds of testing and design iteration based on new learnings and feedback gathered directly from Service members and Veterans who recently separated from military service.

One-Year Independent Assessment of Transition Assistance Program

The 1-year independent assessment of the effectiveness of Transition Assistance Program mandated by Section 4305 of Public Law 116–315 included 19 recommendations for the Transition Assistance Program interagency review and consideration. The Transition Assistance Program Interagency will develop action plans in FY 2024 to implement the actionable recommendations.

Longitudinal Study on Changes to the Transition Assistance Program

The Longitudinal Study on Changes to the Transition Assistance Program required by Public Section 4306 of Law 116–315 is the companion to the 1-year independent assessment of the effectiveness of the Transition Assistance Program stipulated by Section 4305 of Public Law 116–315. The requirements of Section 4306 of Public Law 116–315 will be met by leveraging the existing Post Separation Transition Assistance Program Assessment Outcome Study and the 1-year independent assessment of Transition Assistance Program conducted in FY 2022. The main activities conducted during FY 2023 included Office of Management and Budget approval of the Section 4306 surveys and data collection preparation to meet the legislative requirements. A progress report is scheduled and on track to be sent to Congress by March 2024.

Government Accountability Office Report

A study completed by the Government Accountability Office in December 2022 found that over 90 percent of the transitioning Service members participated in Transition Assistance Program counseling pathways according to an analysis of Transition Assistance Program data between April 1, 2021, and March 31, 2022.

Further, the Government Accountability Office also found that approximately 25 percent of Service members required to attend a 2-day track did not, and almost 70 percent did not start Transition Assistance Program 365 days prior to separation, as required. As a result, in April 2023, the Military Services drafted and submitted corrective action plans to address the Government Accountability Office report.

Priority 3.F. Warm Hand-Offs to Support Transitioning Service Members

The last step of the Military-to-Civilian Readiness Pathway is comprised not only of VA Solid Start and Military One Source, but of an array of State, community, Federal and non-Federal post-separation programs. This step starts with the person-to-person connections via warm handovers, when appropriate, from DoD executed by the Military Services with the appropriate interagency partner(s). Warm handovers provide a confirmed introduction and assurance that the applicable interagency partner acknowledges that an eligible Service member requires post-

military assistance. The interagency partner follows through on providing assistance to meet the needs of Service members, mitigate risk, and assist them in attaining their post-transition goals and a successful transition.⁶

A warm handover process begins during Capstone. During this time, no later than 90 days prior to transition, the Enterprise Individual Self-Assessment will be administered to re-evaluate Service members' mitigated risk to establish a continuum of support for novel and unresolved matters. Warm handover verifications from DoD to partnering agencies are critical to bridge the transitioning Service members' pre- to post-transition support services. To strengthen warm handover improvements and evidence-based prevention practices the Transition Assistance Program Executive Council expanded data sharing efforts, metrics, and transparency to include warm handover verification as part of the FY 2022 performance measures led by the Transition Assistance Program Interagency Performance Management Work Group.

American Job Centers are available in most communities across the Nation. For transitioning Service members who require a warm handover for employment, they are either expected to be connected with a representative at an American Job Center in their community of choice at non-Employment Navigator Partnership Pilot sites. At Employment Navigator Partnership Pilot sites, Service members receiving a warm handover are connected to the Lead Employment Navigator, where they can receive employment related services, as well as be connected to the designated point of contact within a State of their choosing who will validate the connection with Employment Navigator Partnership Pilot.

Department of Labor Employment Navigator and Partnership Pilot Program

On April 1, 2021, the Department of Labor announced the launch of the Employment Navigator and Partnership Pilot at 13 military installations as an extension of Transition Assistance Program to provide transitioning Service members and their spouses with personalized assistance outside of the traditional workshops. Following the completion of self-assessments, skills testing, career, and high-demand occupation exploration, as well as providing resume review, Employment Navigators assist participants in selecting career pathways and connecting them to partners and resources to address any additional employment related needs participants may have. At the end of FY 2023, the pilot increased to 29 military installations and over 5,500 clients received employment related services through the Employment Navigator and Partnership Pilot.

The Transition Service Member Resource Connection Pilot launched in May 2022 and currently has 30 military installation participants. During FY 2023, VA confirmed 100 percent (209) transitioning Service members that required additional assistance during Capstone were connected to VA by a DoD Transition Assistance Program Counselor through the Transition Service Member Resource Connection via the warm handover process. Transition Service Member Resource Connection is the solution and pilot of a single point of entry for DoD Transition Assistance Program Managers who initiate warm handovers to VA during Capstone. Transition Service Member Resource Connection allows VA to have near to real-time tracking

⁶ As defined in DoD Instruction 1332.35, "Transition Assistance Program (TAP) for Military Personnel," September 26, 2019.

and validation of warm handover connections for transitioning Service members. Transition Service Member Resource Connection supports warm handovers for assistance in VA's benefits and services in areas such as Education, Compensation, Medical/Healthcare, Housing, Mental Health Resource Awareness, and other VA benefits and services.

Beyond 365 post-military transition the Transition Assistance Program Interagency Partners continue to bridge education, employment, health, financial, housing, and social relational support services in conjunction with local government and community non-Federal entities (e.g., non-profits, Military Service Organizations/Veteran Service Organizations).

GOAL 4 – Modernize Shared Business Operations

Goal Statement: Remove barriers to effective and efficient delivery of services through proactive joint planning and execution, innovative technology solutions, and a commitment to financial stewardship.

Priority 4.A. Base Access

The VA-DoD Joint Executive Committee Base Access Working Group continues to monitor access issues and provide consistent messaging, clarify information about military installation access, and increase awareness and support among key audiences. The Base Access Working Group expanded its focus to ensure access beyond initial efforts for access to DoD installations and facilities that provide health care for Veterans, Caregivers, and other eligible individuals through local sharing agreements. Section 621 of Public Law 115-232 authorized the extension of commissary, exchange, and certain Morale, Welfare and Recreation retail facility privileges to certain Veterans and their Caregivers. All base access for Veterans and Caregivers has been aligned with DoD requirements contained in DoD Manual 5200.08, Volume 3, "Physical Security Program: Access to DoD Installations," January 2, 2019, as amended.

The Military Departments continued to implement DoD Manual 5200.08, Volume 3, during FY 2023. As of September 30, 2023, approximately 350,000 Veterans Health Identification Cards were enrolled for recurring installation access, an increase of approximately 170,000 since September 30, 2022. Once a Veterans Health Identification Card has been enrolled in DoD's electronic physical access control system at a Visitor's Control Center, cardholders can go directly to the installation's gate that contains an electronic physical access control system, scan their Veterans Health Identification Card, and be granted access without going into an installation's Visitor's Control Center. All Navy, Air Force, Marine Corps, and Army installations and bases are equipped with an electronic physical access control system that includes an identity matching engine for security and analysis.

Priority 4.B. Identity Management

The Information Technology Executive Committee worked throughout FY 2023 to finalize multiple analyses of possible long-term solutions for the common unique identifier for users of the Federal Electronic Healthcare Record. VA and DoD Chief Information Officers jointly closed out the analysis of the Federal Unique Identifier, based on a subset of the Federal Agency Smart Credential Number, and agreed to conduct an in-depth analysis of the Electronic Data

Interchange Personal Identifier, also known as the DoD ID number. The Defense Manpower Data Center conducted an analysis of the Electronic Data Interchange Personal Identifier solution and produced data points on cost to implement, requirements for new entities, policy impacts, and a notional architecture design, as well as a recommendation that the Office of Federal Electronic Healthcare Record Modernization determine a funding strategy for the solution.

In support of the effort to modernize DoD Self-Service Logon, Information Technology Executive Committee completed the upgrade to Multifactor Authentication capabilities within DoD Self-Service Logon in October 2022. VA and DoD continue to coordinate to determine a long-term plan for VA's use of DoD Self-Service Logon.

DoD continued to support the go-lives of DoD-managed Electronic Healthcare Record Modernization deployment sites throughout FY 2023, including deployment waves at Fort Drum, New York; Portsmouth Naval Base, Virginia; Walter Reed National Military Medical Center, Maryland; Fort Belvoir, Virginia; Wright-Patterson Air Force Base, Ohio; Landstuhl Army Medical Center, Germany; Royal Air Force Lakenheath, United Kingdom; U.S. Naval Hospital Okinawa, Japan; and Allgood Army Community Hospital, South Korea.

Priority 4.C. Integrated Disability Evaluation System

VA and DoD operate the Integrated Disability Evaluation System to evaluate Service members' eligibility for continued service and to provide VA and DoD disability-related benefits for those unable to serve due to service-connected disabilities. The Benefits Executive Committee, in collaboration with the Military Departments' Integrated Disability Evaluation System representatives, continues to improve the Integrated Disability Evaluation System performance and efficiency.

The Joint Executive Committee has established two priorities for the Integrated Disability Evaluation System Improvement Working Group:

1. Establish interoperable capability to electronically transfer 100 percent of Integrated Disability Evaluation System case file and transaction data between VA and DoD by the end of FY 2024.
2. Establish policy and procedures to decrease overall Integrated Disability Evaluation System processing time to 180 days or less by the end of FY 2024.

During FY 2023, VA and DoD made progress toward achieving the Joint Executive Committee's first priority by bringing together business and information technology experts to complete two milestones required for establishing full interoperable capability. In February 2023, VA and DoD defined the workflow requirements for Integrated Disability Evaluation System stakeholders, including VA staff, DoD staff, and Service members. In September 2023, VA and DoD completed work on identifying and documenting current processes for Service members' service treatment records, the results of VA examinations, and other Integrated Disability Evaluation System case file data to ensure it is fully available in VA and DoD systems.

Taken together, these actions are major steps toward enhancing and modernizing multiple inter-departmental systems into a single consolidated unified pathway. Establishing the pathways for full interoperability between VA and DoD systems will enhance program oversight, leverage

automation in VA and DoD for tracking of disability cases, streamline the process for sharing files and data, and improve the accuracy and timeliness of data moving between VA and DoD for Integrated Disability Evaluation System participants. Once implemented, interoperable VA and DoD systems also will improve the overall efficiency and accuracy of disability case processing.

In November 2022, DoD published DoD Instruction 1332.18, “Disability Evaluation System,” November 10, 2022, to formally establish policy and procedures to reflect shared DoD and VA timeliness goals, specifically the goal of decreasing overall Integrated Disability Evaluation System processing time to 180 days. VA and DoD experienced challenges in meeting the 180-day requirement primarily due to the residual impacts of the COVID-19 pandemic in 2020. In 2020, over 10,000 cases were paused due to the inability to conduct in-person exams. Once VA was able to conduct in-person exams again, beginning in September 2020, VA quickly worked to complete the exams on the stalled cases as well as on the new cases referred into the disability evaluation system. The pandemic also limited in-person routine care, which delayed identification of those members who required referral into the disability evaluation system. As a result, DoD averaged over 1,775 new referrals each month in FY 2022 and in FY 2023. The increased workload without the appropriate manning levels resulted in processing delays in each stage as the cases proceeded through the process. In FY 2024, VA and DoD also will be conducting a study to determine if current Integrated Disability Evaluation System stage goals are appropriate or if they should be adjusted in FY 2024.

VA provides DoD with proposed rating decisions used to assist DoD with determining whether a referred Service member is eligible for continued service. In FY 2023, VA completed more than 27,000 proposed ratings for Integrated Disability Evaluation System participants. This was the second year in a row in which VA completed more than 26,000 proposed ratings and a 3 percent increase over FY 2022.

When DoD determines an Integrated Disability Evaluation System participant is not eligible for continued service, VA issues a final rating decision. The final rating decision notifies Service members of their eligibility for disability-related benefits. During FY 2023, VA completed more than 24,000 final ratings for Integrated Disability Evaluation System participants. This was more than a 12 percent increase over the number completed in FY 2022.

In August 2023, VA hosted representatives from each branch of service, DoD, and the U.S. Coast Guard for the first in-person Integrated Disability Evaluation Summit since 2019. This event served as a venue for identifying and removing barriers to effective and efficient delivery of services and allowed for proactive joint planning for the Integrated Disability Evaluation System.

Priority 4.D. Joint Sharing of Facilities and Services

The Joint Executive Committee’s Capital Asset Planning Committee was established in 2005 to facilitate an integrated approach to planning, designing, constructing, and leasing real property-related initiatives for medical facilities that is mutually beneficial.

To further the committee's work, in Section 714 of the National Defense Authorization Act for FY 2022 (Public Law 117-81), VA and DoD were granted authority to transfer and accept funds for planning, design, and minor construction of shared medical facilities. Subsequently, VA and DoD received authority to enter into joint leasing actions with the passing of Section 706 of the PACT Act. Section 706 specifically authorized leasing of a shared medical facility (in addition to previous authority for planning, design, and construction of shared facility) up to, but not to exceed, the General Services Administration prospectus limit of annual lease payments and authorized "Medical Facilities" account payments between VA and DoD.

In FY 2023, the VA and DoD Capital Asset Planning Committee engaged the field on the initial joint opportunities list and received feedback on three credible project opportunities:

- A three-phase project for the Gulf Coast Veterans Health Care System in Florida to establish outpatient surgery; remodel inpatient and nutrition space so VA can provide inpatient services; and establish VA inpatient surgery at Naval Hospital Pensacola.
- A joint project to remodel DoD's Wright-Patterson Medical Center in Ohio that will expand the Dayton VA's Patient Aligned Care Team services and provide a permanent space for a VA transition center space.
- A joint construction project between VA Northern California Healthcare System and Travis Air Force Base to expand an existing joint clinic at McClellan Park.

The Joint Executive Committee and the Health Executive Committee concurred with the proposed projects. As such, the Capital Asset Planning Committee stood up an integrated project team and established milestones and schedules, including aligned funding years, for each project. At Naval Hospital Pensacola, VA had an approved Strategic Capital Investment Planning project for FY 2025 to remodel for VA inpatient use. At Wright-Patterson Medical Center, VA and DoD are planning to begin a joint design-build remodel project in FY 2024. At McClellan Park, VA submitted a Major Construction project for their Strategic Capital Investment Planning process for approval and prioritization and is coordinating with DoD on standing up a design team for an expanded joint clinic. In addition, the Capital Asset Planning Committee initiated an integrated project team at Naval Health Clinic Oak Harbor in Washington to bring two VA PACT teams to the naval clinic as a proof of concept.

Moreover, the Capital Asset Planning Committee updated the Joint Capital Project Standard Operating Procedure and worked with the Health Executive Committee's newly established Operations Integrated Project Teams to develop a coordinated process to identify, approve, and prioritize future joint clinical opportunities as part of validating associated joint capital requirements. The Capital Asset Planning Committee also has established joint integrated project teams to identify all impacted policies and oversee updates required to formalize joint project authorities within VA and DoD. Finally, VA and DoD integrated the new joint construction and lease authority into their respective capital planning processes.

GOAL 5 – Strengthen Interoperability and Partnership

Goal Statement: Strengthen and expand cross-agency and public-private partnerships to improve data interoperability, shape policy, facilitate data-driven decisions, and enable a seamless experience for beneficiaries.

Priority 5.A. Electronic Health Record Modernization Interoperability

Throughout FY 2023, VA, DoD, and the Federal Electronic Health Record Modernization Office continued to deploy a single, common Federal electronic health record that enhances patient care and provider effectiveness wherever care is provided. In this effort, the Federal Electronic Health Record Modernization focuses on standardization and convergence and the things VA and DoD do together to ensure VA-DoD interoperability.

In addition to VA and DoD, the Department of Homeland Security's U.S. Coast Guard and the Department of Commerce's National Oceanic and Atmospheric Administration have deployed the Federal electronic health record.

This standardization and convergence strategy unified efforts across the Federal electronic health record ecosystem and delivered common capabilities that add value to electronic health record deployments.

Electronic Health Record Capability Delivery

The common capabilities the VA-DoD Federal Electronic Healthcare Record Modernization Office delivered in 2023 include:

- Managing the Federal Enclave, a shared environment to contain the Federal electronic health record and supporting systems;
- Managing the joint health information exchange, a data-sharing capability;
- Overseeing configuration and content changes to the Federal electronic health record agreed on by VA and DoD through a joint decision-making process facilitated by the Federal Electronic Health Record Modernization Office;
- Providing software upgrades and solutions to optimize electronic health record performance;
- Tracking joint risks, issues, and opportunities as well as lessons learned regarding electronic health record implementation to inform continuous improvement;
- Maintaining an integrated master schedule to help coordinate electronic health record activities. Developing and updating deployment maps to show real-time status of deployments;
- Advancing interoperability, the meaningful use and exchange of data, to improve continuity of care among and between public and private-sector providers; and
- Leading analysis and integration of deployment activities at joint sharing sites where resources are shared between VA and DoD.

At the conclusion of Calendar Year 2023, there are more than 194,000 VA, DoD, U.S. Coast Guard, and National Oceanic and Atmospheric Administration Federal electronic health record users, including doctors, nurses, and other health care providers, at 135 parent military treatment facilities, 5 VA medical centers, 109 U.S. Coast Guard sites, and 7 National Oceanic and Atmospheric Administration sites. More than 9.5 million unique patients are currently in the Federal health record system.

Department Electronic Health Record Deployment Status

Except for the Lovell Federal Health Care Center, DoD has completed its deployment of the Federal electronic health record at all its clinical sites in the continental United States. This DoD stateside electronic health record deployment was delivered on-time and under budget. The DoD's deployment of the Federal electronic health record to sites outside of the continental United States began in fall 2023.

VA has halted deployments of the Federal electronic health record, except for the Lovell Federal Health Care Center, as it undergoes an Electronic Health Record Modernization Program Reset. The purpose of the Reset is to optimize the current state of VA's Federal electronic health record implementation; closely examine and address the issues that VA clinicians and other end users are experiencing; and position VA for future deployment success.

VA remains firm in its resolve to deploy a modern Federal electronic health record. VA does not have a firm timeline for completion of this effort, but it is committed to getting this right for Veterans and VA clinicians alike.

Lovell Federal Health Care Center Deployment Progress

VA and DoD are focused on the synchronous deployment of the Federal electronic health record at Lovell Federal Health Care Center in March 2024. This is the first time VA and DoD will deploy the Federal electronic health record together. As a single deployment team, VA and DoD are taking the best of both efforts and experiences to the Lovell Federal Health Care Center.

Lovell Federal Health Care Center is the most integrated joint sharing site that serves VA and DoD patient populations, providing opportunities to streamline care for all. The facility's Federal electronic health record implementation is fundamental to interoperability and the single, common record. The deployment of the Federal electronic health record at Lovell Federal Health Care Center will lead the way for how two large health care systems work together to make the best care decisions without technology being a barrier.

By ensuring VA and DoD can work together as a single unit, Lovell Federal Health Care Center becomes a model for how this can be done across the broader health care space to ensure seamless, integrated care for patients. This model will help simplify our ability to work together and how VA and DoD can demonstrate interoperability. In addition, the Federal electronic health record cannot succeed at other joint sharing sites until it is successfully implemented and refined at Lovell Federal Health Care Center.

VA and DoD accomplished a host of critical pre-deployment activities at Lovell Federal Health Care Center Electronic Health Record in 2023. The Federal Electronic Healthcare Record Modernization completed the facilities Enterprise Requirements Adjudication process to identify, address, and resolve differences between VA and DoD policies, procedures, nomenclature, and workflows. The Enterprise Requirements Adjudication process identified items and courses of action necessary to complete an implementation plan and bridge the gap between VA and DoD standards and best practices.

Throughout the year, the Federal Electronic Healthcare Record Modernization Office continued to engage with Lovell Federal Health Care Center site leaders and super-users to discuss deployment strategy, milestones, and highlight design and execution decisions for the electronic health record implementation. The Federal Electronic Healthcare Record Modernization Office established 11 sub-working groups for specific functional areas with representation across the Departments and vendors to support different elements of the Federal electronic health record deployment at the facility.

Ultimately, Lovell Federal Health Care Center will serve as a prototype for how we can all work together in new and exciting ways to deliver care. VA, DoD, along with the Federal Electronic Healthcare Record Modernization Office and Lovell Federal Health Care Center stakeholders, are committed to getting the Federal electronic health record deployment right for our providers and patients within the Federal health care system and beyond.

Joint Sharing Sites Implementation Support

VA-DoD Federal Electronic Health Record Modernization Office spearheaded efforts to establish a common approach to deploy Federal electronic health record capabilities to joint sharing sites. Deploying the Federal electronic health record to shared-resource, integrated VA and DoD facilities requires careful collaboration, joint decision-making, and a thorough understanding of the possible effects of the Federal electronic health record deployment. VA-DoD Federal Electronic Health Record Modernization Office leads the analysis and integration of deployment activities at these joint sites, with a specific focus on technical, functional, and programmatic issues, including implementation schedules, joint access, and network security. Throughout 2023, the office engaged in numerous planning, execution, and analysis activities to support the unique health informatics needs at joint sharing sites.

Joint Health Information Exchange

The Joint Health Information Exchange is part of the overarching effort of the Federal Electronic Health Record Modernization Office to deliver capabilities that enable VA, DoD, the U.S. Coast Guard, and the National Oceanic and Atmospheric Administration to deploy a single, common Federal electronic health record. The Joint Health Information Exchange is a modernized health data sharing capability that enhances the ability to share data bi-directionally, quickly, and securely with participating community health care providers. This capability provides more informed care for patients who navigate among health care providers.

In 2023, the Joint Health Information Exchange expanded to include participating in Carequality, a framework enabling health data sharing between and among networks. Participating in Carequality significantly expands the percentage of U.S. hospitals connected to the Joint Health Information Exchange from 75 percent to more than 90 percent, thus enhancing the ability to exchange patient data and resulting in more informed care for patients navigating between different health care systems and providers.

With this enterprise-wide connection, clinicians, nurses, and administrators gain access to an expanded set of external health records from participating provider organizations for patients.

Other organizations previously unable to query VA, DoD, the U.S. Coast Guard, and the National Oceanic and Atmospheric Administration can now retrieve data from them.

Immunization Exchange with State Immunization Information Systems

Immunization Information Exchange is the capability that uses the Centers for Disease Control and Prevention Immunization Gateway to allow VA and DoD clinicians to report administered vaccines to the Centers for Disease Control and Prevention, and query State and jurisdictional immunization information systems for vaccination information that may be added to the patient's Federal electronic health records.

In 2023, the DoD established immunization exchanges with Washington, Florida, Oklahoma, North Carolina, and California. VA has implemented immunization exchanges in Washington, Idaho, Montana, Oregon, and Ohio.

Upgrading and Optimizing Electronic Health Record performance

The VA-DoD Federal Electronic Healthcare Record Modernization Office tracks and facilitates software upgrades and solutions to optimize the performance of the Federal electronic health record. The Federal electronic health record continues to improve as enhancements are integrated into the system. Some enhancements integrated into the Federal electronic health record since its initial deployment include Immunization Forecaster and Immunization Gateway, HealtheRegistries, Telehealth Capabilities, Opioid Registry, Burn Unit PowerForm, Joint Health Information Exchange, and an Enhanced Cybersecurity Posture.

In 2023, two significant Capability Block upgrades were deployed to the Federal electronic health record. Capability Block 8 was released on February 17, 2023, and included multiple enhancements to pharmacy and trauma capabilities that help save clinician time, enhance medication safety, reduce crash counts, and support stronger continuity of care. Capability Block 9 was released in August 2023 and included multiple enhancements to create pharmaceutical efficiencies, help save providers time, reduce duplicative work, and enhance patient care at VA sites using the Federal electronic health record.

Longitudinal Natural Language Processing initiative

The VA-DoD Federal Electronic Healthcare Record Modernization Office deployed the Longitudinal Natural Language Processing initiative to improve the ability of Joint Longitudinal Viewer users to find targeted private sector data. This capability applies natural language processing and artificial intelligence to unstructured notes to make the unstructured data searchable and codified in a way to better understand medical concepts and context.

National Oceanic and Atmospheric Administration Deploys the Federal Electronic Health Record

In June 2023, the VA-DoD Federal Electronic Healthcare Record Modernization Office supported the successful deployment of the Federal electronic health record at the National Oceanic and Atmospheric Administration. The VA-DoD Federal Electronic Healthcare Record

Modernization Office led the functional requirements and onboarding for implementation and execution at its Enterprise Operations Center to support the go-live.

Priority 5.B. Joint Data and Analytics Strategy

The VA-DoD Joint Data and Analytics Executive Committee was established under Joint Governance with a signed Charter on March 16, 2023, by the Deputy Secretary of Veterans Affairs and the Under Secretary of Defense for Personnel and Readiness. The Joint Data and Analytics Executive Committee serves as the VA-DoD advisory body to the Joint Executive Committee subcommittees on cross-cutting integration needs and for guiding, supporting, and recommending the approach and resolution for joint data and analytics activities, framing, and escalating required data-related decisions as needed.

VA and DoD continue to share a joint vision to achieve data interoperability and to treat data as a strategic asset that must be responsibly and actively managed to balance the imperatives of achieving the full potential of the data while respecting the individuals that the data represents.

The Joint Data and Analytics Executive Committee completed a Joint Implementation Plan, baselined for FY 2023, aiming to track and monitor all milestones and activities within the Implementation Plan in support of the Joint Data Strategy. The plan was carried out by six workstreams: (1) Member Experience Journey; (2) Advancing Joint Analytics; (3) Federated Data Management; (4) Joint Data Governance; (5) Joint Data Sharing Operating Model; and (6) Data Services. The workstreams continued the engagement throughout FY 2023 to implement the milestones and identify opportunities for collaboration.

The Member Experience Journey workstream yielded several accomplishments including the completed codesign and integration of the Military Lifecycle Model and VA Journey Map. Funding was secured through the Small Business Innovation Research fund pursuit of end-to-end Service Member/Veteran Moments that Matter and metadata visualization submitted by Defense Manpower Data Center.

The Federated Data Management workstream fulfilled one of the priority milestones for FY 2023 under the Joint Executive Committee with a completed exchange of Defense Enrollment Eligibility Reporting System Personnel Data Repository and Individual Longitudinal Exposure Record Metadata from ADVANA (a centralized data and analytics platform that provides users a unified source of business data, decision support analytics, and essential data tools) to VA Enterprise Data Catalog during Q4 FY 2023. The Enterprise Data Catalog can serve as a catalyst to identify data discrepancies between VA and DoD shared information, leading to proactive error correction in source systems that minimizes Veteran burden. This workstream established a bridge between VA and DoD Enterprise Data Catalogs and piloted the exchanged of immunization metadata. The Joint Data and Analytics Executive Committee approved prioritization of data domains for FY 2023-2024 and the approval of the initial minimal metadata standard.

The Joint Data Sharing Operating Model workstream established preliminary requirements for a joint data request system and cross-walked them between VA and DoD. The workstream is

integrating Memorandum of Understanding, System of Records Notice, and Agreements to the data catalogs to understand the common data application and uses.

The Advancing Joint Analytics workstream identified functional sponsors for long COVID use cases. In FY 2024, this effort will prove out the viability of analytic model sharing across the joint space. This workstream also established the Joint Virtual Private Network, thus streamlining and enhancing security of data transfers between Defense Health Agency Military Health Systems Information Platform and VA.

The Joint Data Governance workstream implemented various of the priority milestones for FY 2023, including the establishment of the joint data maturity baseline to measure progress towards Joint Executive Committee's Specific, Measurable, Achievable, Relevant, and Time-Bound Objectives and the signature of the Executive Committee Charter by VA and DoD to officially kick-off sanctioned governance. Under this workstream, the VA-DoD Joint Data and Analytics Executive Committee completed a data maturity model assessment for the joint space with the data assessment categories including three main capabilities: (1) Data Culture; (2) Data Management; and (3) Data Governance. The goal was to identify gaps and opportunities, and progress to the target maturity level in the joint space. The components assessed included Defense Manpower Data Center, Defense Health Agency, Federal Electronic Health Record Modernization Office, and the Veterans Experience Office. The Veterans Health Administration is projected to have contracting funds to complete baselined maturity assessments in FY 2024. All the components' assessments are expected to follow a 3-year cycle.

Leveraging the work of the VA-DoD Information Technology Executive Committee, the Joint Data and Analytics Executive Committee identified and prioritized Candidate Data Products in support of PACT Act and Patronage, thus fulfilling the priority milestone for FY 2023 on evaluating joint use cases to meet PACT Act requirements.

In addition to the accomplishments of the individual workstreams, the Joint Data and Analytics Executive Committee sanctioned a joint VA-DoD Electronic Health Record Modernization Data Harmonization team to focus on priority identity (person) data quality issues occurring at the new VA Cerner sites, which called for analysis of the differences in identity data shared between VA Master Person Index and DoD Defense Enrollment Eligibility Reporting System.

The team has focused on the specific Agency Identifiers that must be aligned between VA Master Person Index and DoD Defense Enrollment Eligibility Reporting System to support the longitudinal health record for Electronic Health Record Modernization. As part of this work, the team discovered and recommended fixes for several software issues, including a number involving merging of identity records. Issues that could not be adequately addressed at this work group level were raised to the Joint Data Analytics-Executive Committee. An analysis of the VA Match Threshold was conducted, resulting in changes to the algorithm that allowed resolution of nearly 250,000 duplicate records in VA Master Person Index. The Veterans Health Administration Health Care Identity Management team continued pre-migration activities to resolve those identifier and identity trait issues for those sites migrating to Electronic Health Record Modernization. More than 10,000 identifier and nearly 4,000 trait issues were resolved, many of them for the Lovell Federal Health Care Center, which is the next facility to be migrated.

SECTION 3 – NEXT STEPS

The accomplishments described in this FY 2023 VA-DoD Joint Executive Committee Annual Joint Report demonstrate concerted efforts between VA, DoD, and its partners to improve the multiple areas of joint responsibility that directly affect the care and benefits of Service members Veterans, their Families, Caregivers, and Survivors. This report updates strategic areas that will continue to evolve until these joint initiatives become fully institutionalized into everyday operations. All involved agencies are sincerely committed to maintaining and improving the collaborative relationships that make this progress possible.

Moving forward, the Joint Executive Committee will continue to drive joint coordination and sharing efforts between VA and DoD and partner agencies to support the strategic direction established in the FY 2022-2027 VA-DoD Joint Strategic Plan. Together, the agencies will continue to demonstrate and track progress toward defined goals, objectives, and end-states, and provide the continuum of care needed to successfully meet the needs of Service members, Veterans, their Families, Caregivers, and Survivors.

APPENDIX A – ORGANIZATION

The Joint Executive Committee, Health Executive Committee, Benefits Executive Committee, Transition Assistance Program Executive Council, Information and Technology Executive Committee, Federal Electronic Health Record Modernization Executive Committee, and Independent Working Groups are comprised of more than 60 working groups, boards, and areas of oversight.⁷

Health Executive Committee:

- Clinical Care Business Line
 - Deployment Health Working Group
 - * ~~Deployment Health Working Group~~
 - Evidence-Based Clinical Guidelines Working Group
 - Pain Management Working Group
 - Patient Safety Working Group
 - Telehealth/Virtual Health Working Group
 - Women's Health Working Group
- Healthcare Operations Business Line
 - Acquisitions & Medical Materiel Management Working Group
 - Care Coordination Working Group
 - Continuing Education & Training Working Group
 - Duplicate Claims Integrated Product Team
 - James A. Lovell Federal Health Care Center Advisory Board
 - Reimbursements Integrated Product Team
 - Shared Resources Working Group
- Health Informatics Business Line
 - Interagency Clinical Informatics Board
 - Continuity of Care Working Group
 - Health Information Policy Working Group
 - Interagency Data and Analytics Working Group
 - Joint Clinical Information and Standards Implementation Working Group
 - Patient Engagement Working Group

⁷ VA-DoD Joint Executive Committee Organization List (as of February 7, 2023)

Benefits Executive Committee:

- Communication of Benefits and Services Working Group
- Dual Compensation Working Group
- Information Sharing/Information Technology Working Group
- Integrated Disability Evaluation System Working Group
- Military to Civilian Readiness Working Group
- Service Treatment Records Working Group
- Patronage Expansion Working Group

Transition Assistant Program Executive Council:

- Senior Steering Group
- Transition Assistance Interagency Working Group
 - Curriculum Working Group
 - Data Sharing/Information Technology Working Group
 - Employment Working Group
 - Performance Management Working Group
 - Reserve Component Working Group
 - Strategic Communications Working Group

Information and Technology Executive Committee:

- Enterprise Architecture Working Group
- Identity, Credentialing, and Access Management Working Group
- Information Protection Working Group
- Information Technology Operations Working Group
- Military Personnel Data Working Group

Joint Data and Analytics Executive Committee

Joint Executive Committee Independent Working Groups:

- Base Access Working Group
- Capital Asset Planning Committee
- Hannon Act Section 102 Working Group
- Separation Health Assessment Working Group
- Sexual Trauma Working Group
- Strategic Communications Working Group
- Joint Suicide Prevention and Associated Mental Health Working Group

Federal Electronic Health Record Modernization Committee⁸:

- Executive Data Management Board
- Federal Electronics Health Record Modernization Analytics Board
- Federal Electronic Health Record Modernization Data Governance Board

⁸ The Joint Executive Committee serves as an advisory role to the Office of Federal Electronic Healthcare Record Modernization as of the National Defense Authorization Act for FY 2020 amendment to 38 U.S.C. § 715.