

**2026
DEFENSE HEALTH INFORMATION
TECHNOLOGY SYMPOSIUM**

**AUGUST 11-13, 2026
HYATT REGENCY NEW ORLEANS
NEW ORLEANS, LA**

Building the Foundations for Responsible AI: From Data Strategy to Decision Advantage

Dr. Jesus Caban

Chief Data and Analytics Officer, Defense Health Agency



Disclosure Statement

- I have no relevant financial relationships to disclose relating to the content of this activity.
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Speaker Introduction



Dr. Jesus Caban

Chief Data & Analytics Officer
DHA

Jesus J. Caban, PhD, serves as the Chief Data and Analytics Officer (CDAO) for the Defense Health Agency (DHA). In this role, Dr. Caban is the principal advisor to the DHA Deputy Director on all matters related to data, analytics, data management, and data governance. He is responsible for leading the implementation of a comprehensive data strategy for the DHA, which includes establishing safeguards, controls, and guidelines for the responsible use of AI aligned with the DoW Data and AI strategy.

Learning Objectives

- 1** Discuss the Department of War's (DoW) AI strategy and its implications for the DHA.

- 2** Describe the key dimensions for enterprise AI readiness.

- 3** Summarize the current state of Data Governance and AI adoption across the enterprise.

DoW AI Strategy

How We Win



Speed Over Perfection

Shifting culture from bureaucratic perfection to "wartime delivery".



Pace-Setting Projects

Tangible, outcome-oriented projects by DoW CDAO to unlock enterprise data and models.



Fast-Following Projects

Components prioritize three projects to scale PSP successes.

Pace Setting Projects

WARFIGHTING



Swarm Forge

Delivered by CDAO & SOCOM

Proving ground for future robot armies and the humans who command them

Quarterly combat sessions testing new kit and tactics; developing robust library of data, models, and UxS schema



Agent Network

Delivered by CDAO & INDOPACOM

AI agents orchestrating warfare from campaign assumptions to kill chain execution

Agent orchestration layer on Maven Smart System to accelerate targeting, planning, and tactical execution workflows



Ender's Foundry

Delivered by DARPA

The simulations factory for discovering AI-enabled tactics that break human plans

Game factory running 10,000+ tactical experiments daily discovering vulnerabilities

INTELLIGENCE



Project Grant

Delivered by SC0

A control system for deterrence

Transform deterrence from static postures and speculation to dynamic pressure, MOEs, and adaptation



Open Arsenal

Delivered by DAF RCO and I&S

The graph API gateway that turns intel into weapons

Pushing data from sensors to engineers who exploit it

ENTERPRISE



Delivered by CDAO & DAF

Expanding strategic advantage with Frontier AI

The Department of War's premier AI platform, providing secure access to advanced AI to accelerate mission outcomes.



Enterprise Agents

Delivered by CDAO

Transform enterprise workflows through agentic AI

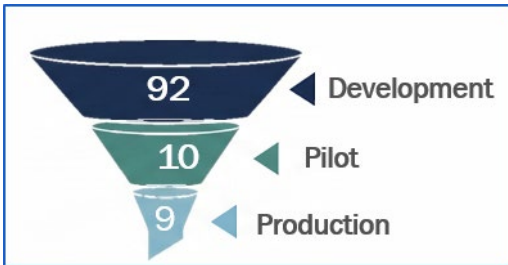
Rapidly deploying AI agents for back-office business operations, realizing productivity gains

DoW Fast Following Projects (1 of 2)

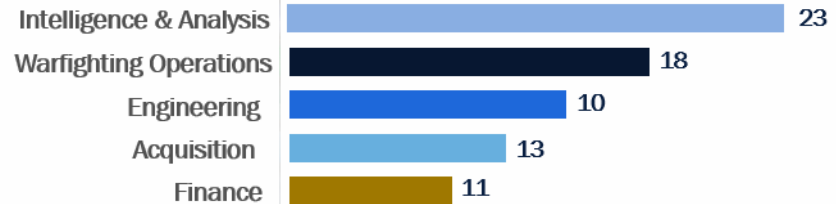
FFP PORTFOLIO OVERVIEW

TOTAL FFP: 136

FFP by Lifecycle Stage



FFP by Functional Category - 5 Largest Categories



DoW Fast Following Projects (2 of 2)

TOTAL FFP: 136

ID	Tag	Component	Project Name	Domain	Impact Level	Sponsor Organiz
115	Fast Follower #1	DIU	Thunderforge	Joint Planning and Command and Control (C2)		Defense Innovatic
116	Fast Follower #2	DIU	Mystic Depot	AI Test & Evaluation and Evaluation		Defense Innovatic
117	Fast Follower #3	DIU	Gambit	ISR/C2		Defense Innovatic
118	Fast Follower #1	OUSD R&E	Faster-Than-Real-Time Simulation (FTRT Sim	Test & Evaluation / Simulation		TRMC / AAI Mod ,
119	Fast Follower #2	OUSD R&E	Joint Autonomy Test Range (SUMTER)	Test & Evaluation / Simulation		TRMC / AAI Mod ,
120	Fast Follower #3	OUSD R&E	AI Data Readiness & Integration Pipeline (AI	Test & Evaluation / Simulation		TRMC / AAI Mod ,
121	Fast Follower #1	DeCA	DoW Compliant AI Assistant Adoption for Pe	Enterprise Wide		DeCA
122	Fast Follower #2	DeCA	Standard Naming for Systems & Equipment	Data Governance/Asset Management		DeCA
123	Fast Follower #3	DeCA	Facilities Management Predictive Maintenanc	Engineering/ Facilities		DeCA
124	Fast Follower #1	DHRA / DMDC	USHRIS	Personnel Data		DMDC
125	Fast Follower #2	DHRA / DPAC	Project Sentiment Bridge	Mission Analytics, Command Climate		Defense Personne
126	Fast Follower #3	DHRA DSSC	AI Pilot for EEO cases	Enterprise		IRD
127	Fast Follower #1	DoWEA	HQ Business Intelligence Copilot Playbook	Enterprise		USW(P&R) DoWE
128	Fast Follower #2	DoWEA	GenAI.mil "Force Readiness" Staff Profession	Enterprise		USW(P&R) DoWE
129	Fast Follower #3	DoWEA	DoWEA Enterprise Data Lakehouse	Enterprise		USW(P&R) DoWE
130	Fast Follower #1	DHA	Ambient Listening Technology Implementatio	Enterprise		DHA
131	Fast Follower #2	DHA	AI Coding	Enterprise		DHA
132	Fast Follower #3	DHA	Profiling and Readiness Action Tracking Unifi	Medical Readiness		DHA
133	Fast Follower #1	USUHS	ORTA Agreement Intake & AI Agent	Enterprise		Transformation O
134	Fast Follower #2	USUHS	Data Agreement AI Review & Automation	Enterprise		Transformation O
135	Fast Follower #3	USUHS	Outside Activity Report AI Supervisor Aid	Enterprise		Transformation O

How DHA is Being Measured?

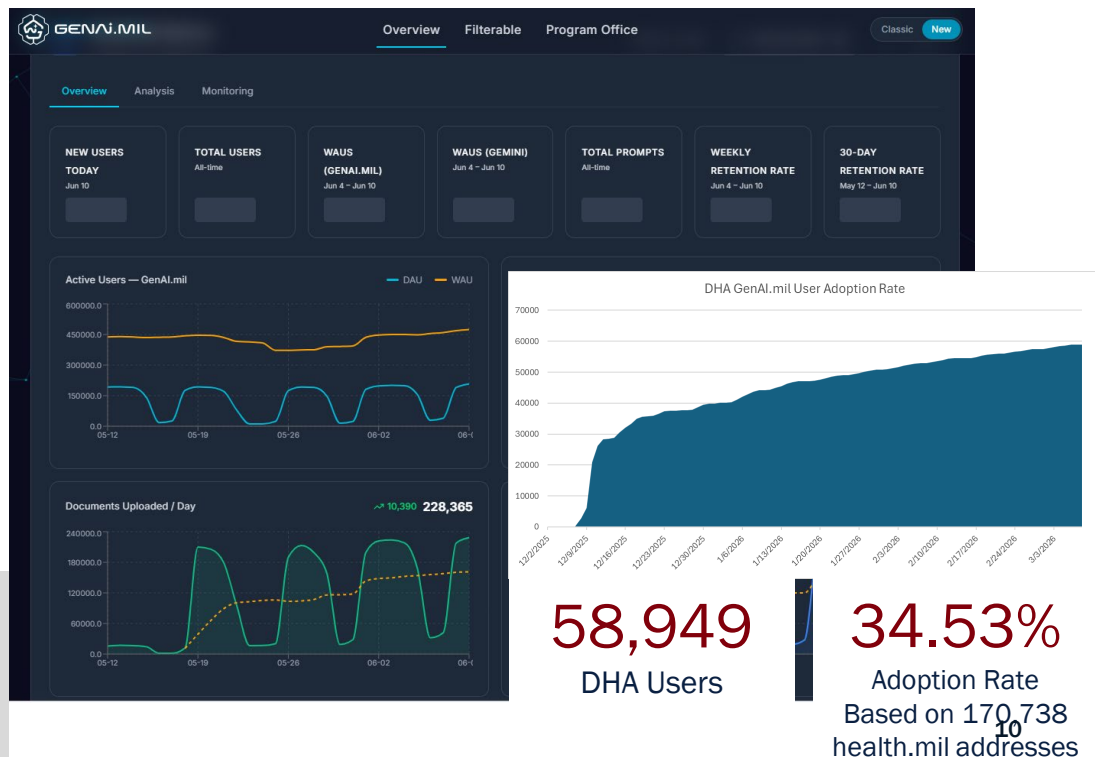
FFP

1

400+
Unique use cases reported

2

3



How is DHA Executing?

Key Dimensions for AI Readiness across DHA

Enterprise AI readiness requires transformation across interdependent dimensions.



Workforce Readiness

Q: How do we re-skill and up-skill the workforce for an AI-enabled future?

AI fluency, technical density, cross-functional workforce



Operating Model

Q: How do we rethink workflows, policies, governance, and decision-making processes?

Policies, agile delivery, human-agent workflows, faster iteration



Technology

Q: Do we have the technology foundation to scale AI securely and responsibly?

Modern software, enterprise AI platforms, cloud-native environments



Data

Q: Do we have trusted, accessible, and interoperable data to power AI?

Data products, semantic interoperability, governance



Monitor Adoption

Q: How do we accelerate enterprise adoption and move beyond pilots?

Scaling from pilots, operational integration, enterprise value

Key Dimensions for AI Readiness across DHA – Monitor Adoption

Enterprise AI readiness requires transformation across interdependent dimensions.



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AI/ML Inventory

2018

2023-24

2025

2026

CH247	AI-Case Report: Marfan's	Research	Marfan's Syndrome
CH248	Workplace Safety and Health	Research	Workplace Safety and Health
CH249	Health Care Quality Improvement	Research	Health Care Quality Improvement
CH250	Global Health	Research	Global Health
CH251	Healthcare Policy	Research	Healthcare Policy
CH252	Healthcare Economics	Research	Healthcare Economics
CH253	Healthcare Law	Research	Healthcare Law
CH254	Healthcare Ethics	Research	Healthcare Ethics
CH255	Healthcare Communication	Research	Healthcare Communication
CH256	Healthcare Informatics	Research	Healthcare Informatics
CH257	Healthcare Research Methods	Research	Healthcare Research Methods
CH258	Healthcare Statistics	Research	Healthcare Statistics
CH259	Healthcare Quality Improvement	Research	Healthcare Quality Improvement
CH260	Healthcare Policy	Research	Healthcare Policy
CH261	Healthcare Economics	Research	Healthcare Economics
CH262	Healthcare Law	Research	Healthcare Law
CH263	Healthcare Ethics	Research	Healthcare Ethics
CH264	Healthcare Communication	Research	Healthcare Communication
CH265	Healthcare Informatics	Research	Healthcare Informatics
CH266	Healthcare Research Methods	Research	Healthcare Research Methods
CH267	Healthcare Statistics	Research	Healthcare Statistics
CH268	Healthcare Quality Improvement	Research	Healthcare Quality Improvement
CH269	Healthcare Policy	Research	Healthcare Policy
CH270	Healthcare Economics	Research	Healthcare Economics
CH271	Healthcare Law	Research	Healthcare Law
CH272	Healthcare Ethics	Research	Healthcare Ethics
CH273	Healthcare Communication	Research	Healthcare Communication
CH274	Healthcare Informatics	Research	Healthcare Informatics
CH275	Healthcare Research Methods	Research	Healthcare Research Methods
CH276	Healthcare Statistics	Research	Healthcare Statistics
CH277	Healthcare Quality Improvement	Research	Healthcare Quality Improvement
CH278	Healthcare Policy	Research	Healthcare Policy
CH279	Healthcare Economics	Research	Healthcare Economics
CH280	Healthcare Law	Research	Healthcare Law
CH281	Healthcare Ethics	Research	Healthcare Ethics
CH282	Healthcare Communication	Research	Healthcare Communication
CH283	Healthcare Informatics	Research	Healthcare Informatics
CH284	Healthcare Research Methods	Research	Healthcare Research Methods
CH285	Healthcare Statistics	Research	Healthcare Statistics
CH286	Healthcare Quality Improvement	Research	Healthcare Quality Improvement
CH287	Healthcare Policy	Research	Healthcare Policy
CH288	Healthcare Economics	Research	Healthcare Economics
CH289	Healthcare Law	Research	Healthcare Law
CH290	Healthcare Ethics	Research	Healthcare Ethics
CH291	Healthcare Communication	Research	Healthcare Communication
CH292	Healthcare Informatics	Research	Healthcare Informatics
CH293	Healthcare Research Methods	Research	Healthcare Research Methods
CH294	Healthcare Statistics	Research	Healthcare Statistics
CH295	Healthcare Quality Improvement	Research	Healthcare Quality Improvement
CH296	Healthcare Policy	Research	Healthcare Policy
CH297	Healthcare Economics	Research	Healthcare Economics
CH298	Healthcare Law	Research	Healthcare Law
CH299	Healthcare Ethics	Research	Healthcare Ethics
CH300	Healthcare Communication	Research	Healthcare Communication

1. Force Health Protection 27.0% (30/111)

1	Public Health & Epidemiology
2	Occupational Health & Safety
3	Medical Readiness
4	Environmental Health Hazards
5	Bio-Surveillance
6	Medical Warfighter Capability
7	Force Generation AI
8	Readiness Monitoring

2. Health Support Services 49.5% (55/111)

9	Clinical Decision Support
10	Mental Health Support
11	Rehabilitation & Assistive Technology
12	Medical Research & Development
13	Patient Engagement & Education
14	Operational Efficiency & Resource Management
15	Medical Coding
16	Medical Logistics

3. Business of Healthcare 23.4% (26/111)

17	Operational Efficiency & Resource Management
18	Training & Education
19	Revenue Cycle Management
20	Supply Chain Management
21	Healthcare Administration
22	Cybersecurity & Privacy
23	Performance Management & Quality Improvement

~96 responses

~119 responses

~72 responses

400+ responses



HEALTH AFFAIRS

THE ASSISTANT SECRETARY OF DEFENSE

1200 DEFENSE PENTAGON
WASHINGTON, DC 20301-1200

MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (MANPOWER AND
RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE NAVY (MANPOWER AND
RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE AIR FORCE (MANPOWER
AND RESERVE AFFAIRS)
DIRECTOR, DEFENSE HEALTH AGENCY
PRESIDENT, UNIFORMED SERVICES UNIVERSITY OF
HEALTH SCIENCE

SUBJECT: Request for Information on Health Care Artificial Intelligence Projects and Capabilities

Recent advances in Artificial Intelligence (AI) have shown its potential to transform health care. The purpose of this memorandum is to request that you provide information regarding your current AI projects and capabilities.

Your respective Department of Defense Components and organizations are requested to identify and briefly describe all health care AI projects and capabilities using the attached matrix (Attachment 1) within 20 business days of the date of this memorandum.

The point of contact for this tasking is Colonel Luigi Rao, who may be reached at (703) 681-1707 or luigi.k.rao.mil@health.mil.

MULLEN SEILEEN
MARIE.1519853007

Lester Martinez-L6pez, M.D., M.P.H.



DEFENSE HEALTH AGENCY
7700 ARLINGTON BOULEVARD, SUITE 5101
FALLS CHURCH, VIRGINIA 22042-5101

MEMORANDUM FOR ASSISTANT DIRECTORS
OFFICE OF THE WARFIGHTER HEALTH ADVANTAGE
DIRECTORS, SPECIAL STAFF
DIRECTORS, DEFENSE HEALTH NETWORKS
DIRECTORS, MILITARY MEDICAL TREATMENT FACILITIES

SUBJECT: Request for Input – FY26 Annual Artificial Intelligence Inventory

References: (a) See War Memorandum, "Artificial Intelligence Strategy for the Department of War," January 9, 2026

(b) Office of Management and Budget Memorandum M-25-21 "Accelerating Federal Use of AI through Innovation, Governance, and Public Trust," April 3, 2025

(d) Office of Management and Budget Memorandum M-24-10 "Advancing

(d) Office of Management and Budget Memorandum 07-24-19 "Advancing Governance, Innovation, and Risk Management for Agency Use of Artificial Intelligence", March 28, 2024

(e) Executive Order 13960, "Promoting the Use of Trustworthy Artificial Intelligence in the Federal Government", December 3, 2020

In alignment with the 2026 Department of War (DoW) Artificial Intelligence (AI) Strategy, Executive Order 13960, Executive Order 14179, and Office of Management and Budget Memorandum M-24-10 (references a-e), this memorandum initiates the Defense Health Agency's (DHA) Fiscal Year 2026 Annual AI Use Case Inventory data call.

This inventory is a critical component of DHA's AI strategy and governance framework. Submissions will inform how the agency is incorporating AI to improve operations and streamline processes, support future budget and resource requests, and help identify the technology gaps and barriers standing between DHA and DoW's goal of becoming an AI-first organization.

All DHA Directorates and Offices are requested to identify and submit information on

UNCLASSIFIED

2026 DHITS 14

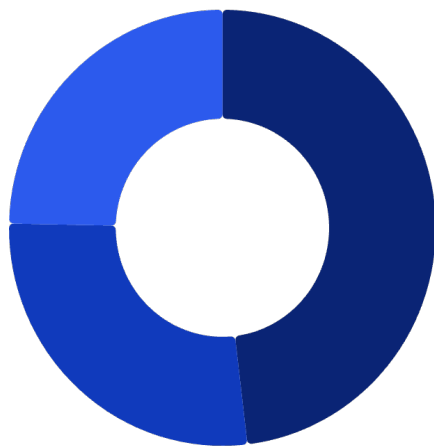
DHA FY26 AI Inventory at a Glance

Generative AI Dominates
66% of use cases
(263) are powered by
foundation models.

Deep Pipeline of Demand
26% of use cases
(107) are in
Production/Active or
Scaling.

PHI/PII Exposure Is Real
24% of use cases (98)
involve Protected
Health Information or
Personally Identifiable
Information,

Where the Portfolio Stands Today?



- Business of Healthcare · 48.13%
- Force Health Protection & Readiness · 27.18%
- Health Support Services · 24.69%

Health Support Services

40 production systems — the most mature mission area in the portfolio.

Force Health Protection & Readiness

35 production systems — strong operational deployment footprint.

Business of Healthcare

98 ideation entries vs. only 30 in production — the aspirational backlog lives here. The largest category is also the least mature.

DHA FY26 Inventory: Themes

Document Drafting & Admin Content

123 use cases

Memos, SOPs, policy drafts, meeting minutes, correspondence.

Knowledge Retrieval & Chatbots

96 use cases

RAG pipelines, internal Q&A systems, TRICARE-facing assistants.

Decision Support & Predictive Analytics

78 use cases

Dashboards, forecasting models, risk stratification tools.

Software Dev & IT Operations

56 use cases

Legacy code modernization, cyber operations, DevOps automation.

Financial, Audit & Acquisition

54 use cases

Reconciliation agents, audit sampling, contract artifact generation.

Workforce Training & Education

34

Ambient Clinical Documentation

33

Surveillance & Force Health

30

Patient Access & Scheduling

19

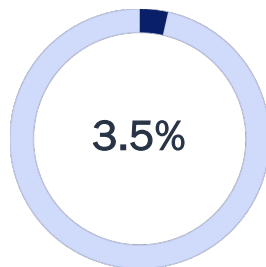
Coding, Billing & Revenue

16

Imaging & Diagnostics

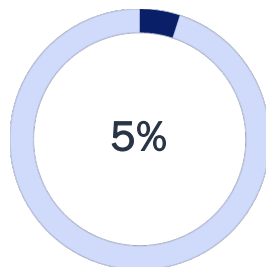
15

DHA FY26 Inventory: Governance



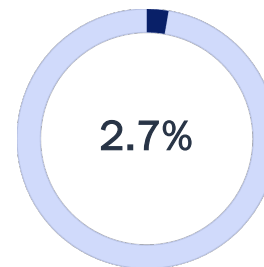
Data Card Exists

Only 14 of 401 use cases have a Data Card on file.



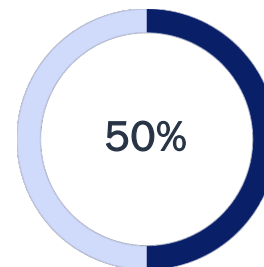
DoD RAI Toolkit Applied

Only 20 of 401 use cases have applied the DoD RAI Toolkit.



Model Card Exists

Only 11 of 401 use cases have a Model Card on file.



"Unknown" on Governance

201 use cases answered "Unknown" to at least one governance question.

Key Dimensions for AI Readiness across DHA - Data

Enterprise AI readiness requires transformation across interdependent dimensions.



Workforce Readiness

Q: How do we re-skill and up-skill the workforce for an AI-enabled future?

AI fluency, technical density, cross-functional workforce



Operating Model

Q: How do we rethink workflows, policies, governance, and decision-making processes?

Policies, agile delivery, human-agent workflows, faster iteration



Technology

Q: Do we have the technology foundation to scale AI securely and responsibly?

Modern software, enterprise AI platforms, cloud-native environments



Data

Q: Do we have trusted, accessible, and interoperable data to power AI?

Data products, semantic interoperability, governance

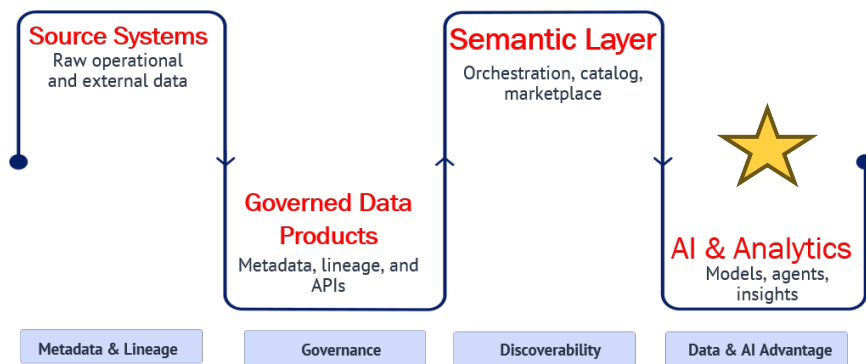


Monitor Adoption

Q: How do we accelerate enterprise adoption and move beyond pilots?

Scaling from pilots, operational integration, enterprise value

Data is the Foundation



The DHA Data Challenge

ABACUS • AFMETS • AHLTA • AHLTA-T • AHLTA-T Kiosk • APLIS
• ART • ASIMS • BATDOK • BioBank • BUMIS II • CAMP •
CarePoint • CCQAS • CDP • CDR • CDS • CHCS • CIS-
ESSENTRIS • DCAM • DENCAS • DHA ECS • DLMC • DMACS •
DMHRIS • DML-ES • DODCR • DODSER • DODTR • DOEHRIS-HC •
DOEHRIS-IH • DOFEMS • DTRS • DVEIVR • EAS IV • EBMS-D •
ECAA • EHA • EIRB • EKT • ESSENCE • FMIS • FROID • HAIMS
• HEALTH.MIL • HMS • ICPCCS • ILER • INQUIRY TRACKING •
JHASIR • JLV • JPIMS • LIMDU SMART • LISA • MCMS • MEDCOP
• MHS GENESIS • MHSG Theater • MHSG-Dentrix • MHSPHP •
MIP • MMM • MP2BET • NMCPHC-EDC2 • NMIS • NMO • OMDs •
PCOS • PHIMT • PIAS-E • POAS-I • POAS-P • POAS-S • PQNS •
PSR • RMST • RPSS • RXREFILL • SEPS • SHAREPOINT • SNPMIS
• SRTS • T2T • TBI Portal • TBLD-M • TC2 • TMDS • TOL •
TRAC2ES • TRICARE.MIL • TRRWS • VSIMS • VSSM • WCFT • WIC
PIMS

100+ systems

DHA Data Strategy

These foundational principles form the core framework for how DHA manages and governs data, ensuring it becomes a trusted, mission-enabling asset.

- 1 Mission Readiness First**
Data initiatives must directly enable readiness, care delivery, and operational efficiency with measurable ROI
- 2 Federated Governance**
Centralized standards with decentralized execution by empowered domain teams
- 3 Collective Data Stewardship**
Every team member is accountable for data value, quality, protection, and responsible use.
- 4 Data as a Product**
Treat data like shared enterprise software with rigorous management and clear ownership
- 5 Trust Through Designated Sources**
Anchor trust in Authoritative Data Sources with verifiable lineage and transparency
- 6 Metadata is the Foundation**
Actively govern and publish metadata to ensure discoverability and context
- 7 Security and Privacy by Design**
Integrate security, compliance, and PHI/PII protection from initial design

www.dha.mil/cdao

www.go.mil/dha-cdao

LOEs

1

Strengthen Data Roles

2

Maximize ADS Use

3

Operationalize DaaP

4

Build Trust

5

Maintain EDC

LOE #1: Data Governance:

Strengthen Data Roles and Responsibilities

Objective

Promote organization-wide accountability ensuring every staff member understands their critical role in data maturity, governance, and responsible use.

1

Data Owner

ACCOUNTABILITY

Senior authority ultimately accountable for data use, protection, quality, and value across DHA. Delegates to Data Domain Owners and approves enterprise policies and final data decisions.

2

Data Domain Owner(s)

DIRECTION & VALUE

Business leader who sets priorities, defines use cases and outcomes for the domain, and ensures alignment to mission needs. Escalates decisions to the Owner when required.

3

Data Domain Steward(s)

STANDARDS & QUALITY

Day-to-day governance lead for a data domain who manages definitions, metadata, business rules, access criteria, and data quality controls, ensuring consistency and compliance across the domain.

4

Data Domain SMEs / Analysts

ANALYSIS & VALIDATION

Analytical experts who profile data, validate rules, develop metrics and reports/dashboards, and translate business needs into actionable insights in partnership with and in support of the Data Domain Steward.

5

Data Steward Coordinator

ORCHESTRATION

Facilitates cross-functional governance activities, including leading forums, tracking decisions, managing change requests, and promoting consistency across functional owners, stewards, and data SMEs.

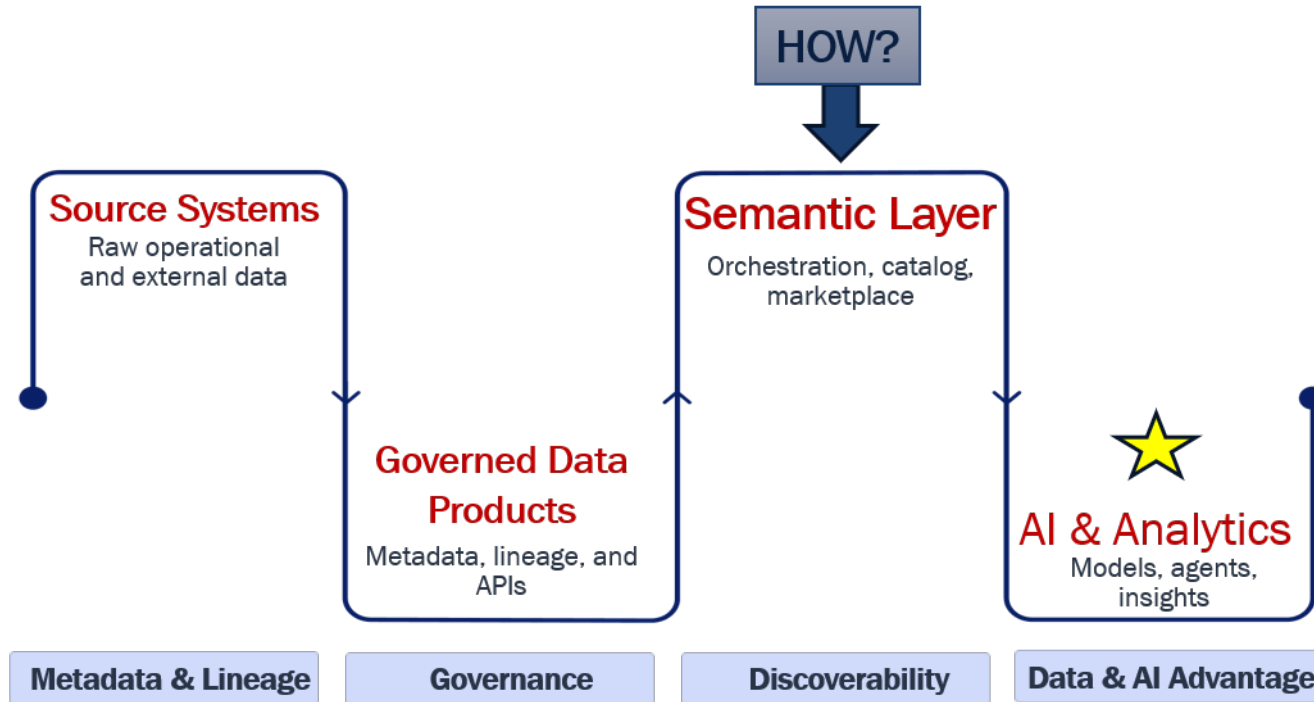
6

IT Data Custodian

SECURITY & IT OPERATIONS

Technical role ensuring data is securely stored, transmitted, and accessed in accordance with governance decisions. Implements controls, backups, monitoring, and compliance.

From Raw Data to Enterprise Data Products to Agents (1 of 2)



Reverse Industry Day

- Market Research
- Clear lesson learn:
 - Don't centralize, instead adopt "data mesh" federated model

Reverse Industry Day flips the script on meeting agency needs to improve military medical readiness

The event provided a platform for industry representatives to share their expertise with DHA leaders.

March 02, 2026 | By Robert Hammer, Defense Health Agency Communications



[Home](#) > [News](#) > Reverse Industry Day flips the script on meeting agency needs to improve military medical readiness

The Defense Health Agency recently hosted a "Data Strategy Reverse Industry Day," providing a platform for industry representatives to share their expertise with DHA leaders. Unlike traditional industry events where government agencies outline their requirements for vendors, this event flipped the script. DHA leaders heard from industry leaders as they presented insights on cutting-edge commercial technologies which could foster an environment to empower data-driven decision-making and enable continuous improvement across DHA's core operational domains.

The event was designed to foster innovative communication and dialogue about how DHA can deploy new and quickly developing technologies to enhance its mission to support warfighters during training and deployment, provide care for service members and their families at military hospitals and clinics, and manage enterprise services to ensure seamless daily operations.

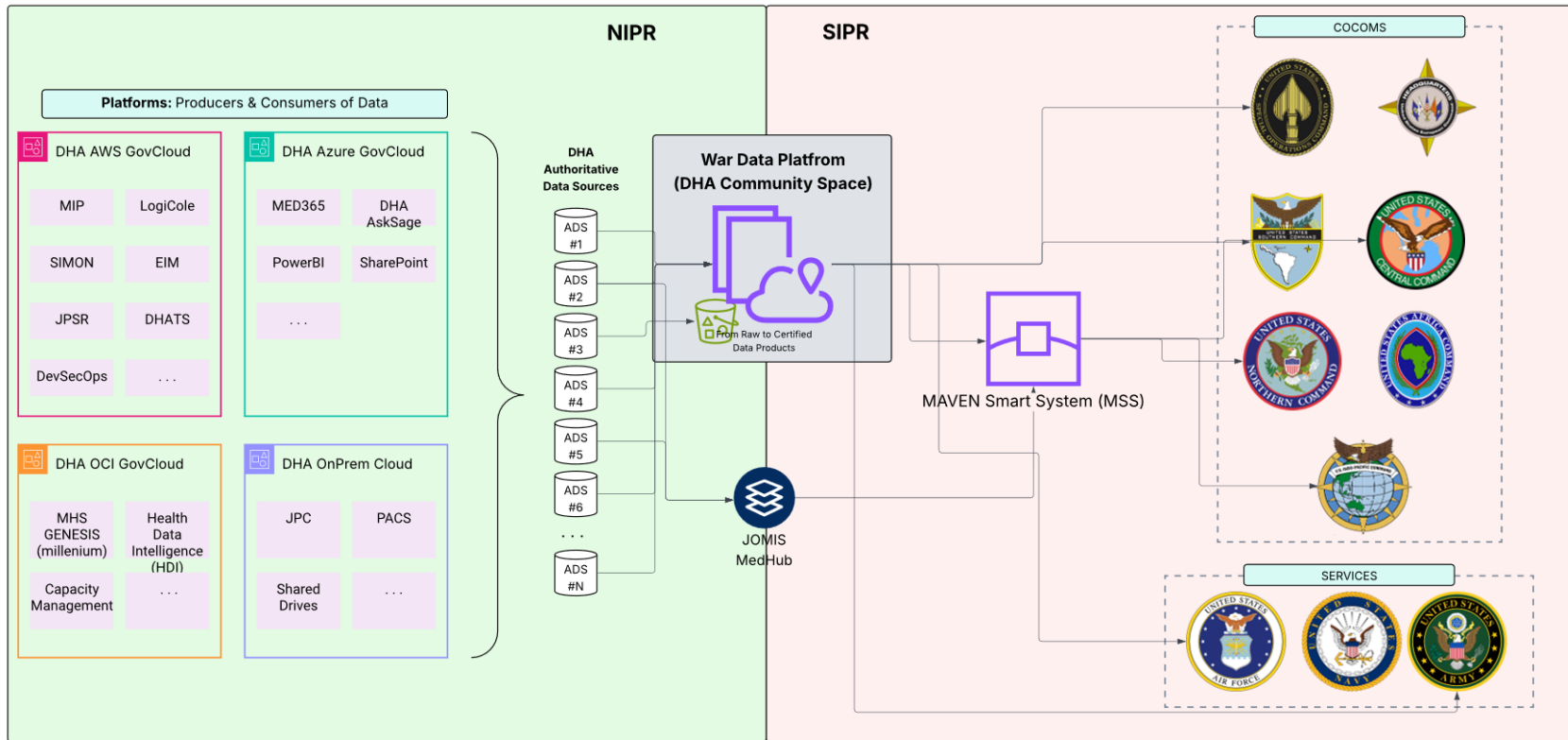
"This Reverse Industry Day represents a pivotal step in fostering collaboration with our industry partners," said Kathleen Berst, DHA acting assistant director for support and the component acquisition executive. "By listening to their innovative ideas and capabilities, we can better align our efforts to improve care, enhance mission readiness, and ensure DHA remains at the forefront of military health care innovation."

At the core of the discussion surrounding DHA's capability gaps was the need for enhanced data

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OV1 of DHA Data Exchange in Support of CSA Functions



Phase I: OV1 of DHA Data Orchestration for CSA Functions

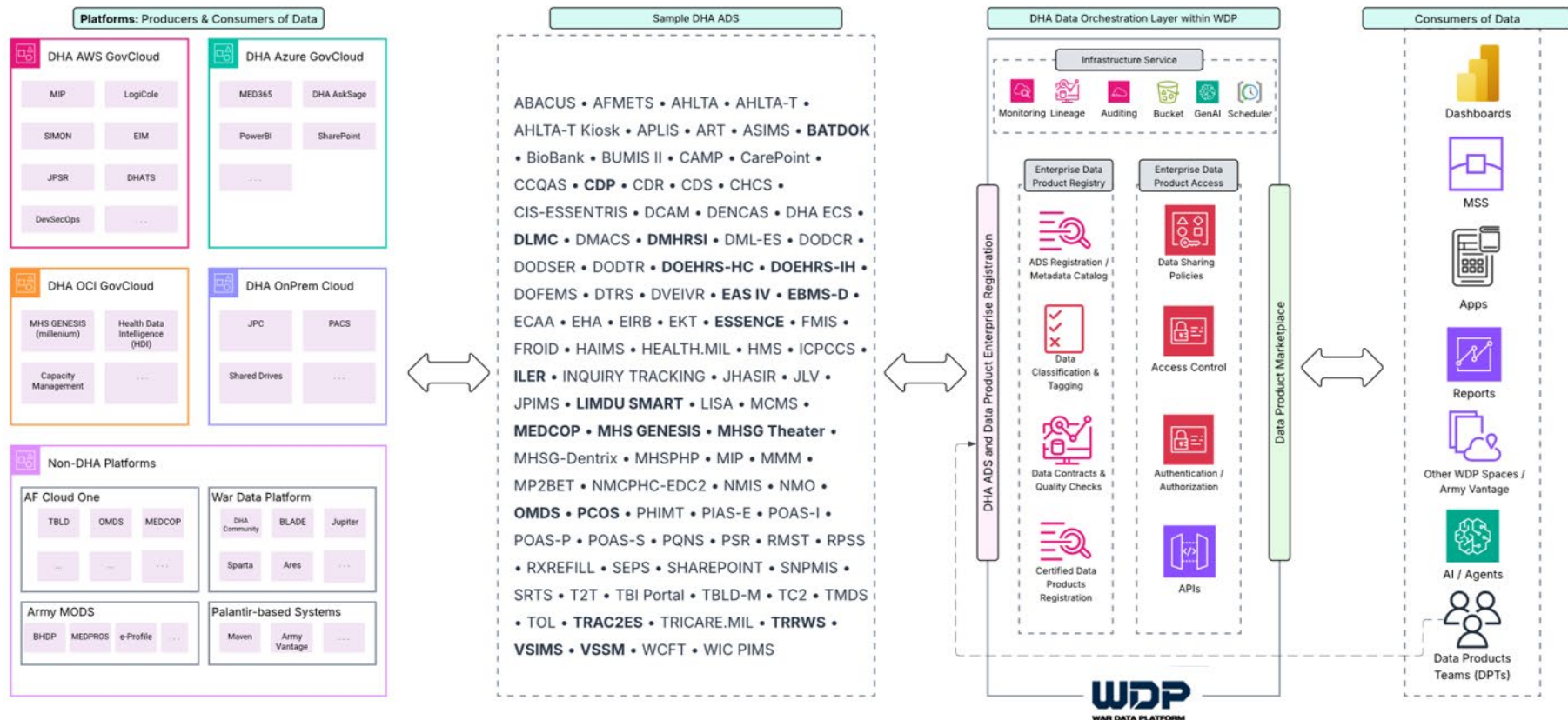


Figure 1: Cyber Threat Intelligence (CTI) Framework

The framework is divided into four main sections:

- Data Sources:**
 - Open-Source (OSINT):**

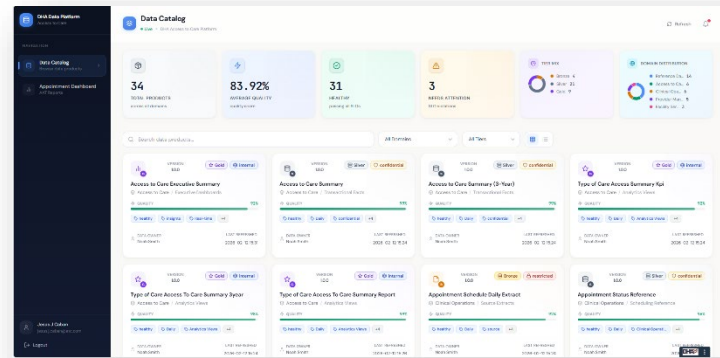
IP	Twitter
Email	Facebook
Dark Web	Darknet
IPsec	Darknet
 - Dark-Web (DWSINT):**

Dark Web	Darknet
Darknet	Darknet
Darknet	Darknet
- Data Ingestion & Layered Data Map:**
 - Data Ingestion:** APIs, Webhooks, etc.
 - Data Processing:** ETL, etc.
 - Data Analysis:** ML, etc.
 - Data Consumption:** Dashboards, etc.
- Consumer Data:**
 - Data Analysis:** ML, etc.
 - Data Consumption:** Dashboards, etc.

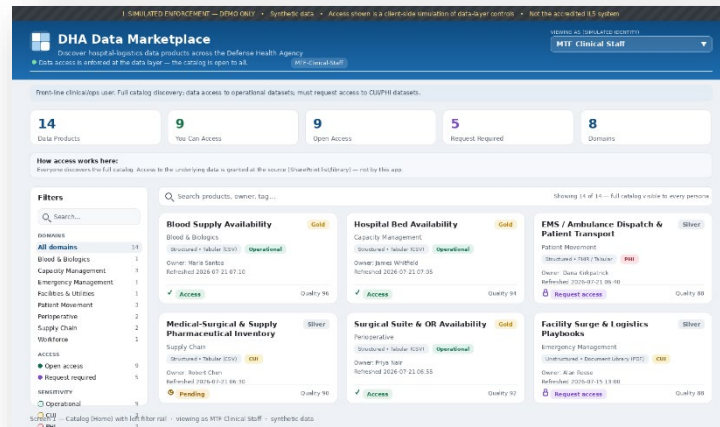
CTI Use Cases:

- ABACUS, APMET, APLA, APLA-2, APLA-3, APLA-4, APLA-5, APLA-6, APLA-7, APLA-8, APLA-9, APLA-10, APLA-11, APLA-12, APLA-13, APLA-14, APLA-15, APLA-16, APLA-17, APLA-18, APLA-19, APLA-20, APLA-21, APLA-22, APLA-23, APLA-24, APLA-25, APLA-26, APLA-27, APLA-28, APLA-29, APLA-30, APLA-31, APLA-32, APLA-33, APLA-34, APLA-35, APLA-36, APLA-37, APLA-38, APLA-39, APLA-40, APLA-41, APLA-42, APLA-43, APLA-44, APLA-45, APLA-46, APLA-47, APLA-48, APLA-49, APLA-50, APLA-51, APLA-52, APLA-53, APLA-54, APLA-55, APLA-56, APLA-57, APLA-58, APLA-59, APLA-60, APLA-61, APLA-62, APLA-63, APLA-64, APLA-65, APLA-66, APLA-67, APLA-68, APLA-69, APLA-70, APLA-71, APLA-72, APLA-73, APLA-74, APLA-75, APLA-76, APLA-77, APLA-78, APLA-79, APLA-80, APLA-81, APLA-82, APLA-83, APLA-84, APLA-85, APLA-86, APLA-87, APLA-88, APLA-89, APLA-90, APLA-91, APLA-92, APLA-93, APLA-94, APLA-95, APLA-96, APLA-97, APLA-98, APLA-99, APLA-100.





*coming fall 2026



2026 DHITS 30

WDP Community Space

- Single space that consolidates all DHA efforts

WDP OFFERINGS

The following offerings provide a comprehensive suite of solutions designed to empower customers to achieve their mission with confidence and impact. Products are offered across the NIPR, SIPR, and JWICS networks. Network availability is notated with each product throughout this section, accompanied by availability status (LA or GA).

Data Foundations

This section includes data tools and services that support data acquisition, storage, sharing, cataloging, promotion, and integration. Together, these offerings provide the foundation for secure, scalable, and compliant data operations that enable mission success.

Insight Generation and Visualization

This section includes advanced search capabilities, business intelligence, and visualization tools to collectively enable access, analyze, and present information with clarity, consistency, and precision in support of mission objectives.

Artificial Intelligence and Machine Learning

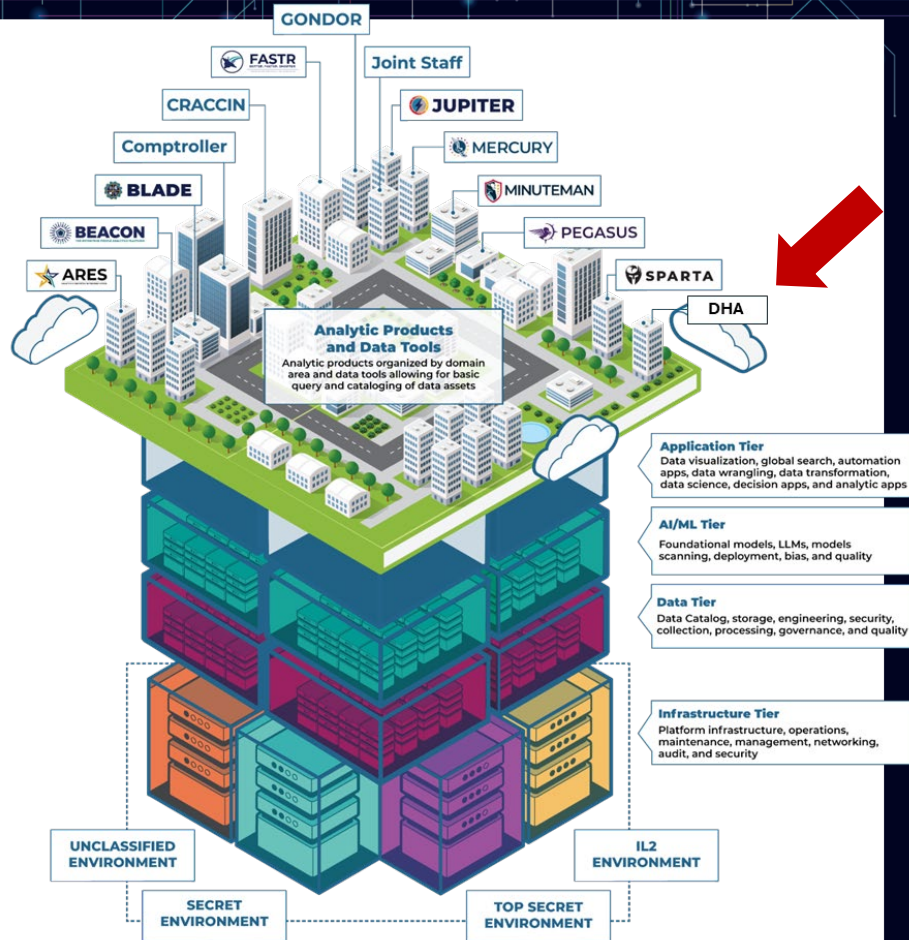
This section includes platforms, models, and tools supporting secure and efficient model execution. Collectively, these offerings enable advanced analytics, predictive modeling, and AI applications that enhance mission performance and accelerate innovation.

Automation (WINGMAN)

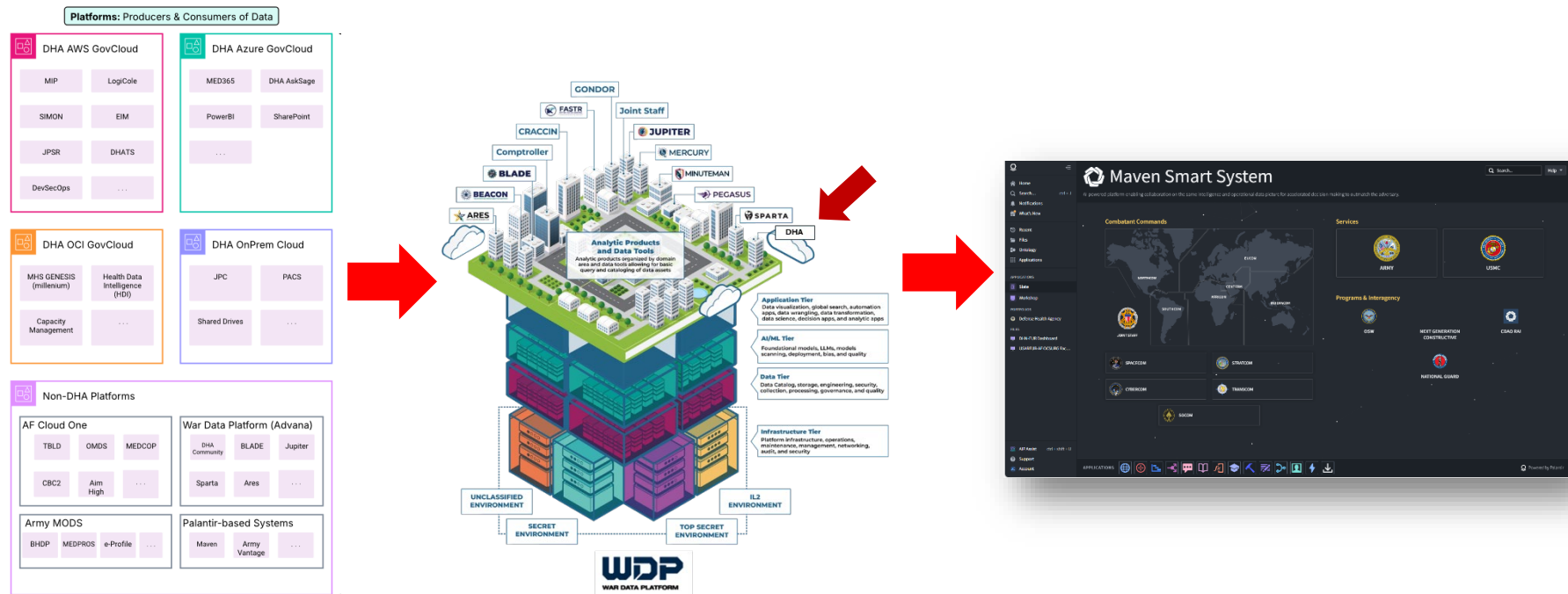
This section includes a collection of capabilities, known as WINGMAN. WINGMAN is a task automation framework that enables users to delegate repeatable assignments to a digital assistant, increasing productivity and availability for higher-value assignments. To support adoption of digital assistants, WINGMAN provides both attended and unattended infrastructure to reliably host and execute automations. These capabilities allow teams to streamline operations, improve efficiency, and focus on mission-critical objectives.

Mission Enablement and Support

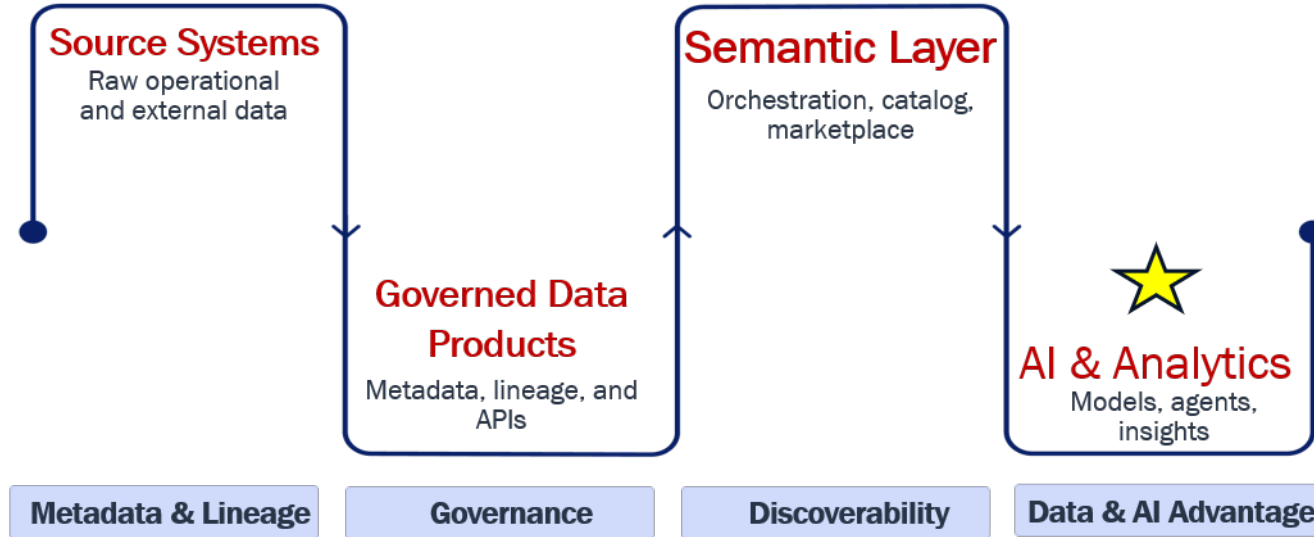
This section details support services that provide dedicated, human-centered customer support and enable teams to access shared resources to meet mission-specific requirements while maintaining governance, security, and operational flexibility. The offerings listed below intend to enable data-informed decision-making, strengthen program oversight, and empower DOW organizations to accelerate data and AI development, enhance product performance, and achieve mission-focused outcomes leading to decision advantage for the warfighter. These capabilities are not broadly available for purchase and are designed to support select missions and mission-driven organizations.



Data Flow to Maven Smart Systems (MSS)



From Raw Data to Enterprise Data Products to Agents (2 of 2)



Key Dimensions for AI Readiness across DHA - Technology

Enterprise AI readiness requires transformation across interdependent dimensions.



Workforce Readiness

Q: How do we re-skill and up-skill the workforce for an AI-enabled future?

AI fluency, technical density, cross-functional workforce



Operating Model

Q: How do we rethink workflows, policies, governance, and decision-making processes?

Policies, agile delivery, human-agent workflows, faster iteration



Technology

Q: Do we have the technology foundation to scale AI securely and responsibly?

Modern software, enterprise AI platforms, cloud-native environments



Data

Q: Do we have trusted, accessible, and interoperable data to power AI?

Data products, semantic interoperability, governance



Monitor Adoption

Q: How do we accelerate enterprise adoption and move beyond pilots?

Scaling from pilots, operational integration, enterprise value

Authorized AI Platforms (1 of 2)

Enterprise AI readiness requires transformation across interdependent dimensions.

DHA Generative AI Resources: Approved Platforms for DHA

What is Generative AI?

Generative AI (GenAI) refers to artificial intelligence capable of creating new and original content such as text and images. It learns patterns from vast amounts of existing data to produce realistic and novel outputs.

IMPORTANT RESTRICTIONS

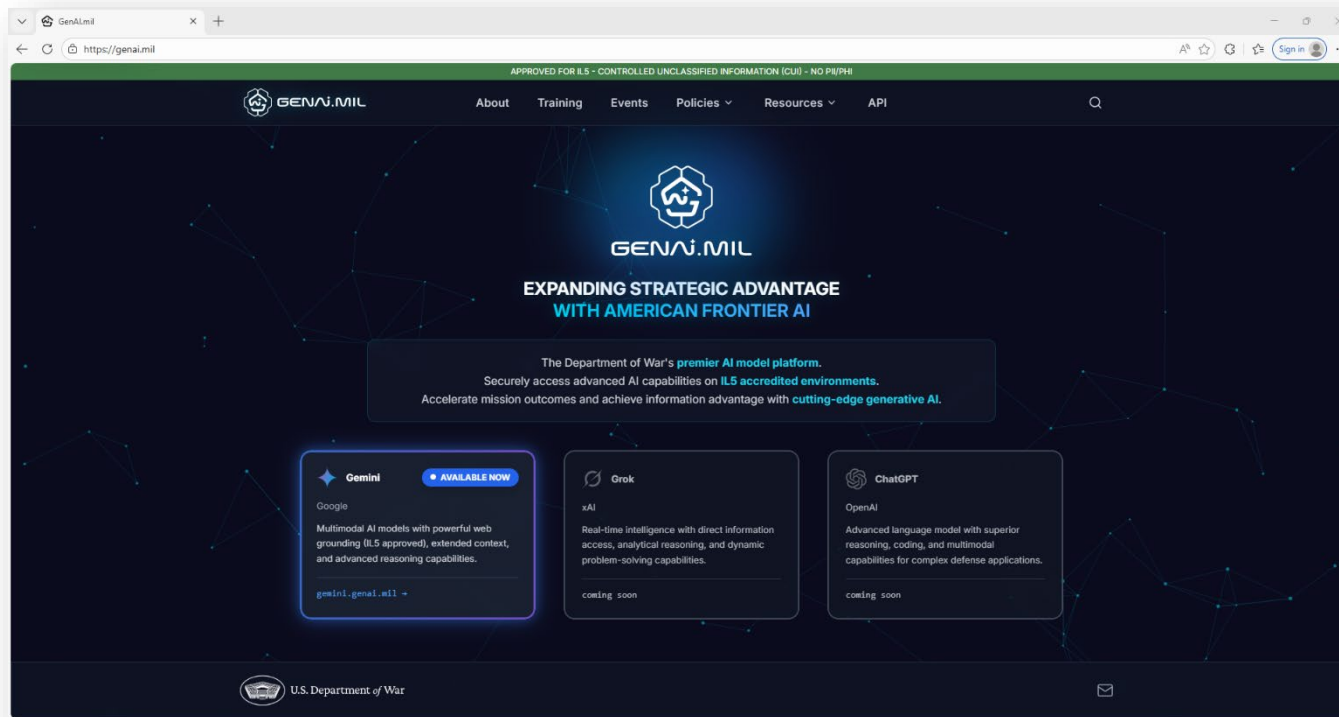
- The use of any non-approved, commercially available GenAI model is STRICTLY PROHIBITED.
- Use of any non-approved systems with PII/PHI is automatically considered a Reportable Data Breach and Security Violation

Approved GenAI Platforms

1	GenAI.mil	CUA (NOT PHI/PII)	Approved Developers	API Available	Provides secure, ILS-rated access to AI models for mission-related tasks, ideal for drafting documents, analyzing operational data, and auditing code. It serves as a powerful force multiplier for everyday analytical work.
2	Ask Sage (health.mil)	CUA, PHI, PII	Tokenless Required	API Available	Specifically configured to handle PHI and PII data securely. Less AI models, but it's approved for writing and summarizing clinical notes, drafting patient care summaries, and creating custom patient education materials.
3	Ask Sage (Army)	CUA (NOT PHI/PII)	No Access Limitations	API Available	Provides access to multiple AI models for non-PHI/PII work, ideal for drafting documents, analyzing data, writing code, and creating workbooks. Serves as the great tool for everyday NIPR administrative tasks.
4	CamoGPT	CUA (NOT PHI/PII)	No Access Limitations	API Available	Offers multiple models optimized for rapid operational queries and non-sensitive logistics. Tested for everyday NIPR administrative tasks and supply chain coordination.
5	Microsoft CoPilot	CUA (NOT PHI/PII)	No Access Limitations	API Available	Fully integrated with MED365 and Outlook, handling both PHI/PII and non-sensitive data. It excels at summarizing and drafting emails, creating documents, and generating patient-related communications and care plans.
6	Approved Cloud-Native Services	CUA, PHI, PII	Approved Developers	API Available	AWS Bedrock, AWS SageMaker, Azure AI End-point, etc... Designed for approved developers building AI applications within the DHA GovCloud.

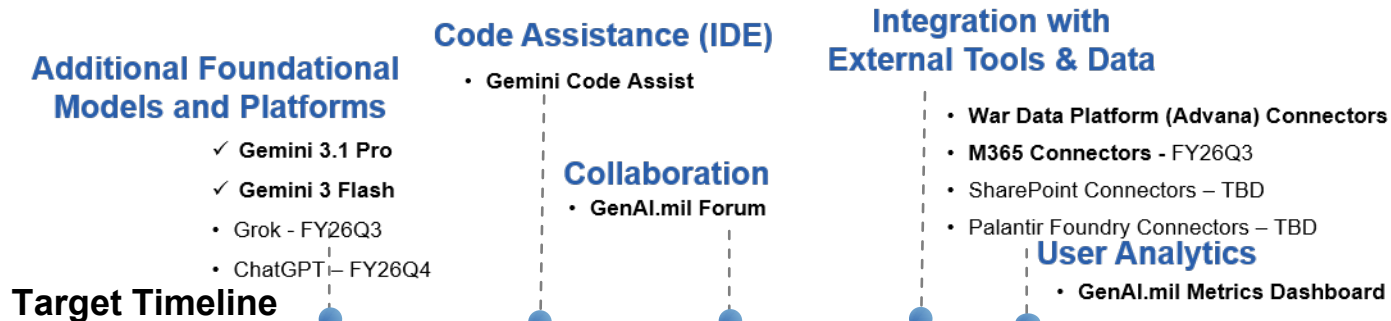
QUESTIONS OR NEED MORE INFORMATION?
dha_nor.cofcs.mbx.cdaco-info@health.mil

GenAI.mil





GENA.MIL



FY26 Q2

FY26 Q3

FY26 Q4

FY27 Q1

API Access

- ✓ Gemini API Access for R&E Pilots
- ✓ Gemini API for all Users - Open Beta
- Updated API (fully featured w/ tool calling) - FY26Q3

Agent Creation and Customization

- ✓ Agent Designer
- ✓ Agent Gallery

Additional Multimodal Capabilities

- Image Generation
- Video Generation - TBD
- Voice Input / Speech-to-Text - TBD
- Text-to-Speech Output - TBD

PII / PHI

- PII Restriction Removed

Notes and Research

- Notebook LM

Higher Enclaves (SIPR/JWICS)

- SIPR
- JWICS - TBD

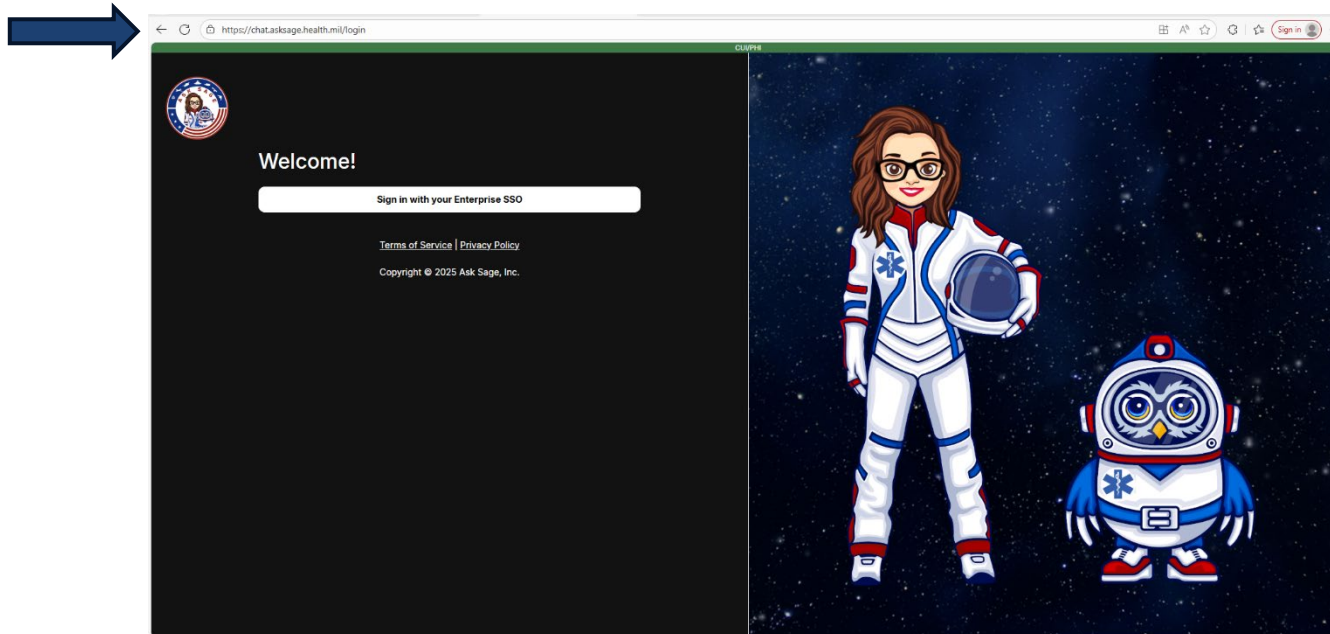
Key

- On Roadmap for Noted Quarter
- Projected for Future Quarters

DHA AskSage

<https://chat.asksage.health.mil/>

- Only Chatbot approved for PII/PHI



DHA AskSage SharePoint Integration

<https://chat.asksage.health.mil/>

 CDAO - Chief Data & Analytics Office

Home Documents Tasks Pages Site contents Edit

DHA Internal and External Public ☆ Not following Site access

+ New ▾ Promote Page details Preview Analytics

Draft saved 4/16/2026 Share ▾ Edit Republish ✓

DHA CDAO Chatbot

A Secure Mission-Support Tool to help you find information faster, draft clearer content, and make data work easier.

Give it a try!

Here are some initial datasets the CDAO has curated to get you started.



MTF Portfolio

Early Access
Now Available!

Click "Initialize Chat" at the bottom-right corner of your



Readiness

Coming Soon



Analysis

Coming Soon



Process

Coming Soon

Ask Sage

Datasets 2

For Maxwell, what was the total pc CMI for NEWBORN in FY2022?

For Maxwell, the total Purchased Care (PC) Case Mix Index (CMI) for the NEWBORN product line in FY2022 was 0.3960 [1].

1 Reference ▾

Type your message... (Shift+Enter for new line)

Army AskSage

<https://chat.genai.army.mil/login?code=CDAO-OSD>



UNCLASSIFIED

https://chat.genai.army.mil/login?code=CDAO-OSD

Sign in



Welcome to the Army Enterprise LLM Workspace!

Email

Password

[Forgot password?](#)

Sign In

Sign in with a CAC/PIV (Sign Up First)

Army 365 Single-Sign-On (Army users only)

Sign Up

[Terms of Service](#) | [Privacy Policy](#)

Copyright © 2025 Ask Sage, Inc.

UNCLASSIFIED



UNCLASSIFIED

Microsoft Copilot within MED365

Approved, but not
widely available



Welcome to Copilot Chat

Web search is off. Responses won't include current web-based insights, which may limit relevance of this setting. [Learn more](#)

Message Copilot



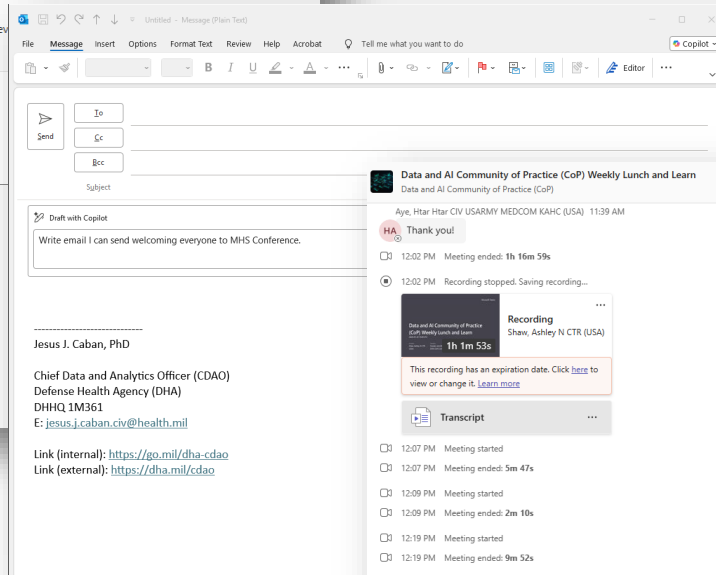
Help me prepare for EDC AoA
Progress

Coming up



List key points from 2026 MHS
Conference_The DHA Data...

You edited



Data and AI Community of Practice (CoP) Weekly Lunch and Learn

Data and AI Community of Practice (CoP)

Aye, Htar Htar CIV USARMY MEDCOM KAHK (USA) 11:39 AM

HA Thank you!

12:02 PM Meeting ended: 1h 16m 59s

12:02 PM Recording stopped. Saving recording...

Recording Shaw, Ashley N CTR (USA)

This recording has an expiration date. Click [here](#) to view or change it. [Learn more](#)

Transcript

12:07 PM Meeting started

12:07 PM Meeting ended: 5m 47s

12:09 PM Meeting started

12:09 PM Meeting ended: 2m 10s

12:19 PM Meeting started

12:19 PM Meeting ended: 9m 52s

12:34 PM Meeting started

Send to thread only

Reply in thread

DHA Internal and ... Go to channel

Copilot

tell me more about today's meeting

Copilot 7:06 PM

5/20 10:55 AM - 5/20 1:03 PM

Here is a summary of today's meeting based on messages sent between May 20, 2026 at 10:55:03 AM and 1:03:46 PM:

- The weekly Data and AI CoP poll was promoted and participants were encouraged to complete it. 1 2

- Several attendees reported latency and system issues, including forced restarts and updates affecting network performance. 3 4

- Some participants had trouble viewing shared slides and charts: only the title slide was visible to most. 5 6

- Clarification was provided that only the presenter can advance slides for everyone. 7 8

- Questions were raised about maintaining "need to know" processes and SIPR access was mentioned. 9 10

- Resolutions were made for meeting the...

Highlights from this conversation

Ask me about this conversation

Authorized AI Platforms (2 of 2)



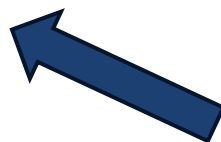
Clinical Tools
Ambient Scribe in MHS GENESIS



DHA-Developed AI
Tools with Authority to Operate



DoD Enterprise Platforms
Advana, MAVEN, and Vantage



Generative AI Resources: Approved Platforms for DHA

What is Generative AI?

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Specifically configured to handle PHI and PII data securely. Less AI models, but it's approved for writing and summarizing clinical notes, drafting patient care summaries, and creating custom patient education materials.				
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6	Approved Cloud-Native Services	CUA, PHI, PII	Approved Developers	API Available
AWS Bedrock, AWS SageMaker, Azure AI End-point, etc... Designed for approved developers building AI applications within the DHA GovCloud.				

QUESTIONS OR NEED MORE INFORMATION?
dha_nor.cofa.mbx.cdaco-info@health.mil

DHA-Approved Ambient Listening



AMBIENT LISTENING TECHNOLOGY

ENHANCING PATIENT CARE | INCREASING PROVIDER EFFICIENCY

Ambient listening technology uses advanced voice recognition to capture conversations between patients and providers, automatically generating draft clinical notes for review and integration into the electronic health record.



More time with patients. Less time on screens.

1 WHAT IS IT?

- Captures patient-provider conversations (with consent)
- Uses AI-driven voice recognition
- Automatically generates draft clinical notes
- Integrates into electronic health records (EHR)

2 WHY IT MATTERS

Improves Care & Readiness

- More eye contact, stronger patient connection
- Higher-quality, more complete documentation
- Increases provider efficiency
- Supports safer, more accurate care
- Enhances medical force readiness

3 PROVIDER IMPACT

- Providers report significant improvements in documentation quality and completeness, allowing more focus on meaningful patient care.

"With the pilot, I can have the intake note done in five to ten minutes. The notes are very high quality and capture the meat of the appointment."

— Colonel (Dr.) Stephen Edstrom, Psychiatrist

4 PATIENT EXPERIENCE

- Patients feel heard and understood
- Better communication and engagement
- More meaningful conversations

"My provider was able to focus more on me and my concerns. Without a doubt, I knew I was heard and we understood each other. I felt more of a connection to my provider with the technology in use."

— Marcy Edwards, Patient

5 HOW IT WORKS

- 1 Patient provides verbal consent
- 2 Conversation is securely captured
- 3 AI generates a draft note
- 4 Provider reviews, edits, signs
- 5 Note is added to the health record

6 PRIVACY & SECURITY

- Fully secure and cyber-compliant
- Protected audio and documentation
- Provider reviews and edits for accuracy
- Verbal consent is required before each use
- Transparency and timely access to information

7 ROLLOUT TIMELINE



A STRATEGIC INVESTMENT IN DIGITAL HEALTH

Supporting readiness. Enhancing care. Empowering providers.
Advancing innovation to deliver high-quality care and strengthen mission readiness.



Resources

Ambient Listening: Smarter Tools. Better Care.

The Military Health System is revolutionizing patient care with ambient listening technology.

Focused on care. Powered by technology.

Providers across the MHS will soon begin using a new voice recognition technology that helps them focus more on direct patient care while improving the patient and provider experience. Ambient listening technology will be rolled out in phases at military hospitals and clinics and will be available worldwide in the coming months.

How it works

Ambient listening acts like a private assistant, securely capturing the conversation between patients and providers, converting it into text and organizing the important medical details into a draft clinical note for the provider to review before submitting to the patient's electronic health record. Patients must provide verbal consent before a provider can use ambient listening technology during medical appointments.

What does this mean for providers?

Because the technology is doing the listening in the background, providers will be able to engage more directly with patients, resulting in a more personalized experience and decreased administrative burden on staff.

What does this mean for patients?

Tools & resources

- Health Information End User Engagement Resources
- Ambient Listening - Overview of the Clinical AI App: Ambient Listening - Overview: Deployment: Open 64 in new tab
- Ambient Listening - Enterprise Deployment
- Ambient Listening Enterprise Deployment FAQ
- Communications Toolkit
- Communications Playbook (Messages and

See DHA Intranet for more information

DHA AWS GovCloud with DHA ATO



MAVEN Smart Systems (MSS)

DYNAMIC DATA. UP TO CUI/NOFORN/LES

WELCOME TO MAVEN SMART SYSTEM! NOTE THAT THIS ENVIRONMENT IS NOW ACCREDITED TO HOLD PII WITH THE EXCEPTION OF SSNS. GET STARTED [HERE](#), AND [CLICK HERE TO SEE ACCEPTED DATA TYPES](#).

Maven Smart System

AI-powered platform enabling collaboration on the same intelligence and operational data picture for accelerated decision making to outmatch the adversary.

Combatant Commands

Map showing regional commands: NORTHCOM, SOUTHCOM, CENTCOM, AFRICOM, EUROM, and INDOPACOM. Below the map are icons for JOINT STAFF, SPACECOM, STRATCOM, CYBERCOM, and TRANSCOM.

Services

ARMY and USMC.

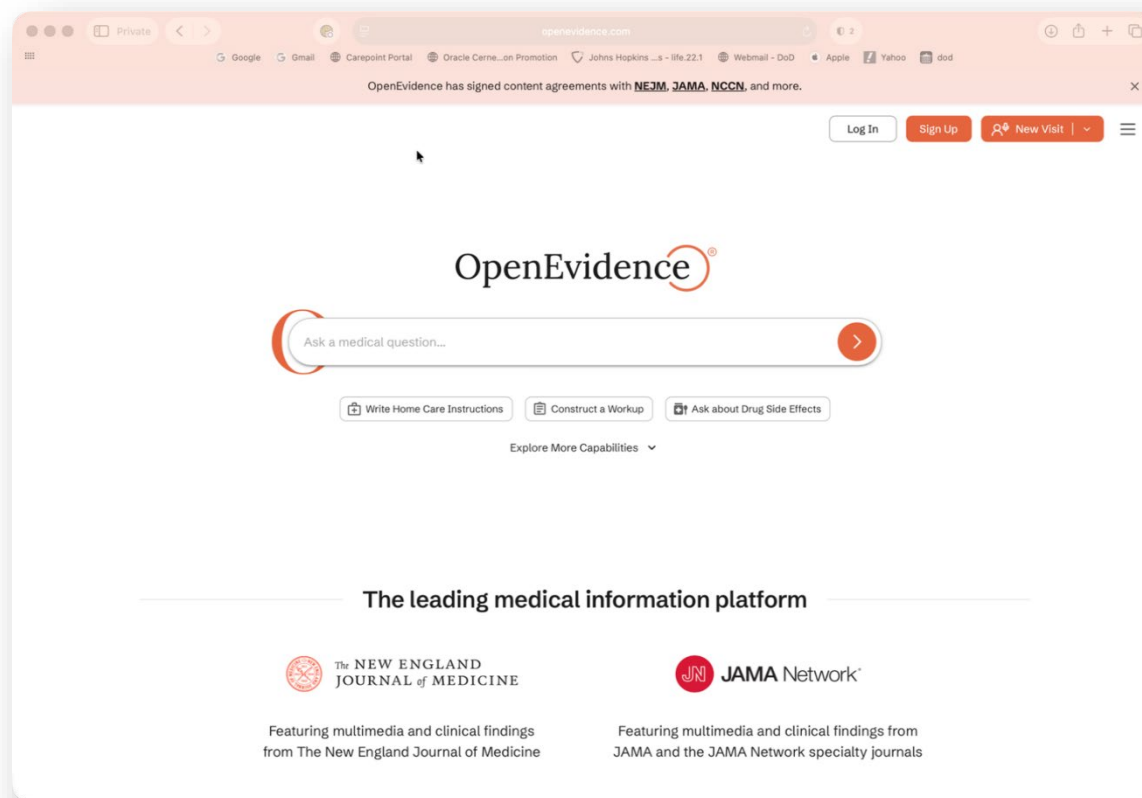
Programs & Interagency

OSW, NEXT GENERATION CONSTRUCTIVE, CDAO RAI, and NATIONAL GUARD BUREAU.

APPLICATIONS

Powered by Palantir

What about OpenEvidence and Similar Tools?



What Is Not Allowed?

Bottom line: No shadow AI

3. PROHIBITED GENAI CAPABILITIES AND PRACTICES.

a. The DHA prohibits the following GenAI capabilities and practices for official use. In general, the DHA prohibits any GenAI capability or practice **that is not explicitly approved** or that violates applicable data protection, security, privacy, or governance requirements.

(1) Unapproved Capabilities: Personnel may not use any GenAI capability not approved by DHA or DoW with any **non-public DHA information**. This includes acquisition-sensitive, PII, PHI, CUI, or classified information.

(2) Unapproved Devices and Applications: Personnel may not use unapproved AI-enabled devices or applications for official work. This prohibition covers personal AI assistants, **note-taking applications, augmented or virtual reality devices, smart glasses, or other AI-enabled hardware or software.**

DHA Interim Guidance for Responsible Use of Generative AI in Health Care

- A preliminary framework for the responsible, secure, and ethical use of Generative Artificial Intelligence (GenAI) in support of the DHA mission.
- This guidance serves as a bridge until the comprehensive DHA AI Strategy is finalized, ensuring alignment with Department of War policies while enabling innovation in healthcare delivery.

Core Principles:



Responsible AI

GenAI capabilities must align with DoW Responsible AI principles: responsible, equitable, traceable, reliable, and governable. All uses must comply with legal, ethical, and privacy requirements including HIPAA.



Human Accountability

GenAI systems are decision-support tools only. DHA users remain fully accountable for all decisions and actions informed by AI outputs and must apply appropriate human oversight.



Transparency

Use of GenAI must be transparent and appropriately disclosed to patients. Personnel must clearly indicate when GenAI is used and maintain sufficient documentation for accountability.

Key Dimensions for AI Readiness across DHA – Operating Model

Enterprise AI readiness requires transformation across interdependent dimensions.



Workforce Readiness

Q: How do we re-skill and up-skill the workforce for an AI-enabled future?

AI fluency, technical density, cross-functional workforce



Operating Model

Q: How do we rethink workflows, policies, governance, and decision-making processes?

Policies, agile delivery, human-agent workflows, faster iteration



Technology

Q: Do we have the technology foundation to scale AI securely and responsibly?

Modern software, enterprise AI platforms, cloud-native environments



Data

Q: Do we have trusted, accessible, and interoperable data to power AI?

Data products, semantic interoperability, governance



Monitor Adoption

Q: How do we accelerate enterprise adoption and move beyond pilots?

Scaling from pilots, operational integration, enterprise value

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Workforce Readiness (1 of 2)

Technology alone will not transform the MHS. Our workforce will.

Workforce Readiness (2 of 2)

Technology alone will not transform the MHS. Our workforce will.

Concern:

Without board AI literacy and fluency, across DHA, AI risks becoming a source of organizational disparity instead of organizational advantage.

The Need for AI Fluency

- Based on 2025 State of AI¹, high performers are significantly more likely to fundamentally redesign workflows around AI, not just layer AI on top of existing processes.
- Potential Disparity if don't re-skill and up-skill staff

Increasing AI Fluency Density

Industry

6.8x

Job Postings Requiring AI Fluency

Increase from 2023 to 2025 across enterprise roles

DHA

???x

DHA Job Postings Requiring AI Fluency

Increase from 2023 to 2025 across enterprise roles

Coverage Scorecard: 15 Plans × 8

Green = addressed • Amber = partial • Red = limited / not addressed

Component	Accel. Hiring	Talent Retention	Training & Develop.	Hiring-Blocker Removal	Mission Alignment	AI-Warfighter Talent	Functional Support	Broader Workforce
DoW Org01	•	•	•	•	•	•	•	•
DoW Org02	•	•	•	•	•	•	◐	◐
DoW Org03	•	◐	•	•	•	◐	•	•
DoW Org04	•	•	•	◐	•	◐	•	•
DoW Org05	•	◐	•	◐	•	◐	•	•
DoW Org06	•	•	•	◐	◐	◐	•	•
DoW Org07	•	◐	◐	◐	◐	◐	◐	◐
DoW Org08	•	◐	•	◐	•	◐	•	◐
DoW Org09	•	•	•	◐	◐	◐	•	•
DoW Org11	◐	◐	•	◐	◐	◐	◐	•
DoW Org11	•	◐	•	◐	•	◐	•	•
DoW Org12	◐	◐	◐	◐	•	◐	◐	•
DoW Org13	•	•	•	◐	◐	◐	◐	•
DoW Org14	◐	◐	◐	◐	•	◐	◐	◐
DoW Org15	◐	◐	◐	◐	•	◐	•	•

Key Dimensions for AI Readiness across DHA - Final

Enterprise AI readiness requires transformation across interdependent dimensions.



Workforce Readiness

Q: How do we re-skill and up-skill the workforce for an AI-enabled future?

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Monitor Adoption

Q: How do we accelerate enterprise adoption and move beyond pilots?

Scaling from pilots, operational integration, enterprise value

Key Takeaways

- The DHA is becoming an 'AI-First' Organization. The DoW AI Strategy mandates an accelerated adoption of AI to maintain our operational advantage, prioritizing "Speed Over Perfection."
- The DHA is actively measured on its contribution, with over 400 unique AI use cases already reported. There is a substantial and growing adoption of AI within the DHA, with nearly 59,000 users on GenAI.mil.
- A robust, modern data infrastructure is the primary catalyst for secure, clinical-grade AI. Under the DHA Data Strategy, we are breaking down historical silos across our 100+ legacy systems to treat data as a secure, discoverable enterprise asset.
- Workforce readiness is key to transforming the DHA to an AI-enabled organization. Emphasis on broad up-skilling and re-skilling the workforce on AI fluency and a shift from simply layering AI onto existing processes to fundamentally redesigning workflows.



Dr. Jesus Caban
jesus.j.caban.civ@health.mil



For MHS Colleagues:
<https://go.mil/dha-cdao>



For General Inquiries:
dha.ncr.cofs.mbx.cdao-info@health.mil

The DHA CDAO is transforming data into a trusted, mission-enabling asset, equipping every member of the DHA staff to lead with the decision advantage.



**2026
DEFENSE HEALTH INFORMATION
TECHNOLOGY SYMPOSIUM**

**AUGUST 11-13, 2026
HYATT REGENCY NEW ORLEANS
NEW ORLEANS, LA**

Thank You!



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