

2026
DEFENSE HEALTH INFORMATION
TECHNOLOGY SYMPOSIUM

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

Candid Conversation with an MTF CIO

2d LT Jorge Bravo; US AFA CIO

Mrs. Victoria Burke; NMOTC CIO

MAJ Jason Dick; MACH DCIO

LCDR Asa Scheafer; Lovell CIO

Daniel L. Winske Jr.; CIO J-6



Agenda

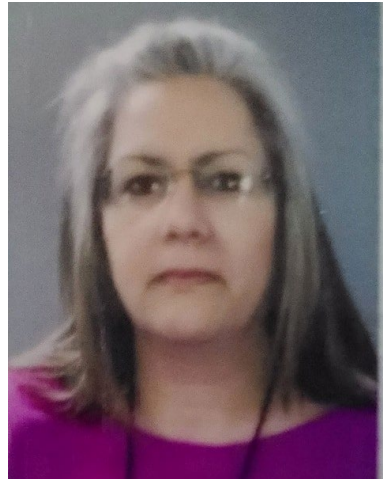
This forum is an opportunity to understand their day in the seat as the CIO

Speaker Introduction



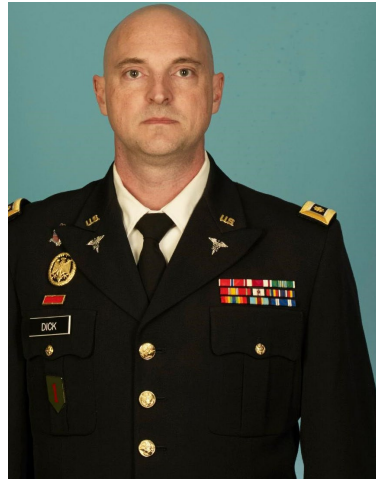
2d LT Jorge Bravo
CIO

US Air Force
Academy



Mrs. Victoria Burke
CIO

NMOTC Pensacola



MAJ Jason Dick
DCIO

Martin ACH



LCDR Asa Schaefer
CIO

NMRTC Great
Lakes



Mr. Daniel L. Winske Jr.
GSL

DHA J-6 CIO

Speaker Introduction (1 of 3)

2d Lt Jorge Bravo

USAFA

Second Lieutenant Jorge Bravo is the Medical Information Services Flight Commander for the 10th Medical Support Squadron and the Chief Information Officer for the 10th Medical Group at the United States Air Force Academy, Colorado. As the Flight Commander and CIO, he directs the operations, security, and lifecycle management of the medical group's information technology and communications infrastructure. His flight ensures the continuous availability of critical health information systems, supporting the delivery of comprehensive healthcare services to cadets, active-duty service members, retirees, and their families.

Mrs. Victoria Burke

Navy Medicine Operational Training Command, NAS Pensacola

Victoria Burke is the Chief Information Officer for Navy Medicine Operational Training Command at NAS Pensacola. As the CIO, she directs critical information technology and management services in support of education and training programs across seven distinct operational medicine communities: undersea, surface, aerospace, aviation survival and accessions, expeditionary, special operations, and healthcare support. Her team ensures the development, sustainment and availability of applications and information systems required to support the delivery of 64 courses of instruction (42 operational and 22 survival). Providing technical support to 5 detachments and 17 training centers staffed across 6 civilian institutions and 16 military bases operating within 11 states is a logistical challenge but accomplished by leveraging vital partnerships between readiness commands and operational medicine on the Defense Health Agency network infrastructure.

Speaker Introduction (2 of 3)

Jason Dick

Martin ACH, DCIO

MAJ Dick serves as the DCIO for Martin Army Community Hospital (MACH) at Fort Benning GA. He has served as the CTO for MACH, and as the CIO and CTO for Madigan Army Medical Center at JBLM.

Asa Schaefer

NMRTC Great Lakes CIO

An accomplished Chief Information Officer with extensive experience leading complex health IT initiatives globally. He has served as CIO for the CAPT James A. Lovell Federal Healthcare Center, Naval Hospital Yokosuka, and the NATO Role 3 MMU in Kandahar Afghanistan. He was also a founding member of the DHA J6 Engineering, Solutions Architecture, and IT Business Analytics Division (ESA-BAD) as its first Deputy Branch Chief for Deployment and Operations.

Speaker Introduction (3 of 3)

Daniel Winske

Geographic Service Lead, J-6 CIO

A former Chief Information Officer with more than 20 years of extensive experience leading complex health IT initiatives globally. He serves as the Geographic Service Lead for the DHA J-6 CIO. Previously, as the Operation Center Branch Chief for PEO Desktop to Datacenter (D2D), he spearheaded the deployment of a standardized, globally integrated Medical Community of Interest network across 600 MTF's. His extensive IT leadership experience also includes a nine-year tenure overseeing IT operations and lifecycle modernization as the IT Department Head for Navy Medicine Headquarters (BUMED). Throughout his career, he has been a pivotal Subject Matter Expert in guiding major enterprise integrations, including the landmark Base Realignment and Closure (BRAC) efforts that successfully co-located joint military medical headquarters (DHHQ).

Learning Objectives

- 1** The position of a Military Treatment Facility Chief Information Officer is a blend of mission assurance, enterprise compliance, resource management, and strategic planning
- 2** Technology transitions and how to overcome the obstacles.
- 3** When changes are being made at the enterprise level how do you adopt to ensure continued support
- 4** Cybersecurity workforce compliance and how to maintain

Discussion Topic 1

With the DHA's refined focus as a Combat Support Agency, how is your MTF IT infrastructure evolving to guarantee 'degraded-mode' clinical operations and data survivability in a cyber-contested or communications-denied environment?

Discussion Topic 2

How can an MTF plan and fund a VoIP transition—using strategic frameworks, local funding options, and phased migration approaches—when enterprise DHA funding is not yet available?

Discussion Topic 3

With the upcoming Network Enterprise & Services (NE&S) contract rebid and the projected shift toward a centralized, 'Remote-First' LAN support model, MTFs—particularly those operating OCONUS—face a stark shift in on-site support footprint. As MTF CIOs responsible for local clinical mission assurance, how are you evaluating the operational risk of losing dedicated, on-site local contractor support?

Discussion Topic 3 continued

Specifically:

- **The Accountability Gap:** If a critical network failure occurs during a complex clinical procedure, how will you bridge the immediate gap between a tier-remote SLA response time and the urgent, physical hands-on mitigation required to prevent patient harm?
- **The OCONUS 'Tyranny of Distance':** In OCONUS environments characterized by host-nation infrastructure complexities, language barriers, and massive time zone disparities, what local fallback plans or mitigation strategies can you realistically deploy to prevent prolonged clinical downtime when remote support fails?"

Discussion Topic 4

How are you restructuring and developing your local IT and cybersecurity workforce to align with the DHA's Cybersecurity Service Authority (CSA) lines of effort, and what measures are in place to mitigate garrison drift in their technical training?

Discussion Topic 5

With LogiCole on the horizon, how can we strategically position our organization to optimize the materials management and procurement lifecycle—enhancing efficiency, strengthening budget stewardship, and improving support to both staff and patients?

Contact

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Thank You!



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