

GEORGE C. TUREK
Supplemental Testimony
House Committee on Veterans' Affairs
VBA and VHA Interactions: Ordering and Conducting Medical Examinations
June 25, 2014

In response to the following question from Congressman Takano, I would like to supplement my testimony as follows:

Mr. Takano: Mr. Turek, does VES use electronic health records and is your electronic system interoperable with VISTA? Currently you are not completely interoperable in the way VBA is with VHA. That is a pretty significant difference because it has huge health implications for the ability for the integrated health system to work. In my view it's a major problem in terms of your argument to contract out the entire examination process. Could give me an answer to the question of how much would it cost to ramp up and whether your company could make that kind of investment?

Mr. Turek: VES works in an electronic medical records environment. All aspects from scheduling to delivery are done electronically. This includes the work performed by VES medical providers who review medical records and complete DBQs in the VES Secure Provider Portal.

With respect to the work VES does for the VBA, we have access to certain limited components of VISTA, including CAPRI and CAATS (which recently replaced VERIS). We also upload all completed C&P MDE reports and the associated diagnostics directly into VBMS, as required by our contract. VES' captive IT department built this capability at the request of and in cooperation with the VBA. We also post the completed reports to our VES Secure Client Portal.

With respect to the work VES does for the VHA, we do not access VISTA, nor do we upload completed reports into VBMS. Although we have offered to do so, the VHA has declined this offer. We currently send completed MDE reports to the VHA via encrypted e-mail as a secure PDF attachment. We also upload the completed reports to the VES Secure Client Portal.

With that said, as a private contractor, VES certainly does not have the same level of access to or interoperability with VISTA as does the VHA or VBA. Moreover, I highly doubt that the VA would allow any private contractor

unlimited and unfettered access to a system with such highly confidential and private information. Nevertheless, to the extent the VA was to allow us such access, our company certainly has the IT capability and financial resources to make the necessary investment to become fully interoperable with VISTA. VES maintains a robust, captive IT department, complete with a team of professional programmers who have previously worked together with VA technical experts on a number of IT-related projects. We are confident we can accommodate any reasonable IT requirements established by the VA going forward. However, absent a more detailed understanding from the VA of the parameters of a project to establish full interoperability, we have no basis upon which to provide you an estimate of how much that might cost.

The point is that we do not need the same level of access to or interoperability with VISTA in order to provide the VA timely and quality medical disability examination services. Not having the same level of interoperability with VISTA as the VHA does not in any way limit or compromise VES' ability to deliver valuable services to the VA. Moreover, it does not detract from our position that our veterans would be better served with the VHA focusing exclusively on treatment, and outsourcing all C&P MDEs to private contractors through the VBA.