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VETERANS AFFAIRS INFORMATION TECHNOLOGY

Management Attention Needed to Improve Critical System Modernizations, Consolidate Data Centers, and Retire Legacy Systems

Why GAO Did This Study

The use of IT is crucial to helping VA effectively serve the nation's veterans, and each year, the department spends over $4 billion on IT. However, over many years, VA has had difficulty managing its information systems, raising questions about the effectiveness of its operations and its ability to deliver intended outcomes needed to help advance the department's mission. GAO has previously reported on a number of the department's IT initiatives.

This statement summarizes results from key GAO reports related to increasing electronic health record interoperability between VA and DOD; system challenges that have contributed to GAO's designation of VA health care as a high-risk area; and VA's development of its system for processing disability benefits, data center consolidation, and legacy systems.

What GAO Recommends

GAO has made numerous recommendations to VA to improve the modernization of its IT systems. For example, GAO has recommended that VA develop goals and metrics for determining the extent to which its modernized electronic health record system is achieving interoperability with DOD's; address challenges associated with modernizing its scheduling system; address shortcomings with VBMS planning and implementation; take actions to improve progress in data center optimization; and modernize or replace obsolete legacy IT systems. VA agreed with these recommendations and said it has begun taking actions to implement them.

View GAO-17-408T. For more information, contact David A. Powner at (202) 512-9286 or pownerd@gao.gov.

What GAO Found

GAO noted in July 2016 that the Department of Veterans Affairs (VA) had moved forward with an effort to modernize its health information system—the Veterans Health Information Systems and Technology Architecture (VistA)—but that the department is uncertain of its long-term plan for addressing its electronic health record system needs beyond fiscal year 2018. Beyond modernizing VistA, GAO reported in August 2015 that VA and the Department of Defense (DOD) had not identified outcome-oriented goals and metrics to clearly define what they aim to achieve from their efforts to increase electronic health record interoperability (i.e., the electronic exchange and use of health records) between the two departments. Moreover, VA has begun to modernize VistA separate from DOD's planned acquisition of a commercially available electronic health record system, even though both departments have many health care business needs in common. In 2014, GAO noted that the departments' decision to abandon the development of a single system in favor of modernizing their two separate systems was not justified and was identified as an example of duplication among government activities. The departments have not yet provided a comparison of the estimated costs and schedules of their current and previous approaches as GAO recommended.

In February 2015, GAO designated VA health care as a high-risk area, with IT challenges being one contributing factor. Specifically, GAO noted that the outpatient appointment scheduling system, which is currently about 30 years old, is time-consuming to use and error prone. However, the project to modernize that system failed after VA spent an estimated $127 million over 9 years. VA has begun a new initiative to build or purchase another scheduling system.

GAO reported in September 2015, that VA had made progress implementing the Veterans Benefits Management System (VBMS) for processing disability benefits. However, the department had not developed a time frame and a reliable cost estimate for completing VBMS. VA also had not established goals for system response time, and had not minimized incidences of high and medium severity system defects for future VBMS releases. Further, the department had not assessed user satisfaction, or established user satisfaction goals.

In addition, VA's consolidation and closure of data centers has lagged behind other agencies, as GAO reported in March 2016. For example, VA's closure of 20 out of a total of 356 data centers gave the department a 6 percent closure rate through fiscal year 2015 that ranked 19th of the 24 agencies in GAO's study. Also, VA's reported $19.1 million in cost savings or avoidances from fiscal year 2011 through fiscal year 2015 was only about 0.7 percent of the total of about $2.8 billion that all 24 agencies reported saving. In addition, the department had not met any of the data center optimization areas established by the Office of Management and Budget.

VA was identified in a May 2016 GAO report as using antiquated and expensive to maintain, legacy IT systems. At that time, the 53-year-old Personnel and Accounting Integrated Data (PAID) system was slated to be replaced in 2017. Further, VA has plans to retire the 51-year-old Benefits Delivery Network, which tracks veterans' claims for benefits, eligibility, and death dates in 2018.