

Congresswoman Cathy McMorris Rodgers
Statement for the Record
Oversight & Investigations Subcommittee Legislative Hearing (HVAC)
March 7, 2018

I'd like to thank Chairman Bergman and Ranking Member Kuster for holding this important legislative hearing to address the fundamental need for comprehensive medical records for veterans.

Every day, I hear from veterans in Eastern Washington who are in desperate need of help from the VA, yet so often they are not receiving the help they need or deserve.

The VA's sole mission is to serve our veterans. Instead of having the red carpet rolled out for them, veterans are treated like a burden.

This includes veterans attempting to simply obtain their medical records from the VA. I have even heard from providers in the community who have been frustrated to the point of tears because they are unable to treat veterans because the patient cannot obtain his own medical records. Some veterans have waited more than two years to simply get their medical records from the VA. That is unacceptable.

But there is an easy, common sense, off-the-shelf solution for this problem.

My bill, introduced along with Congressman Seth Moulton, is a bipartisan, readily available solution to this problem. It directs the Secretary of the VA to establish a secure, patient-centered, portable medical records systems that would allow veterans to have access to their own comprehensive medical records.

As with most things in the VA, this is not an issue where the wheel must be reinvented to fix the issue. Commercial, off-the-shelf solutions already exist in the private sector. This kind of technology is already out there, deployed in hospitals in the private sector.

For example: VYRTY, a company based out of Washington state, is a secure offline data repository, with end-to-end encryption and remote record completion. VYRTY is a fully secure, portable, and HIPAA compliant health record management system that is currently deployed in Washington state -- with Evergreen Health Partners, Evergreen Health Hospital, Halvorson Cancer Center, and the Seattle Cancer Care Alliance, and growing -- and is interoperable across 89 different health records (EHR's)/platforms.

VA Concern: Challenges related to network security and compatibility with electronic health records systems make doctors resistant to accepting plug-in electronic devices from a patient.

We have discussed the security concerns that some may have in conversations with the VA Office of Information and Technology (OI&T) and the VA Committee.

While these concerns would be valid on other scenarios, the technology that exists and that is in use today is secure and is HIPAA compliant. It is compatible across all electronic health records systems, including Cerner, and is encrypted end-to-end.

The fact that it is in use today shows that it does not make doctors resistant to accepting plug-in electronic devices from patients.

VA Concern: Even with a portable storage device, veterans may not always have the most current copy of their record as this depends on when the files are downloaded during the Veteran's visit. It may not reflect the current visit including notes and the results of diagnostic tests that were ordered during the visit.

With the technology that is currently deployed, patients have a current copy and the most up-to-date version of their medical record. Specifically, one of the important aspects of VYRTY's technology is that they perform record completion. When a patient leaves his or her provider, they are leaving with the most up-to-date medical record information because it is updated immediately.

While the VA Department gives veterans access to the Blue Button Initiative through MyHealtheVet, this means that the veteran is constantly downloading, printing, and taking their latest record every time they go to an outside provider or to a different VA facility, or they're waiting for a document to download while sitting in a provider's office. This puts the burden on the veteran to be responsible for printing and bringing their most up-to-date records.

With the VYRTY's technology, the veteran and the provider have all of the information on a chip which then just has to be handed to the doctor. That's it.

VA Concern: the Department of Health and Human Services will be promulgating regulations to require health IT developers to have application programming interfaces (APIs) that enable easy access, use, and exchange of health information, and this technology would obviate the need for, or even the help from, the kind of special purpose storage system that the bill would foster.

First of all, the VA is not regulated by HHS.

Additionally, And again, the technology that this legislation references, is already in use today, therefore it is already up-to-date and in line with current regulations.

VYRTY has the capability to be integrated directly -- and is already supporting direct data feeds in their deployments. The card that is used by VYRTY is a personal repository of all patients' records. It doesn't matter whether those records are coming from an EHR through the "print" functionality or through application programming interfaces (API) level integration. VYRTY has an offline storage capability -- with online synchronization capabilities -- that deliver stored copies of the records between points of service.

Closing

I am disappointed and concerned by the VA Department's decision to oppose the legislation -- that they've chosen to focus on the challenges rather than the opportunities to offer our veterans high quality care.

My staff and I have held several meetings with the VA's Office of Information and Technology (OI&T), where legislation was discussed, where VYRTY was brought in to demonstrate their technology, and where the draft legislation was sent to the VA before introduction for comments and concerns, yet we have -- IN WRITING -- that the OI&T was supportive of the legislation. In the VA's words: "this looks good to us here."

What this bill is proposing is a common sense, off-the-shelf, readily available solution to a persistent problem among veterans today.

While I am pleased that the Secretary is serious about modernization of the EHR system within the VA, but not only is the VA-Cerner contract currently paused, the implementation period is ten years.

Since I came to Congress in 2005, the budget for the VA Department has nearly tripled, yet the problems persist.

The VA has one mission - to serve our veterans, and right now, the VA has lost sight of that mission.

Thank you, Chairman Bergman and Ranking Member Kuster.

I yield back.