Statement of the

Fleet Reserve Association

On the

Department of Veterans Affairs

Electronic Health Record Modernization

Presented to the

U.S. House of Representatives

Veterans' Affairs Subcommittee on Oversight and Investigations

April 19, 2023

The FRA

"Heading to 100 Years"

The Fleet Reserve Association (FRA) is the oldest and largest organization serving enlisted men and women in the active, reserve, and retired communities plus veterans of the Navy, Marine Corps, and Coast Guard. The Association is Congressionally Chartered, recognized by the Department of Veterans Affairs (VA), and entrusted to serve all veterans who seek its help.

FRA started in 1924 and its name is derived from the Navy's program for personnel transferring to the Fleet Reserve after 20 or more years of active duty, but less than 30 years for retirement purposes. During the required period of service in the Fleet Reserve, assigned personnel earn retainer pay and are subject to recall by the Secretary of the Navy.

The Association testifies regularly before the House and Senate Veterans' Affairs Committees, and it is actively involved in the Veterans Affairs Voluntary Services (VAVS) program. A member of the National Headquarters' staff serves as FRA's National Veterans Service Officer (NVSO) and as a representative on the VAVS National Advisory Committee (NAC). FRA's VSOs oversee the Association's Veterans Service Officer program and represent veterans throughout the claims process and before the Board of Veteran's Appeals.

In 2016, FRA membership overwhelmingly approved the establishment of the Fleet Reserve Association Veterans Service Foundation (VSF). The main strategy for the VSF is to improve and grow the FRA Veterans Service Officers (VSO) program. The newly formed foundation has a 501(c) 3 tax exempt status and nearly 800 accredited service officers with FRA.

FRA became a member of the Veterans Day National Committee in 2007, joining 24 other nationally recognized VSOs on this important committee that coordinates National Veterans' Day ceremonies at Arlington National Cemetery. FRA will host the ceremony in their centennial year, 2024. The Association is a leading organization in The Military Coalition (TMC), a group of 35 nationally recognized military and veteran groups jointly representing the concerns of over five million members.

The Association's motto is "Loyalty, Protection, and Service."

Introduction

The FRA welcomes this and other numerous oversight hearings because the Association believes Congressional oversight of the VA technology program is vital to ensuring improvements to the system. The VA healthcare structure is a hybrid system consisting of inpatient and outpatient care, telehealth, and community care. Ensuring that the VA is equipped to meet the unique needs of veterans requires the VA to fully leverage all components of the VA healthcare system and create a seamless and paperless transition from active-duty service to veterans status. The Electronic Health Record Modernization (EHRM) is an essential element in modernization of the VA healthcare system.

EHRM

"The VA uses the Veterans Health Information Systems and Technology Architecture (VistA), which includes the VA's Electronic Health Record (EHR) system to provide healthcare to patients. In June 2017 the agency initiated the EHRM program to replace VistA because it is technically complex, costly to maintain, and does not fully support the need to exchange health data with other organizations."[1] The VA has spent more than $9.42 billion on the EHRM program.

FRA appreciates the House Veterans Affairs Committee oversight hearings on the Electronic Health Record Modernization at the VA. The plan has been plagued with ongoing problems dating back to its initial launch at the VA Medical Center in Spokane, Washington. Serious issues related to patient safety, training, employee morale, and several other deployment problems still exist, though some progress has been made. Office of Inspector General (OIG) report revealing serious issues with the deployment of VA's new Electronic Health Record Modernization (EHRM) program.

The VA first launched its new electronic health record (EHR) system more than 25 months ago. The program was scheduled in July 2022 to expand to include the VA Medical Center in Boise, Idaho. The expansion was delayed from October 2022

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[1] GAO report -23-106685, March 15, 2023

until June 2023 when VA wanted to expand the software to new VA medical centers.

Oversight committees were told that the VA is using this pause to make system enhancements and to perform tests to ensure the system is stable, resilient, and provides the capability VA employees and veterans need to improve access and quality of care. Department of Veterans (VA) Secretary McDonough has extended the pause for implementing the Electronic Health Record Modernization (EHRM) program. There is growing concern on Capitol Hill about the long-term cost, safety, and reliability of the program. This new delay did not specify when implementation would resume. When the program started it was estimated that the cost would be $16 billion over 10 years. However, a more recent independent estimate predicts $33-36 billion over 13 years.

Nevertheless, progress has occurred since the VA joined with the DoD in a joint contract to modernize its EHR system in 2017. The huge $16 billion project raised lots of concerns with lawmakers after decades of attempts by both departments to develop a joint interoperable health record that never materialized.

The House and Senate passed the "Electronic Health Record Transparency Act" (H.R.4591) to require the VA to submit to Congress quarterly reports that evaluate the performance of the EHR, and it was signed into law in June 2022. The FRA wants to ensure adequate funding for DoD and the VA health care resources delivering seamless, cost-effective, quality services to personnel wounded in combat and other veterans and their families. Some members of Congress have expressed concern about the cost and length of time to fully implement this program. The cost and the long time for implementation notwithstanding, the FRA believes there is a tremendous opportunity with the two departments using the same Electronic Health Records.

Implementation Problems

The recent acquisition of the Cerner system by Oracle has come with a wide variety of challenges. The VA staff has experienced difficulties adjusting to the new system. The VA claims this is due to a lack of proper training. The new system created an "unknown queue," a problematic feature that has caused referral orders to effectively go missing at the VA. Additionally, an audit by the Office of

Inspector General (OIG) claims that the VA lacked a reliable integrated master schedule consistent with scheduling standards, which increases the risk of missing milestones and delaying the delivery of a system to provide timely, quality care to veterans. Schedule delays that extend the program are also likely to result in about $1.95 billion in annual cost overruns and may determine the VA's other modernization efforts on supply chain and financial management system. The report claims that Cerner failed to deliver more than 11,000 orders for specialty care, lab work and other services – without alerting health care providers the orders had been lost. Those lost orders, resulted in delayed care and what a VA patient safety team classified as dozens of cases of "moderate harm" and one case of "major harm." It should be noted that the Department of Defense (DoD) waited for roughly two years after implementing the EHR at its first four sites, and the glitches DoD was focused on fixing (primarily with its networks) were smaller than what VA is trying to fix. As VA leadership has confirmed, they will not deploy the new EHR system at any facility until they are certain it is ready to deliver for veterans and VA providers. Based on recent assessments, the VA has determined that the new EHR is not yet ready for further deployment at this time.

Legislative Action

There have been two legislative proposals introduced in the House that pertain to the VA's EHRM program. FRA believes Congressional oversight of VA technology is vital to ensuring improvements in the system. Legislation introduced in the House the "EHRM Improvement Act" (H.R. 592) to block further implementations of the system until the medical centers determine they are well-equipped to receive and use it, without hindering the delivery of care to veterans and hurting productivity. The HVAC Chairman and sponsor of the bill, Rep. Mike Bost (IL) believes that the Oracle Cerner system should not be implemented at any more VA sites until the VA Medical Centers leadership certifies that the medical center is ready.

Other legislation introduced "the EHRM Termination Act" (H.R. 608) which would end the project altogether if VA and Oracle Cerner are unable to make significant improvements. FRA supports H.R. 592 and has not taken a position on H.R. 608.

Conclusion

In closing, FRA wants to express its sincere appreciation for the opportunity to present its views on the EHRM program to this distinguished Subcommittee. The FRA believes there is a tremendous opportunity with the two departments using the same Electronic Health Records.