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DEPARTMENT OF VETERANS AFFAIRS (VA)  
BEFORE THE  
SUBCOMMITTEE ON TECHNOLOGY MODERNIZATION  
COMMITTEE ON VETERANS' AFFAIRS  
U.S. HOUSE OF REPRESENTATIVES**

**"EHR MODERNIZATION DEEP DIVE: CAN THE ORACLE  
PHARMACY SOFTWARE BE MADE SAFE AND EFFECTIVE?"**

**FEBRUARY 15, 2024**

Good morning, Chairman Rosendale, Ranking Member Cherfilus-McCormick, and distinguished Members of the Subcommittee. Thank you for the opportunity to testify today about VA's initiative to modernize its electronic health record (EHR) system. I am accompanied by VA's senior leaders critical to this initiative, Dr. Thomas Emmendorfer, Executive Director, Pharmacy Benefits Management Operations; and Dr. Robert Silverman, Veterans Health Administration (VHA) Pharmacy Council Co-chairman for the Electronic Health Record Modernization (EHRM) Program.

I want to begin by thanking Congress and this Committee for your shared commitment to Veterans, and for your continued support of VA's EHRM efforts. For VA, the successful deployment of the Federal EHR further honors that shared commitment by facilitating seamless health care transitions for Service members and Veterans among Federal care settings. The new system will provide an accurate lifetime health record for Veterans among partners using the Federal EHR. For the newest members of the military, this EHR will serve them from the day they begin their military service, providing a seamless health care experience as they transition from active service to Veteran status.

VA remains committed to successfully implementing the Federal EHR across its enterprise. The suite of technologies that make up a modern EHR are part of a larger ecosystem of orchestrated technologies needed by VA to enhance the quality and safety of health care delivery, empower clinical teams with effective decision support, enhance clinical trial implementation, and advance Veteran engagement. In furtherance of these goals, the new Federal EHR system integrates with other health information technologies, ultimately simplifies the experience for Veterans and VA staff, enhances standardization across the VA enterprise, and will improve VA and the Department of Defense (DoD) interoperability with the rest of the United States. health care system.

Moreover, the adoption of a product used by both VA and DoD will help to simplify health care delivery by providers in both Departments, which benefits patients who receive care in both systems or those transitioning from DoD to VA for care. Among the program's notable goals is to deliver and optimize unified, seamless, and trusted information flow between VA, DoD, the United States. Coast Guard, the National Oceanic and Atmospheric Administration), and community providers.

As part of an EHRM Program reset (Reset) announced in April 2023, VA halted all work on future deployments of the Federal EHR system -- except our planned joint VA and DoD deployment at the Captain James A. Lovell Federal Health Care Center (FHCC) -- while the Department prioritizes improvements at the five sites that currently use the Federal EHR system. The purposes of the Reset are to: optimize the current state of the Federal EHR; to closely examine and address the issues that clinicians and other end users are experiencing; and to position VA for future deployment success.

During this Reset, VA is addressing issues with the Federal EHR system and redirecting resources from deployment activities to further optimize the new system at the sites where it is currently in use. Staff productivity levels, revenue cycle management, technical systems performance, and other areas require dedicated attention and resolution before deployments resume.

VA has an obligation to Veterans and taxpayers to get this right. We understand the concerns of this Committee regarding the Federal EHR system and its impact on Veterans, VA staff, trainees, and researchers who rely on it. We are committed to full transparency, and we appreciate your oversight. We look forward to further engagement with you and your staff to ensure that this modernization effort, and related health information technology modernization efforts, are successful.

## **Program Update**

The EHRM Program Reset continues to move forward. VA is seeing incremental progress as it addresses the issues that clinicians and other end users are experiencing and optimizes the current state of the EHR system to ensure the enterprise-wide foundation is in place for success when deployments resume.

The initial priority activities of the Reset or workstreams focused on the following: (a) an effort to improve the Federal EHR system baseline through configuration changes and user adoption support; (b) workforce development for informatics staff both at the enterprise and field levels; (c) work to improve end-user support with a focus on help desk functions and incident management; (d) a technical "Get Well" plan to improve system reliability and performance; (e) work to enhance transparent communications for all stakeholders; and (f) preparation for the Lovell FHCC deployment.

These six workstreams continue, with requisite projects identified and initiated within those workstreams. The following four new workstreams have subsequently been added: (a) pre-work to enable the creation of a new deployment schedule; (b) the capture and reporting of metrics for the Reset and program overall; (c) post-deployment plans to transition sites to normal operations; and (d) analysis of VA workflows against the best practice models.

Beyond the work being managed within these workstreams, there is considerable effort focused on additional improvement areas during this period of Reset (for example

enhancing pharmacy capabilities, identifying and repairing gaps in research workflows, integrating health professions trainees, identifying improvements for referral management functionality within the system, tracking investigational medications, and more).

The rate of progress during the EHRM Program Reset, while modest, has been steadily accelerating. We have increased engagement with the live sites to ensure their voices are heard, and they have let us know that they are seeing improvements. While our current progress is reassuring, we still have important work ahead. We are working hard to standardize and simplify the system, further improve system reliability and responsiveness, communicate more effectively with end-users, and improve training. Those associated with this effort across VA, feel a sense of urgency to complete the work of the Reset, continue optimizing the EHR system for our current users, and move to restart and complete deployments across the rest of the enterprise.

### **Improving the Pharmacy Experience**

As mentioned, VA is advancing a number of priority areas in parallel with its Reset-related workstreams. One of these priorities is continuing to enhance pharmacy functionality within the Federal EHR system and across the enterprise. Since our last deep dive hearing into this area in May 2023, VA has made incremental and steady progress.

As of the date of this hearing, all but one of the original seven priority pharmacy enhancements have now been delivered through the twice-yearly “Block upgrades” (standard, biannual plans for enhancing the existing capabilities of the Federal EHR system). In February 2023, three were installed as part of the Block 8 upgrade. These enhancements improved providers’ visibility of current prescriptions and supplies of available medications, optimized system options for maintenance medications, and expanded details on prescription expiration dates, along with other enhancements.

Updates in the Block 9 release in August 2023 included three more priority enhancements that improved pharmacists’ ability to discontinue duplicate orders and increase their efficiency, review related orders and better understand patients’ comprehensive medications, and more quickly and effectively refill orders, among other improvements to the Federal EHR’s capabilities. Notably, additional updates in Block 9 resulted in a 24% decrease in user interruptions and a 24% reduction in application freezes for all users.

The Block 10 release, which occurred just days ago, includes pharmacy capability features that improve the automated coordination of prescription information between ordering clinicians and the pharmacy team; enable ordering clinicians to more easily request prescription refills for the Veterans they serve; and enhance how addresses are verified when pharmacy staff process mail prescriptions for patients. A feature to improve the automated coordination of prescription information between

ordering clinicians and the pharmacy team has been installed to the system but not enabled.

In addition to impacting pharmacy and all other parts of the Federal EHR system, Block 10 also introduced the newest versions of the Millennium, MPages, Clairvia, and Rhapsody software that will allow the Federal EHR system to scale solutions for increased user capacity, improve stability, and lay the groundwork for future capabilities. These software upgrades also included corrections for numerous defects, again incrementally improving user experience. The semi-annual cube releases in April and November 2023 also enhanced existing interfaces and capabilities and introduced nearly two dozen improvements and upgrades.

Beyond the block updates, specific to pharmacy, work was completed to improve the efficiency of the pending prescription queue used by pharmacy staff to process incoming prescriptions. Additional work was completed to increase the frequency of initiating receipt of new drug products into the database from monthly to weekly. Two more projects to enhance the functionality of a mobile handheld device used by pharmacy staff and to enhance the EHR system's library of known medication images are also forthcoming. Several enhancements around refilling procedures are also planned.

Ultimately, the desired end state of VA's pharmacy enhancement efforts is reduced time and steps required by pharmacists during verification and dispensing workflows, and reduced time and steps required by providers during prescription ordering and renewal. More work is being done beyond the block updates to address longer-term considerations, including inpatient controlled substance ordering; provider provenance for renewal of controlled substance prescriptions; digital signature; and support resources needed for perpetual inventory implementation, among others. VA's pharmacy programs have achieved success by cultivating a culture of safety and continuous process improvement. I want to acknowledge and thank our pharmacy community for using this same approach to identify the improvements that are needed in the Federal EHR pharmacy system.

To that end, VA has always said the EHR system will not go live at any site that is not ready. We also remain firm in our resolve to continue deployments of the modernized EHR system when it is ready. It is important to take the time now to get things right and to provide a strong foundation for an executable deployment schedule as the project proceeds. The continuous focus will be on assessing and remediating any identified issues at live sites and designing for safety and efficiency at future deployment sites.

### **Upcoming Deployment to Lovell FHCC**

As previously announced, the only exception regarding the pause on deployment activities is the planned deployment at the Lovell FHCC in March 2024—now, less than a month away. Lovell FHCC is the most integrated, jointly run VA and DoD health care

facility. This will be the final deployment of the Federal EHR at a DoD-affiliated site. The joint VA/DoD deployment is on track to go ahead as planned, allowing all patients who visit the facility to be cared for using one EHR system. Lovell will also be the first instance of the Federal EHR system to have research studies live in the EHR in fulfillment of VA's third statutory mission. It is also the first VA site to have a significant complement of Health Professions Trainees contributing to Veteran care.

On February 6, 2024, VA, DoD, and the Federal EHRM (FEHRM) Office leadership convened at Lovell FHCC to confirm overall readiness to deploy the new system. As we approach cutover, conversations will continue to be held daily with the Veterans Integrated Service Network, the director of the facility, and VHA to ensure the necessary criteria are being met for a successful go-live. Furthermore, VA is working cross-functionally with teams at the FEHRM Office, DoD, and the leadership at Lovell FHCC on a daily basis. We expect that the facility will be ready to go live next month with no disruption to clinical care, medical education, or research activities.

### **Path to Restart**

VA remains committed to taking the time necessary during this Program Reset to get this right for Veterans, VA clinicians, trainees, and researchers alike.

To this end, VA is developing a Reset Results Scorecard (previously referred to as "success criteria") focused on providing VA leadership and stakeholders metrics and thresholds that are clear, measurable, and actionable. The goal of the Reset Results Scorecard is to assist decision makers in determining when to exit the Reset and restart deployment activities beyond Lovell FHCC. This scorecard establishes objectives and key results demonstrated within the following four primary areas: Improved User and Veteran experience or how the new EHR system affects VA users and Veterans; improved health system operations or how effectively the new EHR is supporting VA's business and clinical operations; mature product or how well the technical solutions themselves are functioning and how that is affecting the user and health system experience; and finally, mature program processes or how the implementation of best practices and trained staff improve program processes.

When our goals have been met, and the Reset concludes, VA will release a new deployment schedule and resume deployment activities with greater confidence in the readiness of both the Federal EHR system and the VA health care system to successfully navigate this important change.

### **Conclusion: Federal EHR System Imperative**

VA is continuing to move forward with a modern, commercial EHR solution in close coordination with our Federal partners, including DoD and the FEHRM Office. This new Federal EHR system will allow VA to standardize workflows, training, and technology management across VA using a single enterprise system and will support better coordination with DoD, other Federal partners, and private health providers.

Veterans remain the center of everything we do. They deserve high-quality health care that is safe, timely, Veteran-centric, equitable, evidence-based, and efficient. They also deserve access to high quality clinical trials. As improvements continue to be made through the duration of this Reset, VA will continually evaluate readiness of sites and the Federal EHR system to ensure success and patient safety. With the activities and improvements that are now underway, VA leaders are optimistic about the eventual success of the current Reset and subsequent full implementation of the Federal EHR throughout VA.

I again extend my gratitude to Congress for your commitment to serving Veterans with excellence. We look forward to responding to any questions that you may have.