

ISSUE BRIEF: VA HEALTH INFORMATION TECHNOLOGY

The Situation

- Four decades ago, VA clinicians developed and deployed the first modules of what is now known as Veterans Health Information System and Technology Architecture (VistA)—an electronic health record (EHR) that has since been recognized as the gold standard for the health care provider industry as recently as 2016. With VistA, VA is able to access patient information from anywhere across its system of care and aggregate much of its health outcome data to create and promote quality standards and population health still used by much of the industry.
- Over the last several years, efforts to keep VistA at the leading edge of health informatics stagnated due in large part to a change in agency priorities, which put security and standardization before adoption and implementation of innovations in patient care and safety. Most recently, information sharing between VA, the Department of Defense (DOD) and community providers was made a high priority.
- In 2018, VA contracted for a commercial electronic health record solution to replace VistA and solve the long-standing problem of meaningful information sharing between VA, DOD, and other health care providers with whom VA sends veterans for care and services.

The Challenge

- VistA is highly customized to support the largest integrated health care system in the United States and to help providers deliver a comprehensive medical benefit package with many supportive services not found in the private sector.
- The commercial EHR VA is acquiring must bring industry best practices to improve VA's administrative capabilities, but currently it lacks the breadth and depth of clinical capabilities inherent in VistA, which supports 172 VA medical centers that continue to outperform private hospitals in their local markets.
- Cost of full integration of the commercial EHR is projected at \$16 billion over the next 10 years, with \$5.8 billion of those funds set aside to manage and support the current VistA infrastructure. A 10-year EHRM deployment plan presents challenges to VA facilities and may impact the care veterans receive—especially those on the East Coast where EHRM will be deployed last.

The Solution

- VA and Congress must ensure the commercial EHR VA is acquiring brings industry best practices to improve administrative capabilities and not at the costs of diminished clinical capabilities currently and in the future.
- VA must make modernizing its scheduling system a high priority. Scheduling is a tool used to balance patient demand with capacity. If scheduling is problematic, veterans will have problems accessing needed health care.
- Congress must provide and VA must dedicate sufficient resources for VA to continue developing VistA over the next ten years and successfully develop and deploy the commercial EHR replacement.