

Prepared Statement

of

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on

The Progress Being Made by the Department of Defense and the
Department of Veterans Affairs with the Sharing Of Medical
Information and the Development of a Seamless Electronic Medical
Record

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Introduction

Mr. Chairman and distinguished members of this committee, thank you for the opportunity to discuss the progress being made by the Department of Defense (DoD) and the Department of Veterans Affairs (VA) with the sharing of medical information and development of interoperable electronic medical records. DoD is committed to providing the best health care services for our beneficiaries. Today, we have more than 253,000 service men and women deployed in support of our nation's defense, including those serving in Afghanistan and Iraq. We have awarded a full suite of new TRICARE contracts, extended our sharing and cooperative efforts with other federal agencies, and continued to provide excellent healthcare to our 8.9 million beneficiaries. Using the balanced scorecard approach to strategic planning, we have focused on readiness, effectiveness of our health plan and patient satisfaction with access to care.

In the information technology area we are focusing on enhancing our enterprise architecture to ensure that our information technology investments directly support military health care around the world and aligns with the Department's Business Management Modernization Program. We continue to refine our information technology capital investment and portfolio management process, ensuring that all proposed information technology investments are evaluated against objective, business focused criteria. Protecting sensitive beneficiary information is very important. To do so, we have implemented a strong information assurance program which addresses information security from electronic, physical, and personnel perspectives.

The DoD Military Health System Information Management/Information Technology (IM/IT) Program mission is to acquire, develop, deploy, and maintain superior IM/IT solutions and

services in support of health care delivery provided by the Army, Navy, and Air Force. These Tri-Service systems support the complex and varied aspects of peacetime and wartime medical operations. The Department continues to implement and sustain a secure standards-based, shared infrastructure in the support of key healthcare automated information systems. This robust infrastructure ensures essential patient and population-level healthcare information is well protected, and is available at the right time, to the right staff, around the clock and around the world. This enables the continuation of critical e-business functions, enhancing access to care and quality of care, and improves our ability to efficiently manage our business. Over the past year, working with the Services, VA, and key commercial business partners, we have implemented and enhanced transport security and standards-based encryption capabilities to prevent the disclosure of confidential and sensitive protected health information.

A key achievement has been the deployment of the initial Composite Health Care System (CHCS) to over 500 DoD medical facilities worldwide. CHCS is the military computerized provider order entry (CPOE) system. For more than 10 years, military health care providers have utilized CHCS to electronically order millions of lab tests, radiology exams, and prescriptions, as well as record diagnoses, enter treatment codes, and schedule patients. CHCS permits health care providers to issue clear orders efficiently and effectively and enhances patients' safety through CPOE. It documents over 50 million outpatient appointments and performs 70 million prescription transactions yearly. Furthermore, the Department implemented the Pharmacy Data Transaction Service (PDTS), which builds patient medication histories compiled from prescriptions filled at civilian pharmacies, through a mail-order pharmacy and at military treatment facilities. CHCS interfaces to PDTS to display the medication history

maintained in PDTS and issue alerts when prescribed medications could negatively interact with medications on record in PDTS.

A major focus within the Department is the Composite Health Care System II (CHCS II) – the military Electronic Health Record (EHR). CHCS II is an enterprise-wide medical and dental clinical information system that generates, maintains and provides worldwide secure online access to comprehensive patient records. CHCS II is patient centric, secure and scalable for use from our largest garrison based medical facilities to our forward deployed medical units. CHCS II is a core component of military medical readiness, supporting uniform, secure, high-quality health care delivery and continuity of care to Military Health System beneficiaries. With this system, doctors and other medical workers can create and add to electronic medical records for the individuals they treat – one patient, one record. It is a windows-based application that further enhances CHCS capabilities and provides a user-friendly interface with improved coding and expanded documentation of medical care. CHCS II is a leader in the area of health informatics. It meets the eight care delivery functions identified by the Institute of Medicine as essential for electronic health records to enhance safety, quality and efficiency of health care delivery. CHCS II has received approval for full rate production and began worldwide deployment in January 2004. CHCS II full implementation will be achieved by June 2006. The military EHR centrally stores all electronic patient medical records in the Clinical Data Repository (CDR). Concurrent with the worldwide implementation of CHCS II, medical data stored at the regional locations is being aggregated and aligned with a patient's single medical record in the CDR.

As you know, DoD and VA have joined forces to provide our nation's military and veterans with improved health care services. Over the past year, the two Departments have launched a new era of DoD/VA collaboration, with unprecedented strides toward a new federal partnership that promises to transcend business as usual, and establish common business practices. Such collaboration has been going on for a few years and is already seen as a model for inter-agency cooperation across the federal government.

We are pleased to report that we have approved a VA/DoD Joint Strategic Plan to guide our future relationship. We believe that this plan institutionalizes our current collaborative efforts. It also identifies joint objectives, strategies, and best practices for future collaboration. Through our VA/DoD Joint Executive Council, we ensure leadership oversight and endorsement of all initiatives as we continue to develop our strategic partnership. Many of the recommendations of the President's Task Force to Improve Health Care Delivery For Our Nation's Veterans are reflected in the VA/DoD Joint Strategic plan. Importantly, the ability to transfer and share electronic health information is a major area of focus in this joint strategic plan.

Seamless Exchange of Electronic Health Care Data

DoD and VA have a number of initiatives addressing clinical data interoperability and data exchange that will benefit Service members as they transition to veteran status. I would like to review a few of these with you.

Federal Health Information Exchange (FHIE) This exchange supports the transfer of electronic health information from DoD to VA at the point of a Service member's separation. As a model of collaboration between DoD and VA, it markedly enhances continuity of care for our nation's veterans. VA providers nation-wide have access to this data thereby facilitating the delivery of needed care. FHIE is also being used by Veterans Benefits Administration claims adjudicators to assist in fulfilling the evidentiary requirements for processing disability compensation claims and in determining eligibility for Vocational Rehabilitation and Employment Benefits. DoD patient data is displayed in the same format as other data residing in the VA Health Information System, thus facilitating its use.

FHIE leverages existing agency information systems to facilitate the electronic transfer of patient information from DoD to VA. The first phase included patient demographics and pharmacy, laboratory, and radiology information. FHIE was further expanded to include discharge summaries. Enhancements continued, including allergy data in June 2003 and consultation information in September 2003. Information from the PDTS, which included mail order and retail pharmacy profiles, was incorporated shortly thereafter. Our most recent enhancement includes key elements of the standard ambulatory data record, such as diagnostic codes, primary care manager, treatment provider, and clinical service. FHIE has sent information from DoD to VA on over 1.9 million veterans, including over 25.7 million laboratory, 26.4 million pharmacy, and 4.5 million radiology clinical messages, as well as over 310,000 consult reports.

Joint Electronic Medical Record Interoperability DoD and VA are now building on the foundation of the Federal Health Information Exchange to provide a more robust capability. The

successful iterative development process used to develop FHIE will serve as a model for interoperability. We are now developing interoperability between DoD's CDR and VA's Health Data Repository (HDR). This initiative responds to the President's Task Force to Improve Health Care Delivery For Our Nation's Veterans recommendation and the VA/DoD Joint Strategic Plan objective for interoperable electronic medical records. Projects such as Clinical Data Repository/Health Data Repository (CHDR) are laying the ground work for the clinical information exchange that will enable a consolidated view of health data from DoD and VA medical records. This approach will enable clinicians from both Departments to access clinical information from the two repositories.

A DoD/VA integrated product team was formed to manage development of this important capability. It is led by senior health information technology managers and clinicians from both Departments. The initial interface between DoD's CDR and VA's HDR will be the pharmacy prototype, which will test the exchange of outpatient pharmacy data in a laboratory environment, by October 2004. The bi-directional exchange of patient demographics, outpatient pharmacy (MTF, mail order, and retail pharmacy network), laboratory, and allergy information by October 2005.

Laboratory Data Sharing and Interoperability (LDSI) The LDSI initiative facilitates the electronic transfer/sharing of laboratory order entry and results reporting among DoD, VA, and commercial reference labs. DoD has interfaces between various DoD sites and external reference labs. Using this application in Hawaii, the Spark M. Matsunaga VA Medical Center uses the Laboratory module of VistA to electronically route laboratory requests to the CHCS

Laboratory at Tripler Army Medical Center. Upon completion of the ordered test, Tripler electronically routes the laboratory test results back to VistA. Computerized order entry and results reporting support the delivery of high quality patient care and patient safety by eliminating much of the manual entry of test results which may contribute to medical errors. Following the successful pilot test of LDSI in Hawaii, this capability is being deployed to DoD and selected joint venture sites. We are currently planning implementation at Wilford Hall Medical Center, Brooke Army Medical Center, and South Texas Veterans Health Care System. The product will be enhanced to include Anatomic Pathology and Microbiology and to allow DoD to order lab tests from VA.

Health Information Standards DoD and VA are lead partners in the Consolidated Health Informatics project, one of the 24 eGov initiatives supporting the President's Management Initiative. The goal of the Consolidated Health Informatics initiative is to establish federal health information interoperability standards as the basis for electronic health data transfer in federal health activities and projects. In March 2003, the Department of Health and Human Services (HHS) announced the first set of standards to be adopted. They included standards in clinical laboratory results, health messaging, prescription drug codes, digital imaging, and connectivity of medical devices to computers. HHS is planning to announce adoption of additional standards related to areas such as demographics, units, lab results contents, medications, lab test order names, and immunizations. The standards adopted will be used in new acquisitions and systems development initiatives. As federal entities use common standards it will be easier to exchange appropriate health information. DoD and VA are also leading partners in many national standards development efforts. Both Departments participate in

multiple standards boards to collaborate and share expertise. We are also active partners in the new Federal Health Architecture initiative being managed by HHS.

Closing

Mr. Chairman and distinguished members of this committee, I am proud of the accomplishments that have been made to support sharing of appropriate medical information and development of a seamless electronic medical record. These accomplishments are paying dividends in the health of our veterans, and we will continue to improve in the coming year. All systems and currently implemented information collection and exchange activities comply with privacy and security safeguards mandated by the Health Insurance Portability and Accountability Act (HIPAA), the Privacy Act, the E-Government Act, and other applicable regulations and standards. The partner agencies ensure that mandated privacy and security measures are integrated in the design and development of planned activities as well. Where appropriate, information is encrypted prior to transmission and sent using a virtual private network. To ensure that these, and other DoD/VA initiatives, continue to progress, VA/DoD Health Executive Council receives updates bi-monthly and the VA/DoD Joint Executive Council monitors progress quarterly. Additionally, DoD and VA share information on a quarterly basis with the Office of Management and Budget on the status of the DoD/VA Joint Electronic Medical Care Record Interoperability Plan.

The Department of Defense and the Department of Veterans Affairs have made significant progress in improving the sharing of medical information and continue to make progress on development of interoperable electronic medical records. The ground work has been laid for even greater progress in the future and I am firmly committed to continued improvement. Our

shared commitment to strong DoD/VA collaboration in the area of information technology places us in the forefront of interagency cooperation and health data exchange across the federal government.

This cooperative technology sharing serves as one vital tool to assist both Departments in caring for and assuring the availability of appropriate care for the men and women who serve and have served this country. They are the focus of our efforts. It is our responsibility to work together to share important information that will facilitate the care of veterans.

Thank you for the opportunity to highlight our continued progress.