Prepared Statement

of

Mr. James C. Reardon

Military Health System, Chief Information Officer

on

The Importance of Electronic Health Records and the Future Roles of the Department of Defense and Department of Veterans Affairs in Achieving This Goal on a Government-wide Basis

Before the

Subcommittee on Oversight and Investigations
Committee on Veterans' Affairs
U.S. House of Representatives
May 19, 2004

Not for Public Release until 10:00 am
on May 19, 2004.

Introduction

Mr. Chairman and distinguished members of this committee, thank you for the opportunity to discuss the collaborative efforts being made by the Department of Defense (DoD), the Department of Veterans Affairs (VA) and the Department of Health and Human Services (HHS), and how these efforts relate to the President's Technology Agenda involving the transformation of health care through health information technology. DoD/VA's efforts lay the foundation for the President's health technology plan of improving health care quality, reducing health care costs, preventing medical errors, improving administrative efficiencies, reducing paperwork, and increasing access through innovations in electronic medical records and the secure exchange of medical information.

Department of Defense Health Technology

The DoD Health Technology Program acquires, develops, deploys, and maintains superior Health Technology solutions and services in support of health care delivery provided by the Army, Navy, and Air Force. The Department continues to implement and sustain a secure standards-based, shared infrastructure in the support of essential health technology systems. This robust infrastructure ensures crucial health information is protected and 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, enhances access to care and quality of care, and improves our ability to efficiently manage our business.

Enterprise Architecture 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.

Computerized Provider Order Entry (CPOE) The Department has a long history of transforming health care delivery by using information technology. For more than a decade, DoD has led industry by using one of the world's first and largest hospital integrated enterprise CPOE systems that capture important patient information by automating the documentation of patient data for its nine million beneficiaries. The Composite Health Care System I (CHCS I) is deployed to over 500 DoD medical facilities worldwide, interfaces with more than 40 other clinical and administrative systems, documents over 50 million outpatient appointments, and performs 70 million prescription transactions yearly. DoD recognizes the value of secure and on-demand accessible computerized patient information as a substantive way to greatly enhance patient safety as well as the quality of health care delivery. CHCS I reduces patient wait time, increases patient access to medical resources, and allows faster and more efficient reporting of diagnostic test results. CHCS I permits health care providers to issue clear orders efficiently and effectively and enhances patients' safety through CPOE. CHCS I has made the quantum leap from paper to electronic order entry. It enables DoD providers to electronically order laboratory

tests, retrieve test results, authorize radiology procedures, prescribe medications, and schedule appointments.

Pharmacy Data Transaction Service (PDTS) PDTS builds patient medication histories compiled from prescriptions filled at civilian pharmacies, through a mail-order pharmacy and at military treatment facilities. PDTS enhances patient safety and quality of medical care by reducing likelihood of: adverse drug-to-drug interactions; duplicate drugs prescribed to treat same condition; and same drug obtained from multiple sources. This service conducts online clinical screening against patient's complete medication history when processing new or refilled prescriptions. Additionally, PDTS issues alerts when prescribed medications could negatively interact with medications on record in PDTS. This important function has prevented over 99,000 potentially life-threatening drug interactions.

TRICARE Online (TOL) TOL is an enterprise-wide, secure Internet portal for use by DoD beneficiaries, providers, and health care managers worldwide. TOL provides access to health information, contact information for hospitals, clinics and providers, links to information on TRICARE services and benefits, as well as helpful resources such as disease management tools, a drug interaction checker, and a personal health journal. TOL also enables TRICARE members to make appointments with primary care managers online. Future TOL services will include secure e-mail between patients and providers, the ability to request prescription refills, and automated support for provider referrals and authorization requests.

Composite Health Care System II (CHCS II) The Department is currently in the process of fielding CHCS II. CHCS II 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. It is an enterprise-wide medical clinical information system that maintains and provides worldwide secure online access to comprehensive patient records, continuing the Department's military EMR effort. With this system, doctors and other medical workers can create and add to electronic medical records for the individuals they treat. CHCS II is secure, standards based, and patient centric, for use in our 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. By streamlining and computerizing business processes and scheduling systems, CHCS II stresses a team-based approach to health care and will improve hospitals and clinics' efficiency in providing timely service to patients. Additionally, efficient, secure, and readily accessible communication among providers improves the continuity of care and increases patient safety and the timeliness of diagnoses and treatments. CHCS II 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. It centrally stores all electronic patient medical records in the Clinical Data Repository (CDR). CHCS II has received approval for full rate production and began worldwide deployment in January 2004.

Departmental Collaboration

Over the past year, the DoD/VA/HHS have launched a new era of Departmental collaboration, with unprecedented strides toward a new federal partnership. Through our VA/DoD Health and Joint Executive Councils, we ensure leadership oversight is given to all of joint initiatives as we continue to develop our strategic partnership.

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 recently adopted 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.

The DoD/VA standards convergence group continues to work towards leveraging synergies and avoiding duplication and inconsistencies with their respective Enterprise Architecture (EA) development. EA links the business mission, strategy, and processes of an organization to its Health Technology strategy. It is documented using multiple architectural models or views that show how the current and future needs of an organization will be met. Compatible DoD/VA architectures foster systems interoperability and information sharing both inside and between our agencies.

Federal Health Architecture (FHA) The Department is an active partner in the FHA initiative managed by HHS. FHA signifies an excellent opportunity to build partnerships throughout the nation's health care environment in the development of an integrated and effective health information exchange network. FHA will enable the utilization of existing systems to meet health care delivery requirements while providing clear rules for the development of new tools for improved performance and access to health related information and services throughout the national health arena. DoD is co-lead on the Health Care Delivery – Electronic Health Record (EHR) Work Group formed in May 2004. The work group's initial focus is the federal EHR business architecture.

Federal Health Information Exchange (FHIE) FHIE is an excellent example departmental collaboration that markedly enhances continuity of care for our nation's veterans. 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. Based on success in these areas, FHIE was further

expanded to include discharge summaries, allergy data and consultation information. Information from the PDTS, which included mail order and retail pharmacy profiles, and the standard ambulatory data record which includes items, such as diagnostic codes, primary care manager, treatment provider, and clinical service. FHIE has sent information from DoD to VA on over 2.2 million veterans, including over 27.6 million laboratory, 28.4 million pharmacy, and 4.8 million radiology clinical messages, 400 thousand consult reports and 25 million Standard Ambulatory Data Records. FHIE is significant step towards the President's health information technology plan. FHIE is already showing that clinical data can be transferred from one health care system to another in a safe, secure manner.

Joint Electronic Medical Record Interoperability (JEMR) DoD and VA continue to build on the foundation of the Federal Health Information Exchange. The successful iterative development process used to develop FHIE will serve as a model for improved interoperability between DoD's CDR and VA's Health Data Repository (HDR). DoD and VA are in the process of finalizing the Joint Electronic Medical Records Interoperability Program (JEMR) Management Plan. JEMR responds to the VA/DoD Joint Strategic Plan objective of enabling efficient sharing of beneficiary data, medical records, and other information through secure and interoperable information management systems and to the President's Task Force to Improve Health Care Delivery For Our Nation's Veterans recommendation. The JEMR Program Management Plan will guide how management oversight, progress reporting, and continued development will be accomplished. One of these projects is called Clinical Data Repository/Health Data Repository (CHDR). CHDR will enable clinicians from both Departments to access clinical information from the two repositories on shared patients. Projects such as this 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. DoD has reviewed and concurs with the Government Accounting Office letter dated 14 May 2004 and is taking actions to implement their recommendations.

CHDR Pharmacy Prototype The initial interface between DoD's CDR and VA's HDR will be the pharmacy prototype. This interface will test the bi-directional exchange of outpatient pharmacy data to include patient demographics, outpatient pharmacy (MTF, mail order, and retail pharmacy network), laboratory, and allergy information in a laboratory environment, in 2005.

CHCS/VistA Data Sharing Interface (DSI) DSI continues the success experienced by FHIE towards furthering interoperability efforts between DoD and VA. The DSI Project is leveraging the existing FHIE and Department information systems (CHCS and VistA) to meet the current business need that clinicians have for real-time clinical data exchange for shared patients. The most significant recent development has been the finalization of an integration services contract for the development of a real-time, bi-directional local exchange of health information for DoD and VA joint venture sites and sites that have medical sharing agreements. The first phase of DSI will be deployed in FY05, and will support the exchange of allergy and pharmacy data. Lessons learned in the initiative will be captured and applied to future efforts focusing on bidirectional exchange between DoD's CDR and VA's HDR.

Closing

Mr. Chairman and distinguished members of this committee, I am proud of the collaborative efforts being made by the DoD, VA and HHS and how these efforts align with the President's Health Technology Plan. Much has been accomplished in a short period of time and the ground work has been laid for even greater progress in the future. Our shared commitment to strong DoD/VA/HHS collaboration in the area of information technology places us in the forefront of interagency health information technology across the federal government.

I am firmly committed to the Departments' continued collaboration to expand the appropriate sharing of health information as systems and data repositories mature and standards and processes are further defined and implemented. Over the past year, working with the Services, VA, and key commercial business partners, we have implemented and enhanced information transport security and standards-based encryption capabilities to prevent the disclosure of confidential and sensitive protected health information. Exchanging health information between Departments will not only improve the quality of health care delivered, but will also establish an federal model for electronically exchanging medical records. Thank you for the opportunity to highlight our continued progress.