

Congress of the United States
Washington, DC 20515

April 23, 2019

The Honorable Robert L. Wilkie
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

The Honorable Patrick M. Shanahan
Acting Secretary
U.S. Department of Defense
1000 Defense Pentagon
Washington, DC 20301

Dear Secretary Wilkie and Secretary Shanahan:

We write today regarding the status of joint program management efforts by the Department of Veterans Affairs (VA) and the Department of Defense (DoD) to implement an integrated electronic health record (EHR) system. As DoD has begun implementation of Military Health System (MHS) Genesis and VA progresses toward implementation of the Electronic Health Record Modernization (EHRM), the need for a single point of accountability for joint decisions is clear. The Interagency Program Office (IPO), was created in the 2008 National Defense Authorization Act to serve as this single point of accountability in order to accelerate the exchange of healthcare information between the two departments, but it has struggled to meet this mission.¹

We are concerned that more than six months after issuing a joint commitment statement alluding to program management integration, little discernable action has been taken to address the challenges with the IPO. Further, despite repeated requests, information about a proposal for joint activities and goals is not forthcoming to Congress. An accountable and transparent structure for joint program management is urgently needed, but it is incumbent on your departments to provide the information necessary for Congress to evaluate your plans for an alternative structure to the existing IPO.

Now that VA and DoD have agreed to the same EHR vendor, it would stand to reason that the IPO should have assumed a mission in line with Congress's original intent that a joint office be the single point of accountability to coordinate and accelerate the exchange of health information between the two departments. When the Director of the DoD/VA Interagency Program Office testified before the House Committee on Veterans' Affairs on September 13, 2018, she stated that the IPO was not staffed or resourced to be that single point of authority. The Government Accountability Office (GAO) testified in that same hearing that "the root cause of why the IPO has been ineffective over the past decade is because it has had no authority or influence over the actions of the large and powerful organizations within DoD and VA that have responsibility for the Departments' electronic health record programs."² To date, we understand

¹ National Defense Authorization Act of 2008, Pub. L. 110-181, Sec. 1635(a) (2008).

² House Committee on Veterans' Affairs, *Hearing on The Role of the Interagency Program Office in VA Electronic Health Record Modernization*, 115th Cong. (Sep. 13, 2018).

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that little progress has been made in implementing GAO's recommendation to address these shortcomings.

In addition, it is clear that the concept of a joint program office needs to be expanded beyond EHR implementation. The effort to bring seamless healthcare to servicemembers and veterans and the goal to integrate healthcare information requires more than a longitudinal health record. True integration means using data and continuously evolving technology to promote healthcare innovation, enhance information exchange, and measure health outcomes. The joint program office should be at the forefront of the departments' activities to coordinate and accelerate healthcare delivery.

VA has promised for several months that a plan for joint program management, by the IPO or a successor organization, would be forthcoming, but it has never materialized. On March 26, 2019, in a hearing before the Senate Committee on Veterans' Affairs, Secretary Wilkie testified that he hoped to make an announcement about a joint program management office soon.³ The question was posed again in a hearing before the House Committee on Veterans' Affairs on April 3, 2019, and no detail was provided regarding a leadership structure or even a timeline for when one will emerge. However, media reports have given the impression that the structure has already been decided, and that the joint program office would be led by a director appointed by DoD and a deputy director appointed by VA.⁴ We believe that because EHRM is significantly larger than MHS Genesis and health care is central to VA's mission, it is important that VA has a more significant role in decision-making related to joint EHR implementation at VA and DoD.

So that Congress can continue its oversight of the implementation of EHRM at VA and to better understand how VA and DoD are addressing the longstanding concerns with the IPO and considerations for a successor structure, we request that VA and DoD provide a staff briefing on proposals for the IPO by no later than May 1, 2019.

Thank you for your attention to this matter. If you have any questions and to schedule the briefing, please contact Sarah Garcia with Chair Lee's Subcommittee staff at (202) 225-9756, or Amy Smith with Ranking Member Tester's Committee staff at (202) 224-3498.

³ Senate Committee on Veterans Affairs, Hearing on Fiscal Year 2020 Budget for Veterans' Programs and Fiscal Year 2021 Advance Appropriations Request, 116th Cong. (Mar. 26, 2019).

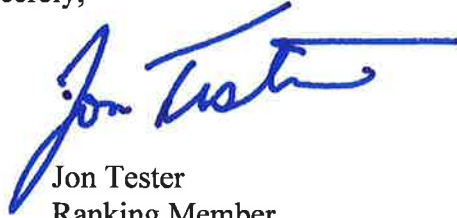
⁴ *Cummings Promoted as Pentagon, VA Negotiate Power Sharing on Cerner*, Politico (Mar. 26, 2019).

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Sincerely,



Susie Lee
Chair
Subcommittee on Technology Modernization
House Committee on Veterans' Affairs



Jon Tester
Ranking Member
Senate Committee on Veterans' Affairs

cc: Johnny Isakson
Chair
Senate Committee on Veterans' Affairs

Jim Banks
Ranking Member
Subcommittee on Technology Modernization
House Committee on Veterans' Affairs