ELECTRONIC HEALTH RECORDS

DOD and VA Interoperability Efforts Are Ongoing; Program Office Needs to Implement Recommended Improvements

What GAO Found

DOD and VA previously established six objectives that they identified as necessary for achieving full interoperability; they have now met the remaining three interoperability objectives that GAO previously reported as being partially achieved—expand questionnaires and self-assessment tools, expand DOD’s inpatient medical records system, and demonstrate initial document scanning. As a result of meeting the six objectives, the departments’ officials, including the co-chairs of the group responsible for representing the clinician user community, believe they have satisfied the September 30, 2009, requirement for full interoperability. Nevertheless, DOD and VA are planning additional actions to further increase their interoperable capabilities and address clinicians’ evolving needs for interoperable electronic health records. Specifically,

- DOD and VA plan to meet additional needs that have emerged with respect to social history and physical exam data;
- DOD plans to further expand the implementation of its inpatient medical records system to sites beyond those achieved as of September 2009; and
- DOD and VA plan to test the capability to scan documents, in follow-up to their demonstration of an initial document scanning capability.

Additionally, in response to a Presidential announcement, the departments are beginning to plan for the development and implementation of a virtual lifetime electronic record, which is intended to further increase their interoperable capabilities.

The interagency program office is not yet positioned to function as a single point of accountability for the implementation of interoperable electronic health record systems or capabilities. The departments have made progress in setting up their interagency program office by hiring additional staff, including a permanent director. In addition, consistent with GAO’s previous recommendations, the office has begun to demonstrate responsibilities outlined in its charter in the areas of scheduling, planning, and performance measurement. However, the office’s effort in these areas does not fully satisfy the recommendations and are incomplete. Specifically, the office does not yet have a schedule that includes information about tasks, resource needs, or relationships between tasks associated with ongoing activities to increase interoperability. Also, key IT management responsibilities in the areas of planning and performance measurement remain incomplete. Among the reasons officials cited for not yet completing a schedule, plan, or performance measures were the office’s need to focus on verifying achievement of the six interoperability objectives and participating in the departments’ efforts to define the virtual lifetime electronic record. Nonetheless, if the program office does not fulfill key management responsibilities as GAO previously recommended, it may not be positioned to function as a single point of accountability for the delivery of future interoperable capabilities, including the development of the virtual lifetime electronic record.

What GAO Recommends

GAO is not making further recommendations at this time; DOD and VA need to implement the recommendations on program planning, scheduling, and performance measurement that GAO previously made. Commenting on a draft of this report, DOD, VA, and the interagency program office concurred with GAO’s findings.

Why GAO Did This Study

The National Defense Authorization Act for Fiscal Year 2008 required the Department of Defense (DOD) and the Department of Veterans Affairs (VA) to accelerate their exchange of health information and to develop capabilities that allow for interoperability (generally, the ability of systems to exchange data) by September 30, 2009. It also required compliance with federal standards and the establishment of a joint interagency program office to function as a single point of accountability for the effort.

Further, the act directed GAO to semiannually report on the progress made in achieving these requirements. For this fourth report, GAO determined the extent to which (1) DOD and VA developed and implemented electronic health record systems or capabilities that allowed for full interoperability by September 30, 2009, and (2) the interagency program office established by the act is functioning as a single point of accountability for the effort.

What GAO Recommends

GAO is not making further recommendations at this time; DOD and VA need to implement the recommendations on program planning, scheduling, and performance measurement that GAO previously made. Commenting on a draft of this report, DOD, VA, and the interagency program office concurred with GAO’s findings.

View GAO-10-332 or key components. For more information, contact Joel Willemssen at (202) 512-6253 or willemssenj@gao.gov.