



Highlights of [GAO-04-687](#), a report to the Subcommittee on Oversight and Investigations, House Committee on Veterans' Affairs

Why GAO Did This Study

A critical element of the Department of Veterans Affairs' (VA) information technology program is its continuing work with the Department of Defense (DOD) to achieve the ability to exchange patient health care information and create electronic medical records for use by veterans, active-duty military personnel, and their health care providers.

This report provides an assessment of the departments' recent progress toward achieving an electronic two-way exchange of health care data, along with recommendations based on GAO's work.

What GAO Recommends

To help ensure progress by the departments in achieving the two-way exchange of health information, GAO recommends that the Secretaries of Veterans Affairs and Defense develop an architecture for the systems' electronic interface, establish a project management structure that designates a lead decision-making entity, and create and implement a coordinated project plan for developing the interface between the departments' health information systems. In commenting on a draft of this report, the departments agreed with our recommendations and identified actions planned or undertaken to address them.

www.gao.gov/cgi-bin/getrpt?GAO-04-687.

To view the full product, including the scope and methodology, click on the link above. For more information, contact Linda D. Koontz at (202) 512-6240 or koontz1@gao.gov.

COMPUTER-BASED PATIENT RECORDS

VA and DOD Efforts to Exchange Health Data Could Benefit from Improved Planning and Project Management

What GAO Found

While VA and DOD continue to move forward in agreeing to and adopting standards for clinical data, they have made little progress since last winter toward defining how they intend to achieve an electronic medical record based on the two-way exchange of patient health data. The departments continue to face significant challenges in achieving this capability.

- VA and DOD lack an explicit architecture—a blueprint—that provides details on what specific technologies will be used to achieve the electronic medical record by the end of 2005.
- The departments have not fully implemented a project management structure that establishes lead decision-making authority and ensures the necessary day-to-day guidance of and accountability for their investment in and implementation of this project.
- They are operating without a project management plan describing the specific responsibilities of each department in developing, testing, and deploying the electronic interface.

In seeking to provide a two-way exchange of health information between their separate health information systems, VA and DOD have chosen a complex and challenging approach—one that necessitates the highest levels of project discipline. Yet critical project components are currently lacking. As such, the departments risk investing in a capability that could fall short of what is expected and what is needed. Until a clear approach and sound planning are made integral parts of this initiative, concerns about exactly what capabilities VA and DOD will achieve—and when—will remain.