



U.S. Department of Veterans Affairs

Office of Information and Technology

Chief Information Officer
FY 2011 Annual Report



VA's Strategic Plan Framework



MISSION

- To fulfill President Lincoln's promise
- "To care for him who shall have borne the battle, and for his widow and his orphan"
 - by serving and honoring the men and women who are America's Veterans

Core Values

Integrity Commitment Advocacy Respect Excellence

Characteristics

Trustworthy Accessible Quality Innovative Agile Integrated

Guiding Principles	Strategic Goals	16 Major Initiatives
<i>People-centric</i>	<i>Improve the quality and accessibility of health care, benefits, and memorial services while optimizing value.</i>	<ul style="list-style-type: none"> • Eliminate Veteran homelessness • Enable 21st century benefits delivery and services • Automate GI Bill benefits • Create Virtual Lifetime Electronic Record by 2012 • Improve Veterans' mental health • Build VRM capability to enable convenient, seamless interactions • Design a Veteran-centric health care model to help Veterans navigate the health care delivery system and receive coordinated care • Enhance the Veteran experience and access to health care • Ensure preparedness to meet emergent national needs • Develop capabilities and enabling systems to drive performance and outcomes • Establish strong VA management infrastructure and integrated operating model • Transform human capital management • Perform research and development to enhance the long-term health and well-being of Veterans • Optimize the utilization of VA's Capital Portfolio by implementing and executing the Strategic Capital Investment Planning (SCIP) process • Health Care Efficiency: Improve the quality of health care while reducing cost • Transform health care delivery through health informatics
<i>Results-driven</i>	<i>Increase Veteran client satisfaction with health, education, training, counseling, financial, and burial benefits and services.</i>	
<i>Forward-looking</i>	<i>Raise readiness to provide services and protect people and assets continuously and in time of crisis.</i>	
	<i>Improve internal customer satisfaction with management systems and support services to make VA an employer of choice by investing in human capital.</i>	
20 Supporting Initiatives		

Copies of publications are available from:
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Chief Information Officer

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Office of Information and Technology
Washington, DC 20420

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Department of Veterans Affairs Major Transformational Initiatives

Eliminate Veteran homelessness.

Enable 21st century benefits delivery and services.

Automate GI Bill benefits.

Create Virtual Lifetime Electronic Records (VLER) by 2012.

Improve Veterans' mental health.

Build VRM capability to enable convenient, seamless interactions.

Design a Veteran-centric health care model and help Veterans navigate the health care delivery system and receive coordinated care.

Enhance the Veteran experience and access to health care.

Ensure preparedness to meet emergent national needs.

Develop capabilities and enabling systems to drive performance and outcomes.

Establish strong VA management infrastructure and integrated operating model.

Transform human capital management.

Perform research and development to enhance the long-term health and well-being of Veterans.

Optimize the utilization of VA's Capital Portfolio by implementing and executing the Strategic Capital Investment Planning (SCIP) process.

Health Care Efficiency: Improving the quality of health care while reducing cost.

Transforming Health Care Delivery through Health Informatics.



ERIC K. SHINSEKI
Secretary
Department of Veterans Affairs

Message from the Chief Information Officer

CIO Strategic Priorities

Customer Satisfaction
Next Generation Information Security
Product Delivery
Transparent Operational Metrics
Fiscal Management

I am pleased to present the FY 2011 Office of Information and Technology Annual Report. This report details the tremendous work our dedicated staff has undertaken to support Secretary Shinseki's goal of transforming VA into an innovative, 21st century organization that is people-centric, results-driven, and forward-looking. Information Technology is the driving force behind this transformation, and our employees are doing a great job leading the way toward meeting the Secretary's goal.

The VA IT enterprise is one of the largest consolidated IT enterprises in the world. The Office of Information and Technology (OIT) supports 153 hospitals, 853 community-based outpatient clinics, 57 benefits offices, 131 cemeteries, and 33 soldier's lots and monument sites. Our approximately 8,000 staff members support over 300,000 VA employees and more than 10 million Veterans, managing a network with over 400,000 users and 700,000 devices. Despite the challenges associated with supporting an organization as large and complex as VA, OIT provides quality customer service across the board, even increasing our customer service satisfaction index faster than anticipated.

In FY 2011, we delivered on our promises to the organization and the Veterans we serve. Our Product Development organization delivered on its software delivery commitments on time, 89% of the time, far better than industry standard. Our Service Delivery organization achieved 99.9% network and VistA uptime across our vast network. We established the Office of Architecture, Strategy, and Design, which quickly set to work to establish the Technical Reference Model and tie together VA systems into one integrated architecture. Our Information Security office provided us visibility into desktops and servers, and continued to set the standard for information protection within a large organization. Our financial organization skillfully aligned IT acquisition and spending to our rigorous Project Management Accountability System processes, increasing accountability and ensuring every IT dollar is well spent with minimal carryover.

OIT made significant strides in FY 2011 in transforming the VA. I encourage all OIT employees to continue their hard work as we continue to move forward in FY 2012.

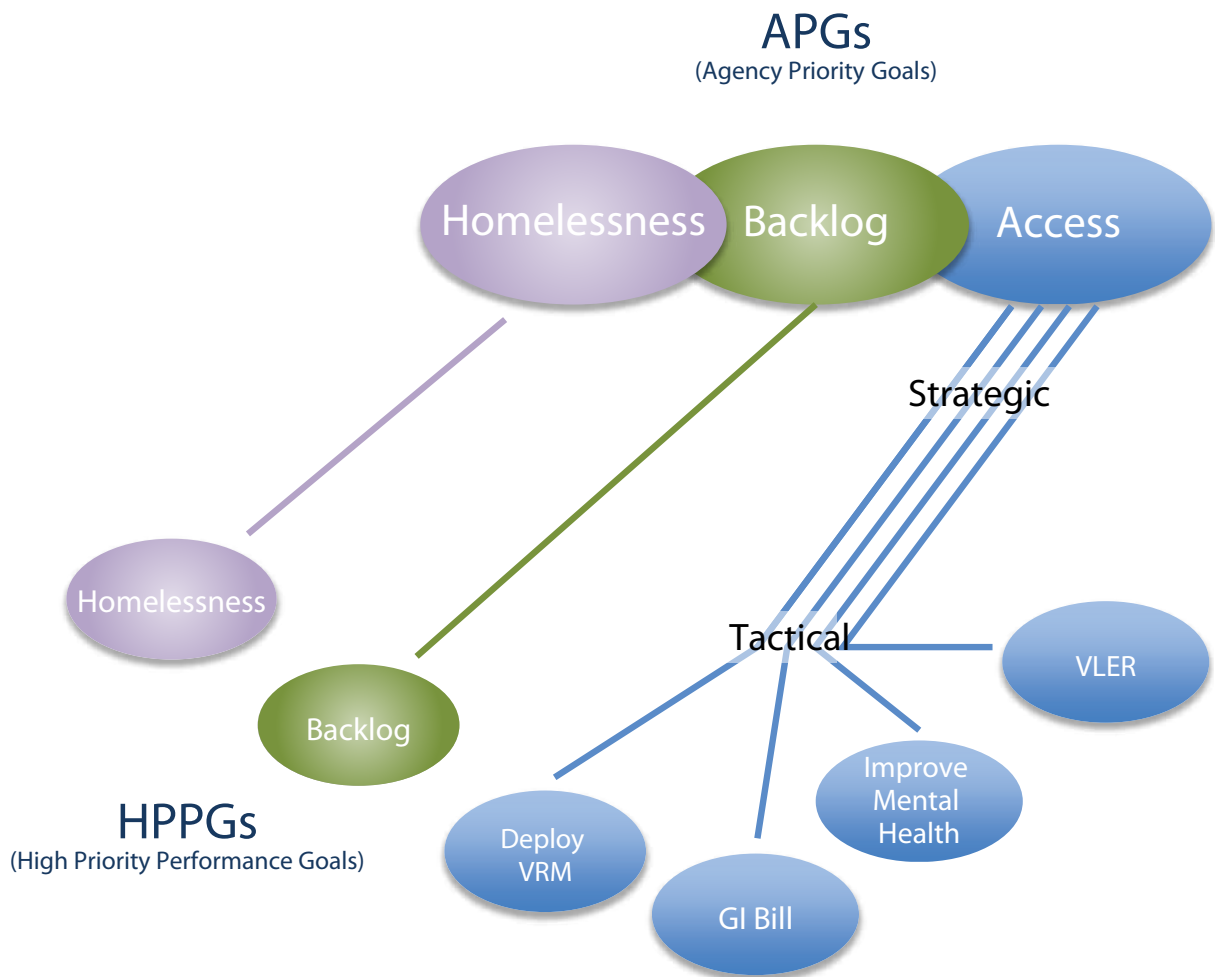


ROGER W. BAKER
*Assistant Secretary for
Information and Technology
Department of Veterans Affairs*

"The things we do here today will affect Veterans for the rest of their lives. You think about the service these individuals rendered to their country, and you know exactly why you do this job."

Roger Baker during an interview with AOL Government,

October 19, 2011.





Section I. Major Initiatives and Transformation

Within OIT we are delivering the necessary technology and expertise to transform VA into an innovative 21st century organization and the best IT organization in the Federal government. Our five strategic priorities provide the necessary insight to our internal VA customers so they may provide improved services and benefits to Veterans and their beneficiaries. The three leading agency priority goals are the elimination of Veteran homelessness, breaking the backlog of claims, and improving access to quality care, which will significantly improve direct service delivery to Veterans and eligible beneficiaries. Our dedicated efforts to these initiatives are linked and impact all strategic initiatives.

By unifying efforts and analyzing points of convergence across VA we are able to leverage our finite resources to deliver IT solutions and remain agile to meet unexpected events.

Homelessness

VA continued to enhance outreach to homeless Veterans in FY 2011 with the assistance of information technology (IT). The National Call Center for Homeless Veterans (NCCHV) received 45,219 calls as of August 2011. Of these calls, 38,157 individuals identified themselves as Veterans, of which 23,025 were at risk of becoming homeless. The Veterans Crisis Line now has reported over 600 calls and chats per day. Here are the major steps we took that made an impact:

- ◆ Began upgrading the NCCHV software application that we implemented a year ago.
- ◆ Initiated assessment of various mobile communications devices for use by outreach employees, including a handheld tool that will track the fluid population of homeless Veterans.
- ◆ Deployed Mental Health Suite treatment planning software and implemented a national training program to standardize recovery-oriented, mental health treatment planning at all VA health care facilities.
- ◆ Provided IT enhancements to the Veterans Crisis Line, which now has a new Web site.
- ◆ Deployed the Homeless Operations Management and Evaluation System (HOMES), an online data collection system that tracks homeless Veterans as they move through VA's system of care.

Backlog

Given the sheer volume of disability claims VA receives each year, automation is necessary in meeting Veterans' expectations for quality and timeliness of claims processing. The Veterans Benefits Administration and OIT are working together to develop the Veterans Benefits Management System (VBMS), a paperless system supporting the Secretary's goal to complete Veterans' claims in less than 125 days with 98 percent accuracy. In Fiscal Year (FY) 2011, VA experienced a dramatic improvement in processing benefit claims for the GI Bill, and OIT played a pivotal role. For example, VA reduced the processing time for initial GI Bill (Chapter 33) claims from 56 to 26 days, thereby increasing productivity from processing 2,000 to 10,000 claims per day, and reduced the time process supplemental GI claims from ~48 to ~18 days.

- ◆ In January 2011, deployed Phase 1 at the Providence Regional Office (RO), successfully demonstrating the paperless processing of an initial claim.
- ◆ Launched Phase 2 in May at the Providence and Salt Lake City ROs, increasing the number of users and types of claims processes.
- ◆ Deployed VBMS-Rating application to the Providence and Salt Lake City ROs during the summer of 2011, which gave claims processors the ability to rate an original claim in a new rating system replicating RBA 2000 functionality, the current application used for disability compensation rating decisions.
- ◆ Designed and implemented a long-term solution (LTS) for Chapter 33, deploying Release 5.0 to ensure VA complies with changes mandated in legislation (Public Law 111-377). The LTS rules engine re-calculates benefits without requiring modifications to the application (e.g., system screens). This deployment is an example of how the successful implementation of the agile software development methodology accommodates rapid re-prioritization and development of new or changed system features.

Access

Improving Veteran access to care involves taking a proactive approach in reaching Veterans who are unaware of their earned benefits or have lost faith in VA. OIT is working to provide self-service capabilities to its customers, reducing the amount of time and the number of places Servicemembers and Veterans must go to find their health and benefit information. In FY 2011, OIT has made tremendous progress providing greater telehealth capabilities and improvements with Blue Button, the eBenefits portal and Veteran-centric mobile applications.

- ◆ Through the eBenefits portal, a "one stop shop" for information, Servicemembers and Veterans are able to access claim status and easily enroll for benefits and services. Added eBenefits functionality included providing information regarding benefits available from VA, Department of Defense (DoD) and other Federal agencies. The number of eBenefits registered users grew from 250,000 to 1.3 million giving users immediate access to over 41 self-service features.

- ◆ Enhanced the Blue Button capability by extracting data from the medical record, including lab reports, medications, and appointments. Blue Button allows Veterans to download their personal health information on the secure MyHealthVet website.
- ◆ Developed a Post-traumatic Stress Disorder (PTSD) Coach smartphone application providing users with tools to screen and track symptoms and link them with support services.
- ◆ Designed, procured, and deployed an additional 30 Very Small Aperture Terminal (VSAT) Mobile Veterans Centers, provisioning a 28% increase in the mobile Veteran Center service fleet to improve access for rural or remote Veterans
- ◆ Provided over 325,000 Veterans with telehealth services through Home Telehealth Clinical Video, Telehealth and Store, and Forward Telehealth technologies.
- ◆ Deployed Interactive Voice Response (IVR) nationally, allowing 2,500 Veterans to use their own cell phones to receive telehealth care and case management services.

Virtual Lifetime Electronic Record

The Virtual Lifetime Electronic Record (VLER) initiative enables VA and its partners to proactively provide the full continuum of services and benefits Veterans have earned via Veteran-centric processes made possible by effective and efficient standards-based information sharing. When President Obama announced the VLER initiative in April 2009, he recognized VLER as a necessary vehicle in the effort to deliver seamless, high-quality service to our nation's Veterans.

When VLER is fully implemented, all information needed to quickly and accurately provide services and benefits to our Servicemembers and Veterans will be exchanged electronically and proactively, putting the right information in front of the right people at the right time for them to take action. These services and benefits include health care, disability compensation, education, home loans, insurance, and other benefits provided by VA's federal government partners and by our state, local, and non-governmental partners. The information sharing made possible by VLER will enable VA to achieve other Major Initiatives, including reduction in the claims backlog and access to quality care, as well as implement VA Chief Information Officer's (CIO's) strategic priority of customer service in every part of IT.

Critical to the vision for VLER is the concept of universal registration, where the VA has an established relationship with every Veteran from initial oath to final benefit. This seamless relationship will ensure that there is no gap in the transfer of those records when a Servicemember transitions to Veteran status.

The Office of Information and Technology made significant progress in achieving VLER's goals this past year in four areas: VLER Core Services, VLER Benefits, VLER Memorials, and VLER Health.

VLER Core Services includes VLER Data Access Service (DAS), VLER Adapter, and Veterans Authorization and Preferences (VAP).

- ◆ During FY11, VLER developed initial architecture to exchange VLER health and benefits data using

VLER DAS. This will provide on-the-fly harmonization of health, benefits, and personnel data to securely and appropriately connect all data producers and consumers among DoD, VA, external partners, and within VA.

- ◆ The VLER Adapter capabilities expanded to enable sharing of clinical notes through useable PDF format, to integrate VA Enterprise Terminology Services (VETS), and to incorporate additional private provider sharing partners to further expand VA's exchange with Nationwide Health Information Network (NwHIN) partners to better serve Servicemembers and Veterans.
- ◆ VAP established initial opt-in/opt-out capability through the eBenefits portal, partially automating the authorization process for the sharing of health information with NwHIN partners. Further, Turbo VAP developed business use cases and development of a business requirement document (BRD) to enable the exchange of information from the VA to the Social Security Administration (SSA) for disability adjudication.

Within VLER Benefits are Veterans Tracking Application (VTA), which is used in the Integrated Disability Evaluation System (IDES), and the eBenefits portal.

- ◆ VTA improved data collection and reporting capabilities to track disability evaluation claims of Servicemembers and Veterans and introduced new business functions to enhance Veteran outreach programs for education and casualty benefits. This improvement enhanced VHA liaison workload tracking and reporting to support the referrals of Servicemembers and Veterans across facilities.
- ◆ Through eBenefits, Servicemembers and Veterans can access official military personnel documents, view the status of disability claims, update direct deposit information for benefits, and obtain documents such as VA-guaranteed home loan certificates of eligibility. By the end of FY11, eBenefits had more than 1 million registered users, and that number is rapidly growing.

VLER Memorial Affairs includes enhancements to the National Gravesite Locator. These enhancements allow customers to find gravesite locations whether accessed from the Web or one of 83 kiosks at VA cemeteries. For example, during the peak period of Memorial Day weekend, this enhancement enabled customers to quickly find gravesite locations of their loved ones, whether from a handheld device or a kiosk.

Within VLER Health, DoD and VA launched a health information exchange pilot in which Servicemembers' and Veterans' health information is shared electronically, securely, and privately between VA, DoD, and selected private health care facilities that are members of the NwHIN. VA exceeded its High Priority Performance Goal of 10 by operating the pilot at 12 sites by the end of FY11. In addition:

- ◆ The capabilities of Bidirectional Health Exchange (BHIE) were extended to view DoD neuropsychological assessments, imagery, and inpatient notes, resulting in improved identification of Veterans and Servicemembers with traumatic head injuries and posttraumatic stress disorder for treatment and further research to better serve those wounded, ill, and injured.
- ◆ The Clinical Data Repository/Health Data Repository (CHDR) increased the number of shared patient records for Active Dual Consumers (ADC) and completed deployment of full CHDR capabilities to all VA hospital sites. This achievement enables providers to have access to computable outpatient pharmacy and medication allergy information.



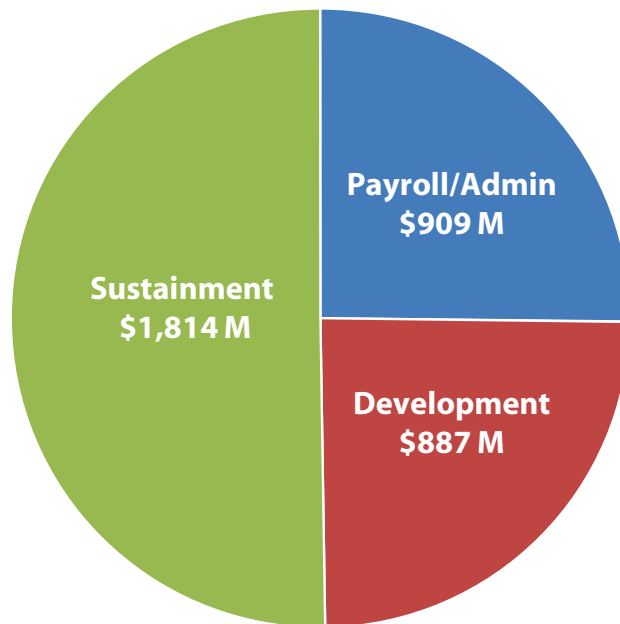
Section II. Strategic Priorities

"As perhaps the largest consolidated IT organization in the world, our goal at VA is to also be the best IT organization in the Federal government. So we are frequent users of the words "Transformation" and "Reform." Most importantly, we use the word "discipline" on a regular basis, because for Federal IT, transformation is all about instilling the disciplines practiced by effective private sector organizations: focusing on results, measuring our performance, caring about every dollar, and making hard decisions."

Roger Baker, Blog Post on CIO Council,
June 1, 2011

Office of Information and Technology

FY 2011 Available Funds (\$ Million)



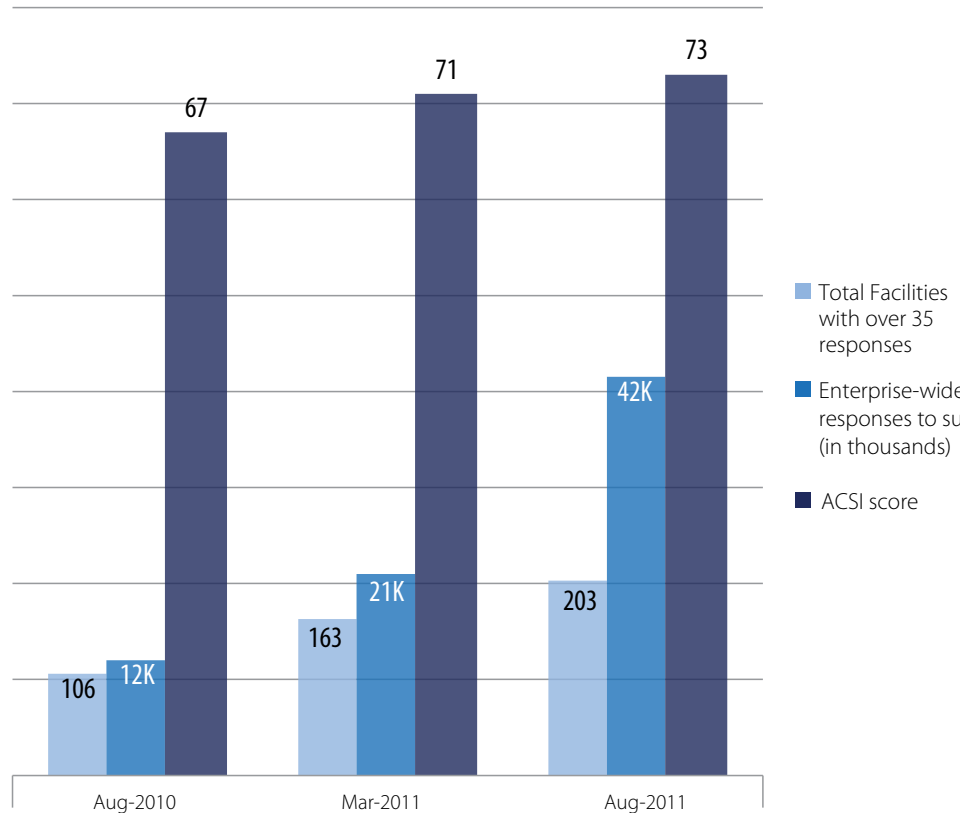
Through an eclectic blend of our strategic priorities, organizational efforts and operational achievements, we successfully executed 97% (\$3.61 billion) of our total available funding of \$3.718 billion.

Customer Service

Quality customer service is about ensuring a high-level of committed and responsive IT support to the VA employees who provide mission-critical care, benefits, and other services to our nation's Veterans.

In 2011, we launched awareness campaigns to increase participation in the OIT customer service satisfaction survey. The bi-annual survey addresses issues affecting user satisfaction with IT services, including equipment support, interactions with local information security officers, and communications, just to name a few. The campaigns were extremely effective as we received a participation rate of 90 percent among all 226 VA facilities in August, up 70 percent from the previous survey conducted in March. The performance measure used for the survey is the American Customer Satisfaction Index (ACSI), which scored VA IT at 73, up six points from the score of 67 we received on last year's survey. We are continuing to improve our IT Customer Satisfaction Index with a near term goal of achieving a 76.

IT Customer Satisfaction Surveys



Next Generation Information Security

OIT is committed to not putting a Veteran or employee’s identity at risk. In 2011, we embarked on several projects to create a 21st century, world class security program that enhances information services to Veterans, improves compliance with legislation and regulations, and increases security awareness for the user community.

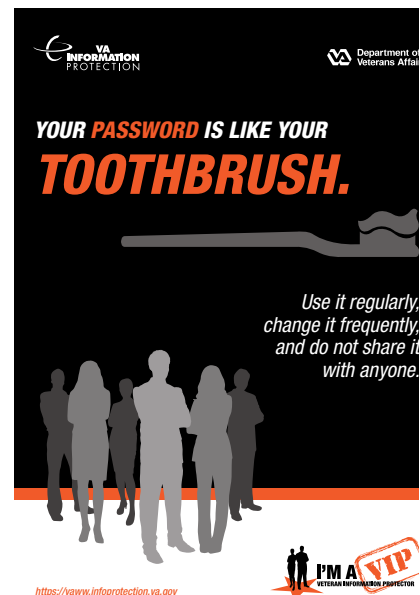


Throughout FY 2011, OIT worked to improve the security posture of the VA network by achieving full visibility of the desktops and servers, increasing the Department’s ability to proactively identify threats across the enterprise. We successfully maintained insight into the security of over 95% (approximately 350,000) of the workstations and 100% of servers within VA. In addition, we encrypted 19,000 Blackberry devices. To secure medical devices from cyber threats, we ensured each medical device on the network implemented medical device isolation architecture, using a virtual local area access network structure to prevent the devices from exposure to intrusion or viral attack.

The Office of Information Security (OIS) implemented several campaigns focused on providing tools and tips for VA employees, emphasizing the important line of defense they play in protecting employee and Veteran data against hackers, malware, and identity thieves. In September, OIS launched the “More than a Number” campaign, illustrating that each piece of personally identifiable information should be safeguarded with great care in order to prevent identity theft. In addition, OIS hosted the sixth annual Information Protection Awareness Week in April, engaging more than 3,000 staff at more than 200 locations across VA, including each facility’s privacy officer and local information security officer. The goal of this event was to increase awareness of information protection responsibilities and best practices.

Through the Citrix Access Gateway (CAG) we enabled the secure use of non-government furnished equipment for contractors requiring safe, limited access to the VA network. The CAG replaced the One-VA Virtual Private Network (VPN) remote access solution. Since going into production on April 24, 2011, remote access accounts with One-VA VPN have been reduced by approximately 87% (from 45,008 to 5,721).

The Personal Identity Verification (PIV) program issued an aggregate total of over 270,000 PIV badges since its launch. The main function of the card is to encrypt or code data to strengthen the security of both employees’ and Veterans’ information and physical access to secured areas, while using a common technical and administrative process.



Product Delivery

The Program Management Accountability System (PMAS) is a management approach requiring all IT projects to deliver customer-facing functionality on an incremental basis; providing real, useable, mission delivery capabilities for the VA staff who directly serve our nation's Veterans.

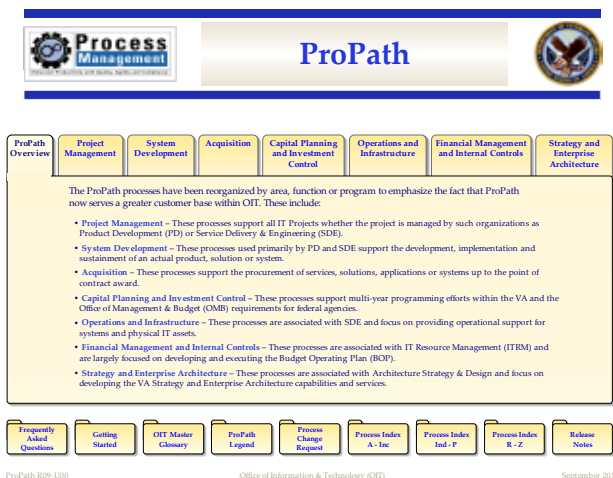
FY 2011 marked the first full year in which all IT projects were managed and tracked through PMAS, demonstrating the successful delivery of 89% of all project milestones, comparable to the IT project success rates across industry and government at approximately 32%, on average. For the twelve months that ended on September 30, 2011, VA managed 101 IT projects, established a total of 237 milestones, and successfully executed 212 of those milestones.

As our 2011 results show, VA is a trailblazer in IT product development. The real purpose of PMAS is to ensure our IT investments result in successful delivery of functionality that serves Veterans. Since 2009, VA attributes at least \$200 million in cost avoidance to implementing the PMAS program to manage projects. It also cites PMAS and other strong management disciplines as the main reason the Department has requested no increase from its 2010 IT spending level in its 2011 and 2012 budgets. VA introduced PMAS in mid-2009, and soon announced 45 IT projects would be paused and reformed. During FY 2011, projects delivered functionality that was important for Veterans' services, including a pharmacy application that enhances detection of potential adverse drug interactions, as well as enhancements to speed the processing of Post 9/11 GI Bill education claims. Through our efficient acquisition strategy, projects are receiving needed resources in a more reasonable timeframe and resources are managed centrally for a greater degree of oversight and standardization of functions.

- ◆ OIT delivered two customer-facing milestones for VBMS, utilizing \$191.4 million to support VA's goal of dramatically reducing paper processing of benefits claims, employing rules-based claims development and decision recommendations where possible. These milestones included deploying the first iteration of VBMS to Providence Regional Office in January 2011, enabling the paperless system to process its first fully automated claims. In FY 2011, 512 claims for compensation benefits were established while 137 claims were completed in this paperless environment.
- ◆ OIT delivered four Chapter 33 GI Bill customer-facing milestones, utilizing over \$85 million to support delivering Post-9/11 GI Bill benefits to Veterans, Servicemembers, and eligible dependents. These milestones met customer needs, providing timely claims processing, payments, and customer service while streamlining processing and minimizing manual claims work for field employees.



- ◆ Developed and deployed on-time and on-budget four releases into ProPath, VA OIT's comprehensive Process Management Framework. ProPath provides the OIT workforce quick access to current, proven processes, templates, and references to successfully meet customers' needs, cost, schedule, and quality requirements. The FY 2011 releases extended the scope of ProPath to include several VA OIT processes such as Acquisition, Finance, IT Strategy, and Business Intake Governance.



- ◆ In support of the Integrated Electronic Health Record (iEHR) initiative, we completed a groundbreaking performance work statement to procure the Enterprise Service Bus and Common Services Broker.
- ◆ Secured Messaging is offered in primary care at all VA medical centers and used in 30+ clinical and sub-specialty areas.
- ◆ Delivered new MyHealthVet features, including appointments, lab tests and results, allergies and adverse reactions, improved reporting capabilities, and Blue Button enhancements.



- ◆ Released the Virtual Patient Record on August 29, 2011, which subsequently was installed at all VA medical centers nationwide.

- ◆ Completed a pilot of an Apple platform Mobile Device Manager (MDM). Pilot users tested Apple mobile Operating System (iOS) devices with MDM, and examined whether MDM is sufficient to protect VA sensitive information. Outcomes were used to guide the procurement of a long-term MDM solution, currently underway, that will initially allow up to 100,000 Apple iOS devices to operate in a secure environment.
- ◆ Successfully completed the Consolidated Patient Accounts Center (CPAC) expansion project by the activation of seven CPAC revenue centers, including the creation and maintenance of over 40,000 new employee VistA accounts.
- ◆ Implemented The Artifact Information Management System, which enables VA clinicians to view DoD inpatient notes in support of Bidirectional Health Exchange (BHIE).
- ◆ Increased the number of shared patient records for Active Dual Consumers (ADC) to over 1 million and completed enterprise deployment of the full Clinical Data Repository / Health Data Repository (CHDR) capabilities to all VA hospital sites.
- ◆ Completed migration from the Learning Management System (LMS) to the Talent Management System (TMS).

Open Source

On June 30, 2011, VA began implementation of an open source project, using the Veterans Integrated Systems Technology Architecture (VistA), VA's electronic health record (EHR), as the foundation for this effort. This project will "open" the VistA source code for government, industry, and academia, harnessing their ideas and strategies to modernize VA's legacy electronic health record system. Migrating VistA to an open source framework will increase the rate of innovation for VistA development and provide Veterans quality services at a lower cost. In August, VA announced the Open Source Electronic Health Record Agent (OSEHRA) as the custodial agent, which will survey as the central governing body of the open source community. OSEHRA will oversee the community of EHR users, developers, and service providers that will deploy, use, and enhance the EHR software.

Transparent Operational Metrics

OIT is committed to transparent performance reporting and uses various tracking mechanisms to accurately report on our performance. The focus is on availability and response times to our customers, assuring our critical systems that provide daily services to Veterans are up and running. In FY 2011, OIT improved a standard set of enterprise-wide performance metrics for measuring the effectiveness of IT service delivery, and by tracking these metrics through the Rigor and Performance Report, Monthly Performance Reviews, and customer satisfaction surveys we can identify long-term goals and strategies. Metric examples include system availability, system response, and customer response.

- ◆ OIT has achieved national VistA uptime at 99.9 percent and network availability at nearly 100 percent.
- ◆ Using a performance based hiring tracking and monitoring system we added approximately 500 OIT employees, mostly in the field, that will carry out necessary functions that have positive impact daily on Veterans.
- ◆ The OIT Rigor and Performance (RAP) Report provides statistics on uptime (availability, throughput, and performance) for various systems, networks, and services across the enterprise.
- ◆ The OIT Monthly Performance Review (MPR) provides executive leadership with a concise set of performance metrics and other information to support both tactical and strategic decision-making. The compiled status reports are compared to planned progress; the leadership team can focus on actions needed to fix problems and a “cross-feed” of information to other activities.



Fiscal Management

VA prioritized its IT project and services spending in preparation for FY 2011 to efficiently allocate fund resources, maximizing accomplishments and optimizing operations. IT funds were tracked at the obligation level in FY 2011 from plan through final obligations from several management perspectives to assure Department priorities were addressed and to assure effective execution management.

Program Management Accountability System

PMAS increased project accountability by requiring IT projects to stay on schedule and within budget. This management tool ensured delivery of quality results for IT dollars invested, ensuring taxpayer dollars were spent wisely.

IT Dashboard

The IT Dashboard tracked the status of projects that comprise VA’s IT development activities, providing greater transparency into cost, schedule, and overall performance of each IT project.

Budget Tracking Tool

The Budget Tracking Tool (BTT), an integrated enterprise-wide budget planning, management and reporting system, was used to plan the annual budget at the obligation level and to manage execution and funds resource allocation through the end of the year.

Key Activities with Associated Fiscal Management

- ◆ The cancellation of the Financial and Logistics Integrated Technology Enterprise (FLITE) and Data Warehouse (DW) resulted in a FY 2011 cost avoidance of \$85 million.
- ◆ Approximately 3% reduction in recurring telecommunication costs achieved via a multipronged strategy which included transitioning to the Networx contract, consolidating telecom management, and employing effective bill scrubbing methods. During the fiscal year we successfully conducted a nationwide challenge to identify effective cost containment solutions.
- ◆ All OIT contracts for the activity to Enhance the Veteran Experience and Access to Health Care (EVEAH) were awarded, and the cost was \$5.4 million less than the planned estimate.
- ◆ In June 2011, we expanded the goal of aligning all tier one service desk support by including the alignment of all field service desks. As of October 2011, approximately 75% of the national service desks and eight customers at health care facilities and regional benefit offices were successfully realigned. This process of unification will result in a cost savings through economy of scale, reduction in the number of ticketing systems and call systems.

Integrated Electronic Health Record (iEHR)

Background



Each year more than 150,000 military members separate from military service and transition to The Interagency Program Office (IPO), established by section 1635 of the National Defense Authorization Act (NDAA) of 2008, to accelerate the exchange of health care information between the Department of Defense (DoD) and VA, will lead the Departments in the development and implementation of iEHR and the Virtual Lifetime Electronic Record

health systems, capabilities, and initiatives that follow to achieve full information interoperability.

Each year more than 150,000 military members separate from military service and transition to Veteran status. Transitioning their health care from one large health care system (DoD) to the other (VA) involves coordination of data and information between the two departments. The transformation to EHRs will improve access to health care data for both patients and providers. The IPO serves a critical role in the achievement of this effort, remaining accountable for the coordination, oversight, and implementation of EHR systems and capabilities.

When complete, iEHR will serve as a national model for capturing, storing, and sharing electronic health information for Servicemembers and Veterans from the moment they enter active duty throughout their lifetime. Since formal agreement and sponsorship in March, significant groundwork has been laid, including completion of a governance model, cost analysis, technical assessment, architectural review, knowledge sharing process recommendation, and completion in July 2011 of a Common Graphical User Interface (GUI).

On March 17, 2011, the Secretary of Veterans Affairs (SECVA) and the Secretary of Defense (SECDEF) reached an agreement to work cooperatively on the development of a common electronic health record and are planning to sunset some of the legacy systems and transition to the new iEHR.

This effort is known as iEHR since both Departments are modernizing together, using incremental development methodology to create a single repository for all the data related to a medical record, whether that data belongs to VA or DoD. iEHR will standardize the user interface, reduce redundant applications, and enhance ease of access to systems and information for both Departments.

The launch of the iEHR program team, comprised of both VA and DoD personnel, occurred in September 2011. This consolidated VA and DoD team will work together to develop and implement iEHR systems, capabilities, and initiatives, resulting in full health care information interoperability between the two Departments. Veterans' care providers in VA and DoD, along with other federal and private partners, will share health care information with one another through a Veteran/ Servicemember-centric process made possible by effective and efficient, standards-based information sharing.

In October 2011, the Deputy Secretaries of both Departments signed a new IPO charter, instilling more authority into the joint program office, and making the IPO the single point of accountability for iEHR and VLER Health. The IPO has organized teams to define various capabilities and processes for iEHR, and continues to build relationships with private health care providers pioneering the exchange of information through VLER. The VA and DoD are equal partners in this effort, and from a staffing standpoint, are contributing equally, with DoD's Assistant Deputy Chief Management Officer serving as the Interim Director, and with a VA Senior Executive serving as Interim Deputy Director of the IPO. The two Departments plan to initially staff the program office with at least 50 people from each Department with the goal of hiring the permanent IPO Director (DoD) and Deputy Director (VA) by December 31, 2011.

Although this effort is in its early planning phases, the goal is to have the joint system in place four to six years from now.

Key Activities with Associated Milestones:

- ◆ Completed deployment of the Graphical User Interface (GUI) in North Chicago on December 1, 2011.
- ◆ Engaged the Open Source Community and capitalized on innovations for DoD and VA to operationalize a Custodial Agent for iEHR in August 2011.
- ◆ To support the iEHR, DoD, and VA will define and initially staff a program organizational structure and operational construct by March 31, 2012.
- ◆ To obtain one of the infrastructure foundation elements for the iEHR, DoD and VA will award a contract for the iEHR Enterprise Bus acquisition by January 31, 2012.
- ◆ Accelerate North Chicago iEHR development by using existing Enterprise Services Bus (ESB) capability.
- ◆ To support standard data models across DoD and VA, VA will begin mapping the VA Salt Lake City Health Care System to the Health Data Dictionary (HDD) by March 31, 2012.
- ◆ To provide a shared environment for DoD/VA systems testing, DoD and VA will establish iEHR joint Development and Test Environment (DTE) by September 30, 2012.
- ◆ Created Plan of Action & Milestones (POA&M) to deliver essential customer-facing functionality in November 2011.
- ◆ Completed DoD/VA Interagency Program Office (IPO) charter in October 2011.



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