

Military Update: Health record plan may open VA to all veterans

By Tom Philpott, Special to Stars and Stripes, Pacific edition, Saturday, April 25, 2009

President Obama's ambitious plan to establish a lifetime electronic record for service members and veterans will improve delivery of benefits, speed processing of claims and, over time, open VA health care to any veteran, regardless of their medical condition or income level. VA Secretary Eric Shinseki first raised the idea of a more sophisticated electronic record system, and linked it to automatic enrollment by all veterans in the VA health system, during a House hearing in February.

This week, through a press spokeswoman, Shinseki confirmed that universal access to VA health care is integral to the administration's plan to develop as quickly as possible a 21st Century electronic record system. "Secretary Shinseki and the whole [VA] team believe that 'uniform registration' " in the VA health system "is an essential part of the lifetime virtual record," said Katie Roberts, his press secretary, in an e-mail. Shinseki and Defense Secretary Robert Gates were with the president April 9 in the Old Executive Office Building when Obama announced to an audience of veterans a "huge step toward modernizing the way VA health care is delivered and [VA] benefits are administered."

Obama described a comprehensive electronic record system, to be developed and used jointly by the Department of Defense and VA, which would hold all service-related documents, administrative and medical, on individuals from the time they enter service until "they are laid to rest." Members leaving service no longer would have to "hand carry" medical records to VA health facilities.

And VA health providers, like military counterparts, would have full electronic medical files on any member or veteran. VA claim processes likewise would have access to military administrative files, thereby reducing delays and mistakes for applicants. "And it would do all this," the president said, "with the strictest and most rigorous standards of privacy and security so our veterans can have confidence that their medical records can only be shared at their direction."

Shinseki, a retired four-star general and former Army chief of staff, told the House Veterans Affairs Committee Feb. 4 that he already was discussing with Gates a joint electronic record system. "An individual enters the ranks as a youngster and stays for several years, or stays for 20, and comes to us as a veteran. Those records ought to be transferable...accurate and complete.

Not just medical records but personal records as well, because the personnel records are also part of the disability adjudication process. If we can get to this agreement on what an electronic medical record looks like, we will solve the challenges we're wrestling with today where we have two different records," Shinseki said. With regard to medical records, Shinseki said features of the VA Vista system were preferred, even by military doctors, to the more cumbersome AHLTA system used by the Defense Department. At the same hearing,

Shinseki said mandatory enrollment in the VA health care system should be part of any move to a joint electronic record. "That alone will force the two institutions to begin to move together on what records need to be handed off," said Shinseki. Mandatory enrollment is significant because current access to VA health care is restricted. Since January 2003, veterans in Priority Group 8 – those who have no service-connected conditions and have incomes above certain government thresholds – have been barred from enrolling in the VA health care system.

About a half million Group 8s since then have applied. Congress has taken a first step to lift that ban. By July, income thresholds on new Group 8 enrollments will be raised enough to allow in about 266,000 more veterans. The Obama administration announced plans to more than double that number by 2013. But if launch of the “Virtual Lifetime Electronic Record”, as VA officials have dubbed it, would occur sooner, so too would the VA medical system to all veterans.

That’s important, Shinseki told lawmakers. “Even for those who may not have a disability claim” on separation, he said, “10 years down the road, who knows? Twenty years down the road we don’t want to be doing what we’re doing now, which is chasing details and records that are hidden away some place.” Shinseki assured Congress that he won’t allow the health system to become so crowded that access to care is choked off for the war disabled or veterans having service-connected disabilities.

Chuck Hume, deputy chief information officer in the Veterans Health Administration, said it’s too soon to predict when VA and DoD will be ready to launch a single electronic record system. “The president has stated that he wants us to pursue this as aggressively as possible and to get this vision realized for the benefit of our service member and veterans,” said Hume. “But it’s premature – without [a system] architecture, without a detailed plan – to forecast a timeline.” Linda Fischetti, VHA’s top health informatics officer, said the vision embraced here presents wonderful opportunities for veterans.

Electronic health records evolved, she said, to ease workloads within medical offices, then inside medical departments, across hospitals and then entire systems. What’s endorsed here, she said, is a system with a different purpose. “It’s not about the department. It’s not about the hospital. It’s about the person,” said Fischetti. “What do we need to move all of this information to support the best decisions and services for the person? How do we make this information available so they can partner in their health care?”