An update on VA's current tech tools, services and priorities moving forward to improve veteran health care, as outlined by VA CIO James Gfrerer.

Overseeing arguably the largest health IT modernization effort at the Department of Veterans Affairs, recently appointed VA CIO James Gfrerer is working to improve the tools and services that veterans, like himself, can access as VA health care patients.

Application Programming Interfaces

Among those efforts is the VA’s Lighthouse program, an application programming interface (API) framework that grants the use of VA data with veteran’s consent to third-party developers. Gfrerer, who also serves as the assistant secretary for VA’s OIT, noted APIs allow VA to “partner more with the rest of the community” and build more services that help veterans, he said at ACT-IAC’s Health IT Innovation event this month.

One way APIs are being used at the VA is in the creation of apps that make it simpler for veterans to schedule appointments, Gfrerer said.

Emerging Technology

The VA is also using AI to analyze data on 6 million-plus veterans enrolled in the VA's health care system and tap into a lot of undiscovered health care potential. The technology would support a range of VA’s other projects.

For instance, VA’s Million Veteran Program aims to build one of the world’s largest databases of genomic data from over a million veteran volunteers to increase medical understanding of health, lifestyle information and genetically linked diseases. AI could make analyzing gathered data more efficient, especially due to the massive quantity of information collected, to study diseases like diabetes, cancer and PTSD, Gfrerer said.
This could also lead to better services and health outcomes by improving data accuracy and the overall quality of data insights, he added.

Regarding the agency’s urgent need to address veteran suicide — which House Committee on Veterans’ Affairs Chairman Mark Takano identified as a national crisis — Gfrerer said AI could assist in VA’s REACH VET Initiative to identify “those at statistically elevated risk for suicide, hospitalization, illness and other adverse risk outcomes,” making it quicker to supply at-risk veterans with the proper mental health services and treatment plans they need.

**Tackling VA’s EHR Modernization**

The VA has struggled with a lack of stable senior leadership over the past two years, as highlighted in the Government Accountability Office’s 2019 report on federal programs that need broad reform — its “high-risk” report.

Gfrerer, who was appointed VA CIO in January, is now responsible for managing one of VA’s most critical projects — a $16-billion 10-year plan to transfer all of VA’s health records from its VistA legacy system to a shared Cerner Millennium electronic-health-record platform with the Defense Department.

The project aims to improve organization, data exchange and interoperability across VA and DOD enterprises, integrating patient data from 130 different data sets to one reliable EHR system.

“[The VA is] re-engineering around common datasets now to have more of a whole architecture around that data and around the benefits that will flow from that in the future,” Gfrerer said, emphasizing that the ongoing project is a “catalyst for fundamental change for delivering veteran-focused care.”

**MISSION Act and DST**

By June, the VA is on track to have the MISSION Act implemented. The legislation would give veterans the option of community care when the VA is unable to meet its needs in terms of wait time, service availability and other criteria.

To support the decision-making process, VA developed the Decision Support Tool, which integrates information across several legacy systems, Gfrerer explained, and helps clinicians determine veteran eligibility for community care.

The VA OIT supports the option to provide “convenient and timely care [that’s] more accessible for our veterans,” he said.
Expanding Care with Telehealth Services

In 2018, there were approximately 1 million telehealth visits — remote, patient-physician appointments conducted through secure, online portals, Gfrerer said. In fiscal year 2018, about 72,000 veterans, or roughly 13% of the overall VHA population, received care at least through one telehealth visit. That number is expected to rise, he said.

Partnering with private sector companies like T-Mobile and Verizon, the VA is working to expand these services and make data more affordable, Gfrerer explained. It is a particularly critical health-outreach strategy. Gfrerer noted 45% of veterans in the VA health care system live in rural areas, which may prevent them from traveling to distant clinics and receiving necessary treatment.

Mass App Migration to the Cloud

By 2024, Gfrerer said that VA wants 350 apps — about half of the department’s portfolio — moved to the cloud.

The VA wants to mirror the private sector’s approach, Gfrerer said, to be agile and more scalable. It would also help facilities access operations remotely and continue processing claims if, by chance, a facility is unable to physically operate, he added.

Not IT Failure, But Business Success

The VA’s digital strategy is “about adopting a business framework that revolves around customer-driven requirements,” Gfrerer said, echoing VA Secretary Robert Wilkie’s 4 priorities for the VA.

It’s also about asking how the VA can provide care comparable to and preferably better than what people expect from the private sector, Gfrerer suggested, such as “what are the best practices in the commercial space, and what can technology do to improve them?”

Still, considerable concerns remain regarding VA’s health IT modernization process, such as how the agency addresses cybersecurity threats, physician burnout and metrics measuring effectiveness in a veteran-centered approach.

But what is certainly evident is the VA’s resilient, mission-directed effort: to better serve veterans regardless of challenges and setbacks. The VA CIO expressed confidence in his agency’s ability to succeed, stating IT failure simply isn’t an option.

“Too often, transformation is only viewed as one of two outcomes: either business success or IT failure,” Gfrerer said, in closing, “but the only option for the VA is business success.”