

DVA EMR PROPOSAL 07/10/2013

Department of Veterans Affairs EMR Project Proposal/ Review Current Patient Care System and a brief summary of milestone events

See attachment with detailed timelines and events

1. DVA's current production Patient Care System was custom designed, developed, and implemented using FoxPro version 2.0 in 1991.
2. The Patient Billing System module crashed in 2004 and was repaired with the assistance of DOIT after spending over \$200K in consultant fees to fix the system.
3. After the 2004 crash, the Agency has worked diligently to implement a new integrated enterprise healthcare management system. The Agency identified each business area's requirements and outlined the related system requirements to include; admissions, patient information, patient care records, clinical care, doctor's notes, an **MDS care plan**, lab reports, drug information, appointments, the Medicare/Medicaid days, VA billing, and patient billing.
4. The Patient Care System module crashed in 2010 once again indicating the instability of the current platform. Currently the patient care system continues to experience serious problems (i.e. data loss, fragmented reporting capability and system glitches).
5. In 2012, the Agency revisited the Electronic Medical Records (EMR) business requirements and developed a scope of work to design a system that would best serve our veteran population at the Rocky Hill Vets Home. A DOIT CORE-10 purchase requisition was submitted to DOIT for review and later sourced to DAS Procurement without success.
6. The DVA's journey to design and implement a fully integrated EMR system began 10 years ago under the leadership of Dr. Linda Schwartz, Commissioner. After numerous efforts to move this mission critical initiative forward, the DVA remains the only State Healthcare Agency (exclusively serving veterans) without a fully integrated Healthcare Management System supported by any vendor in the category of "Electronic Medical Records".

Benefits to implementing our proposed EMR System

Inter-operability (how will this system inter-connect with other agencies) and/or Federal VA (file sharing)

- The proposed enterprise system that the DVA is looking to install (off the shelf "**shrink wrapped**") product), requires little to no custom development. It comes out of the box and is easily customizable to our current business requirements. **All patient demographic, patient care plan, patient information, and patient financial and billing information – all the valuable information will be readily available in the system** for other state agencies or federal VA to connect to with minimum resource outlay required.
- The current system is obsolete with very limited capability to maintain the Federal credentialed authentication requirements outlined in the VA billing rules. **The Agency generates an**

average \$8 million in VA per diem, \$14 million in Medicaid claims, \$6.5 million in DSH claims, and \$2.5 million in patient payments. The new enterprise system will capture the information electronically (without loss of data) and submit billing to VA, Medicare, and Medicaid appropriately. The cost savings in man hours will be reduced by migrating to a electronic medical record is immeasurable.

- **The Agency worked closely with the Federal VA in providing care levels and benefits to veterans in our Healthcare and Domiciliary Facilities on campus.** Utilizing the enterprise system will allow information sharing via MOA with other State Healthcare Agencies also serving the veteran population in Connecticut. Improvement in the efficiency of inter-agency communications as it relates to providing informed healthcare management services to our veterans will be achieved.
- After implementing the healthcare management solution at the DVA, **our facility will be in compliance with the HITECH Act** which requires the *establishment of an electronic health record that meets the meaningful use protocol by the year 2014.*
- The enterprise system(s) that the Agency has explored are **systems that are customized to the unique business requirements of a State Veterans Home, such as the DVA. With VA Per Diem, Medicare and Medicaid rules and requirements are already programed into the system.** Therefore, very minimum customization and upfront development costs are needed.
- **The enterprise system also has all the modules already programmed to meet the functionalities that the Agency has identified.** Thus, eliminating the legacy system problems that the Agency is faces with its current Patient Care System.
- Constant update with new rules and regulations -- **The vendor of the enterprise system will update periodically for all new rules and regulations** – this will always keep us updated and in compliance with current state and federal regulations and alleviate the burden of programming new regulations.

Estimated/ proposed timeline for implementation of DVA’s EMR solution and “to do” checklists are as follows:

- The estimated implementation time is approximately 4-6 months
- Firm up procurement logistics required qualification for the vendor selection process
- Select vendor with proper design and scope of work
- Prepare for system changeover and data transfer
- System testing
- Staff training
- Final system switch over