

# Union Calendar No. 534

115<sup>TH</sup> CONGRESS  
2<sup>D</sup> SESSION

# H. R. 4245

[Report No. 115-691]

To direct the Secretary of Veterans Affairs to submit to Congress certain documents relating to the Electronic Health Record Modernization Program of the Department of Veterans Affairs.

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## IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 3, 2017

Mr. WALZ (for himself, Mr. ROE of Tennessee, Ms. KUSTER of New Hampshire, and Mr. BERGMAN) introduced the following bill; which was referred to the Committee on Veterans' Affairs

MAY 21, 2018

Additional sponsors: Mr. GROTHMAN, Mr. MEADOWS, Mr. LAMBORN, and Mr. COFFMAN

MAY 21, 2018

Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

# **A BILL**

To direct the Secretary of Veterans Affairs to submit to Congress certain documents relating to the Electronic Health Record Modernization Program of the Department of Veterans Affairs.

1        *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4        This Act may be cited as the “Veterans’ Electronic  
5 Health Record Modernization Oversight Act of 2017”.

6 **SEC. 2. OVERSIGHT OF ELECTRONIC HEALTH RECORD**  
7 **MODERNIZATION PROGRAM.**

8        (a) PROGRAM DOCUMENTS.—Not later than 30 days  
9 after the date of the enactment of this Act, the Secretary  
10 of Veterans Affairs shall submit to the appropriate con-  
11 gressional committees the following documents concerning  
12 the Electronic Health Record Modernization Program:

- 13            (1) Integrated Master Plan.  
14            (2) Integrated Master Schedule.  
15            (3) Program Management Plan.  
16            (4) Annual and lifecycle cost estimates, includ-  
17 ing, at a minimum, cost elements relating to—  
18            (A) Federal Government labor;  
19            (B) contractor labor;  
20            (C) hardware;  
21            (D) software; and  
22            (E) testing and evaluation.  
23            (5) Cost baseline.  
24            (6) Risk Management Plan.  
25            (7) Health IT Strategic Architecture Plan.

1           (8) Transition Plan for implementing updated  
2           architecture.

3           (9) Data Migration Plan.

4           (10) System and Data Security Plan.

5           (11) Application Implementation Plan.

6           (12) System Design Documents.

7           (13) Legacy Veterans Information Systems and  
8           Technology Architecture Standardization, Security  
9           Enhancement, and Consolidation Project Plan.

10          (14) Health Data Interoperability Management  
11          Plan.

12          (15) Community Care Vision and Implementa-  
13          tion Plan, including milestones and a detailed de-  
14          scription of how complete interoperability with non-  
15          Department health care providers will be achieved.

16          (b) QUARTERLY UPDATES.—Not later than 30 days  
17          after the end of each fiscal quarter during the period be-  
18          ginning with the fiscal quarter in which this Act is enacted  
19          and ending on the date on which the Electronic Health  
20          Record Modernization Program is completed, the Sec-  
21          retary shall submit to the appropriate congressional com-  
22          mittees the most recent updated versions, if any exist, of  
23          the following documents:

24                 (1) Integrated Master Schedule.

1           (2) Program Management Plan, including any  
2           written Program Management Review material de-  
3           veloped for the Program Management Plan during  
4           the fiscal quarter covered by the submission.

5           (3) Each document described in subsection  
6           (a)(4).

7           (4) Performance Baseline Report for the fiscal  
8           quarter covered by the submission or for the fiscal  
9           quarter ending the fiscal year prior to the submis-  
10          sion.

11          (5) Budget Reconciliation Report.

12          (6) Risk Management Plan and Risk Register.

13          (c) CONTRACTS.—Not later than five days after  
14          awarding a contract, order, or agreement, including any  
15          modifications thereto, under the Electronic Health Record  
16          Modernization Program, the Secretary shall submit to the  
17          appropriate congressional committees a copy of the entire  
18          such contract, order, agreement, or modification.

19          (d) NOTIFICATION.—

20                 (1) REQUIREMENT.—Not later than 10 days  
21                 after an event described in paragraph (2) occurs, the  
22                 Secretary shall notify the appropriate congressional  
23                 committees of such occurrence, including a descrip-  
24                 tion of the event and an explanation for why such  
25                 event occurred.

1           (2) EVENT DESCRIBED.—An event described in  
2 this paragraph is any of the following events regard-  
3 ing the Electronic Health Record Modernization  
4 Program:

5           (A) The delay of any milestone or deliver-  
6 able by 30 or more days.

7           (B) A request for equitable adjustment, eq-  
8 uitable adjustment, or change order exceeding  
9 \$1,000,000 (as such terms are defined in the  
10 Federal Acquisition Regulation).

11           (C) The submission of any protest, claim,  
12 or dispute, and the resolution of any protest,  
13 claim, or dispute (as such terms are defined in  
14 the Federal Acquisition Regulation).

15           (D) A loss of clinical or other data.

16           (E) A breach of patient privacy, including  
17 any—

18           (i) disclosure of protected health in-  
19 formation that is not permitted under reg-  
20 ulations promulgated under section 264(c)  
21 of the Health Insurance Portability and  
22 Accountability Act of 1996 (Public Law  
23 104–191; 42 U.S.C. 1320d–2 note); and

1 (ii) breach of sensitive personal infor-  
2 mation (as defined in section 5727 of title  
3 38, United States Code).

4 (e) DEFINITIONS.—In this section:

5 (1) The term “appropriate congressional com-  
6 mittees” means—

7 (A) the Committees on Veterans’ Affairs of  
8 the House of Representatives and the Senate;  
9 and

10 (B) the Committees on Appropriations of  
11 the House of Representatives and the Senate.

12 (2) The term “Electronic Health Record Mod-  
13 ernization Program” means—

14 (A) any activities by the Department of  
15 Veterans Affairs to procure or implement an  
16 electronic health or medical record system to re-  
17 place any or all of the Veterans Information  
18 Systems and Technology Architecture, the Com-  
19 puterized Patient Record System, the Joint  
20 Legacy Viewer, or the Enterprise Health Man-  
21 agement Platform; and

22 (B) any contracts or agreements entered  
23 into by the Secretary of Veterans Affairs to  
24 carry out, support, or analyze the activities  
25 under subparagraph (A).

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