

115TH CONGRESS
2D SESSION

H. R. 4245

IN THE SENATE OF THE UNITED STATES

MAY 22, 2018

Received; read twice and referred to the Committee on Veterans' Affairs

AN ACT

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,*

1 **SECTION 1. SHORT TITLE.**

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

4 **SEC. 2. OVERSIGHT OF ELECTRONIC HEALTH RECORD**
5 **MODERNIZATION PROGRAM.**

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

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

1 (10) System and Data Security Plan.

2 (11) Application Implementation Plan.

3 (12) System Design Documents.

4 (13) Legacy Veterans Information Systems and
5 Technology Architecture Standardization, Security
6 Enhancement, and Consolidation Project Plan.

7 (14) Health Data Interoperability Management
8 Plan.

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

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

21 (1) Integrated Master Schedule.

22 (2) Program Management Plan, including any
23 written Program Management Review material de-
24 veloped for the Program Management Plan during
25 the fiscal quarter covered by the submission.

1 (3) Each document described in subsection
2 (a)(4).

3 (4) Performance Baseline Report for the fiscal
4 quarter covered by the submission or for the fiscal
5 quarter ending the fiscal year prior to the submis-
6 sion.

7 (5) Budget Reconciliation Report.

8 (6) Risk Management Plan and Risk Register.

9 (c) CONTRACTS.—Not later than 5 days after award-
10 ing a contract, order, or agreement, including any modi-
11 fications thereto, under the Electronic Health Record
12 Modernization Program, the Secretary shall submit to the
13 appropriate congressional committees a copy of the entire
14 such contract, order, agreement, or modification.

15 (d) NOTIFICATION.—

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

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

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

3 (B) A request for equitable adjustment, eq-
4 uitable adjustment, or change order exceeding
5 \$1,000,000 (as such terms are defined in the
6 Federal Acquisition Regulation).

7 (C) The submission of any protest, claim,
8 or dispute, and the resolution of any protest,
9 claim, or dispute (as such terms are defined in
10 the Federal Acquisition Regulation).

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

12 (E) A breach of patient privacy, including
13 any—

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

20 (ii) breach of sensitive personal infor-
21 mation (as defined in section 5727 of title
22 38, United States Code).

23 (e) DEFINITIONS.—In this section:

24 (1) The term “appropriate congressional com-
25 mittees” means—

1 (A) the Committees on Veterans' Affairs of
2 the House of Representatives and the Senate;
3 and

4 (B) the Committees on Appropriations of
5 the House of Representatives and the Senate.

6 (2) The term "Electronic Health Record Mod-
7 ernization Program" means—

8 (A) any activities by the Department of
9 Veterans Affairs to procure or implement an
10 electronic health or medical record system to re-
11 place any or all of the Veterans Information
12 Systems and Technology Architecture, the Com-
13 puterized Patient Record System, the Joint
14 Legacy Viewer, or the Enterprise Health Man-
15 agement Platform; and

16 (B) any contracts or agreements entered
17 into by the Secretary of Veterans Affairs to
18 carry out, support, or analyze the activities
19 under subparagraph (A).

Passed the House of Representatives May 21, 2018.

Attest:

KAREN L. HAAS,

Clerk.