



## *Virtual Lifetime Electronic Record for Health*

The Department of Veterans Affairs (VA) Virtual Lifetime Electronic Record (VLER) Health is a multifaceted business and technology initiative that includes a portfolio of health information sharing capabilities. The portfolio is designed to share Veterans' health information electronically, securely and privately between VA, other federal agencies, (e.g., Department of Defense) and private health care facilities, through the eHealth Exchange. The VA VLER Health Exchange Program provides secure and seamless access to Electronic Health Records (EHR) and manages the sharing and exchange of patient data.

## *eHealth Exchange Partnership Requirements*

To become an eHealth Exchange partner with VA, health organizations should meet the following requirements for bi-directional exchange:

Ability to send *available traits* in patient discovery message, such as: full legal name, date of birth, gender, Social Security Number (SSN), address, and phone number. Use of SSN improves matching

Populated Summary of Care Document (C32) data domains:

- Allergy/drug sensitivity
- Conditions (problem list)
- Patient information
- Immunizations
- Information source
- Lab results – hematology/chemistry
- Medications
- Vital signs

Populated Unstructured Document Component (C62) data domains (if available):

- Consults/referrals
- Discharge summaries
- History and physical
- Procedure notes
- Results of diagnostic studies (notes)

Plan to train at least 20 key health care providers on how to access VA data using the eHealth Exchange, in the first three months of production

EHR alerts informing clinicians of VA eHealth Exchange information available for retrieval/viewing

Single sign-on functionality between the clinician EHR interface and web portal (if applicable), where VA data will be available

EHR has the capability to “*pre-fetch*” Veteran health data, prior to scheduled appointments

*Planned for FY2014 and 2015:*

- Upgrade to CONNECT 4.2
- Upgrade to 2011 eHealth Exchange Specs
- Upgrade to Consolidated Clinical Document Architecture

For more information, contact:

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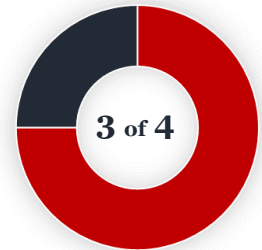




# VA VLER Health Exchange Value Proposition

*Did you know that three of four Veterans use private health care providers?<sup>1</sup>*

VLER Health ensures enrolled Veterans receive improved and coordinated care between their VA and Non-VA health care providers. This is accomplished by **providing the capability for sharing electronic health data in structured, standardized formats, using national specifications.**



## Partnership Steps

1. Production eHealth Exchange on-boarding completed
2. VA VLER Health Partner Business Survey completed
3. VA VLER Partner Integration Testing begins
4. VA VLER Partner Integration Testing completed
5. Partner Business Readiness Survey and Testing results reviewed
5. Meet with local VA Medical Center Director
7. Upon approval of VA medical center Director, move software capability to production
8. Production software validation
9. Implement training, education and support
10. Monitor performance, sustain and maintain mature health information exchange

## VA VLER Health

- Enables** clinicians to make more informed decisions
- Reduces** the need for patients to carry paper records between health care providers
- Provides** immediate access to additional health care information, during an emergency
- Supports** population health management

## VA VLER Health Equals

- Improved** patient care and health outcomes
- Fewer** duplicate tests
- Increased** patient safety (e.g. medication reconciliation)
- Improved** care coordination
- Saved** lives
- Timely access** to critical information
- Saved** time, money and other resources



**Over 84,500**

Opted-in Veterans

Veterans who have agreed to share their VA health information with private partners

1. Approximately three of four Veterans polled have other public and/or private health insurance for use at Non-VA providers. Per the 2010 Survey of Veteran Enrollees' Health and Reliance upon VA, VA, Office of Policy and Planning, July 2011

