

## ELECTRONIC HEALTH INFORMATION EXCHANGE FOR TREATMENT

### 1. SUMMARY OF MAJOR CHANGES: This directive:

a. Requires that Veterans Integrated Service Networks (VISNs) and Department of Veterans Affairs (VA) medical facilities use VA's electronic Health Information Exchange (eHIE) technologies as the primary method for accessing external health information in support of patient care (refer to paragraph 1).

b. Adds responsibilities for the VA medical facility Veterans Health Information Exchange (VHIE) Portal User (refer to paragraph 2.j.).

c. Adds information about the retrieval purpose of use for treatment (paragraph 3).

d. Updates training requirements for all VA medical facility staff, who are required to review patient electronic health records for the purpose of care coordination or treatment, to complete Talent Management System (TMS) Course 39342, VHIE Overview, within 120 days of new employment (refer to paragraph 5.a.).

e. Specifies that only VA medical facility VHIE Portal Users are required to complete TMS Course 39343, VHIE Portal Training, within 120 days of new employment (refer to paragraph 5.b.).

### 2. RELATED ISSUES: None.

3. **POLICY OWNER:** The Office of Health Informatics (10DH03) is responsible for the content of this directive. Questions may be referred to the Director, VHIE Program, at [VHAVHIEPublicAffairs@va.gov](mailto:VHAVHIEPublicAffairs@va.gov).

4. **LOCAL DOCUMENT REQUIREMENTS:** There are no local document creation requirements in this directive.

5. **RESCISSIONS:** VHA Directive 6371, Electronic Health Information Exchange for Treatment, dated April 30, 2019, is rescinded.

6. **RECERTIFICATION:** This VHA directive is scheduled for recertification on or before the last working day of September 2030. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

7. **IMPLEMENTATION SCHEDULE:** This directive is effective upon publication.

September 30, 2025

VHA DIRECTIVE 6371

**BY DIRECTION OF THE OFFICE OF THE  
UNDER SECRETARY FOR HEALTH**

/s/ Steven L. Lieberman, M.D., MBA, FACHE  
Acting Under Secretary for Health

**NOTE:** *All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.*

**DISTRIBUTION:** Emailed to the VHA Publications Distribution List on September 30, 2025.

**CONTENTS**

**ELECTRONIC HEALTH INFORMATION EXCHANGE FOR TREATMENT**

1. POLICY ..... 1

2. RESPONSIBILITIES ..... 1

3. RETRIEVAL FOR THE PURPOSE OF TREATMENT ..... 4

4. OVERSIGHT AND ACCOUNTABILITY ..... 5

5. TRAINING ..... 6

6. BACKGROUND ..... 6

7. DEFINITIONS ..... 6

8. RECORDS MANAGEMENT ..... 7

9. REFERENCES ..... 7

## ELECTRONIC HEALTH INFORMATION EXCHANGE FOR TREATMENT

### 1. POLICY

It is Veterans Health Administration (VHA) policy that Veterans Integrated Service Networks (VISNs) and Department of Veterans Affairs (VA) medical facilities use VA's electronic Health Information Exchange (eHIE) technologies as the primary method for accessing external health information in support of patient care and documenting community care encounters. This includes advising VA patients on the benefits of health information exchange technologies and their right to opt out of participation.

**AUTHORITY:** P.L. 104-191, 111-5; 5 U.S.C. § 552a; Executive Order 13410 (August 22, 2006).

### 2. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for:

(1) Ensuring overall VHA compliance with this directive.

(2) Supporting the Office of Health Informatics with implementation and oversight of this directive.

b. **Chief Operating Officer.** The Chief Operating Officer is responsible for:

(1) Communicating the contents of this directive to each of the VISNs.

(2) Assisting VISN Directors to resolve implementation and compliance challenges in all VA medical facilities within that VISN.

(3) Overseeing VISNS to ensure compliance with this directive.

c. **Director, Veterans Health Information Exchange Program.** The Director, Veterans Health Information Exchange (VHIE) Program, is responsible for:

(1) Ensuring that the standards specified by this directive are implemented and that corrective action is taken when noncompliance is identified.

(2) Providing program guidance and direction by:

(a) Developing the VHIE Implementation Guide and VHIE Implementation Toolkit.

(b) Developing and delivering a national training strategy and eHIE product training to VISNs and VA medical facilities related to VA Exchange, VA Direct, and other eHIE tools as they become available for use.

(c) Developing the VHIE Talent Management System (TMS) module, which provides an overview of the VHIE Program and instructions for using VHIE tools to view community data.

(d) Supporting and expanding participation of community providers in the exchange of health information with VA by engaging with national Health Information Exchange (HIE) networks and frameworks, including the eHealth Exchange, Commonwell, and Carequality. **NOTE:** *Community providers are non-VA healthcare organizations (e.g., hospitals, health care systems) and professionals that provide health care for VA patients.*

(e) Implementing workflows involving VA medical facility clinical staff, VHIE staff, and community partners, utilizing VA Direct for communication between VA medical facilities and community providers. Workflow examples include using VA Direct to share patient electronic health records with community providers in support of clinical referrals, request for services (RFS), and care coordination.

(f) Developing and providing to VISNs the VHIE VISN Quarterly Report, which summarizes progress toward eHIE adoption goals within the VISN.

d. **Veterans Integrated Service Network Director.** The VISN Director is responsible for:

(1) Ensuring that all VA medical facilities within the VISN comply with this directive and informing the Under Secretary for Health and the Chief Operating Officer when barriers to compliance are identified.

(2) Overseeing corrective actions that address noncompliance at the VISN and VA medical facilities within the VISN.

e. **VA Medical Facility Director.** The VA medical facility Director is responsible for:

(1) Ensuring overall VA medical facility compliance with this directive and taking corrective action if noncompliance is identified.

(2) Serving as the VHIE program sponsor for the VA medical facility and associated Community Based Outreach Centers (CBOC).

(3) Designating a VA medical facility VHIE Facility Lead and ensuring that the VA medical facility VHIE Facility Lead is performing their designated duties (refer to paragraph 2.h.).

(4) Ensuring that eHIE technologies are used to support patient care in accordance with the [VHIE Implementation Guide](#) and [VHIE Implementation Toolkit](#). **NOTE:** *These are internal VA websites that are not available to the public.*

(5) Ensuring that VA medical facility staff members complete required training (refer to paragraph 5).

f. **VA Medical Facility Chief of Staff and Associate Director of Patient Care Services.** The VA medical facility Chief of Staff and Associate Director Patient Care Services are responsible for:

(1) Serving as an eHIE clinical advocate by promoting awareness, use of eHIE products by VA medical facility health care providers, and VA medical facility staff participation in eHIE training initiatives, such as VA Exchange and VA Direct training, and Joint Longitudinal Viewer (JLV) Essentials via staff meetings, email, staff intranet sites, and other communication modalities as appropriate.

(2) Designating at least one VA medical facility Clinical Champion and ensuring that their responsibilities (refer to paragraph 2.i.) are completed. **NOTE:** *The VA medical facility Chief of Staff and Associate Director Patient Care Services may designate this role to more than one position, typically based on the eHIE product (e.g. the VA medical facility Chief of Staff and Associate Director Patient Care Services may designate a VA Exchange/JLV Clinical Champion and a VA Direct Clinical Champion at their discretion).*

g. **VA Medical Facility Chief, Health Information Management.** The VA medical facility Chief, Health Information Management (HIM), is responsible for:

(1) Ensuring that release of information (ROI) processes related to VHIE capabilities are carried out in accordance with VHA Directive 1605.01, Privacy and Release of Information, dated July 24, 2023, and VHA Directive 1907.01(1), VHA Health Information Management and Health Records, dated April 5, 2021.

(2) Designating a minimum of two VA medical facility VHIE Portal users (typically ROI clerks, medical record technicians, or ROI supervisors) with access to the VHIE Portal.

(3) Ensuring changes to opt-in/opt-out preferences are entered by the VA medical facility VHIE Portal Users into the VHIE Portal.

h. **VA Medical Facility Veterans Health Information Exchange Facility Lead.** The VA medical facility VHIE Facility Lead is responsible for:

(1) Functioning as the VA medical facility point of contact between the VHIE program office, and VA medical facility staff on the overall VHIE program by referring VA medical facility staff to eHIE educational resources and responding to eHIE-related questions and concerns, and escalating them to the VHIE program office, as appropriate.

(2) Identifying area community providers for participation in VA Exchange or VA Direct.

(3) Serving as the VA medical facility point of contact for information about available eHIE resources including the VHIE Program Implementation Guide, VHIE Implementation Toolkit, and available training.

i. **VA Medical Facility Veterans Health Information Exchange Clinical Champion.** **NOTE:** *This role may be designated to more than one position, typically based on the eHIE product (e.g., The VA medical facility Chief of Staff and/or Associate Director Patient Care Services may designate a VA Exchange/JLV Clinical Champion*

and a VA Direct Clinical Champion at their discretion.). The VA medical facility VHIE Clinical Champion is responsible for:

(1) Serving as a subject matter expert on specific VHIE external interoperability products, in particular VA Exchange or VA Direct, and informing the VA medical facility staff members who as part of their duties review patient electronic health records for the purpose of care coordination or treatment of supplemental training and education, as needed, to support use of these products.

(2) Serving as the primary contact to the VHIE Engagement Coordinator on behalf of VA medical facility health care providers regarding usability, data quality, reliability, and desired enhancements for VA Exchange and VA Direct.

(3) Promoting the use of the VA Exchange and VA Direct with VA health care providers as detailed in the [VHIE Implementation Guide](#) and [VHIE Implementation Toolkit](#). **NOTE:** *These are internal VA websites that are not available to the public.*

(4) Communicating with the VHIE Engagement Coordinator about the VA medical facility health care providers' usability, data quality, reliability, and other desired enhancements for VA Exchange and VA Direct.

j. **VA Medical Facility Veterans Health Information Exchange Portal User.** The VA medical facility VHIE Portal User is responsible for:

(1) Completing TMS Course 39343, VHIE Portal Training.

(2) Entering patient participation health information sharing preferences submitted on appropriate VA forms into the VHIE Portal upon receipt.

### 3. RETRIEVAL FOR THE PURPOSE OF TREATMENT

a. The viewing of community provider health records retrieved through the VA Exchange in VA EHR products, specifically the JLV and the FEHR Millennium Outside Records MPage, is strictly limited to use for the permitted purpose of treatment. These products must not be used to view a patient's external health records for other purposes, such as VA compensation benefits determination or any other non-treatment use. Non-treatment users are not permitted to access the JLV Community Health Summaries and Documents widget or the Federal EHR Millennium Outside Records MPage to avoid inadvertently triggering requests for external health records through VA Exchange.

b. "Permitted purpose" is defined by the [Restatement II of the Data Use and Reciprocal Support Agreement \(DURSA\)](#), dated August 13, 2019. Refer to the Restatement II of the Data Use and Reciprocal Support Agreement (DURSA) Version Date: August 13, 2019. "Treatment" is defined by 45 C.F.R. § 164.501, a provision of the Health Insurance Portability and Accountability Act (HIPAA), which addresses permitted use, as "the provision, coordination, or management of healthcare and related services by one or more health care providers, including the coordination or

management of health care by a health care provider with a third party; consultation between health care providers relating to a patient; or the referral of a patient for health care from one health care provider to another.”

c. VA health care providers must primarily access community provider health records via VA Exchange in JLV and the Federal EHR Millenium Outside Records MPage and associated EHR clinical workflows, and follow VHA HIM Health Record Documentation Program Guide, as needed. The latest version of the VHA HIM Health Record Documentation Program Guide is available on the [VHA Health Information Management SharePoint](#). **NOTE:** *This is an internal VA website that is not available to the public.* Access to external (non-VA) EHR systems made available through portals does not fall under the VHIE Program governance.

#### 4. OVERSIGHT AND ACCOUNTABILITY

a. **Internal Controls.** The internal controls for this directive are:

(1) Oversight responsibilities by the Under Secretary for Health; Chief Operating Officer; Director, VHIE Program; VISN Director; VA medical facility Director; and VA medical facility Chief, HIM, as outlined in paragraph 2 of this directive.

(2) The VA medical facility Director ensures VA medical facility staff who are required to review patient electronic health records for the purpose of care coordination or treatment, specifically with access to Computerized Patient Record System (CPRS) or the Federal EHR Millennium Outside Records MPage completes required VHIE TMS training.

(3) The VA medical facility Director designates the VA medical facility VHIE Facility Lead.

(4) The VA medical facility Chief of Staff and Associate Directory Patient Care Services designates at least one VA medical facility Clinical Champion.

(5) The VA medical facility Chief, HIM, designates a minimum of two VA medical facility VHIE Portal Users.

(6) The VA medical facility Chief, HIM, ensures that the ROI processes related to VHIE capabilities are consistent with and carried out in accordance with existing VHA policies and procedures (i.e., VHA Directive 1605.01, Privacy and Release of Information, dated July 24, 2023; VHA Directive 1907.01(1), VHA Health Information Management and Health Records, dated April 5, 2021).

b. **Metrics.** The metrics in this directive that assess the directive or program effectiveness are:

(1) Compliance with eHIE TMS training requirements.

(2) Designation of a VA medical facility VHIE Facility Lead, VA medical facility VHIE Clinical Champion, and VA medical facility VHIE Portal User at all VA medical facilities.

(3) The Director, VHIE Program, developing and providing the VHIE VISN Quarterly Report to VISNs which summarizes progress toward eHIE adoption goals within the VISN.

## 5. TRAINING

a. VA medical facility staff members, who are required to review patient electronic health records for the purpose of care coordination or treatment, specifically with access to CPRS or the Federal EHR Millennium Outside Records MPage, are **required** to complete TMS Course 39342, VHIE Overview, within 120 days of new employment. These VA medical facility staff members are typically physicians, registered nurses (RN), dentists, medical support assistants, nurse managers, nurse practitioners, licensed practical nurses, and other clinical care coordinators, including the Integrated Veteran Care (IVC) staff. **NOTE:** *Though health professions trainees (HPTs) may be required to review patient electronic health records, this training requirement only applies to VA medical facility staff members. For information about required TMS courses for HPTs, consult VHA Directive 1052, Appropriate and Effective Use of VHA Employee Mandatory and Required Training, dated June 29, 2018.*

b. VA medical facility VHIE Portal Users are **required** to complete TMS Course 39343, VHIE Portal Training, within 120 days of new employment and every other year thereafter.

## 6. BACKGROUND

a. Electronic health information exchange (eHIE) is the electronic transmission of healthcare-related data between health information organizations. eHIE allows health care providers, such as physicians, nurses, pharmacists, healthcare operations staff, and patients to securely access and share patient health information, improving the speed, quality, safety, and cost of patient care and promoting population health.

b. The 2009 Health Information Technology for Economic and Clinical Health Act, as part of the American Recovery and Reinvestment Act of 2009, established the VHIE Program to enhance Veterans' access to care and facilitating the electronic exchange of Veterans' health information between VA, other Federal agencies, health information exchanges (HIE), and community providers. The VHIE program office, under VHA, is responsible for identifying and provisioning eHIE products to support VA Exchange, VA Direct, and interoperability with certain public health registries at VHA.

## 7. DEFINITIONS

a. **Electronic Health Record.** EHR is the digital collection of patient health information resulting from clinical patient care, medical testing, and other care-related activities. Authorized VA health care providers may access EHR to facilitate and document medical care. **NOTE:** *EHR comprises existing and forthcoming VA software.*

*The purpose of this definition is to adopt a short, general term to use in VHA national policy in place of software-specific terms while VA transitions platforms.*

b. **Federal Electronic Health Record.** For purposes of this directive, the Federal EHR refers to the single, common EHR being implemented by Department of Defense (DoD), VA, and other Federal partners. Within VA, the Federal EHR is being deployed under the VA Electronic Health Record Modernization (EHRM) program. Both VA Exchange and VA Direct capabilities are available within the Federal EHR.

c. **Joint Longitudinal Viewer.** Joint Longitudinal Viewer (JLV) is an intranet application jointly created by VA and DoD, which is used as a view-only portal to review patient health information from sources including other VA medical facilities, DoD, and community providers.

d. **VA Direct.** VA Direct is an enterprise-wide tool allowing VA health care providers to securely send and receive encrypted health information with community providers who are part of the DirectTrust Network. VA clinical and administrative staff who support patient health care can access VA Direct through a web portal or the Federal EHR. External partners/providers who participate in VA's Community Care Network (CCN) must also have a corresponding Direct messaging product to send and receive messages with VA Direct.

e. **VA Exchange.** VA Exchange is an electronic platform used by VA and DoD to securely exchange patient health records with participating community providers. VA Exchange connects to national, secure networks of trusted partners that allow VA and participating community providers to electronically request and receive medical information about patients under their care. VA health care providers can access patient records received through VA Exchange using JLV and Federal EHR.

f. **Veterans Health Information Exchange Portal.** The VHIE Portal is a graphical user interface within VA Exchange. It allows VHIE Portal users to electronically record patient participation preferences, also known as "opt in" and "opt out" preferences. Once entered into the VHIE Portal, patient participation preferences are enforced by VA Exchange.

## 8. RECORDS MANAGEMENT

All records regardless of format (for example, paper, electronic, electronic systems) created by this directive must be managed as required by the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management can be addressed to the appropriate Records Officer.

## 9. REFERENCES

a. P.L. 104-191.

b. P.L. 111-5.

- c. 5 U.S.C. § 552a.
- d. 45 C.F.R. § 164.501.
- e. Executive Order 13410 §§ 2(b)-(c), 3(a)(1)-(2) (August 22, 2006).
- f. VHA Directive 1605.01, Privacy and Release of Information, dated July 24, 2023.
- g. VHA Handbook 1907.01(1), Health Information Management and Health Records, dated April 5, 2021.
- h. [Restatement II of the Data Use and Reciprocal Support Agreement \(DURSA\)](#)  
[Version Date: August 13, 2019.](#)
- i. VHA Intranet: [VHA Health Information Management SharePoint](#). **NOTE:** *This is an internal VA website that is not available to the public.*
- j. VHA Intranet: [VHIE Implementation Guide](#). **NOTE:** *This is an internal VA website that is not available to the public.*
- k. VHA Intranet: [VHIE Implementation Toolkit](#). **NOTE:** *This is an internal VA website that is not available to the public.*