MANDATORY USE OF THE ELECTRONIC HEALTH RECORD AND PROCESS TO RESOLVE IDENTIFIED CONCERNS

1. By direction of the Office of the Under Secretary for Health, Department of Veterans Affairs (VA) personnel at VA medical facilities using the Cerner Millennium Electronic Health Record (EHR) software are to fulfill their responsibilities using Cerner Millennium. A significant benefit of the deployment will be standardization of workflows and processes across VA. With this standardization, there are expected conflicts between the applications and workflows of the new EHR configuration and existing policies and other documents, such as standard operating procedures and clinical guidelines. VA and Veterans Health Administration (VHA) offices, VISNs, and deployment sites must attempt to amend these documents to resolve these conflicts before deployment. However, this will not always be possible, and some conflicts or impacts might not be apparent until after the new EHR is deployed.

2. This notice establishes exceptions from any VHA national or local policy (and any other national or local issuance, such as standard operating procedures, clinical practice guidelines) that prevents implementation of the new EHR at a deployment site.

3. EXCEPTIONS TO MANDATORY USE
   
   a. VA staff members are required to use Cerner Millennium EHR and approved workflows as the official system for health care records immediately upon deployment at their VA medical facility.

   b. The Cerner Millennium EHR and associated applications and workflows supersede any conflicting national or local policy or other national or local issuance unless the user identifies any of following concerns:

      (1) Use of the Cerner Millennium EHR application or workflow would present a safety issue to the patient, staff, care unit, or VA medical facility.

      (2) Use of the Cerner Millennium EHR application or workflow would jeopardize health information privacy. Parties to the conflict must adhere to the privacy and security standards governing protected health information (PHI) and personally identifiable information (PII) as required by law, regulation, and VA and VHA privacy directives such as the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-19, implemented by 45 CFR Parts 160 and 164), and the Privacy Act of 1974 (5 U.S.C. 552a, implemented by VA at 38 CFR 1.575-1.582), and VHA Directive 1605.01, Privacy and Release of Information, dated August 31, 2016.

      (3) Use of the Cerner Millennium EHR application or workflow would violate statutes or regulations governing VA.
(4) Use of the Cerner Millennium EHR application would significantly impact a national objective.

4. ACTIONS REQUIRED BY USER

If a user determines that an Exception to Mandatory Use, as outlined in paragraph 3.b.(1)-(4), applies, the user will:

a. Cease using the application or workflow.

b. Notify through chain of command the VA medical facility Director, Chief Medical Officer or Program Director for immediate direction.

c. Direct questions or concerns identified to the Ticket Resolution process identified by the user’s VA medical facility.

5. ACTIONS REQUIRED BY SITE LEADERSHIP

Upon notification under paragraph 4.b. of this notice, the VA medical facility Director or designee will take the following actions:

a. Decide whether the exception applies and, if it does, direct staff not to apply the application or workflow. Such direction must apply only to the extent necessary to comply with law or regulation or prevent the impact to safety, privacy, or program integrity.

b. Within 24 hours, submit an issue brief through the VISN Support Team/Network Support Office (10NS) for action by the responsible entity within 72 hours, copying the VA medical facility’s VISN; the Office of Regulatory and Administrative Affairs (ORAA) at “VHA CO 10B4 Actions”; and the Office of Electronic Health Record Modernization at “OEHRM CMIO Action.”

6. ACTIONS REQUIRED BY VHA OFFICE OF REGULATORY AND ADMINISTRATIVE AFFAIRS AND VHA RAPID RESPONSE TEAM (RRT)

a. Upon notification under paragraph 4.b. of this notice, ORAA will “track” the item and submit to RRT for action.

b. The RRT will take actions in accordance with internal processes that will be developed, tested, and shared with VA medical facility and VISN leadership before EHR deployment. Those processes will include: verifying whether the exception applies; ensuring appropriate national guidance is provided, as quickly as possible; and ensuring that such guidance is written narrowly to apply only to the extent necessary to avoid impacting safety, privacy, or program integrity.

7. All inquiries concerning this notice should be addressed to ORAA at VHACO10B4FormsandPubs@va.gov.
8. This VHA notice will be reissued on or before the last working day of March 31, 2021.

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

/s/ Richard A. Stone, M.D.
Executive in Charge