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ONE HUNDRED SEVENTEENTH CONGRESS

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WASHINGTON, DC 20515

<http://veterans.house.gov>

March 16, 2022

The Honorable Donald Remy
 Deputy Secretary
 U.S. Department of Veterans Affairs
 810 Vermont Avenue, NW
 Washington, DC 20420

Travis Dalton
 President
 Cerner Government Services
 2800 Rock Creek Parkway
 North Kansas City, MO 64117

Dear Deputy Secretary Remy and Mr. Dalton:

We are concerned that the Department of Veterans Affairs' (VA) characterizations of the impact of the ongoing Electronic Health Record Modernization data corruption incident, which reportedly began in Washington and Ohio on March 2, 2022, have been at odds with the apparent reality on the ground. Given the technical complexity of the Cerner electronic health record system's integration with multiple VA and Department of Defense systems, it is understandable how such a software error could occur. However, any attempt to soft-pedal the reality would further undermine confidence in this program.

We are also concerned by the disabling effects this data corruption incident had on multiple elements of Cerner's electronic health record system. It appears to have caused a complete work stoppage in community care referrals and revenue cycle and partial work stoppages in pharmacy and scheduling for several days. Its impacts still have not been completely resolved. This indicates system fragility.

On March 11, VA's Office of Congressional and Legislative Affairs (OCLA) informed our staffs that, "the EHR has been up and running since Friday morning, March 4 without further issues related to the March 2nd incident," and that 85 of the affected veterans' medical record charts had been reconstituted, while 120 remained to be reconstituted. The OCLA notification indicated the data corruption impacted three veterans in Walla Walla, in addition to veterans in Spokane and Columbus as originally indicated.

Contrary to the notification, the electronic health record system was not "up and running" since March 4, and some impacts persist to this day. An advisory from the Electronic Health Record Modernization Integration Office on March 4 indicated that, "the EHR remains down due to patient demographic issues" and the office "anticipates that the resolution will be completed by approximately 0800PT/1000ET [sic] today."

On March 7, staff at the Mann-Grandstaff medical center in Spokane were still being instructed by management to remain hypervigilant for mismatched records, to confirm that each veteran's record was accurate before providing care, and that the facility was still potentially operating in an unsafe environment. For at least a week, individual departments and lines of care within the medical center were permitted to decide whether to resume using the Cerner system or operate on "downtime procedures" using paper, and some opted to rely on paper.

Additionally, a notice was placed in affected veterans' records, which reads as follows: "ADVISORY: This Veteran was impacted by the Demographics Data Incident that affected records on 3/2/2033[sic]-3/3/2022. You may assure the veteran that his/her record was validated to have current and accurate demographic and clinical data as of 3/2/2022." Few, if any, veterans' records had been reconstituted when this message was created, and some impacted veterans' records remain to be reconstituted today. This advisory is untrue and misleading for the impacted veterans.

Please indicate: (1) whether you have reconstituted all affected veterans' records, and if so, when; (2) whether you have conclusively determined that no other data was corrupted, and if so, how; and (3) when all departments and service lines of all three facilities resumed using the system for all purposes.

Thank you for your attention to this important matter.

Sincerely,



Mike Bost
Ranking Member



Matthew Rosendale, Sr.
Ranking Member
Subcommittee on Technology
Modernization