May 2, 2022

The Honorable Frank Mrvan
Chairman
House Committee on Veterans' Affairs
Electronic Modernization Subcommittee
364 Cannon House Office Building
Washington, DC 20515

The Honorable Matt Rosendale
Ranking Member
House Committee on Veterans' Affairs
Electronic Modernization Subcommittee
364 Cannon House Office Building
Washington, DC 20515

Dear Chairman Mrvan and Ranking Member Rosendale:

On behalf of the American Association of Nurse Anesthesiology (AANA) I am writing today in response to your recent hearing "Next Steps: Examining Plans for the Continuation of the Department of Veterans Affairs Electronic Health Record Modernization Program" to highlight several important issues with the VHA's implementation of the Cerner system. We believe this is a critical initiative to ensure that veterans have access to the highest quality care within the Veterans Health Administration (VHA). Additionally, the movement to ensure that VHA's electronic health record (EHR) systems are compatible with those of the Department of Defense (DoD) will guarantee that veterans have consistent care throughout their transition from active duty to veteran status.

The AANA is the professional association for Certified Registered Nurse Anesthetists (CRNAs) and student registered nurse anesthetists (SRNAs). AANA membership includes more than 59,000 CRNAs and SRNAs, representing almost 90 percent of the nurse anesthetists in the United States. CRNAs are advanced practice registered nurses (APRNs) who personally administer more than 50 million anesthetics to patients each year in the United States and are among the nation's most trusted professions according to Gallup[1]. Nurse anesthetists have provided anesthesia in the United States for 150 years, and high-quality, cost-effective CRNA services are in high demand. Today, more than 1,000 CRNAs serve in the Veterans Health Administration (VHA), providing the highest quality care to our nation's veterans and practice in every setting and with every patient population. CRNAs have historically provided much of the anesthesia to our active-duty military in combat arenas since World War I and predominate in veterans' hospitals and the U.S. Armed Services, where they enjoy full practice authority in every branch of the military.

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[1] Gallup "U.S. Ethics Ratings Rise for Medical Workers and Teachers (December 22, 2020), https://news.gallup.com/poll/328136/ethics-ratings-rise-medical-workers-teachers.aspx

As the VHA continues the important work of implementing their EHR system to better serve our nation's veterans, national standards of practice are a crucial component to ensuring that the EHR system implemented by the VHA is also compatible with the EHR system of the DoD. It's important that both the DoD and VHA EHR systems are compatible and have interoperability to better serve our nation's active-duty military and veterans and to ensure that there is no disruption in healthcare as active members of the military transition to veteran status. We have seen that this system can be successful with its implementation in DoD, but the VHA and Cerner need to make significant improvements to the current system within the VHA to ensure that it is best serving our veterans and the many nurses and other healthcare providers caring for them.

To ensure that the EHR systems work properly, there will need to be specific privileges set for providers working with the VHA. As the VHA's rule on national practice standards stated, "In order to be successful, VHA must standardize clinical processes with DoD. This means that all health care professionals in DoD and VHA who practice in a certain health care profession must be able to carry out the same duties and tasks irrespective of State requirements." The AANA strongly supports efforts to successfully ensure interoperability to better serve our nation's veterans.

We join with Veterans Service Organizations like AMVETS and the Veterans of Foreign Wars in supporting an electronic health record system and national standards that would allow all providers, including CRNAs to work to the top of their scope. This would also reflect current practice standards and the EHR system within the DoD, where CRNAs have full practice authority in every branch of the military. In order for the VHA's EHR system to be successful, there need to be strong national standards that ensure all veterans receive equal access to quality care, and that will ensure that different VHA sites are not unnecessarily complicated by differences in the EHR system.

In addition, the AANA supports the goal of promoting interoperability and data sharing through consensus-based and commonly recognized standards to ensure health information is available for patient care across healthcare settings. In the realm of anesthesia, we note that CRNA practice can be affected by a lack of standardization, due to CRNAs and other providers being required to collect information from a variety of sources. Having one standardized EHR system, which allows providers to work to the top of their scope, is a critical part of a successful healthcare system.

We hope to be a resource to you and the VHA as they continue this important work. We appreciate your willingness to ask the tough questions to ensure that our veterans have the access to care that they deserve. Ensuring that the VHA has strong national standards of practice that allow all providers, including CRNAs to work to the top of their scope will be a vital part of the successful implementation of the Cerner EHR system. You can reach out to AANA's Senior Director of Federal Government Affairs, Ralph Kohl at rkohl@aana.com or (202) 484-8400 if we can be of any assistance. Thank you again for your attention to this important matter.

Sincerely,

Dina Velocci, DNP, CRNA, APRN
AANA President

cc: Rep. Julia Brownley   Rep. Mike Bost
        Rep. Conor Lamb   Del. Amata Radewagen
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