

### VA Community Care June 8, 2017

# Continuity of Veteran Care during EHR Migration and beyond:

### VISTA Data Project

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### A Joint Interagency Project with the U.S. Department of Defense, Defense Health Agency















- VA-DoD Interagency Project
- Leverages DoD-developed EHR migration technology and approach
- Provides security, audit, analysis, and migration for all veteran data
- Creates Master Veteran Data Model for all veteran data
- Enables Master Veteran Data Repository for all veteran data
- Execution 2016-2018
- http://vistadataproject.info



# History of VHA/DHA Health Management Systems DHCP is the common base system

VHA: 151 hospitals; 820 clinics; 300 vet centers; + other (total 1700 care sites) DHA: 57 hospitals; 350 clinics + other

VHA: 131 VISTA systems operational (since 1981) DHA: 101 CHCS systems operational (since 1985) Total: 232 DHCP-based systems across VHA-DHA

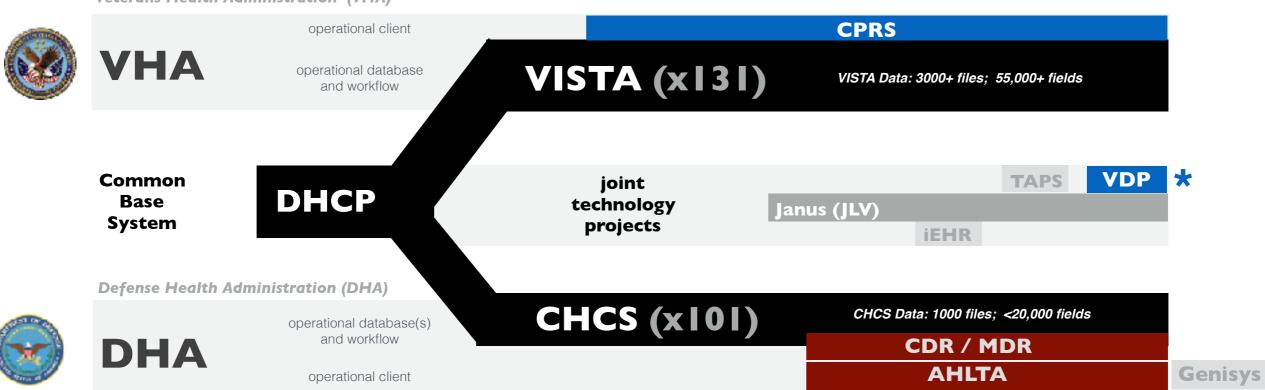
DHCP-based systems

VHA-specific interface and workflow

Common technology projects

DHA-specific interface and workflow

#### **Veterans Health Administration (VHA)**



While DHCP was initially the same in VHA and DHA, it has diverged over time. The most significant fork occurred in 2004 when DHA standardized and migrated a large portion of operational data and functions from CHCS to CDR and MDR databases. Currently the variety, volume, and function of CHCS data is approximately one-third that of VISTA.

2010 1980 1990 2000 2017 **CPRS VISTA** VHA-specific Note: Time scale **DHCP** JLV **VDP** Common **TAPS** simplified for clarity AHLTA / CDR **CHCS** Genesis DHA-specific

1981 - DHCP - Decentralized Hospital Care Program - VA Fileman database and applications [VHA]

1985 - CHCS - (DHCP renamed to) Composite Health Care System; modified for DHA use [Leidos (SAIC)]

1994 - VISTA - (DHCP renamed to) Veterans Information Systems Technology Architecture [VHA]

1997 - CPRS - Computerized Patient Record System - graphical interface and workflow [VHA]

2004 - AHLTA/ CDR/ MDR - Armed Forces Health Longitudinal Technology Application [Northrup Grumman]

2003 - Janus - Interagency viewer (renamed to JLV in 2011) [DHA-VHA]

2011 - iEHR - Integrated Electronic Health Record [ SMS ]

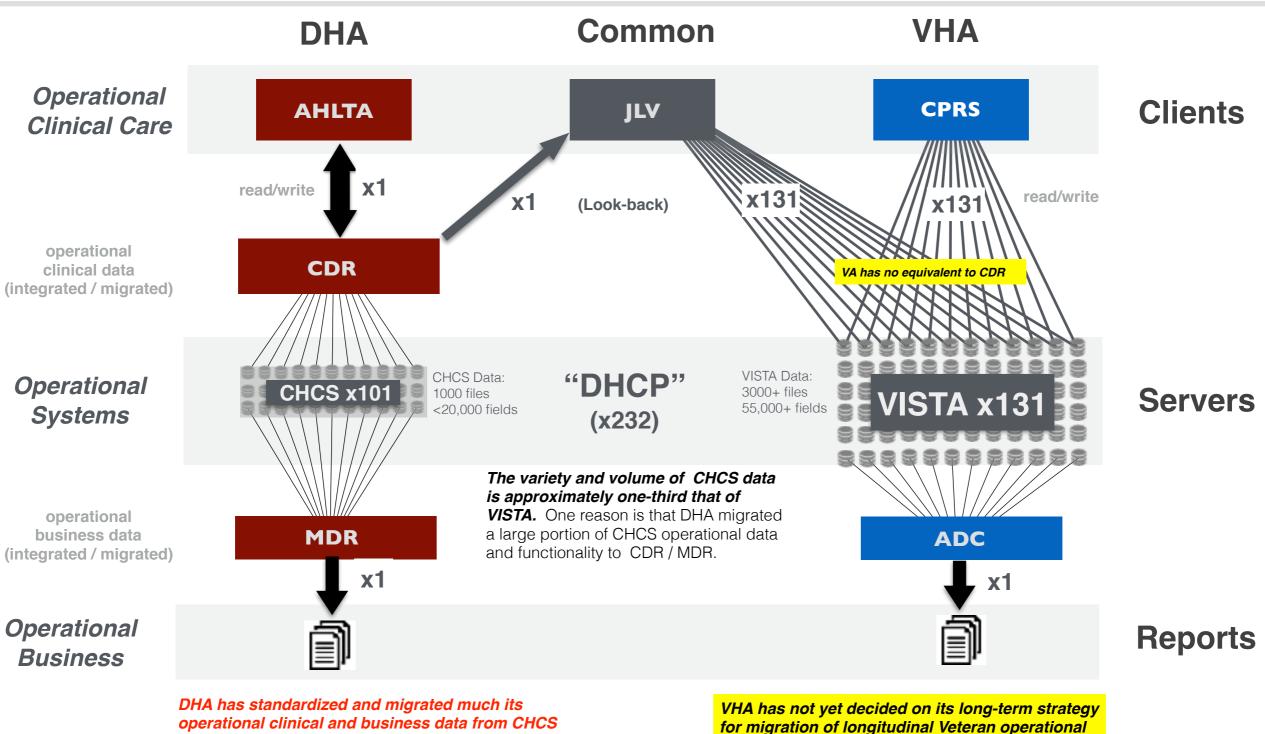
2013 - TAPS - Transition Application Plan Support [DHA-VHA]

2016 - MHS Genisys (COTS EHR - Cerner)

2016 - VDP - VISTA Data Project [DHA-VHA]



### **Current State of VHA/DHA Systems**



DHA has standardized and migrated much its operational clinical and business data from CHCS into CDR, allowing read-write access to longitudinal health data while retiring CHCS, without loss of continuity of care.

AHLTA - User Interface

CHCS - Composite Healthcare System (All operational data) MDR - Military Data Repository (Operational business data)

CDR - Clinical Data Repository (Operational clinical data

CPRS - User Interface

VISTA - VA Information Systems Architecture (All operational data)

business and clinical data. There is no equivalent

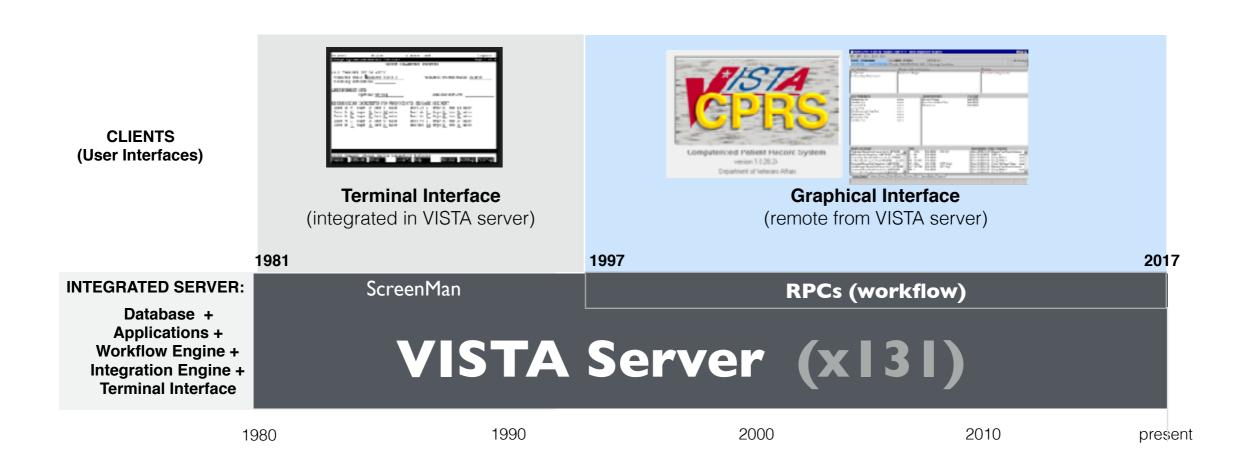
of a CDR in VHA. VA remains fully dependent on

VISTA for all clinical and business operations.

ADC - Austin Data Center (Operational business data)



### VA workflow: Captured in VISTA Server



Because the VISTA server's remote procedure call (RPC) interfaces captures all the clinical and business operational workflow of the CPRS client, migrating VISTA "server-first" captures and ensures VA continuity of care and business processes.







- Proven, stepwise VISTA Server migration
- Provides seamless continuity of care (CPRS/JLV)
- Formalizes and preserves Veteran Care Model
- Formalizes and preserves Veteran Business Model
- Allows retirement of legacy MUMPS VISTA [spaghetti]
- Provides COTS / EHR migration foundation













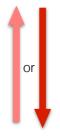


Phase I: Stepwise Server Migration while maintaining Continuity of Care

### **Current VISTAs**

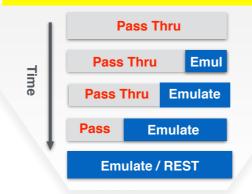
CPRS / JLV ....

RPC Interfaces (x 1000s)



Insecure
Asymmetric
Opaque
Legacy MUMPS
Code-driven
Interfaces

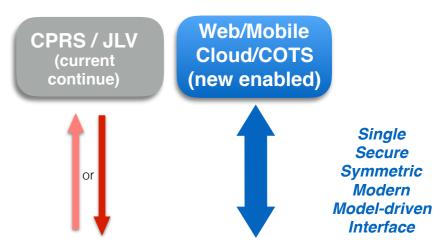
#### Stepwise, Measurable Server Migration

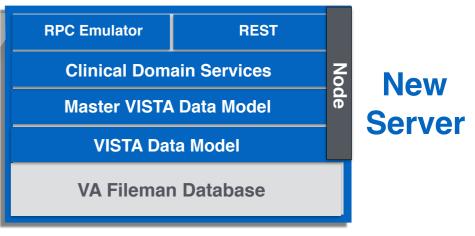


### Key Features

- · Measurable, Stepwise Migration from Legacy VISTA server
- · Leverages DoD-funded migration tooling for VA systems
- Migrates to model-driven server, based on CPRS blueprint
- · Executable Master Data Model, regression tested
- Maintains continuity of care:
  - · CPRS continues to run without change
  - JLV continues to run without change
- · Provides new National Veteran Care Services interface
- · Enables new, mobile and web clients

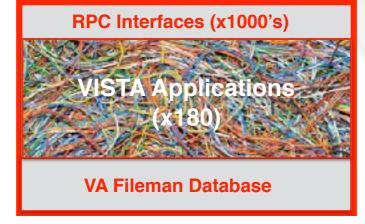
### **VISTA Data Project**





Structured VISTA Server (mainstream, extensible technology)

### VISTA Server



MUMPS-driven VISTA Server (maintenance and growth issues)

- M Legacy VISTA (MUMPS)
- Master Data Model Node.js Driven VISTA (no MUMPS)

Strategic Benefits

- · New, maintainable veteran care server based on mainstream technology
- New web and mobile clients enabled with mainstream technology
- Current clients (CPRS/JLV) supported and enforce continuity of VA Care coverage
- · May now safely incrementally retire legacy MUMPS VISTA [spaghetti]
- (Some) Clinical Domain Services may be implemented over COTS (EHR Migration)

https://vistadataproject.info

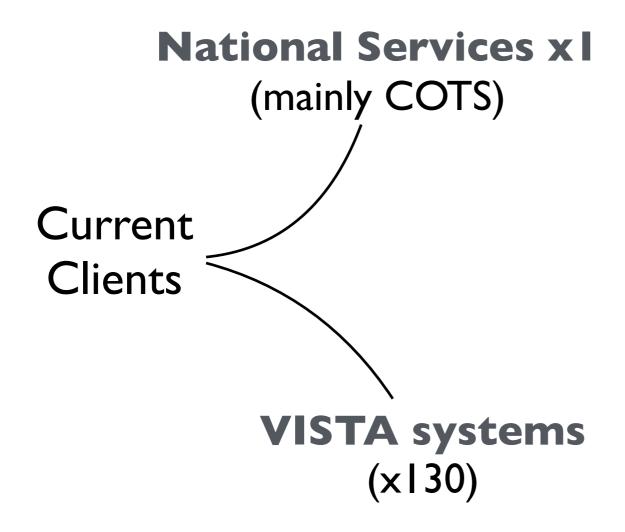
### VISTA Data Project

Phase II: National services migration to Centralized Cloud-based Services

#### Key Features - Phase II (FY18-19)

- Leverage proven stepwise VISTA Server migration
- Provides seamless continuity of care (CPRS/JLV)
- Formalizes and preserves Veteran Care Model
- Formalizes and preserves Veteran Business Model
- Allows retirement of legacy MUMPS VISTA application
- Provides national COTS / EHR migration

VISTA Server and Services Migration: Allow clients to continue to work while services are migrated from decentralized VISTA systems to a centralized national service, domain by domain.



Turn on services domain by domain

Clients continue to work on both legacy and new

Turn off services domain by domain

Key Features - Phase II (FY18-19)

- Leverage proven stepwise VISTA Server migration
- Provides COTS / EHR migration foundation

**Stepwise Server Migration to single Centralized Services** 

**Decentralized Centralized VISTA Systems Veteran Care Services** (x130)**New COTS New EHR** Web / Mobile clients **CPRS/JLV ROUTE** (service continues **RPC Emulator REST / Sockets** without change) **AUDIT** Node **Veteran Services** Master VISTA Data Model **Commercial Cloud Database** Stepwise, Measurable **Services Migration MUMPS RPCs (x1000s)** Legacy x130 Legacy Serv Time **MUMPS** Apps Legacy Services (x180)**Services** VA Fileman Database **Veteran Services** 

130 x Local Legacy VISTA Servers (insecure and due for retirement)

Model-backed Cloud Service (mainstream, modular, extensible)

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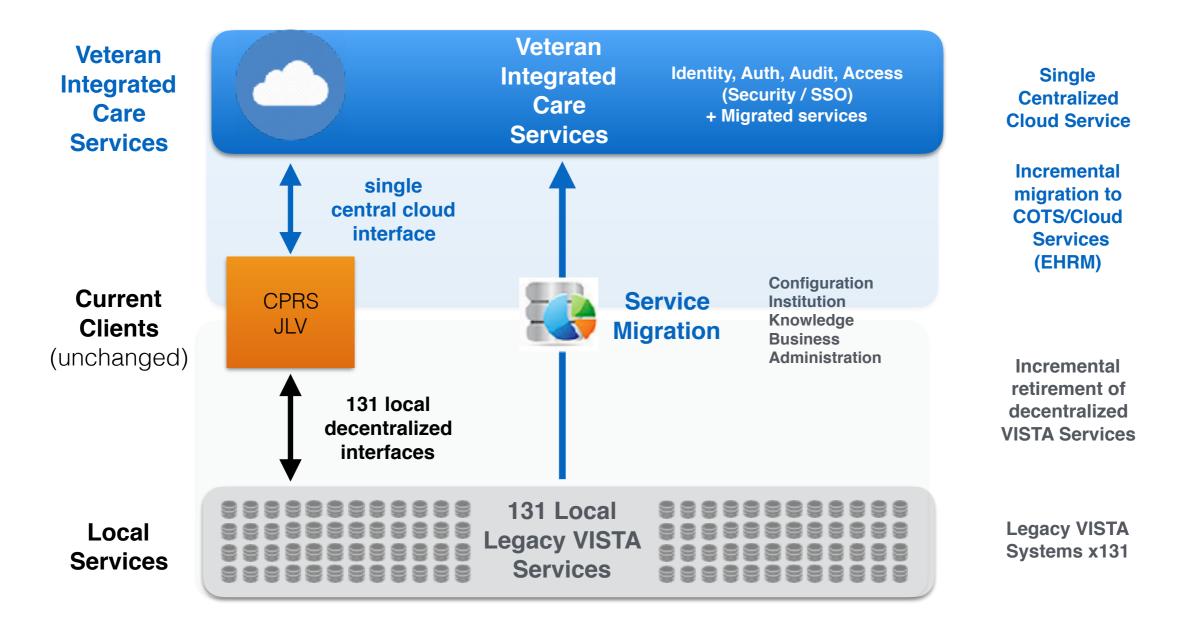
### VISTA Data Project

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- Provides national COTS / EHR migration

Approach: Incrementally deconstruct and **migrate VistA services to Best-of-Breed** *national cloud services which are backwards-compatible to existing VistA clients*; then re-route VistA clients to these new national services instead of any local VistA. SAFE: Non-disruptive. Incremental migration to Best of Breed COTS / services with no impact on current end-users. The clients remain unchanged; only the back-end services change, invisible to the end-user.





### VA EHR Migration

Migrate to COTS/Cloud-based National EHR following the proven VISTA Data Project strategy

#### **Current System**

### Local Legacy VISTA Servers

### Clients (care specifics)

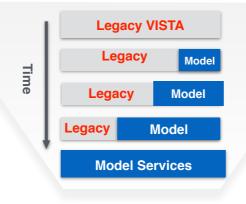
### **CPRS/JLV**

RPC Interfaces (x 1000s) Insecure
Asymmetric
Opaque
Legacy MUMPS
Code-driven
Interfaces

### **Key Features**

- VISTA Data Project's Proven Migration Strategy
- Move to Single Veteran Integrated Care System
- Integrate best-of-breed COTS
- Incrementally retire 131 VISTAs
- Maintains Continuity of Care
  - CPRS continues to run without change
  - |LV continues to run without change
- Enable new mobile and web clients

#### **Proven Migration Strategy of VDP**



#### **OneVA Care System**

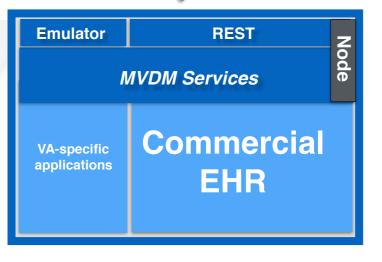
### National Veteran Care Services

CPRS / JLV (continue) New web/mobile (enabled)

Clients
(current + new)

Secure
Symmetric
Modern Node.js
Model-driven
Interface

MVDM
Services
Interface



Cloud EHR Server (x 1)

Specialized Veteran Care Services with integrated COTS EHR

# Local Servers (x131) VISTA Applications VISTA Database

**VA Proprietary** 

### Master Veteran Data Mod

Master Veteran Data Model (MVDM) Services

Industry Standard Modules (NEW)

#### Strategic Benefits

- Single Integrated Veteran Care System
- Guarantees continuity of veteran care and services during migration
- VA stops maintaining features available in COTS / Cloud EHR
- Easily add new clients and services for providers and veterans



### Resources

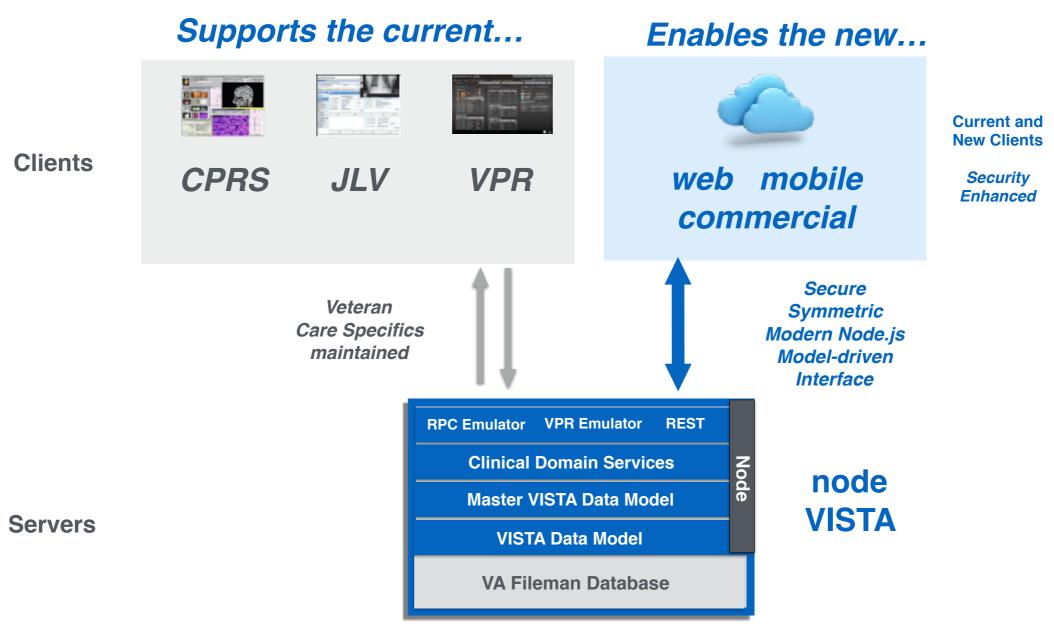
Web: vistadataproject.info

Github: github.com/vistadataproject

Contact: rafael.richards@va.gov

Stepwise Server Migration while maintaining Continuity of Care

Enables Cloud-based, COTS-integrated
National Veteran Care Services
Preserving Continuity of Care



New, Structured VISTA Server (mainstream, modular, extensible)



### VA Community Care June 8, 2017



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### VA EHR migration: A Big Data Problem

#### **Objective**

### VA needs to migrate from VISTA to a new EHR, while

- Providing continuity of all care and business processes
- Preserving all historical Veteran data both clinical and business, and
- Making all historical data accessible and computable going forward

#### **Problem**

VA has 30+ years of business and clinical data contained in 131 VISTA systems, each with a specialized, unique data model.

#### Solution

### VISTA Data Project: "Data migration follows Model migration"

- Phase I (2016-17): Make all Veteran data in all VISTA systems securely accessible, usable, and computable using a single, standardized, national Master Veteran Data Model (MVDM)
- Phase 2 (2017-18) Based on the MVDM, create a full fidelity copy of all data from all VISTA systems in a single, centralized, commercial cloudbased Master Veteran Data Repository (MVDR)



### VA EHR Modernization: A Big Data Problem

### **Objective**

### VA needs to migrate from VISTA to a new EHR, while

- Providing continuity of all care and business processes
- Preserving all historical Veteran data both clinical and business, and
- Making all operational data accessible and usable going forward

### Problem

- VA has 30+ years of business and clinical data contained in 131 VISTA systems, each with a specialized, unique data model, BUT
- VA has no master operational data repository (like DHA's CDR) to preserve and make available all clinical and business operational data to enable continuity of services during migration and beyond.

#### **Solution**

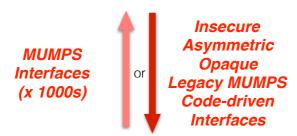
Following DHA's risk mitigation strategy: Create a full fidelity copy of all data from all current VA VISTA systems in a single, centralized, commercial, cloud-based, operational data repository - the Veterans Data Repository (VDR) - to provide continuity of care and services during EHR migration and beyond.



Stepwise measurable migration of current VISTA data and applications to the Master Veteran Data Model (MVDM) while maintaining Continuity of Care

The MVDM is derived from the native as-is Veteran Data Model of all 131 VISTA Systems and describes with full fidelity <u>all</u> operational clinical <u>and</u> business data

#### MUMPS VISTA Interfacing



MUMPS Interfaces

MUMPS Applications

VISTA Data

MUMPS-driven Server (maintenance, growth, and usability issues)

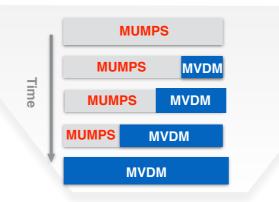
Modern, Web-standard Veterans Service Interface



MVDM

VISTA Data

Stepwise, Measurable Migration



Measurable, Stepwise Migration from Legacy VISTA server
 Leverages DoD funded EHR migration tooling for VA EHR

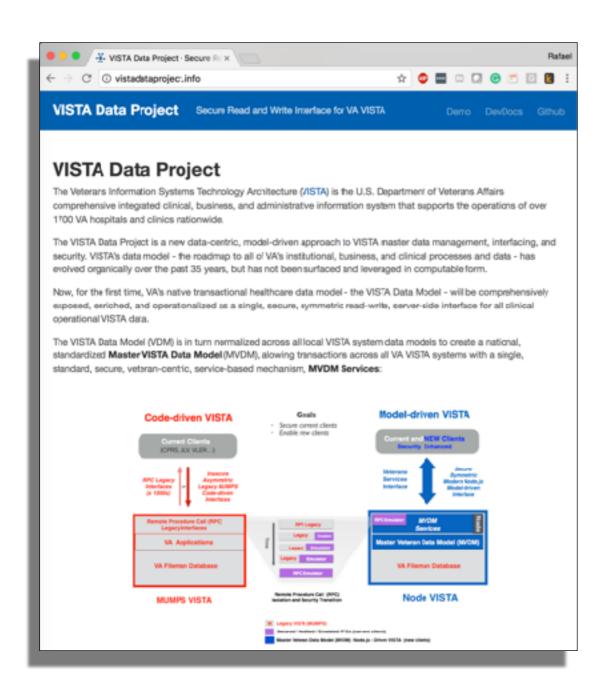
Migrates to modern, model-driven server

- Maintains continuity of care
  - CPRS and JLV continue to run without change
- Enables new National Veteran Care and Business Services
- Enables creation of comprehensive Veteran Data Repository

Structured Data Server (mainstream, modular, modern, and extensible)



Stepwise measurable migration of current VISTA data and applications to the Master Veteran Data Model (MVDM) while maintaining Continuity of Care



### Website

http://vistadataproject.info

### Demo

http://vistadataproject.info/demo

### Docs

https://github.com/vistadataproject/documents

### Contact

rafael.richards@va.gov



### Master VISTA Data Model

**Enables National Veteran Clinical and Business Services Migration** 

#### More than 50% of VISTA data is VA Business function

Clinical files

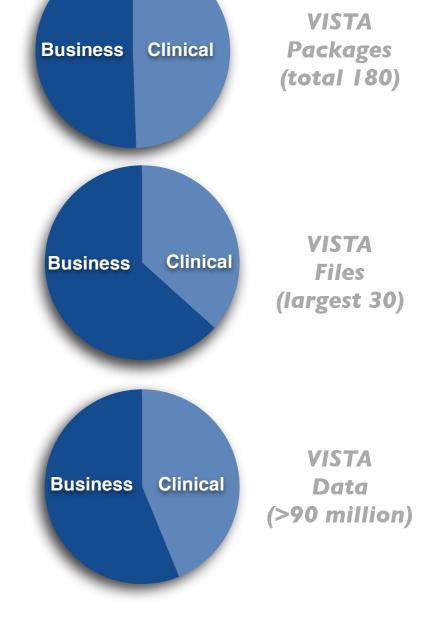
**Business files** 

40,211,696

51,593,302

#### Content of largest 30 files in a VISTA system

	#	File	Count		
Clinical	P1	IMAGE (2005)	5,728,923		
Business	P2	AR TRANSACTION (433)	5,595,597		
Clinical	P3	GMRV VITAL MEASUREMENT (120.5)	5,582,099		
Clinical	P4	V CPT (9000010.18)	5,533,193		
Business	P5	ENROLLMENT/ELIGIBILITY UPLOAD AUDIT	5,525,976		
Clinical	P6	ORDER (100)	5,243,872		
Clinical	P7	TIU DOCUMENT (8925)	4,588,982		
Clinical	P8	VISIT (9000010)	4,465,018		
Clinical	P9	OUTPATIENT ENCOUNTER (409.68)	4,385,585		
Business	P10	BCMA MEDICATION LOG (53.79)	3,901,198		
Clinical	P11	V POV (9000010.07)	3,640,303		
Clinical	P12	V PROVIDER (9000010.06)	3,446,623		
Business	P13	ACRP TRANSMISSION HISTORY (409.77)	3,122,925		
Business	P14	TRANSMITTED OUTPATIENT ENCOUNTER	2,697,388		
Business	P15	IMAGE ACCESS LOG (2006.95)	2,524,259		
Business	P16	PATIENT ENROLLMENT (27.11)	2,386,762		
Business	P17	IB COPAY TRANSACTIONS (354.71)	2,291,380		
Business	P18	BCMA REPORT REQUEST (53.69)	2,119,037		
Business	P19	INTEGRATED BILLING ACTION (350)	2,065,742		
Business	P20	CLAIMS TRACKING (356)	1,989,049		
Business	P21	ADT/HL7 PIVOT (391.71)	1,987,001		
Clinical	P22	PRESCRIPTION (52)	1,863,696		
Business	P23	ORDER CHECK INSTANCES (100.05)	1,486,470		
Business	P24	UNIT DOSE EXTRACT DATA (728.904)	1,475,497		
Business	P25	ACCOUNTS RECEIVABLE (430)	1,466,346		
Clinical	P26	V HEALTH FACTORS (9000010.23)	1,462,325		
Business	P27	IVM FINANCIAL QUERY LOG (301.62)	1,439,880		
Business	P28	IVM TRANSMISSION LOG (301.6)	1,285,905		
Business	P29	IB BILL/CLAIMS DIAGNOSIS (362.3)	1,264,869		
Business	P30	BCMA UNABLE TO SCAN LOG (53.77)	1,239,098		
		Total files	91,804,998		

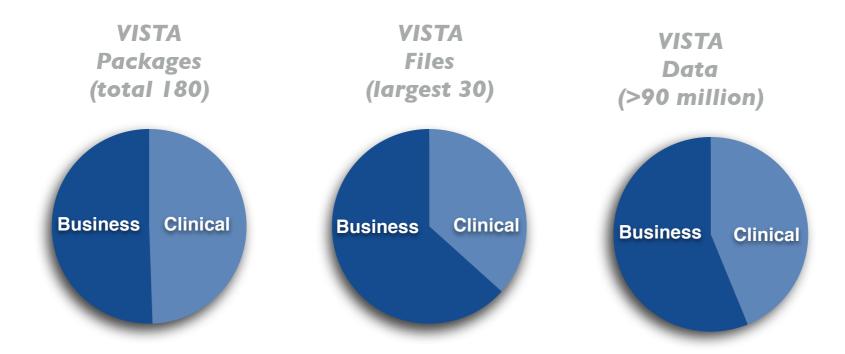




### Master VISTA Data Model

**Enables National Veteran Clinical and Business Services Migration** 

More than 50% of VISTA data is VA Business function

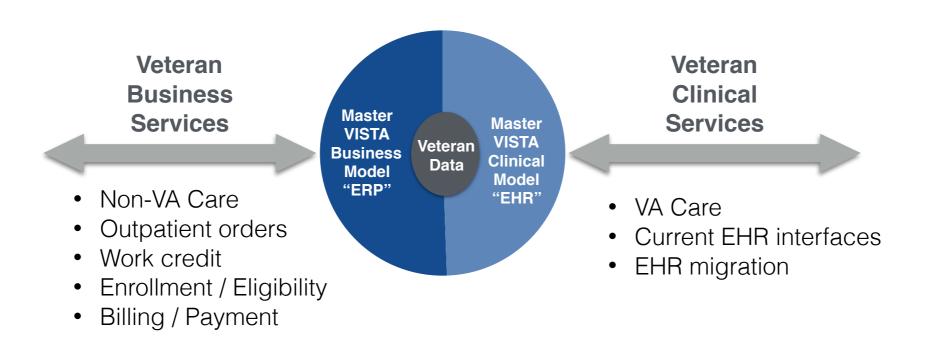


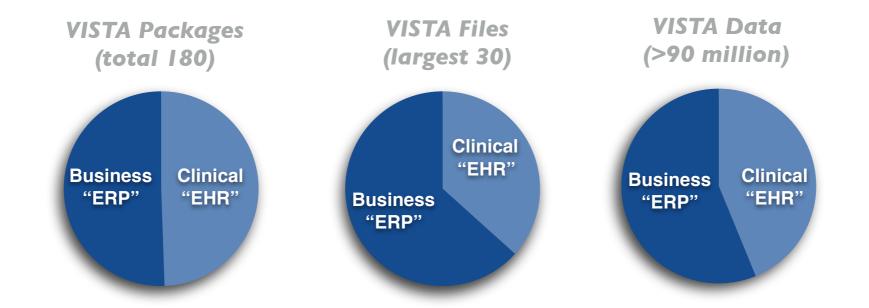


### Master Veteran Data Model

**Enables National Veteran Clinical and Business Services Migration** 

### Master VISTA Data Model



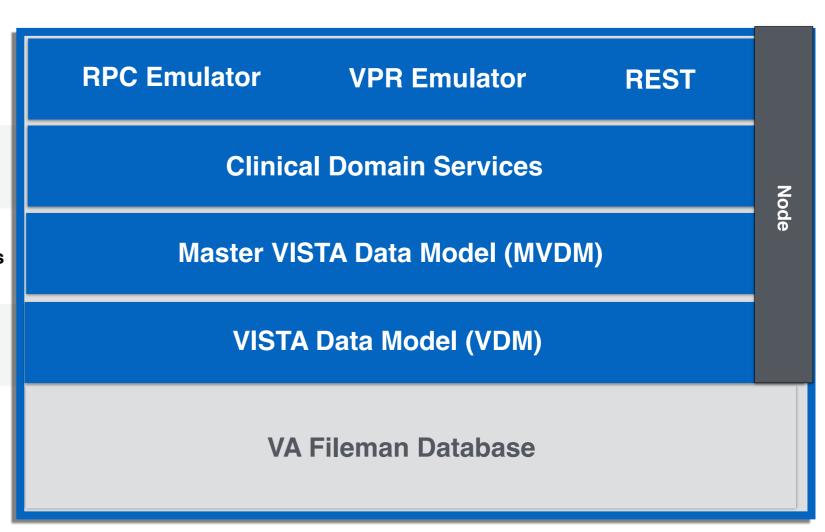




### nodeVISTA Stack

### Clean, Modular, Separation of Functionality

- Emulation and New Interfaces
- · All reduce to same service interactions
- · (Problem, Pharmacy ...) Services over MVDM
- · Patient level selection and security
- · Normalizes VDM
- Distinguishes Veteran and Patient/Clinical specifics
- · A Clean "CRUD+R"/Events paradigm
- Transparent JSON of the native model
- · Read for 100% data in FileMan
- Write Tested for MVDM covered classes
- · All interaction through formal FileMan API
- · Only FileMan changes fix Data Dictionary (DD)

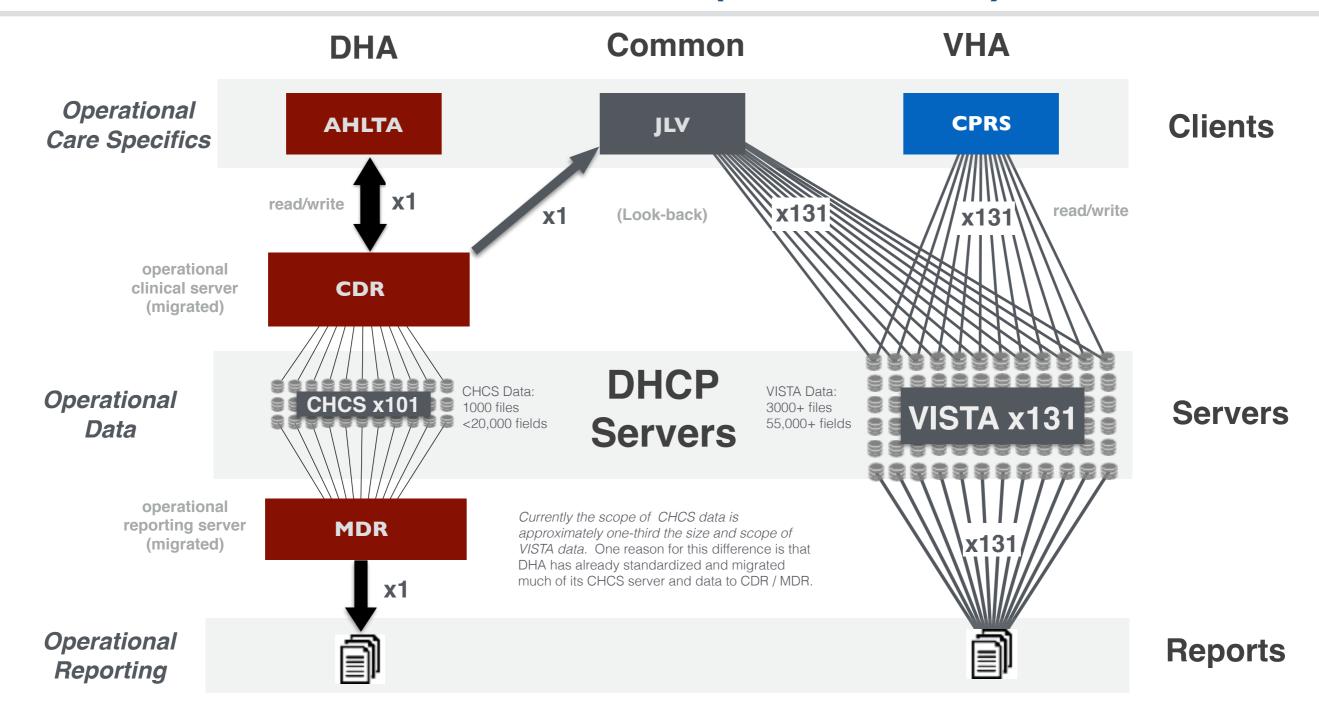


Structured VISTA Server (mainstream, modular, extensible)

Javascript/Node.js



## Continuity of Care Risks in migrating from DHCP Servers (CHCS/VISTA)



DHA migrated its operational server and data to MDR / CDR in 2004.

VHA has not migrated its operational server or data.

DHA	Source	Migration	Risk	VHA	Source	Migration	Risk
Military-specific care	AHLTA	?	?	Veteran-specific care	VISTA x131	NONE	HIGH
DoD Custom Reports	CHCS x101	MDR (read-only)	MEDIUM	VA Custom Reports	VISTA x131	NONE	HIGH
Longitudinal Care (Look-back)	CHCS x101	CDR (read-only)	LOW	Longitudinal Care (Look-back)	VISTA x131	NONE	HIGH



### **CPRS:** Blueprint for VA Longitudinal Care

CPRS <u>is</u> VISTA to Physicians, and Embodies Veteran Care specifics

### **Veteran-specific**

Built specifically around veteran care policies and practice



#### Memorandum

OCT 17 2002

From: Deputy Under Secretary for Health for Operations and Management (10N)

National Patient Record Flag for High Risk for Suicide

Network Director (10N1-23) Chief Medical Officer (10N1-23) Network Mental Health Liaisons

> The purpose of this memo is to provide guidance for the implementation of a new Category I Patient Record Flag (PRF) for High Risk for Suicide.

#### Agent Orange

Agent Orange (AO) is an herbicide that was used in Vietnam between 1962 and 1971 to remove unwanted plant life that provided cover for enemy forces. The VA has recognized the following conditions as associated with but not necessarily caused by exposure to Agent Orange:

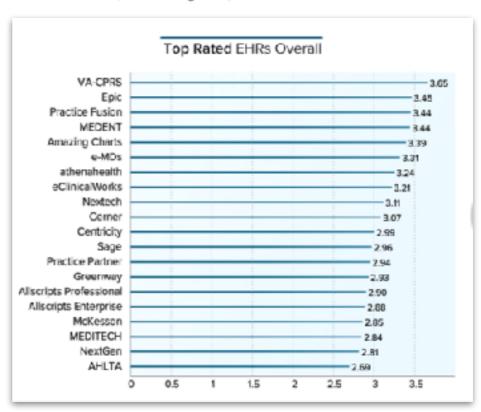
- AL Amylodosis
- Diabetes (type 2)

# CPPS Computerced Patrent Process System version 1,28,2 Dipatrent of Veloran Attan

### Physicians favorite

#### Medscape EHR Report 2016: Physicians Rate Top EHRs

Carol Peckham, Author; Leslie Kane, Sr. Director, Medicape Business of Medicine; Susanna Rosensteel, Editor 1 August 25, 2016



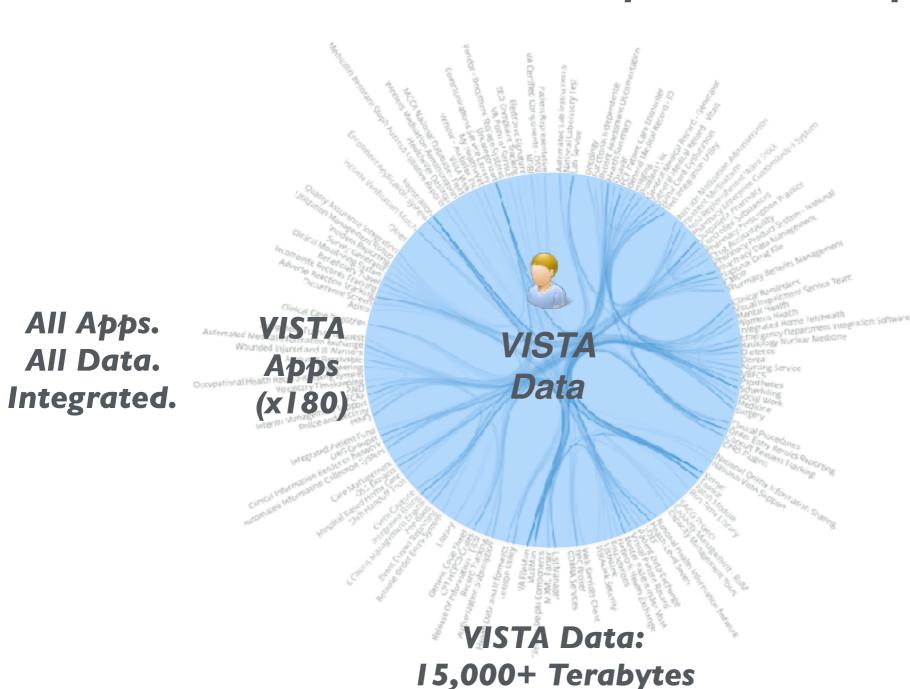
http://www.medscape.com/features/slideshow/public/ehr2016

#### **Opportunity:**

Supporting CPRS (for a period) ensures continuity of Veteran and VA-specific care and practices as VA's EHR is migrated.

### **Veterans Information Systems Technology Architecture (VISTA)**

### Single, Integrated Inpatient/Outpatient Veteran-Centric Health Information Platform



### Single Integrated Veteran-Centric Information Platform

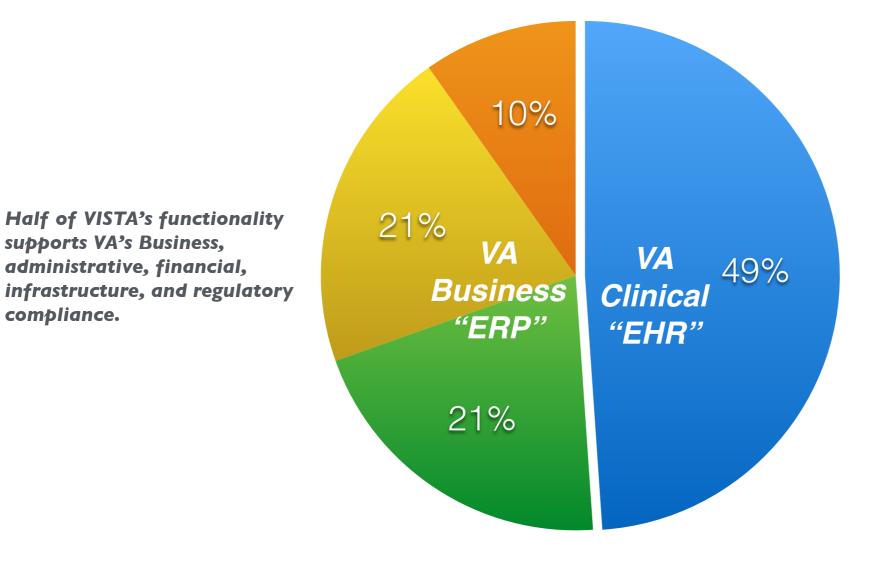
The data architecture of VISTA consists of over 180 applications for clinical care and administration integrated within a single common database.

Both business logic (Applications) and data (Database) are managed within the same data-application transaction engine. This provides the tight integration of applications to data, and to a single common integrated database.

The integration between VISTA applications (outer ring) and VISTA data (inner circle) is visualized, showing the data flow between 180 applications and the shared, single, common patient data.

### VISTA Applications

VISTA is comprised of 184 Applications. Approximately half are for VA Business functionality (administrative, financial, infrastructure, and regulatory compliance). The remaining half are VA Clinical functionality (enterprise, integrated inpatient/outpatient electronic health record).



Half of VISTA's functionality is clinical - providing the VA's enterprise integrated inpatient/outpatient electronic health record (EHR) system.

VA VISTA is comprised of 184 Applications in the following functional domains:

- Clinical ("EHR")
- Financial/Admin ("ERP")
- Infrastructure
- **Extensions**

Clinical (EHR) Financial/Admin: 38 Infrastructure: Extensions (HEV) 18

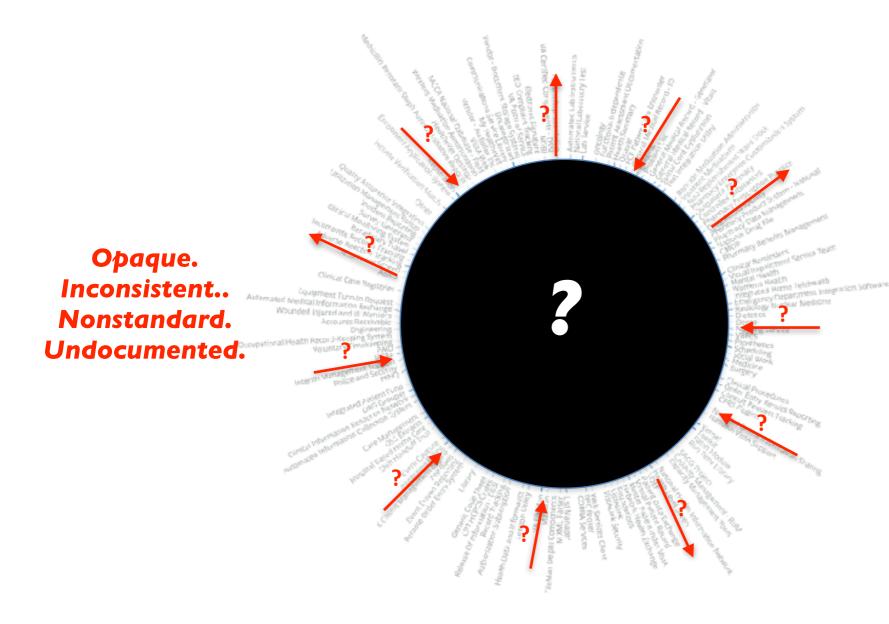
compliance.

For full list of applications and documentation, see VISTA Documentation Library:

http://www.va.gov/vdl

### **VISTA Data: Interfacing Challenges**

### Code wrappers obfuscate VISTA Data.



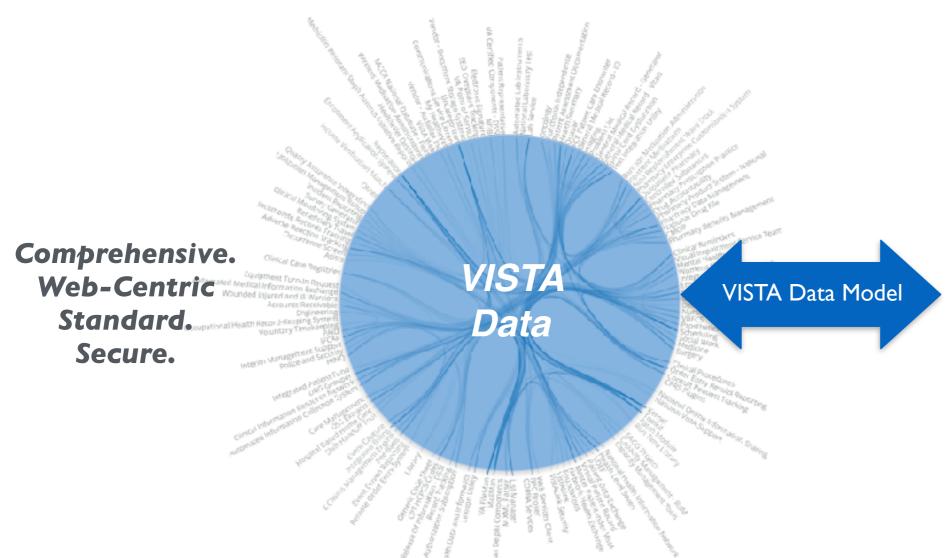
# Code-centric interfacing obfuscates VISTA data within a "Black Box"

Code-centric interfacing has no logical connection to any of the internal structures, context, or definition of the data within VISTA. Code-centric interfacing lacks any uniform method to comprehensively or securely expose or interface to VISTA data. As a result, there are thousands of hard-coded opaque, unique MUMPS interfaces called RPCs (remote procedure calls).

These MUMPS RPC "wrappers" add an additional layer of obfuscation of the native data model and structures by "encapsulation" making the system even more opaque and difficult to maintain.

### **VISTA Data: Interfacing Modernization**

### Exposing VISTA's Data Model makes data accessible



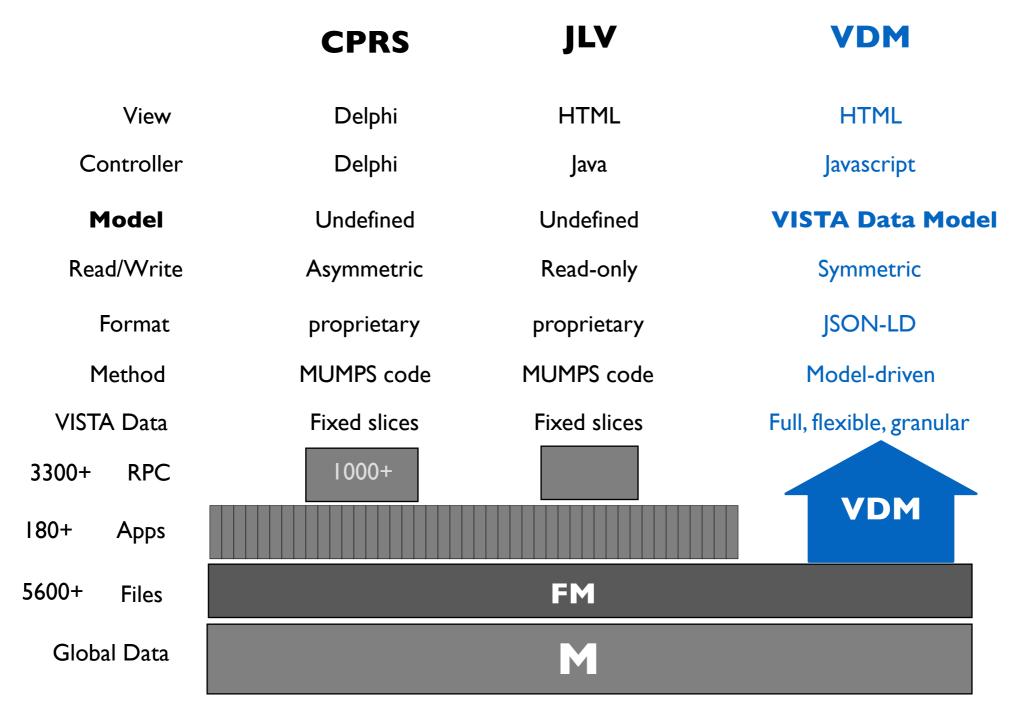
Representing VISTA's internal data model as industry-standard, machine-processable Master VistA Data Model enables external interfacing and integration at web-scale.

# Model-centric interfacing makes <u>all</u> VISTA data accessible.

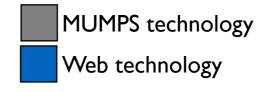
Surfacing all data, metadata, and structures *internal* to VISTA - its true, native, operational VISTA data model - allows secure read-write *external* to VISTA with a single common, industry-standard, web-centric Linked Data Model.



### **VISTA Interfacing Evolution**



VISTA Data Model (VDM) can access all data spanning 180+ applications with full granularity and definition because the fully exposed VISTA Data model logically bridges all applications through their native data dictionaries. No legacy APIs, HL7, RPCs, or MUMPS code. Just data. All of it. Defined. Structured. Secure.



### **VISTA Interfaces: Leveraging VISTA Data**

#### **Terminal Inferfaces**

#### **Graphical Interfaces:**

Full client: CPRS (full read-write transactional interface)

Thin client: JLV, VistAWeb, HMP (read-only)

#### **Data Interfaces**

RPCs - CPRS, MDWS, VPR (HMP, JLV), HEV

### **System Interfaces**

HL7

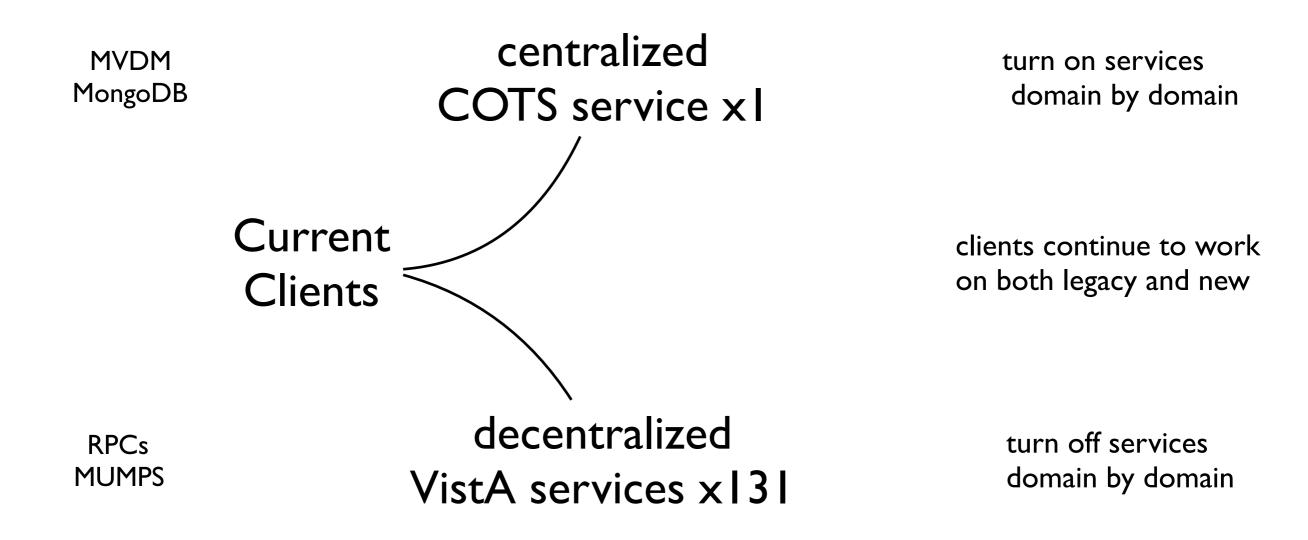
### **Data Analytics**

CDW, VINCI

For full list of VISTA interfaces, see: <a href="http://www.va.gov/vdl">http://www.va.gov/vdl</a>

### VA Migration Service:

Allow clients to continue to work while services are migrated from decentralized VistAs to centralized COTS services domain by domain



3 data entry: vitals, allergies, problems

CPOE: pharmacy, lab