

**Department of  
Veterans Affairs**

# Memorandum

Date: June 8, 2020

From: Director, Requirements Development Management, Strategic Investment Management;  
Assistant Deputy Under Secretary for Health for Health Informatics (10A7)

Subj: Final Update to Addendum to Decision Document - VistA Standardization and Virtualization  
Software Waiver Exemption and Project Extension Decision

Thru: VistA System Owner, Enterprise Portfolio Management Division (005Q)

To: Acting Associate Deputy Assistant Secretary, Enterprise Program Management Office (005Q)

1. The purpose of this final update to the Addendum is to recommend extending the current internal VistA Standardization deadline from June 30, 2020, until a transition to a permanent solution will obviate the need for these modifications.

2. Related Updated Addendum to Decision Document - VistA Standardization and Virtualization (VSV) Software Waiver Exemption and Project Extension Decision dated March 26, 2019 and July 30, 2019; Addendum to Decision Document - VistA Standardization and Virtualization (VSV) Software Waiver Exemption and Project Extension Decision dated March 26, 2019; Memorandum and Directive: Decision Document - VistA Standardization and Virtualization (VSV) Software Waiver Exemption and Project Extension Decision dated November 15, 2018; and VA Directive 6402 dated August 28, 2013.

3. In 2013, the Office of Information and Technology (OIT) and Veterans Health Administration (VHA) jointly agreed that VA Medical Centers need to be running the national standardized versions of all VistA software. This was a foundational step to prepare sites for VistA Evolution/Electronic Health Record Modernization. VA Directive 6402 was released and the Software Modification Waiver Committee completed its requirements stated in Section 3.f. of the Directive. In November of 2018, OIT signed *Decision Document – VistA Standardization and Virtualization (VSV) Software Waiver Exemption and Project Extension Decision*, which designated specific VistA software waivers as “exempt” from VistA software standardization work until OIT resources become available to remediate code and/or as priorities change; or until the Cerner platform is rolled out, and 2) extend the internal VistA Standardization deadline of December 31, 2018, until the conclusion of second quarter of Fiscal Year 2019, so ongoing standardization efforts could be released nationally, was signed by the Director, Health Product Support, OIT. An Addendum to the *Decision Document* was signed on March 26, 2019, extending the internal VistA Standardization deadline to the conclusion of July 31, 2019. An Update to this Addendum was signed on July 30, 2019, further extending the standardization deadline through June 30, 2020.

4. As of December 14, 2018, the Existing Product Intake Program (EPIP) Release contract, which supported the testing and release of the Class III – Class I waivers, expired. At present, the EPIP Release Management team consists only of a handful of VA employees to support the release of the contractor remediated software through

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national release. However, there are numerous New Service Requests in support of VistA standardization, that have yet to be remediated, tested and released. There are also VistA software waivers that align to active development projects, whose release dates have slipped past July 31, 2019. In these scenarios, VHA does not support mandating sites remove their Class III solutions due to OIT not having the resources to deliver these as Class I products within the current VistA Standardization timeline. Therefore, VHA requests OIT extend the current internal VistA Standardization deadline for these Class III – Class I candidates and Active development efforts until the transition to a permanent solution obviates the need for these modifications.

5. Many VA facilities are running local changes to VistA software that support their ability to interface with various pharmacy or laboratory devices. Where sites would need to fund contracts to receive software updates, VHA requests VISN 20 site's local interfacing modifications be deemed exempt from VistA Standardization as it will be cost prohibitive, and the transition to Cerner will obviate the need for these contracts. For all other sites needing to fund contracts to receive software updates, VHA does not support mandating sites remove those enhancements and restore to the national standard when doing so would be cost prohibitive. Therefore, VHA requests OIT extend the current internal VistA Standardization deadline until the transition to a permanent solution obviates the need for these modifications.

6. Questions may be directed to Christine Rhodes, Director, Requirements Development Management, Strategic Investment Management, Office of Health Informatics (10A7), at [Chris.Rhodes@va.gov](mailto:Chris.Rhodes@va.gov) and (407) 840-6954.

Recommend approval

**Christine M.  
Rhodes 173446**

Digitally signed by Christine  
M. Rhodes 173446  
Date: 2020.06.08 14:09:52  
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Christine Rhodes  
Director, Requirements Development &  
Management

Approved

**Vanessa J.  
Davis 369266**

Digitally signed by Vanessa J.  
Davis 369266  
Date: 2020.06.08 16:02:39  
-04'00'

Vanessa J. Davis  
VistA System Owner  
Enterprise Portfolio Management Division

Approved