



**STATEMENT FOR THE RECORD  
OF  
MATTHEW CARDENAS  
HEALTH POLICY ANALYST  
THE AMERICAN LEGION  
TO THE  
HOUSE COMMITTEE ON VETERANS' AFFAIRS  
SUBCOMMITTEE ON TECHNOLOGY MODERNIZATION OVERSIGHT  
ON  
"READY, SET, GO-LIVE: ASSESSING VA'S EHR MODERNIZATION  
DEPLOYMENT READINESS"**

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Chairman Barrett, Ranking Member Budzinski, and distinguished members of the subcommittee, on behalf of National Commander Dan K. Wiley and more than 1.5 million dues-paying members of The American Legion, we thank you for the opportunity to offer our statement for the record on the Department of Veterans' Affairs' modernization efforts.

The American Legion is guided by active Legionnaires who dedicate their time and resources to serve veterans, service members, their families, and caregivers. As a resolution-based organization, our positions are directed by over 106 years of advocacy and resolutions that originate at the grassroots level of our organization. Every time The American Legion testifies, we offer a direct voice from the veteran community to Congress.

As the United States Department of Veterans Affairs (VA) resumes rollout of the Electronic Health Record Modernization (EHRM) program it is important to note that the VA began the EHRM program to make critically needed updates to the VA's software systems. VA's current electronic health record (EHR), the Veterans Health Information Systems and Technology Architecture (VistA), is *extremely* outdated and simply cannot serve current or future veteran needs.

Though the name VistA was adopted by VA in 1994, the system itself can date its origins back to 1977.<sup>1</sup> While it was a triumph of its age, this decades-old system lacks many modern features available to civilian hospitals. The VA's new EHRM, Oracle Cerner Millennium, is intended to bring new, modern capabilities to the VA such as more accurate and faster tracking and identifying of potential health risks, scheduling features that would improve on wait times, and a seamless experience across different hospitals and departments.<sup>2</sup> The EHRM program, as intended, will provide veterans with an easily updated health record that follows a veteran for life, from the time

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<sup>1</sup> Allen, Arthur. n.d. "A 40-Year 'Conspiracy' at the VA." The Agenda. Politico.com. <https://www.politico.com/agenda/story/2017/03/vista-computer-history-va-conspiracy-000367/>. Unless otherwise noted, all cited hyperlinks accessed March 28, 2023.

<sup>2</sup> Communication, IT Strategic. 2022. "What Veterans Need to Know about How VA's Health Record System Is Changing - VA EHR Modernization." Digital.va.gov. July 21, 2022. <https://digital.va.gov/ehr-modernization/resources/fact-sheets/what-veterans-need-to-know-about-how-vas-health-record-system-is-changing/>.

of their service in the Department of War (DOW) through their time in VA healthcare. The American Legion strongly supports these goals.<sup>3</sup>

However, the rollout has not gone as intended. The deployment of this new system began in 2020 at Mann-Grandstaff VA Medical Center in Spokane, WA, and was almost immediately inundated with issues.<sup>4</sup> Several of these issues were severe, such as veteran data being migrated to the new system with outdated prescriptions and emergency contact information, or dropping prescriptions altogether. Problems with further rollout sites led to the program being put on pause in April 2023, with one exception allowing for a rollout to the Captain James A. Lovell Federal Health Care Center (FHCC) in Chicago, Illinois.

The American Legion visited the Lovell FHCC in August of 2025 to review how the facility has adopted and implemented the new electronic health record system. The results we saw reflected a marked improvement from prior rollout experiences at other locations. Facility staff reported zero instances of critical harm, and no veterans' health seriously affected due to problems resulting from the rollout. Staff further reported that VA had provided ample staff to assist with the rollout, complemented by Oracle employees who spent significant time at the facility assisting with the process. All the departments with which we spoke to reported being generally pleased with the new software, and the facility has since been able to return to near-normal staffing levels. TAL is hopeful that Lovell FHCC's successes can be duplicated in future rollouts.

Staff at the Lovell FHCC reported that the software itself has significantly improved operations at the facility. Medication ordering systems are tied together so, for example, once a pharmacist scans out a medicine, the logistics team is immediately informed so that they can order more. Tasks take fewer clicks than with the previous system, reducing the amount of time to perform routine functions. Total patient records from every medical center department are immediately available at a single click. These and many more updates to the system help Lovell FHCC provide the world-class, modern healthcare that veterans have earned.

For these successes to be duplicated, it is critical that facilities with upcoming rollouts are provided with the same level of support, training, and oversight. Specifically, VA and Oracle must commit increased facility staffing during rollouts similar to the levels provided to Lovell FHCC during the transition. Software changes led to planned and unforeseen complications, and the increased staffing helped ensure that veteran health and safety was not lost in the change-management process. A lack of adequate vendor support from Oracle would undermine the VA staff's ability to properly do their jobs, potentially risk lives, and any system downtimes could force staff to rely on time-consuming paper records, slowing processes to a crawl and impacting health and safety. When this happened during previous rollouts veterans were directly harmed, including six veteran deaths in Spokane, WA.<sup>5</sup> Lovell FHCC's successful roll-out shows that adequate staffing and

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<sup>3</sup>"Resolution No. 83: Virtual Lifetime Electronic Record." 2016. <https://archive.legion.org/node/329>; "Resolution No. 12: Implementation of the MISSION Act." 2022. <https://archive.legion.org/node/14050>.

<sup>4</sup> VA OIG Details Continued Deficiencies with VA's EHRM." n.d. [www.meritalk.com](http://www.meritalk.com). <https://www.meritalk.com/articles/va-oig-details-continued-deficiencies-with-vas-ehrm/>.

<sup>5</sup> Donovan Smith and Desmond Butler, Orion. "VA Staff Flag Dangerous Errors Ahead of New Health Records Expansion." Spokesman.com, December 3, 2025. <https://www.spokesman.com/stories/2025/dec/03/va-staff-flag-dangerous-errors-ahead-of-new-health/>.

preparation by the vendor and by VA are necessary and will lead to success. The American Legion National Staff routinely attends briefings from Oracle to track progress, and we have been assured the Millennium EHR deployment at new sites will not face the same difficulties and setbacks as at the first six sites. Oracle has committed to the necessary investments needed to ensure the deployment of the EHR at new sites will be more stable. Also, the system has extensive updates, enhancements, and simplifications to improve usability. Oracle report targeted EHR optimizations, designed to address VA's unique needs in the areas most critical for a successful expansion. TAL urges Congress, VA, and Oracle to ensure adequate staffing augmentation and robust technical support for all future deployments in order to duplicate the successes seen at Lovell FHCC.

The American Legion's position and outlook on the upcoming EHRM rollouts remains positive. The rollout at Lovell FHCC was an overall success, but VA and Oracle must heed the important lessons learned there and put them to future use. Absent the same level of preparation given to Lovell FHCC, future EHR rollouts should not be expected to achieve comparable results. Oracle must strengthen all aspects of their deployment methodology, with a deliberate emphasis on improving staff readiness. Significant improvements must be made in testing and aligning Change Management (CM) through increased training and communications.

Similarly, VAMC leadership must take ownership of the EHR deployment at their sites, while continued oversight from Congress and stakeholders remains essential, particularly as EHRM rollouts accelerate. TAL urges Congress to conduct regular oversight hearings with Oracle and VA stakeholders to ensure transparent, ongoing updates throughout the deployment process.

Chairman Barrett, Ranking Member Budzinski, and distinguished members of the subcommittee, The American Legion thanks you for your leadership on this matter and for allowing us the opportunity to explain the position of our more than 1.5 million members. The American Legion stands ready to work with the subcommittee on changes as they develop, and we look forward to sharing the feedback we receive from our membership. For 106 years, The American Legion has never shied away from the responsibility of being a voice for veterans, and we will not start now. For additional information regarding this testimony, please contact Ms. Bailey Bishop at The American Legion's Legislative Division at [b.bishop@legion.org](mailto:b.bishop@legion.org).