Health Information Technology Modernization Program Update

Alaska Area

December 9, 2025

Health IT Modernization Program

Vision

Provide the best possible EHR, managed by its users, for its users, that will drive high-quality health care through sustainable, modern, and easy-to-use tools

PATH EHR Key Priorities

Unify patient health records to improve access

Build *with* our tribal and urban partners, not *for* them

Coordinate care across providers and sites

Support end users with training and resources

Empower patients in their health journey

Ensure sustainability of the system

Protect data with robust security

Localize to meet the needs of each site

PATH EHR

PATIENTS AT THE HEART

Program Updates

Enterprise Future State Design Activities

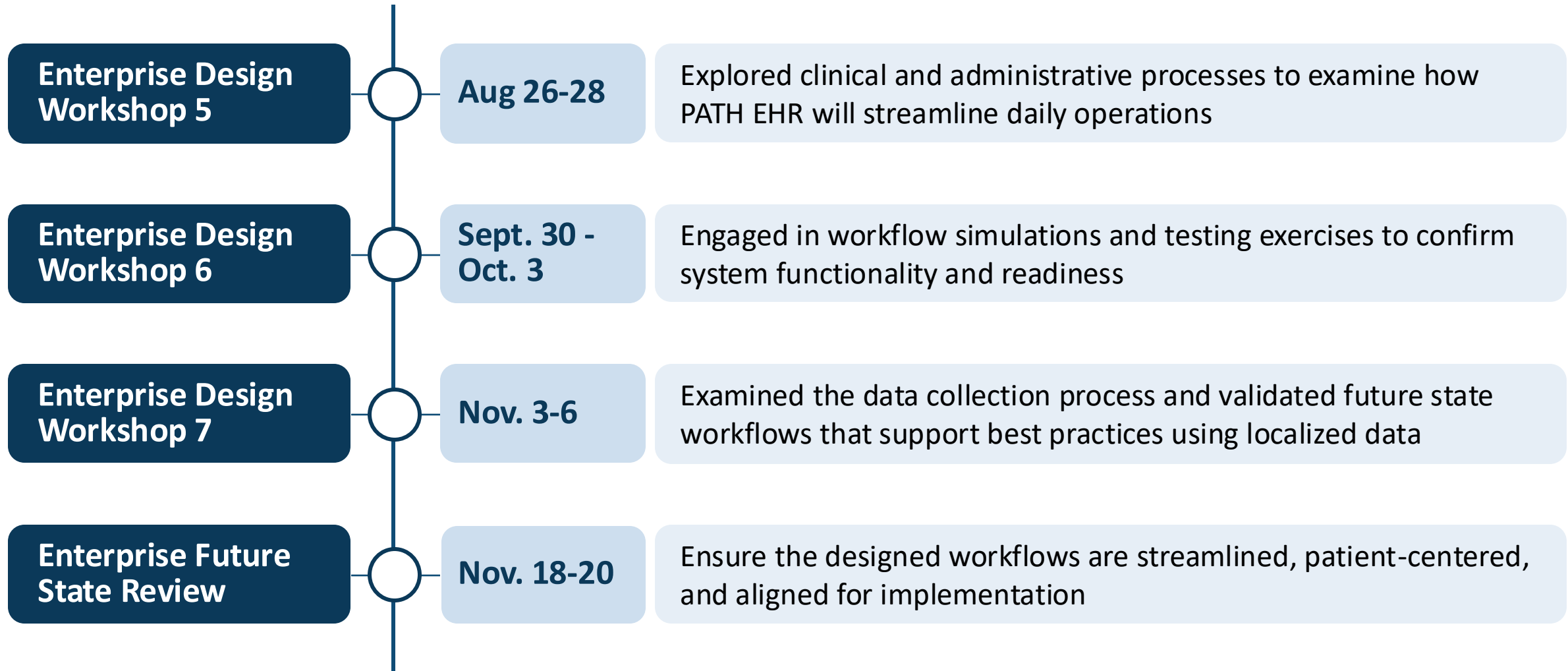| Pre-Workshop Design Event (PWDE) & Enterprise Design Workshops	Future State Review	Integrated Testing	Baseline Acceptance
Jan. – Nov. 2025	*Nov. 2025*	*Dec. 2025 – Jan. 2026*	*Feb. 2026*

Site Design Workshops will localize enterprise standards for pilot and cohort sites

Enterprise Recent Activities

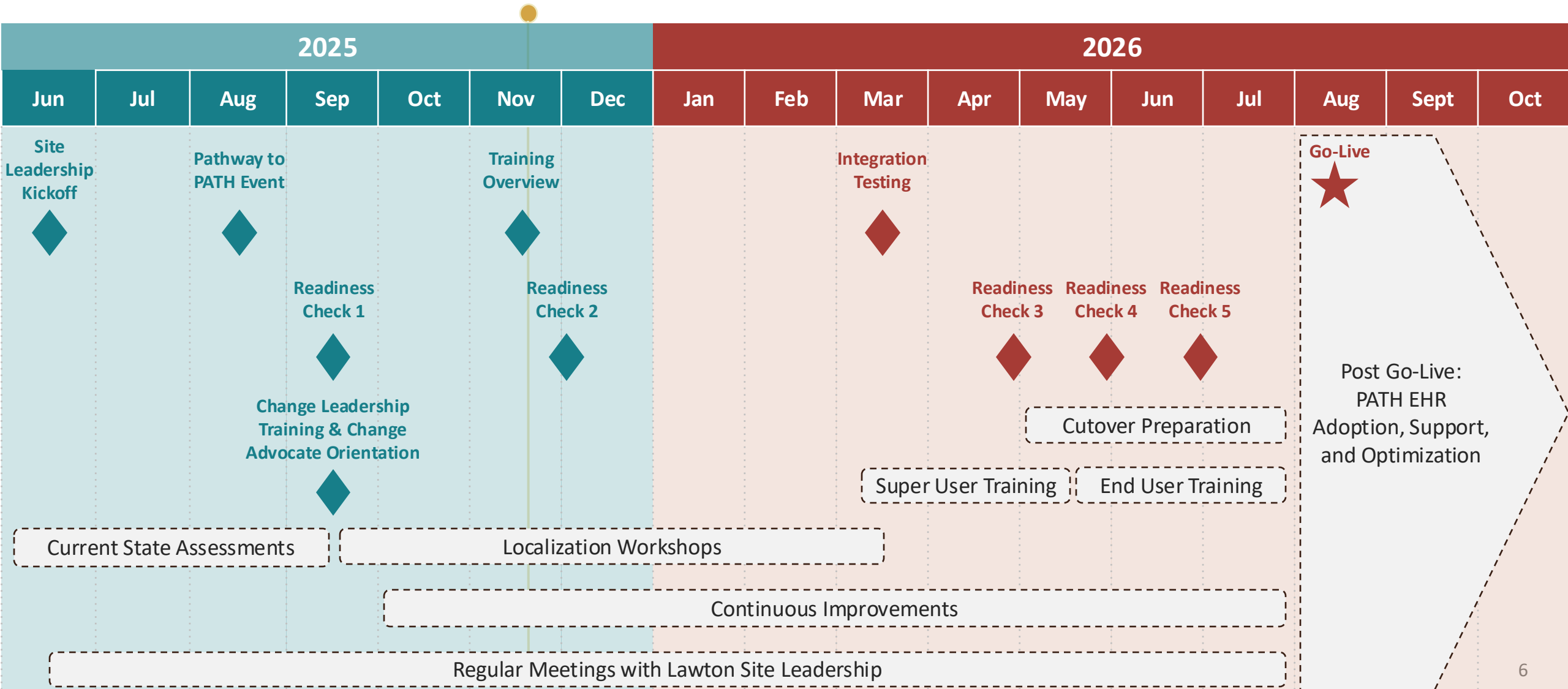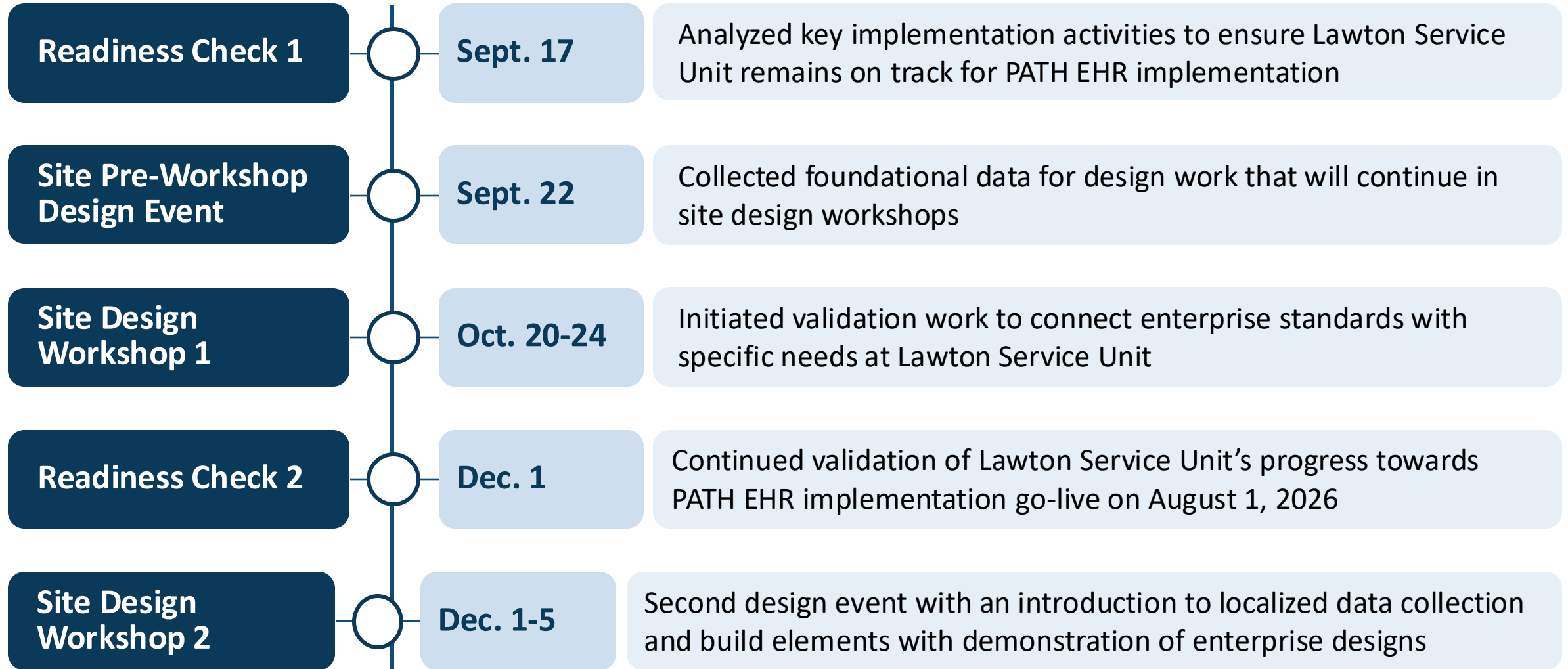|		
Enterprise Design Workshop 5	**Aug 26-28**	Explored clinical and administrative processes to examine how PATH EHR will streamline daily operations
Enterprise Design Workshop 6	**Sept. 30 - Oct. 3**	Engaged in workflow simulations and testing exercises to confirm system functionality and readiness
Enterprise Design Workshop 7	**Nov. 3-6**	Examined the data collection process and validated future state workflows that support best practices using localized data
Enterprise Future State Review	**Nov. 18-20**	Ensure the designed workflows are streamlined, patient-centered, and aligned for implementation

Lawton Deployment Timeline

The PATH Team is partnering with Lawton leaders and staff to ensure all key activities are complete to support Go-Live

2025							2026									
Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct

Site Leadership Kickoff ◆ (Jun)

Pathway to PATH Event ◆ (Aug)

Training Overview ◆ (Nov)

Integration Testing ◆ (Mar)

Go-Live ★ (Aug)

Readiness Check 1 ◆ (Sep)

Readiness Check 2 ◆ (Dec)

Readiness Check 3 ◆ (Apr)

Readiness Check 4 ◆ (May)

Readiness Check 5 ◆ (Jun)

Change Leadership Training & Change Advocate Orientation ◆ (Sep)

Post Go-Live: PATH EHR Adoption, Support, and Optimization

Cutover Preparation

Super User Training

End User Training

Current State Assessments

Localization Workshops

Continuous Improvements

Regular Meetings with Lawton Site Leadership

Pilot Site Recent Activities

Readiness Check 1	Sept. 17	Analyzed key implementation activities to ensure Lawton Service Unit remains on track for PATH EHR implementation
Site Pre-Workshop Design Event	Sept. 22	Collected foundational data for design work that will continue in site design workshops
Site Design Workshop 1	Oct. 20-24	Initiated validation work to connect enterprise standards with specific needs at Lawton Service Unit
Readiness Check 2	Dec. 1	Continued validation of Lawton Service Unit's progress towards PATH EHR implementation go-live on August 1, 2026
Site Design Workshop 2	Dec. 1-5	Second design event with an introduction to localized data collection and build elements with demonstration of enterprise designs

PATH EHR Scope and Capabilities

Value of PATH EHR

For Clinicians

- Improved efficiency and interoperability
- Increase time with patients
- Data-driven clinical decisions
- Better device and system integration
- Modernized engagement and user interface

For Patients

- Faster, more convenient access to care
- Enhanced care coordination
- Increased patient safety
- Seamless care across systems
- Modernized patient engagement and user interface

PATH EHR Solution Set

| Acute & Ancillaries | Inpatient Pharmacy | Core Clinicals (EHR) | Emergency Department | Rehabilitation | Radiology | Inpatient Behavioral Health | Lab | Clinical Inventory Management | Surgery & Perioperative | Women's Health |

| Ambulatory | Core Clinicals (EHR) | Practice Management | Outpatient Pharmacy | Outpatient Behavioral Health | Outpatient Rehab | Patient Portal |

| Population Health | Population Health Management | Care Management | Reporting & Analytics |

| Revenue Cycle & Health Information Management | Registration | Revenue Cycle Analytics | Scheduling | Acute Case Management | Health Information Management | Document Management | Purchased Referred Care | Patient Accounting | Contract Management |

| Interoperability | Health Record Management | Public Health Reporting | CommonWell |

| Technology Solutions | Device Connectivity | Enterprise Document Management | Mobility & Connect | Interface Engine |

Implementation & Deployment

Implementation Approach
Iterative Cohorts of I/T/U sites

Cohort Go-Live

ALIGN	ENGAGE	ACTIVATE	MEASURE

Cohort 1

Cohort 2

Cohort 3

Continuous Improvement / New Capabilities
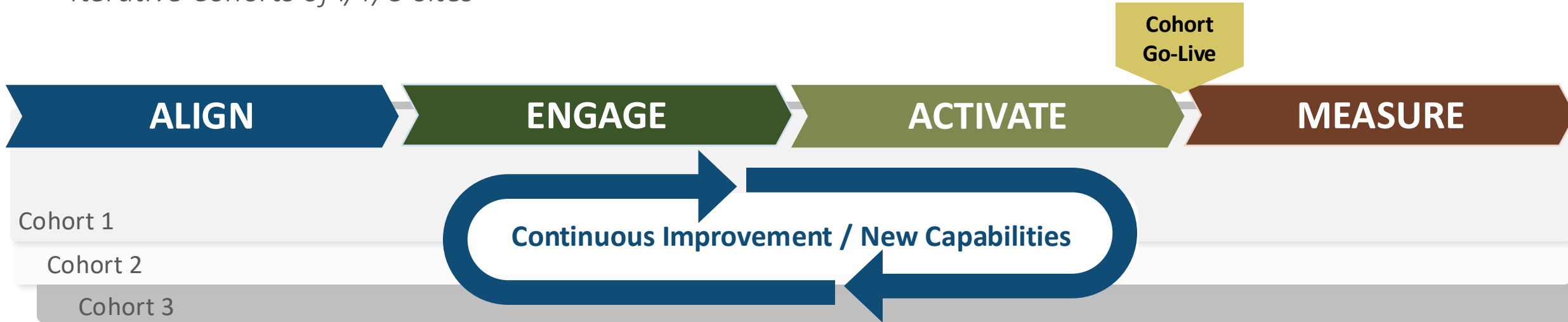
Pilot

- The first group of facilities selected for simultaneous system implementation
- Pilot sites will be direct service facilities, which are yet to be determined

Cohort

- Cohorts will be sequenced based on their **organizational, operational, and technical readiness**
- A group of sites that **share readiness characteristics**. Cohorts are not limited to federal sites and will include tribal and urban organizations
- The cohort selection process will utilize information from **iterative site assessments and readiness reviews**

Comprehensive Training Approach

Equipping you with the knowledge to manage change and develop skills to use PATH EHR.

Change Leadership Training

Who: Site leaders

Outcomes: Leaders equipped with the skills and knowledge to effectively guide their site through the PATH EHR implementation.

Change Advocate Training

Who: Site-selected staff

Outcomes: Staff equipped with the skills and knowledge to successfully advocate and build support for the change, helping to drive adoption and acceptance.

Super User Training

Who: Site-selected end users

Outcomes: Users equipped with advanced knowledge, enabling them to provide first-line support and help resolve issues quickly.

PATH EHR User Training

Who: EHR End Users

Outcomes: Staff equipped with the requisite knowledge and skills to effectively work in PATH EHR following go-live.

Funding

Estimated Cost and Additional Funding

Limitations

IHS does not have the authority or mechanisms to retroactively reimburse Tribes for monies with which they elected to supplement shares received in prior years.

Opportunities

IHS may designate a proportion of congressionally allocated funding for shares in accordance with existing processes for Programs, Functions, Services, and Activities (PFSA).
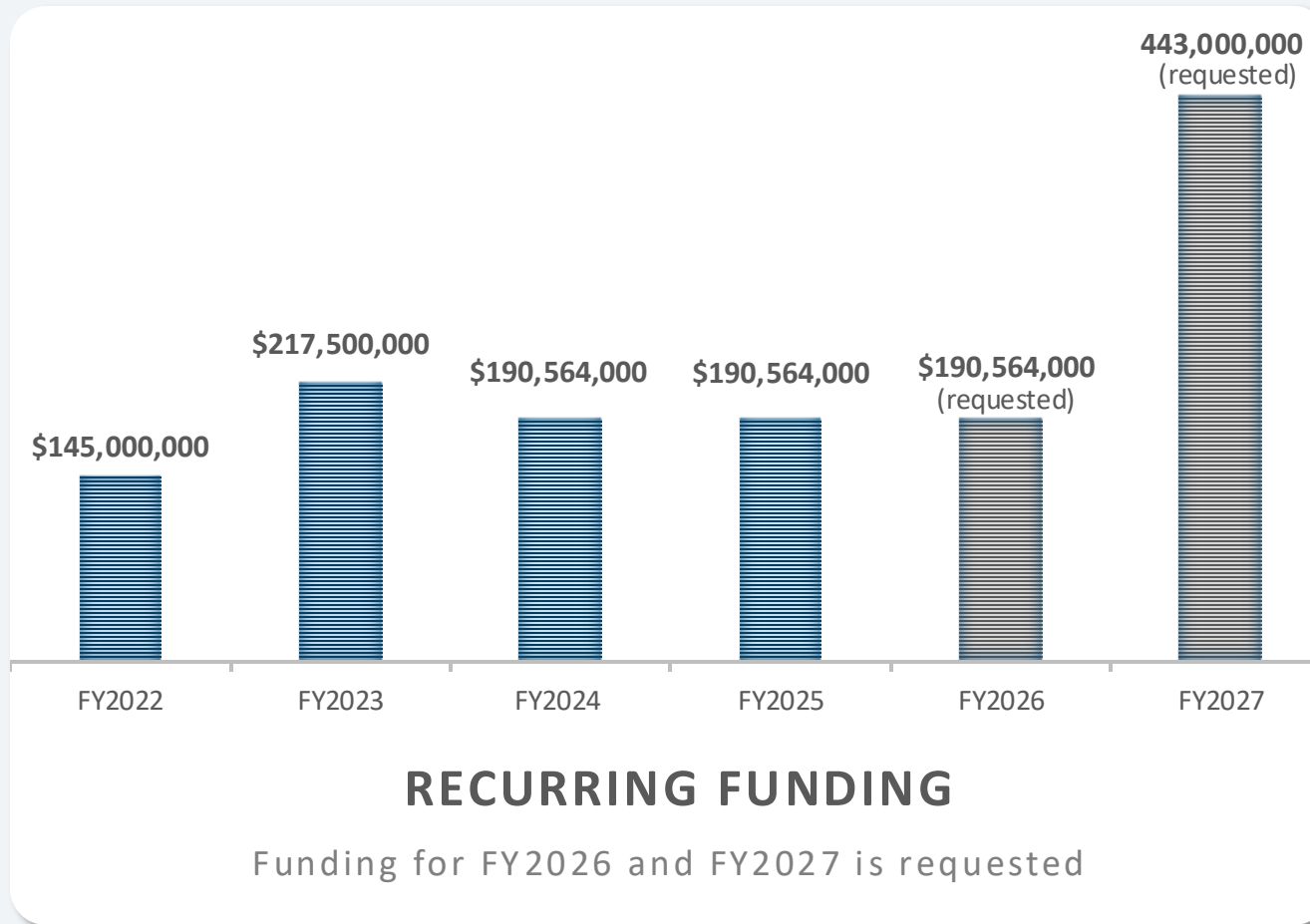
Looking Forward
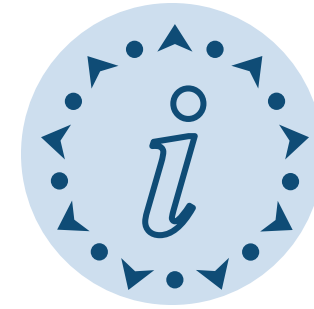
IHS is continually updating and refining the cost analysis, incorporating insights and data drawn from our ongoing experience with the vendor to enhance accuracy and relevance in financial planning and assessment.

Funding to Date & Future

IHS uses one-time and recurring funding to support Health IT Modernization.

443,000,000
(requested)

$217,500,000

$190,564,000 $190,564,000 $190,564,000
(requested)

$145,000,000

FY2022   FY2023   FY2024   FY2025   FY2026   FY2027

RECURRING FUNDING

Funding for FY2026 and FY2027 is requested

The Lifecycle Cost Estimate (LCCE) for all tribal, urban, and federal sites is $4.5 - $6.2 billion over 10 years for implementation, operation, and maintenance.

The LCCE accounts for facility physical and IT infrastructure needs necessary to operate an enterprise EHR solution.

Follows the GAO 12-step cost estimation process and incorporates labor and non-labor categories