PART I - A

PART I: SUMMARY INFORMATION AND JUSTIFICATION

In Part I, complete Sections A. B, C, and D for all capital assets (IT and non-IT). Complete Sections E and F for IT capital assets.

OMB Text Limitations - SHORT ANSWER(250 Characters), MEDIUM ANSWER(500 Characters) and LONG ANSWER(2500 Characters)

Section A: Overview (All Capital Assets)

I.A.1) Date of Submission (mm/dd/yyyy)

Sep 10, 2007

I.A.2) Agency

029 - Department of Veterans Affairs

I.A.3) Bureau

00 - Agency Wide Initiatives

I.A.4) Name of this Investment:(SHORT ANSWER)

Pharmacy Re-Engineering and IT Support-2009

I.A.5) Unique Project(Investment) Identifier: Update the UPI using the Exhibit 53 tab.

029-00-01-11-01-1184-00

I.A.6) What kind of investment will this be in FY2009? (Please NOTE: Investments moving to O&M in FY2009, with Planning/Acquisition activities prior to FY2009 should not select O&M. These investments should indicate their current status.)

Full-Acquisition

I.A.7) What was the first budget year this investment was submitted to OMB?

FY2002

I.A.8) Provide a brief summary and justification for this investment, including a brief description of how this closes in part or in whole an identified agency performance gap: (LONG ANSWER)

Pharmacy Re-Engineering and IT Support is undergoing modernization as defined by the HealtheVet - VistA strategy. The Project scope is to replace current pharmacy software modules with new technology by re-engineering, new development and purchase of commercial products. In addition, this initiative aligns with the Services for Citizens category under the federal Business Reference Model, with a particular focus on the Health subcategory. This project will facilitate improved VA pharmacy operations, customer service and patient safety, concurrent with pursuit of full re-engineering of VA pharmacy applications to support a new patient centric business model. It will address critical needs, such as the following benefits for the veteran: improved patient safety by 50%reduction of Adverse Drug Events and saving approximately 115 lives for serious errors, increased access to benefits by improving formulary management support and improved fiscal performance by reducing 5% in cost of inventory. Systems limitations and inconsistent pharmacy processes have hindered the VA's ability to provide efficient pharmacy service. The re-engineered pharmacy system will address these inefficiencies and enhance pharmacy data exchange, as well as clinical documentation capabilities, in an integrated fashion that will improve operating efficiency. It will provide a flexible technical environment to adjust to and meet future business conditions and needs in the clinical environment, an environment that is focused on the patient with robust decision support safety features. However, the implementation of the Pharmacy Re-Engineering project is dependent upon the personnel and budgetary resources and the HealtheVet strategy and deployment schedule. The Pharmacy re-engineered system will fit into the One VA architecture by implementing the standards proposed by the Consolidated Health Informatics group. The re-engineered system will also utilize enterprise level services such as Enterprise Level Authentication and Authorization Service, Clinical Data Service to access Health Data Repository, Person Service to identify patients and access patient demographics, Standard Data service to access standard enterprise level reference tables, Enterprise Terminology service to access standard clinical code sets, Ordering Service to handle lab orders and Infrastructure services such as a common delivery service, auditing service, defect logging service etc.

I.A.9) Did the Agency's Executive/Investment Committee approve this request?

Yes

I.A.9.a) If "yes," what was the date of this approval?

Jun 28, 2007

I.A.10) Did the Project Manager review this Exhibit?
Yes

I.A.11) Project Managers Contact Information

	Project Managers Names (SHORT ANSWER)	PM Phone	E-mail (SHORT ANSWER)
Primary in-house	Michael L. Mims, Sr. Project Manager	205-554-3452	mike.mims@va.gov

I.A.11.a) What is the current FAC-P/PM certification level of the project/program manager?
DAWIA-Level-2

I.A.12) Has the agency developed and/or promoted cost effective, energy-efficient and environmentally sustainable techniques or practices for this project.
Yes

I.A.12.a) Will this investment include electronic assets (including computers)?
Yes

I.A.12.b) Is this investment for construction or retrofit of a federal building or facility? (Answer applicable to non-IT assets only)
No

I.A.12.b.1) If "yes," is an ESPC or UESC being used to help fund this investment?

I.A.12.b.2) If "yes," will this investment meet sustainable design principles?

I.A.12.b.3) If "yes," is it designed to be 30% more energy efficient than relevant code? (Answer applicable to non-IT assets only)

I.A.13) Does this investment directly support one of the PMA initiatives?
Yes

I.A.13.a) If "yes," check all that apply:

	PMA Initiatives for XML Submission	PMA Initiatives
		- Human Capital
		- Budget Performance Integration
		- Financial Performance
Yes	Expanded E-Government	- Expanded E-Government
		- Competitive Sourcing
		- Faith Based and Community
		- Real Property Asset Management
		- Eliminating Improper Payments
		- Privatization of Military Housing
		- Research & Development Investment Criteria
		- Housing & Urban Development Management & Performance
		- Broadening Health Insurance Coverage through State Initiatives

			- "Right Sized" Overseas Presence
	Yes	Coordination of VA and DoD Programs and Systems	- Coordination of VA & DoD Programs and Systems

I.A.13.b) Briefly and specifically describe for each selected how this asset directly supports the identified initiative(s)? (e.g. If E-Gov is selected, is it an approved shared service provider or the managing partner?)(MEDIUM ANSWER)

Coordination of VA and DoD Program Systems: In an effort to achieve a Consolidated Health Informatics standard, the new VHA information system for pharmacy will achieve cross-agency interoperability with DoD This will facilitate two-way sharing of information for pharmacies or drug distribution centers. Expanded E-Government: standardization of platforms, language and improved technology deployed to the field will enable veterans to utilize the e-government capability to access prescriptions.

I.A.14) Does this investment support a program assessed using the Program Assessment Rating Tool (PART)? (For more information about the PART, visit www.whitehouse.gov/omb/part.)

No

I.A.14.a) If "yes," does this investment address a weakness found during a PART review?

I.A.14.b) If "yes," what is the name of the PARTed program? (SHORT ANSWER)

I.A.14.c) If "yes," what rating did the PART receive?

I.A.15) Is this investment information technology? (See section 53.8 for definition)

Yes

I.A.16) What is the level of the IT Project? (per CIO Council PM Guidance)

Level 3

I.A.17) What project management qualifications does the Project Manager have? (per CIO Council PM Guidance)

Qualification Status	Qualification Status for XML Submission	Description
1	(1) Project manager has been validated as qualified for this investment	(1) - Project manager has been validated as qualified for this investment.
		(2) - Project manager qualification is under review for this investment.
		(3) - Project manager assigned to investment, but does not meet requirements.
		(4) - Project manager assigned but qualification status review has not yet started.
		(5) - No Project manager has yet been assigned to this investment.

I.A.18) Is this investment or any project(s) within this investment identified as "high risk" on the Q4-FY 2007 agency high risk report (per OMB Memorandum M-05-23)

Yes

I.A.19) Is this project (investment) a Financial Management System? (see section 53.3 for definition)

No

I.A.19.a) If so, does this project (investment) address a FFMIA (Federal Financial Managers Integrity Act) compliance area?

I.A.19.a.1) If yes, which compliance area?

I.A.19.a.2) If "no," what does it address? (MEDIUM ANSWER)

I.A.19.b) If "yes," please identify the system name(s) and system acronym(s) as reported in the most recent financial systems inventory update required by Circular A–11 section 52 (LONG ANSWER)

I.A.20) What is the percentage breakout for the total FY2008 funding request for the following? (This should total 100%)

Percentage of Total Investment	
% Hardware	16.14
% Software	52.46
% Services	31.40
% Others	

I.A.21) If this project produces information dissemination products for the public, are these products published to the Internet in conformance with OMB Memorandum 05-04 and included in your agency inventory, schedules and priorities?

No

I.A.22) Contact information of individual responsible for privacy related questions:

Contact Name: (SHORT ANSWER)	Chi Yu
Phone Number:	(202) 565-8928
Title: (SHORT ANSWER)	IT Specialist
E-mail: (SHORT ANSWER)	Chi.yu@va.gov

I.A.23) Are the records produced by this investment appropriately scheduled with the National Archives and Records Administration's approval?

Yes

I.A.24) Does this investment directly support one of the GAO High Risk Areas?

No

PART I: SUMMARY INFORMATION AND JUSTIFICATION

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Section B: Summary of Funding (All Capital Assets)

I.B.1) FILL IN TABLE IN CURRENT VALUES (in millions)

(Estimates for BY+1 and beyond are for planning purposes only and do not represent budget decisions)

Provide the total estimated life-cycle cost for this investment by completing the following table. All amounts represent budget authority in millions, and are rounded to three decimal places. Federal personnel costs should be included only in the row designated "Government FTE Cost," and should be EXCLUDED from the amounts shown for "Planning," "Full Acquisition," and "Operation/Maintenance." The total estimated annual cost of the investment is the sum of costs for "Planning," "Full Acquisition," and "Operation/Maintenance." For Federal buildings and facilities, life-cycle costs should include long term energy, environmental, decommissioning, and/or restoration costs. The costs associated with the entire life-cycle of the investment should be included in this report.

Category of Funds	PY-1 and Earlier	PY 2007	CY 2008	BY 2009
Planning				
Budgetary Resources	10.670	0.000	0.000	0.000
Acquisition				
Budgetary Resources	34.746	10.952	9.297	15.524
Total, Sum of Stages				
Total, Resources (Plan & Acq)	45.416	10.952	9.297	15.524
Operations & Maintenance				
Budgetary Resources	0.000	0.000	0.063	1.710
Total, All Stages Resources	45.416	10.952	9.360	17.234
Government FTE Costs	8.500	2.018	2.225	2.266
Govt. FTE Numbers	76	18	22	22
Total, All Stages Resources + FTE	53.916	12.970	11.585	19.500

Government FTE Costs SHOULD NOT be INCLUDED as part of the TOTAL, All Stages Resources represented.

Note: 1) For the cross-agency investments, this table should include all funding (both managing partner and partner agencies). 2) Total, All Stages Resources should equal Total, All Stages Outlays.

I.B.2) Will this project require the agency to hire additional FTE's?

Yes

I.B.2.a) If Yes, How many and in what year? (MEDIUM ANSWER)
Due to the accelerated plan, Pharmacy Reengineering will require additional staff meet the new schedule. In order to meet this new time line the project will require approximately 22 FTEs in 2008 and 2009. This calculation is made with the assumption that the additional staff is needed to replace the existing contractor.
I.B.3) If the summary of spending has changed from the FY2007 President's budget request, briefly explain those changes. (LONG ANSWER)
The delta between the FY 2008 President's budget request and the 2009 summary of spending is due to the acceleration of the deployment plan. Previous Exhibit 300 did not include the drug database costs. It has been recently reallocated the non IT category in pay dollars, thus the Government FTE Cost line item is significantly higher than previous OMB requests. In addition, due to replacing contract staff with VA staff has also contributed to the Government FTE Cost Number line item.

PART I: SUMMARY INFORMATION AND JUSTIFICATION

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Section C: Acquisition/Contract Strategy (All Capital Assets)

I.C.1) If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why? (LONG ANSWER)

Contract V776P-0689 is a license to procure a product and as such earned value is not calculated. However, this contract is managed using delivery milestones to monitor scheduling and acceptance testing to monitor performance. Payment is contingent upon these two parameters being met.

I.C.2) Do the contracts ensure Section 508 compliance?

Yes

I.C.2.a) If the Contracts WILL NOT ensure Section 508 Compliance, explain why:

All contracts associated with this Exhibit 300 require Section 508 compliance.

I.C.3) Is there an acquisition plan which has been approved in accordance with agency requirements?

Yes

I.C.3.a) If "yes," what is the date?

Jun 30, 2005

I.C.3.b) If "no," will an acquisition plan be developed?

I.C.3.b.1) If "no," briefly explain why: (MEDIUM ANSWER)

	PART I - D	

PART I: SUMMARY INFORMATION AND JUSTIFICATION

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Section D: Performance Information (All Capital Assets)

I.D.1) In order to successfully address this area of the exhibit 300, performance goals must be provided for the agency and be linked to the annual performance plan. The investment must discuss the agency's mission and strategic goals, and performance measures must be provided. These goals need to map to the gap in the agency's strategic goals and objectives that this investment is designed to fill. They are the internal and external performance benefits this investment is expected to deliver to the agency (e.g., improve efficiency by 60%, increase citizen participation by 300% a year to achieve an overall citizen participation rate of 75% by FY 2xxx, etc.). The goals must be clearly measurable investment outcomes, and if applicable, investment outputs. They do not include the completion date of the module, milestone, or investment, or general goals, such as, significant, better, improved that do not have a quantitative or qualitative measure.

For Existing IT projects that have previously submitted Exhibit 300s:

--> If you completed Table 1 last year, please use Table 1 to report for fiscal year 2005 and Table 2 for fiscal years 2006 through at least 2009.

--> If you completed only Table 2 last year, please use Table 2 to report for fiscal years 2006 through at least 2009.

For projects that are submitting Exhibit 300s for the first time:

--> Use Table 2.

--> Report on Performance Measures for at least two years, i.e., FY 2008 and 2009, FY 2009 and 2010.

--> If the project will have data for 2007 that you wish to include, add extra lines in Table 2 and complete all information in this single table.

--> At least one performance goal should be met by BY+1.

PERFORMANCE INFORMATION TABLE 2:

Please use Table 2 and the FEA Performance Reference Model (PRM) to identify the performance information pertaining to this major IT Investment. Map all Measurement Indicators to the corresponding "Measurement Area" and "Measurement Grouping" identified in the PRM. There should be at least one Measurement Indicator for at least four different Measurement Areas (for each fiscal year).

Fiscal Year	Strategic Goal(s) Supported	Measurement Area	Measurement Grouping	Measurement Indicator	Baseline	Planned Improvements to the Baseline	Actual Results
2009	Honor & Memorialize	Mission and Business Results	Asset and Liability Management	Asses and Liability Management: Reduced cost of inventory	FY2005 average inventory level was $274,571.26	A 5 % decrease in the average inventory level.	To be calculated in Q1 of FY2009
2009	Public Health & Socioeconomic Wellbeing	Technology	Data Reliability and Quality	Data Reliability and Quality: Frequency of National Drug File updates	5 updates were produced in FY2002	Increase the number of updates from 5 updates per year to 52 updates per year.	To be calculated in Q1 of FY2009
2008	Quality of Life	Customer Results	Accuracy of Service or Product Delivered	Accuracy of service delivered: Decrease in cost of adverse drug events due to improved business process and applied technology.	$42,460,914 per year	A 40% reduction in cost of ADEs.	To be calculated in Q1 of FY2009
2009	Honor & Memorialize	Mission and Business Results	Collections and Receivables	Collection and Receivables: Improved third party collections.	2004 denials currently amount to 80% of all claims	Denials to be reduced to 50% of all claims.	To be calculated in Q1 of FY2009

Year	Goal	Category	Measure Area	Measure	Baseline	Target	Status
2009	Ensure Smooth Transition	Processes and Activities	Productivity	Productivity: Number of prescriptions filled. Improved technology allows greater number of prescriptions to be filled within the same time frame.	There were 105,499,349 prescriptions filled in FY 2002	A 15% increase in prescription fills over the FY2002 baseline.	To be calculated 3rd quarter 2011
2009	Quality of Life	Customer Results	Accuracy of Service or Product Delivered	Accuracy of service delivered: Decrease in cost of adverse drug events due to improved business process and applied technology.	$42,460,914 per year	A 45% reduction in cost of ADEs.	To be calculated in Q1 of FY2010
2009	Honor & Memorialize	Mission and Business Results	Collections and Receivables	Collections and Receivables: Improved Third Party collections	2004 denials amount to 80% of all claims	Denials to be reduced to 25% of all claims.	To be calculated in Q1 of FY2010
2009	Ensure Smooth Transition	Processes and Activities	Productivity	Productivity: Number of prescriptions filled. Improved technology allows greater number of prescriptions to be filled within the same time frame.	There were 105,499,349 prescriptions filled in FY 2002	An 25% increase in prescription fills over the FY2002 baseline.	To be calculated 3rd quarter 2011
2008	Honor & Memorialize	Processes and Activities	Efficiency	Efficiency	CMOP utilization was 81.3% in FY 2005	An 8% increase in CMOP fills over the baseline.	To be calculated in Q1 of FY2009
2008	Honor & Memorialize	Technology	Data Reliability and Quality	Data Reliability and Quality	Rejections due to non matched items from local drug files to NDF averaged 4K in FY 2005	Non-matched items from local to NDF would be reduced by 30%.	To be calculated in Q1 of FY2009
2008	Honor & Memorialize	Processes and Activities	Efficiency	Efficiency	Current FY 2005 local refill measured at 18.7%	An 8% decrease in local refills. This improvement is in support of Enabling Goal Objective E-3.	To be calculated 1st quarter 2009
2009	Honor & Memorialize	Technology	Data Reliability and Quality	Data Reliability and quality	FY2005 data indicates in takes 60 to 120 days to match VA data to DoD and CHDR data	Improvements in the quality of the order checks for shared patients will reduce the number of days to 7 days.	To be calculated in Q1 of FY2009

PART I: SUMMARY INFORMATION AND JUSTIFICATION

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Section F: Enterprise Architecture (EA) (IT Capital Assets only)

In order to successfully address this area of the business case and capital asset plan you must ensure the investment is included in the agency's EA and Capital Planning and Investment Control (CPIC) process, and is mapped to and supports the FEA. You must also ensure the business case demonstrates the relationship between the investment and the business, performance, data, services, application, and technology layers of the agency's EA.

I.F.1) Is this investment included in your agency's target enterprise architecture?

Yes

I.F.1.a) If "no," please explain why? (LONG ANSWER)

I.F.2) Is this investment included in the agency's EA Transition Strategy?

Yes

I.F.2.a) If "yes," provide the investment name as identified in the Transition Strategy provided in the agency's most recent annual EA Assessment. (MEDIUM ANSWER)

This project maps to VA 4.1 SRM Pharmacy mapping. The major capabilities are: decrease in adverse drug events, ability to procure and integrate inhouse developed and COTS capabilities enhancing patient safety, decrease of maintenance costs associated with today's outdated technical environment, and improved pharmacy staff (including software programmers) recruitment and retention. Benefits will be realized in a staggered approach, beginning in 2008 with full (100%) realization occurring in 2014.

I.F.2.b) If "no," please explain why? (LONG ANSWER)

I.F.3) Is this investment identified in a completed (contains a target architecture) and approved segment architecture?

Yes

I.F.3.a) If "yes," provide the name of the segment architecture as provided in the agency's most recent annual EA Assessment.(MEDIUM ANSWER)

Health Business Segment, Health Care Sub-segment.

I.F.3) FEA SERVICE REFERENCE MODEL:

I.F.3) Identify the service components funded by this major IT investment (e.g.,knowledge management, content management, customer relationship management, etc.). Provide this information in the format of the following table. For detailed guidance regarding components, please refer to http://www.whitehouse.gov/omb/egov/.

SERVICE COMPONENT TABLE:

	Agency Component Name(SHORT ANSWER)	Agency Component Description (MEDIUM ANSWER)	FEA SRM Service Type	FEA SRM Component (a*)	FEA Service Component Reused : Component Name (b*)	FEA Service Component Reused : UPI (b*)	Internal or External Reuse? (c*)	BY Funding Percentage (d*)
1	Customer Account Management	Defines the set of capabilities that support the retention and delivery of a service or product to an organization's clients.	Customer Relationship Management	Customer / Account Management	Customer / Account Management		No Reuse	0.000

2	Call Center Management	Defines the set of capabilities that allow a customer to be contacted in relation to a subscription or service of interest.	Customer Preferences	Alerts and Notifications	Alerts and Notifications		No Reuse	0.000
3	Process Tracking	Defines the set of capabilities that support the supply of goods or services as well as the tracking and analysis of costs for these goods.	Supply Chain Management	Sourcing Management	Sourcing Management		No Reuse	0.000
4	Payment/Settlement	Defines the set of capabilities that support the analyze information and predict the impact of decisions before they are made.	Business Intelligence	Decision Support and Planning	Decision Support and Planning		No Reuse	0.000
5	Data Exchange	Defines the set of capabilities that support the exploring and analyzing of detailed business transactions to uncover patterns and relationships within the business activity and history.	Knowledge Discovery	Data Mining	Data Mining		No Reuse	0.000
6	System Resource Monitoring	Defines the set of capabilities that support the use of dynamic reports on an as needed basis.	Reporting	Ad Hoc	Ad Hoc		No Reuse	0.000
7	Software Distribution	Defines the set of capabilities that support the use of preconceived or pre-written reports.	Reporting	Standardized / Canned	Standardized / Canned		No Reuse	0.000

NOTE:

(a*) - Use existing SRM Components or identify as "NEW". A "NEW" component is one not already identified as a service component in the FEA SRM.

(b*) - A reused component is one being funded by another investment, but being used by this investment. Rather than answer yes or no, identify the reused service component funded by the other investment and identify the other investment using the Unique Project Identifier (UPI) code from the OMB Ex 300 or Ex 53 submission.

(c*) - 'Internal' reuse is within an agency. For example, one agency within a department is reusing a service component provided by another agency within the same department. 'External' reuse is one agency within a department reusing a service component provided by another agency in another department. A good example of this is an E-Gov initiative service being reused by multiple organizations across the federal government.

(d*) - Please provide the percentage of the BY requested funding amount used for each service component listed in the table. If external, provide the funding

I.F.4) FEA TECHNICAL REFERENCE MODEL:

I.F.4) To demonstrate how this major IT investment aligns with Reference Model (TRM), please list the Service Areas, Service Specifications supporting this IT investment.

TECHNICAL REFERENCE MODEL TABLE:

	FEA SRM Component (a*)	FEA TRM Service Area	FEA TRM Service Category	FEA TRM Service Standard
1	Customer / Account Management	Service Access and Delivery	Access Channels	Web Browser
2	Customer / Account Management	Service Access and Delivery	Access Channels	Other Electronic Channels
3	Customer / Account Management	Service Access and Delivery	Delivery Channels	Intranet
4	Customer / Account Management	Service Access and Delivery	Delivery Channels	Virtual Private Network (VPN)
5	Customer / Account Management	Service Access and Delivery	Service Requirements	Legislative / Compliance
6	Customer / Account Management	Service Access and Delivery	Service Requirements	Authentication / Single Sign-on
7	Alerts and Notifications	Service Platform and Infrastructure	Hardware / Infrastructure	Servers / Computers
8	Alerts and Notifications	Service Platform and Infrastructure	Hardware / Infrastructure	Servers / Computers
9	Alerts and Notifications	Service Platform and Infrastructure	Delivery Servers	Portal Servers
10	Alerts and Notifications	Service Platform and Infrastructure	Delivery Servers	Application Servers
11	Alerts and Notifications	Service Platform and Infrastructure	Database / Storage	Database
12	Alerts and Notifications	Service Platform and Infrastructure	Database / Storage	Storage
13	Alerts and Notifications	Service Platform and Infrastructure	Hardware / Infrastructure	Servers / Computers
14	Sourcing Management	Component Framework	Security	Supporting Security Services
15	Sourcing Management	Component Framework	Presentation / Interface	Dynamic Server-Side Display
16	Sourcing Management	Component Framework	Business Logic	Platform Independent
17	Sourcing Management	Component Framework	Data Interchange	Data Exchange
18	Sourcing Management	Component Framework	Data Management	Database Connectivity
19	Sourcing Management	Component Framework	Data Management	Reporting and Analysis
20	Decision Support and Planning	Service Interface and Integration	Integration	Middleware
21	Decision Support and Planning	Service Interface and Integration	Integration	Middleware
22	Decision Support and Planning	Service Interface and Integration	Integration	Middleware

23	Decision Support and Planning	Service Interface and Integration	Interoperability	Data Format / Classification
24	Decision Support and Planning	Service Interface and Integration	Interface	Service Discovery
25	Decision Support and Planning	Service Interface and Integration	Interface	Service Description / Interface

NOTE:
(a*) - Service Components identified in the previous question(I.F.3) should be entered in this column. Please enter multiple rows for FEA SRM Components supported by multiple TRM Service Specifications
(b*) - In the Service Specification field, Agencies should provide information on the specified technical standard or vendor product mapped to the FEA TRM Service Standard, including model or version numbers, as appropriate.
I.F.5) Will the application leverage existing components and/or applications across the Government (i.e., FirstGov, Pay.Gov, etc)?
Yes
I.F.5.a) If "yes," please describe. (LONG ANSWER)
The re-engineered system will implement the standards proposed by the Consolidated Health Informatics group. The re-engineered system will also utilize the enterprise level services such as Enterprise level Authentication and Authorization Service, Clinical Data Service to access Health Data Repository, Person Service to identify Patients and access patient demographics, Standard Data service to access standard enterprise level reference tables, Enterprise Terminology service to access standard clinical code sets Ordering service to handle lab orders and Infrastructure services such as common delivery service, auditing service, defect logging service etc..
I.F.6) Does this investment provide the public with access to a government automated information system?
No
I.F.6.a) If "yes," does customer access require specific software (e.g., a specific web browser version)?

PART II: PLANNING, ACQUISITION AND PERFORMANCE INFORMATION

Part II should be completed only for investments which in FY2008 will be in "Planning" or "Full Acquisition," investments, i.e., selected one of these three choices in response to Question 6 in Part I, Section A above.

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Section B - RISK MANAGEMENT (All Capital Assets)

II.B.1) Does the investment have a Risk Management Plan?

Yes

II.B.1.a) If "yes," what is the date of the plan?

May 3, 2007

II.B.1.b) Has the Risk Management Plan been significantly changed since last year's submission to OMB?

Yes

II.B.1.c) If "yes," describe any significant changes: (LONG ANSWER)

The plan was modified to state that all risks for the project are being entered into a software system and monitored from there. The document was changed to reflect the path that a risk tasks once it is entered into the systemt and who is responsible for monitoring the risk at any given point during the risks lifecycle. The plan goes on to describe the weekly meetings that are to be held with the project PM's and risk owners to discuss the current status of the risks.

II.B.2) If there currently is no plan, will a plan be developed?

II.B.2.a) If "no," what is the strategy for managing the risks? (LONG ANSWER)

II.B.3) Briefly describe how investment risks are reflected in the life cycle cost estimate and investment schedule: (LONG ANSWER)

The Pharmacy Reengineering project performs routine risk assessments and at key milestone reviews. A risk assessment was performed during initial planning and continues during milestone reviews. Success of this project is software that is secure, functions reliably, and improves patient safety and care. In addition to the cost, schedule and scope risks, specific quality risks were identified and mitigation strategy initiated. Quality controls have been identified and incorporated as part of the WBS, integrating risk into the schedule. These controls include acceptance test planning and execution to identify any quality deficiencies early. In addition, contract vehicles that utilize EVMS and Firm Fixed Price contracts are used. Risk is reviewed on a weekly basis with priority being given to level four and five risks. Issues are analyzed and evaluated for disposition. Management is included in the risk management review and high impact; high probability risks are communicated to upper management.

Part II: Planning, Acquisition And Performance Information

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C) Cost and Schedule Performance:

Identify in this section the proposed change to the original or current OMB-approved baseline. What are the new cost and schedule goals for the phase or segment/module (e.g., what are the major investment milestones or events; when will each occur; and what is the estimated cost to accomplish each one)? If this is a new investment in the FY 2008 Budget year or if the agency does not intend to propose a new baseline modification, this section will be blank for your budget submission.

II.C.1) Does the earned value management system meet the criteria in ANSI/EIA Standard – 748?

No

II.C.3) Has the investment re-baselined during the past fiscal year?

No

II.C.3.a) If "Yes", when was it approved by the Agency head?

II.C.4) Comparison of Initial Baseline and Current Approved Baseline:

II.C.4) Complete the following table to compare actual performance against the current performance baseline and to the initial performance baseline. In the Current Baseline section, for all milestones listed, you should provide both the baseline and actual completion dates (e.g., "03/23/2003"/ "04/28/2004") and the baseline and actual total costs (in $ Millions).

Description of Milestone	Init BL Planned Completion Date	Current BL Completion Date Planned	Current BL Completion Date Actual
Initial Cost projections & Exhibit 300		Aug 1, 2002	Aug 1, 2002
Prototype Development Approval	Dec 31, 2004	Dec 31, 2004	Dec 31, 2004
System Development Approval - Part 1		Sep 30, 2005	Oct 28, 2005
System Development Approval - Part 2		Feb 28, 2006	Jun 2, 2006
Maintenance		Sep 30, 2008	
Maintenance		Sep 30, 2009	
PEPS Prototype Development Phase I		Dec 31, 2006	Mar 31, 2007
PEPS Production Development Phase I		Dec 31, 2007	
PRE Production Development Phase II		Dec 31, 2008	
PRE Production Development Phase III		Dec 31, 2009	
PEPS Production Deployment - Phase I		May 31, 2009	