

## **UFMS** Connection December 2003 Volume 2 Issue 4

### The Count Down to Go-Live

HHS is creating the federal government's largest civilian financial management system

On June 14, 2001, Secretary Thompson launched an initiative to redesign the financial management culture of the Department. Now, over two years later, the UFMS Program Team is counting the days until that vision becomes reality beginning with the UFMS pilot site, the Centers for Disease Control and Prevention, in October 2004.

To accomplish the pilot site's October Go-Live date, the Global and CDC teams have an aggressive plan to configure interfaces, hold a second Conference Room Pilot, conduct numerous tests of the system, and design and conduct user training, all in 10 months before the first UFMS switch is turned "ON."

UFMS is heating up elsewhere as well. The Food and Drug Administration is preparing for their Conference Room Pilot in February 2004 and a Go-Live date for General Ledger in October 2004. Meanwhile, the Program Support Center will inaugurate their implementation team in early 2004.

While the timing of each site's activities are staggered, the implementation activities that each UFMS site team conducts to reach Go-Live are similar. The following graphic depicts the high-level program activities for the Global/CDC pilot implementation. The other UFMS sites will execute similar activites. The ultimate goal is to have the system fully operational Department-wide by 2007.



High-Level Activities for Global/CDC Pilot UFMS Implementation

### It Has To Be "U"

#### Inside . . .

CRP: The Sequel	2
In Brief	3
Learning to use UFMS	3
FDA CRP	4
Profile: Kathryn Pirnia	4

"There are a lot of moving parts right now . . . we need to be clear and consistent about the vision for a unified implementation so that we can all be on the same page." That's the way George Strader, Deputy Assistant Secretary for Finance, described the need for the UFMS Program Management Office (PMO) to clarify the Department's vision of a "unified" UFMS implementation at the December 3 meeting of the UFMS Planning and Development Committee. Strader was referring to the concurrent activities of the continuing CDC implementation, the start up of the FDA implementation, and preparation for the imminent PSC implementations. Toss in the merger of the NIH NBS with UFMS, the integration of CMS' HIGLAS and UFMS, and an HHS financial operation shared services study . . . and you have "a lot of moving parts" indeed!

(Continued on page 2)

<sup>\*</sup> This graphic depicts high-level activities only; it does not depict time duration, component activities, or milestones

#### (Continued from page 1)

To communicate the unified vision, Strader and Tom Doherty, UFMS Program Director, started by delivering a presentation entitled, "A Unified Vision – Implementing the 'U' in UFMS" to several UFMS stakeholders, including the Common Accounting System Subcommittee, made up of representatives from the NIH, CMS, and the PSC.

There are a lot of moving parts right now... we need to be clear and consistent about the VISION for a unified implementation so that we can all be on the same page.

> George Strader **HHS Deputy Assistant Secretary for Finance**

Their presentation highlights the guiding principles to support planning and decision-making, which emphasize the goal of system and operational standardization. It also includes a description of the respective roles of the global and site teams and the collaborative process that will be followed relative to major project activities. Finally, it graphically depicts the evolution of HHS financial management operations from the current state through the UFMS implementation—to a shared services state.



Standardization will foster compatibility across HHS OPDIV lines, which will enable the move to a shared services environment. The Secretary sees shared services as a way to "achieve greater economies of scale, eliminate duplication, and provide better service delivery." A unified UFMS implementation will provide the standardization needed for such streamlining and efficiency. Clearly, though, this cannot be done with a one-sizefits-all approach. Each OPDIV has unique accounting requirements. So, adaptability and flexibility are key, because UFMS will only succeed if the Department and the OPDIVs are satisfied and their needs are met. To help ensure satisfaction, the UFMS global team is working closely with the site teams to tailor the system, where needed, for each site implementation.

The unified vision will guide the Department's efforts as we progress through the major components of the UFMS implementation. If you are interested in learning more about the unified vision, access it online at http://intranet.hhs.gov/ufms/library/ unified vision FINAL11 12 03.pdf.

### Conference Room Pilot: The Sequel

The highly anticipated sequel to the first Conference Room Pilot (CRP), CRP2, hits the calendar in March 2004. The Global/CDC CRP2 will be held during March in Atlanta, allowing the CDC audience to validate and confirm that the system, as configured, can accommodate the CDC-specific integrated business processes, the integration of feeder systems using interfaces, and cross-module and cross-functional activities.

During the first week of April 2004, a separate session will be conducted in the Washington D.C. area that will provide all other OPDIVs an opportunity to participate in the demonstration of the global interfaces, extensions, and federally mandated reports.

#### Mini-CRPs Traverse New Ground

In preparation for CRP2, a series of mini-CRP sessions were conducted December 2-18 to continue the execution of global and CDC (UFMS pilot site) scripts. Specifically, the sessions focused on some of the more complex functions of the system (including cross-(Continued on page 3)

#### **Questions? Comments?**

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UNIFIED FINANCIAL MANAGEMENT SYSTEM

(Continued from page 2)

modular transactions) and demonstrated new Oracle functionality made available since CRP1.

Sessions were conducted twice each, once in Atlanta and once in Washington D.C. The OPDIVs' representatives validated that the global elements defined during the Configuration Workshops have been incorporated into the software instance and that the business processes executed during the sessions address the defined "fit" requirements.

With the output from the mini-CRPs, the module leads now have sufficient information to update the CDC configuration instance and continue preparation for CRP2.

# How will HHS Learn to use UFMS?

The clock is counting down to the pilot implementation of UFMS at the CDC, scheduled for Fall 2004, and you are prob-

### In Brief . . .

- The NIH NBS team achieved a major milestone in October when transactions from both NBS Travel and NIH legacy systems began to flow into Oracle. Here is a brief status report:
  - October 1, 2003 Travel transactions (entered into NBS Travel since September 1) began flowing into the Oracle Sub Ledgers and General Ledger.
  - October 11 Transactions from NIH legacy system began to flow into the Oracle General Ledger.
  - October 14 NBS began feeding transactions to NIH's legacy data warehouse.
    The new data warehouse was opened to users on October 21.
- CMS HIGLAS began testing the claims payment processing cycle at its pilot contractors, Empire and Palmetto, in October 2003. To date, testing is on schedule and no major issues have surfaced.
- The FDA UFMS project plan has been completed and approved. FDA has begun their interface functional design documentation for site-specific systems.

ably wondering how we plan to train the broad cross-section of staff involved in the financial management function. The UFMS Business Transformation Team (BTT) is currently developing a training strategy that will address the need to:

- establish a knowledge infrastructure to provide long term guidance and quality assurance.
- develop effective learning materials on the many procedures that UFMS will support.
- provide a comprehensive training environment and a global learning management system.

UFMS has begun production of baseline courseware, a process that will be accelerated in the new year.

The UFMS's BTT will shortly announce a training strategy that will outline what the project team needs to do to train people to use UFMS and also support the users in the future, revise training materials for any new releases of Oracle, and create a local and nationwide learning network for ongoing learning and support.

## FDA Implemention Team Prepares for a Conference Room Pilot

The Food and Drug Administration (FDA) will be holding their FDA-specific Conference Room Pilot in Rockville, Maryland, on February 2-13, 2004. The FDA CRP will validate the configuration of a single set of books for the FDA in the Oracle U.S. Federal Financials application, giving the audience the opportunity to better understand how FDA does business and how business may be conducted in the future UFMS environment.

The validation performed during the CRP will provide as much end-to-end testing of the application and FDA's future business processes as possible, including all functional modules and their impacts to the General Ledger. Inputs from external systems that impact the business scenarios under execution during CRP will also be simulated.

Specifically, the FDA CRP will look at the following modules: Budget Execution, General Ledger, Purchasing, Accounts Payable, and Accounts Receivable. The FDA Team plans to execute one primary CRP and "mini-CRP" sessions as appropriate.





# Taking the Lead on UFMS (Technically-Speaking)

Kathryn Pirnia loves adventure. She and her husband have globe-trotted from the museums of Europe to the rocky shores of Cabo San Lucas, Mexico (where they plan to retire someday). But not all of her adventures have required a passport; she has covered a lot of ground in her professional life as well, working in information technology in the Federal Government since 1979

with stints at the Department of Education and the Navy. She spent most of her career with FDA, most recently as Acting Director of the Operations and Technology Services Division in the Office of the Commissioner. Now Pirnia serves on the UFMS program as the Federal Global Technical Analysis Team (TAT) Lead.

As the Global TAT Lead, Pirnia has two key tasks: (1) facilitating the UFMS technical design and development and (2) expediting the acquisition of technical infrastructure. Her team is responsible for technical design, system security, data conversions, disaster recovery, and interfaces. As the details of UFMS take shape, she is charged with keeping a global, enterprise-wide perspective on everything technical.

Pirnia is enthusiastic about UFMS, "The project excites me because it will provide concrete, measurable benefits to the organization." Getting UFMS up and running will be no cakewalk, but, as Pirnia herself puts it, "Challenges are opportunities."

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The greatest challenge for her team is that the new infrastructure meets business requirements in a timely manner. To do this, she is working with contractors from BearingPoint, but she is also looking to recruit more Federal employees for the team, including systems and network engineers, configuration and test managers, and others with strong technical skills. She welcomes the technically adventurous to travel along side her in the new, uncharted waters of UFMS.