

**Department of Health and Human Services
President's Management Agenda
Goals for July 1, 2007**

GOVERNMENT-WIDE INITIATIVES

Expanded E-Government

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Overall Status Score: Green

GREEN Standards for Success

Agency -- HHS:

- √ Has an Enterprise Architecture with a score of 4 in the "Completion" section and 3 in both the "Use" and "Results" sections (*FY07Q2*);
- √ Has acceptable business cases for all major systems investments and no business cases on the "management watch list" (*FY06 Q3, reevaluate FY07Q1*);
- √ Has demonstrated appropriate planning, execution, and management of major IT investments, using EVM or operational analysis, and has portfolio performance within 10% of cost, schedule, and performance goals (*FY07Q1*);
- √ Inspector General or Agency Head verifies the effectiveness of the Department-wide IT security remediation process and rates the Department-wide certification and accreditation process as "Satisfactory" or better (*FY06 Q1, reevaluate FY07Q1*);
- √ Has 90% of all IT systems properly secured (certified and accredited) (*FY04-Q3 and continuing*);
- √ Adheres to the agency-accepted and OMB-approved implementation plan for all of the appropriate E-Gov/Lines of Business/SmartBuy initiatives rather than creating redundant or unique IT projects and has transitioned and/or shut down investments duplicating these initiatives in accordance with the OMB-approved implementation plan (*Ongoing*).

Standard for Success to MAINTAIN GREEN

Agency -- HHS:

- √ Has ALL IT systems certified and accredited (*FY06Q3 and continuing*);

As always, further revisions to the Proud to Be may be necessary as circumstances change and HHS continues to progress with its initiatives, including revisions to incorporate future milestones from final scorecards.

- √ Has IT systems installed and maintained in accordance with security configurations (*FY07Q1 and continuing*);
- √ Has demonstrated for 90% of applicable systems a Privacy Impact Assessment has been conducted and publicly posted (*FY06-Q3 and continuing*); and
- √ Has demonstrated for 90% of systems with personally identifiable information a system of records has been developed and published (*FY06-Q3 and continuing*).

YELLOW Standards for Success

Agency -- HHS:

- √ Has an Enterprise Architecture with a score of 4 in the “Completion” section and 3 in either the “Use” or “Results” sections (*FY06-Q2*);
- √ Has acceptable business cases for more than 50% of its major IT investments (*FY05-Q1*);
- √ Submits security reports to OMB that document consistent security improvement and either (*FY04-Q2 and continuing*):
 - 80% of all IT systems are properly secured; OR
 - Inspector General of Agency Head verifies the effectiveness of the Department-wide IT Security Plan of Action and Milestone Remediation Process;
- √ Has demonstrated appropriate planning, execution, and management of major IT investments, using EVM or operational analysis, and has IT portfolio performance operating within 30% of cost, schedule, and performance goals (*FY06-Q1*); and
- √ Has an up-to-date agency-accepted and OMB-approved implementation plan for all of the appropriate E-Gov/Lines of Business/SmartBuy initiatives rather than creating redundant or agency unique IT projects (*FY05-Q4, and Ongoing*).

KEY MILESTONES for the Department of Health and Human Services

Note: Parenthesized numbers refer to MPA Outcome Report in which HHS' status will be reported: Outcome 1 – Strategic Planning; Outcome 2 – Enterprise Architecture; Outcome 3 – CPIC; Outcome 4 – Security and Privacy; Outcome 5 – eGov Initiatives. Outcome reports to be provided by primary dates given by quarter below.

FY 2006 – Fourth Quarter [Sept. 6, 2006 unless otherwise specified, but FISMA report Sept. 1]

- (na) Submit business cases for all major systems investments which are 100% acceptable (no business cases on the “management watch list” as of FY07-Q1);
- (2) Publish to the HHS EA website an updated release of the HHS Enterprise Architecture.
- (3) Revise the HHS ITIRB charter to increase business representation
- (3) Implement an EVM Tool for all major IT investments
- (4) Provide quarterly report of progress toward achieving FISMA security goals and objectives to ensure:
 - All systems reflected in system inventory remain fully certified and accredited;
 - IT systems are installed and maintained in accordance with security configurations;
 - At minimum 90% of applicable systems have requisite Privacy Impact Assessment conducted and posted;
 - At minimum 90% of systems with personally identifiable information have requisite systems of records developed and published; and
 - All systems retain a tested IT contingency plan
 - At minimum, 98% of all employees and contractors received general security awareness training
 - At minimum, 90% of employees and contractors identified with significant security responsibilities received appropriate role-based training
- (5) Resolve remaining issues on E-Gov Implementation Plan milestones and related issues. Report status of migration to PMA e-gov solutions (milestones met and upcoming).

FY 2007 – First Quarter Quarter [Dec. 1, 2006 unless otherwise specified, including FISMA report]

- (1) Evaluate and update, as necessary, the HHS Enterprise IT Strategic Plan, which supports the HHS Strategic Plan mission and goals, in accordance with the HHS Strategic Plan (*December 1, 2006*)
- (1) Review and update, as necessary, the Information Resources Management (IRM) Tactical and Performance Plan that will align with strategic plan and performance goals (*December 1, 2006*)
- (2) Publish to the HHS EA website an updated release of the HHS Enterprise Architecture.

- (3) Finalize revised CPIC/EVM processes to capitalize on the new EVM Tool
- (3) Demonstrate use of EVM variance data in IT management decision processes, including capital planning and budgeting.
- (3) Resolve any remediation issues for acceptability of FY 2008 business cases.
- (4) Provide HHS Annual FISMA Report and quarterly FISMA progress report, demonstrating all IT systems are secure, and installed in accordance with security configurations. In particular:
 - All systems reflected in system inventory remain fully certified and accredited;
 - IT systems are installed and maintained in accordance with security configurations;
 - At minimum 90% of applicable systems have requisite Privacy Impact Assessment conducted and posted;
 - At minimum 90% of systems with personally identifiable information have requisite systems of records developed and published; and
 - All systems retain a tested IT contingency plan
- (4) Demonstrate 98% of all employees and contractors have received general security awareness training (*FY07Q1 and continuing*);
- (4) Demonstrate 90% of all employees and contractors identified with significant security responsibilities have received appropriate role-based training (*FY07Q1 and continuing*);
- (5) Pending appropriations, approve required MOUs/MOAs with all e-gov initiatives in which HHS is a partner
- (5) Report status of migration to PMA e-gov solutions (milestones met and upcoming)
- (5) Provide HHS Annual E-Gov Report [OMB Due Date]

FY 2007 – Second Quarter Quarter [Mar. 15, 2007 unless otherwise specified, but FISMA report Mar. 1]

- (2) Publish to the HHS EA website an updated release of the HHS Enterprise Architecture.
- (2) Has an Enterprise Architecture with a score of 4 in the “Completion” section and 3 in both the “Use” and “Results” sections
- (3) Eliminate reliance on omnibus annual reviews for quality in the FY09 budget cycle due to an increase in the rigor of quarterly reviews.
- (3) 100% of changes to major and tactical IT investment baselines are under IT governance control.

- (4) Provide quarterly report to demonstrate continued achievement of the following objectives:
 - All systems reflected in system inventory remain fully certified and accredited;
 - IT systems are installed and maintained in accordance with security configurations;
 - At minimum 90% of applicable systems have requisite Privacy Impact Assessment conducted and posted;
 - At minimum 90% of systems with personally identifiable information have requisite systems of records developed and published; and
 - All systems retain a tested IT contingency plan
 - At minimum, 98% of all employees and contractors received general security awareness training
 - At minimum, 90% of employees and contractors identified with significant security responsibilities received appropriate role-based training

- (5) Report status of migration to PMA e-gov solutions (milestones met and upcoming)

FY 2007 – Third Quarter [June 1, 2007 unless otherwise specified, including FISMA report]

- (2) Publish to the HHS EA website an updated release of the HHS Enterprise Architecture.
- (3) Establish improved HHS ITIRB oversight over OPDIV CPIC processes and HHS ITIRB review of key OPDIV investments.
- (3) Formalize the CPIC/Budget formulation integration process.
- (3) Integrate the EVM and Portfolio Management Tools.

- (4) Provide quarterly report to demonstrate continued achievement of the following objectives:
 - All systems reflected in system inventory remain fully certified and accredited;
 - IT systems are installed and maintained in accordance with security configurations;
 - At minimum 90% of applicable systems have requisite Privacy Impact Assessment conducted and posted;
 - At minimum 90% of systems with personally identifiable information have requisite systems of records developed and published; and
 - All systems retain a tested IT contingency plan
 - At minimum, 98% of all employees and contractors received general security awareness training
 - At minimum, 90% of employees and contractors identified with significant security responsibilities received appropriate role-based training

- (5) Report status of migration to PMA e-gov solutions (milestones met and upcoming)

FY 2007 – Fourth Quarter [Sept. 5, 2007 unless otherwise specified, but FISMA report Sept. 1]

- (2) Publish to the HHS EA website an updated release of the HHS Enterprise Architecture.

- (4) Provide quarterly report to demonstrate continued achievement of the following objectives:
 - All systems reflected in system inventory remain fully certified and accredited;
 - IT systems are installed and maintained in accordance with security configurations;
 - At minimum 90% of applicable systems have requisite Privacy Impact Assessment conducted and posted;
 - At minimum 90% of systems with personally identifiable information have requisite systems of records developed and published; and
 - All systems retain a tested IT contingency plan
 - At minimum, 98% of all employees and contractors received general security awareness training
 - At minimum, 90% of employees and contractors identified with significant security responsibilities received appropriate role-based training

- (5) Report status of migration to PMA e-gov solutions (milestones met and upcoming)

KEY RESULTS - We Would Be Proud to Achieve

- (3) All major IT investments have acceptable business cases.
- (3) All major IT investments with annual or life cycle DME costs of \$10 million or more will comply with the EVM ANSI standard and operate within 10% variance from approved cost, schedule and performance baselines.
- (3) Firmly establish the use of EVM variance data in IT management decision processes, including capital planning and budgeting.
- (4) IT Systems have been certified and accredited as secure
- (4) At minimum 90% Privacy Impact Assessments have been conducted and publicly posted for applicable systems.
- (4) At minimum 90% of systems with personally identifiable information have developed systems of records which have been properly published.
- (4) IT systems are installed and maintained in accordance with security configurations
- (4) All systems retain a tested IT contingency plan
- (4) At minimum, 98% of all employees and contractors have received general security awareness training
- (4) At minimum, 90% of all employees and contractors identified with significant security responsibilities have received specialized or role-based training
- (5) HHS implements appropriate e-gov solutions in lieu of new, redundant initiatives