OMB Exhibit 300 (Operations/Maintenance) Redaction - 2010 (Form)
Federal Health Information Exchange - 2010 (Item)

Primavera
ProSight

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 27, 2008

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)

Federal Health Information Exchange-2010

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

029-00-01-11-01-1220-00

I.A.6) What kind of investment will this be in FY2010? (Please NOTE: Investments moving to O&M in FY2010, with Planning/Acquisition activities prior to FY2010 should not select O&M. These investments should indicate their current status.)

Operations and Maintenance

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

FY2004

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)

FHIE is an interagency clinical program, operating in direct support of the President's Management Agenda, Initiative #14. The FHIE project was created in response to the recommendations in Presidential Review Directive 5 in Aug.1998. In that document, the Secretaries of Defense, H&HS, & Veterans Affairs were charged with improving the medical record keeping associated with future deployments of service members and the care of vets. In Dec.2000, VA/VHA & DoD/MHS CIO's re-scoped the project. The objective was to provide significant functionality sooner, accelerate receipt of benefits, & mitigate technology risks. DoD & VA have worked very closely on establishing the appropriate technical architecture to extract e-health information from the DoD CHCS and transmit this information to a secure, shared FHIE repository. VA makes this clinically relevant data accessible to VA healthcare providers as part of the veteran's e-health record within the VistA health information system while adhering to the VHIM architecture.

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?

Sep 22, 2008

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

Yes

I.A.11) Contact information of Program/Project Manager?

	Project Managers Names (SHORT ANSWER)	PM Phone	E-mail (SHORT ANSWER)
Primary in-house	Horace Blackman	202-461-9645	horace.blackman@va.gov

I.A.11.a) What is the current FAC-P/PM (for civilian agencies) or DAWIA (for defense agencies) certification level of the program/project manager?

DAWIA-Level-2

I.A.11.b) When was the Program/Project Manager Assigned?

Aug 11, 2008

I.A.11.c) What date did the Program/Project Manager receive the FACP/PM certification? If the certification has not been issued, what is the anticipated date for certification?

Dec 31, 2008

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)	

FHIE supports "Expanded E-Govt" initiative by providing VA&DoD w/ capability to exchange e-health recs in a secure environment & reduces manual processes associated w/ exchanging paper health records. FHIE directly supports "Coordination of VA&DoD Pgms&Systems" initiative by sharing health data, adopting standards, & converging s/w apps. FHIE provides interoperability between systems, maintaining infrastructure & architecture supported by common data, communications, security, stds & systems.

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.)

Yes

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

No

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?

Adequate

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 2

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 2008 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 FY2010 funding request for the following? (This should total 100%)

Percentage of Total Investment	
% Hardware	
% Software	
% Services	
% 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?

NA

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

Contact Name: (SHORT ANSWER)	Dennis Stewart
Phone Number:	202-461-7456
Title: (SHORT ANSWER)	IT Specialist
E-mail: (SHORT ANSWER)	dennis.stewart2@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 - B

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.

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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 2008	CY 2009	BY 2010
Planning Total	29.450	0.000	0.000	0.000
Acquisition Total	20.700	0.000	0.000	0.000

Operations & Maintenance Total	16.450	3.620	6.030	6.211
Total, All Stages (Non-FTE)	66.600	3.620	6.030	6.211
Government FTE Costs	0.486	0.500	0.000	0.000
Govt. FTE Numbers	1	4	0	0
Total (FTE and Non-FTE)	67.086	4.120	6.030	6.211

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)

3 new Government FTEs will be required starting in FY08.

I.B.3) If the summary of spending has changed from the FY2009 President's budget request, briefly explain those changes. (LONG ANSWER)

The FHIE program is not requesting additional funding in FY2009 than previously stated in the FY 2008 Exhibit 300. FHIE is requesting a level of funding increase from FY08 in order to effectively accommodate the shift of activities originally planned for FY 2006, but have been shelved since as a result of funding cuts that affected every Exhibit 300 Program within the VHA OI portfolio. Non-pay funds that FHIE had free up by increasing pay dollars and shifting contractors to government FTE did not materialize when a government hiring freeze was imposed. Specifically, the budget reductions have resulted in the need to reschedule significant events including the upgrade of the Vitria Interface engine; and the elimination of single points of failure in the system. The FHIE program will be able to achieve the aforementioned activities at the funding level requested in this submission and maintain our commitments with DoD. Furthermore, the consequences of not funding the FY 2009 budget request as submitted for the system refresh, would jeopardize not only this interagency system, but other interagency programs that have become dependent on the reuse of components of this system. Systems that include the Bidirectional Health Information Exchange (BHIE) program, the Clinical/Health Data Repository Program, CAPRI, VSSC, VistA Imaging, LDSI, LEDI, AHLTA and other VA, DoD and NDAA projects require that FHIE is maintained, funded and available 24x7 to continue operations. The baseline shown in this Exhibit 300 is the latest approved by the Office of Management and Budget (OMB). A revised baseline reflecting the amounts shown in the BY 2008 Summary of Funding table is pending OMB approval.

PART I - C

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)

VA Directive 6061 requires the use of post implementation reviews and operational analysis on operations and maintenance efforts for sustainment (system operation/steady state) investments or the sustainment portion of mixed life cycle projects to promote more effective management oversight. VA will use an Operational Analysis to formally assess how well an investment is meeting program objectives, customer needs, and is performing within baseline performance goals. The VA operational analysis will involve the collection of information concerning an investment's performance and the comparison of this performance with an established baseline. Performance measures are required in order to determine how well the asset supports customers and stakeholders, how well the asset is managed by the agency, how well the IT system is operating, and how well the asset is meeting established performance goals. The outputs of the operational analysis are recommendations to VA agency resource managers as to the asset's continued use, modification, improvement, or termination.

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

I.C.2.a) Explain why not or how this is being done? (MEDIUM ANSWER)

I.C.3) Is there an acquisition plan which has been approved in accordance with agency requirements?
No

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

I.C.3.a.1) Is it Current?

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

I.C.3.b.1) If "no," briefly explain why: (MEDIUM ANSWER)
Department of Veterans Affairs 48 Code of Federal Regulation (CFR) Chapter 8 Clause 873.105(d) states that in lieu of the requirements of FAR Part 7 addressing documentation of the acquisition plan, the contracting officer may conduct an acquisition strategy meeting with cognizant offices to seek approval for the proposed acquisition approach. If a meeting is conducted, briefing materials shall be presented to address the acquisition plan topics and structure in FAR 7.105.

PART I - D

PART I: SUMMARY INFORMATION AND JUSTIFICATION

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Section D: Performance Information (All Capital Assets)

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 (indicators) must be provided. These goals need to map to the gap in the agency's strategic goals and objectives 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 percent, increase citizen participation by 300 percent a year to achieve an overall citizen participation rate of 75 percent 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, milestones, or investment, or general goals, such as, significant, better, improved that do not have a quantitative measure.

Agencies must use the following table to report performance goals and measures for the major investment and use the Federal Enterprise Architecture (FEA) Performance Reference Model (PRM). 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 each of the four different Measurement Areas (for each fiscal year). The PRM is available at www.egov.gov. The table can be extended to include performance measures for years beyond the next President's Budget.

Fiscal Year	Strategic Goal(s) Supported	Measurement Area	Measurement Grouping	Measurement Indicator	Baseline	Planned Improvements to the Baseline	Actual Results
2006	Honor & Memorialize	Mission and Business Results	Health Care Delivery Services	Health Care Services	The average number of VA personnel electronically accessing FHIE information per week increased to 155.	The average daily number of VA Personnel accessing FHIE data will increase by 10%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	At the end of FY06, the average number of VA personnel accessing FHIE data was 373, exceeding the FY05 level by 141% and exceeding the FY06 Planned Improvement to the Baseline.

2006	Honor & Memorialize	Customer Results	Customer Impact or Burden	Customer Impact or Burden	For FY05, avg nbr of queries per wk was 2,201 & avg time on framework remained < 30 secs. Thus, on avg in 2,201 instances per wk, Vets weren't required to provide paper recs yet critical to care info was immediately available to providers.	The average number of FHIE queries per week will increase by 10%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	At the end of FY06, the average number of FHIE queries per week stood at 8,200, a 273% increase over the average number in FY05. In addition, the average time on the framework stood at 6.24 seconds/query, well below the goal of < 30 seconds/query.
2006	Honor & Memorialize	Processes and Activities	Compliance	Efficiency	By 30 Sep 2005, DoD had transferred over 3,066,938 unique records. Of these, 1,408,444 records correlated to the VA's Master Patient Index.	The total number of DoD records that correlate with the VA's MPI will increase by 10%. Supports Enabling Goal/Objective E.3 - Implement a One VA technology framework that supports the integration of information across business lines.	At the end of FY06, DoD xfer'd 3,647,922 unique recs. A 19% incr over FY05. Of these, *1,263,200 correlated to VA's MPI. *Note: a correction to reflect only VA excl was made during FY06. The new baseline is the final FY06 tot of 1,263,200.
2006	Honor & Memorialize	Technology	Data Reliability and Quality	Data Reliability and Quality	By 30 Sep 2005, 4,185,679 messages per month contained clinically relevant health care information for a total of 137,451,694.	The total nbr of msgs electronically transmitted containing critical health care info will increase by 10%. Supports Enabling Goal/Objective E.3- Implement a One VA technology framework that supports integration of information across business lines.	As of the end of FY06, a total of 165,586,797 messages have been xmit'd thru FHIE, a 20% incr over the FY05 total. The avg messages xferr'd per mth for FY06 is 2,344,592.
2007	Honor & Memorialize	Mission and Business Results	Health Care Delivery Services	Health Care Services	At the end of FY06, the average number of VA personnel electronically accessing FHIE information per week was 373.	The average daily number of VA Personnel accessing FHIE data will increase by 5%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	At the end of FY07, the weekly average number of VA personnel accessing FHIE data was 595, exceeding the FY06 level by 24% and exceeding the goal for the FY07 Planned Improvement to the Baseline.

2007	Honor & Memorialize	Customer Results	Customer Impact or Burden	Customer Impact or Burden	At the end of FY06, the avg nbr of queries per wk was 8,200 & avg time on framework was 6.24 secs/query.	The average number of FHIE queries per week will increase by 5%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	At the end of FY07, the avg nbr of FHIE queries/week stood at 26,071 and a 217.9% increase over the avg nbr in FY06. In addition, the avg time on the framework stood at 6.28 seconds/query, significantly below the goal of < 30 secs/query.
2007	Honor & Memorialize	Processes and Activities	Compliance	Efficiency	At the end of FY06, DoD had transferred 3,647,922 unique records. Of these, 1,263,200 records correlated to the VA's Master Patient Index.	The total number of DoD records that correlate with the VA's MPI will increase by 5%. Supports Enabling Goal/Objective E.3 - Implement a One VA technology framework that supports the integration of information across business lines.	At the end of FY07, DoD has transferred a total of 4,064,835 unique records (patients), an 11.4% increase over the FY06 total. Of these records (patients), 1,426,638 have correlated to the VA's MPI, an increase of 12.9% over FY06.
2007	Honor & Memorialize	Technology	Data Reliability and Quality	Data Reliability and Quality	By the end of FY06, an avg of 2,344,592 messages per month containing clinically relevant health care information were transmitted for an FY06 total of 165,586,797.	The total nbr of msgs electronically transmitted containing critical health care info will increase by 5%. Supports Enabling Goal/Objective E.3- Implement a One VA technology framework that supports integration of information across business lines.	At the end of FY07, a total of 194,217,570 messages have been transmitted thru the system, a 17.2% increase over the FY06 total. The avg messages transferred per month in FY07 stands at 2,385,898 which is 1.76% more than the monthly avg in FY06.
2008	Honor & Memorialize	Mission and Business Results	Health Care Delivery Services	Health Care Services	At the end of FY07, the average number of VA personnel electronically accessing FHIE information per week was 595.	The average daily number of VA Personnel accessing FHIE data will increase by 5%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	To date, the weekly average number of VA personnel access FHIE data is 723, exceeding the FY07 level by 21% and exceeding the goal for the FY07 Planned improvement to the baseline.

2008	Honor & Memorialize	Customer Results	Customer Impact or Burden	Customer Impact or Burden	At the end of FY07, the avg nbr of queries per wk was 26,071 & avg time on framework was 6.28 secs/query.	The average number of FHIE queries per week will increase by 5%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	To date, the average number of FHIE queries per week stands at 36,971 a 41.8% increase over the average number in FY07. In addition, the average time on the framework stands at 8.76 seconds/query, significantly below the goal of < 30 seconds/query.
2008	Honor & Memorialize	Processes and Activities	Compliance	Efficiency	At the end of FY07, DoD had transferred 4,064,835 unique patients. Of these, 1,426,638 records correlated to the VA's Master Patient Index.	The total number of DoD records that correlate with the VA's MPI will increase by 10%. Supports Enabling Goal/Objective E.3 - Implement a One VA technology framework that supports the integration of information across business lines.	To date, the DoD has transferred records for a total of 4,479,305 unique patients, an increase of 10.1% over the FY07 total. Of these patients, 1,612,692 have correlated to the VA's MPI, an increase to-date of 4.57%.
2008	Honor & Memorialize	Technology	Data Reliability and Quality	Data Reliability and Quality	By the end of FY07, an avg of 2,385,898 messages per month containing clinically relevant health care information were transmitted for an FY07 total of 194,217,570.	The total nbr of msgs electronically transmitted containing critical health care info will increase by 5%. Supports Enabling Goal/Objective E.3- Implement a One VA technology framework that supports integration of information across business lines.	To date, a total of 226,789,383 messages have been transmitted thru the FHIE system, a 16.7% increase over the FY07 total. The average messages transferred per month for FY08 stands at 2,961,074 which is 24.1% more than the monthly average in FY07.
2009	Honor & Memorialize	Mission and Business Results	Health Care Delivery Services	Health Care Services	The average number of VA personnel accessing FHIE data per week in the previous year will be calculated and utilized as the new baseline.	The average daily number of VA Personnel accessing FHIE data will increase by 5%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	Results will be determined for measurement during the FY.

2009	Honor & Memorialize	Customer Results	Customer Impact or Burden	Customer Impact or Burden	The average number of FHIE queries per week for the previous year will be calculated and utilized as the new baseline.	The average number of FHIE queries per week will increase by 5%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	Results will be determined for measurement during the FY.
2009	Honor & Memorialize	Processes and Activities	Compliance	Efficiency	The total number of records transferred by DoD and the number that has correlated to the VA's Master Patient Index will be calculated and utilized as the new baseline.	The total number of DoD records that correlate with the VA's MPI will increase by 5%. Supports Enabling Goal/Objective E.3 - Implement a One VA technology framework that supports the integration of information across business lines.	Results will be determined for measurement during the FY.
2009	Honor & Memorialize	Technology	Data Reliability and Quality	Data Reliability and Quality	The total number of messages containing critical health care information will be determined and utilized as the new baseline.	The total nbr of msgs electronically transmitted containing critical health care info will increase by 10%. Supports Enabling Goal/Objective E.3- Implement a One VA technology framework that supports integration of information across business lines.	Results will be determined for measurement during the FY.
2010	Honor & Memorialize	Mission and Business Results	Health Care Delivery Services	Health Care Services	The average number of VA personnel accessing FHIE data per week in the previous year will be calculated and utilized as the new baseline.	The average daily number of VA Personnel accessing FHIE data will increase by 5%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	Results will be determined for measurement during the FY.
2010	Honor & Memorialize	Customer Results	Customer Impact or Burden	Customer Impact or Burden	The average number of FHIE queries per week for the previous year will be calculated and utilized as the new baseline.	The average number of FHIE queries per week will increase by 5%. Supports Strategic Plan Goal 3, Objective 3.1 - Provide high-quality, reliable, accessible, timely and efficient health care.	Results will be determined for measurement during the FY.

2010	Honor & Memorialize	Processes and Activities	Compliance	Efficiency	The total number of records transferred by DoD and the number that has correlated to the VA's Master Patient Index will be calculated and utilized as the new baseline.	The total number of DoD records that correlate with the VA's MPI will increase by 5%. Supports Enabling Goal/Objective E.3 - Implement a One VA technology framework that supports the integration of information across business lines.	Results will be determined for measurement during the FY.
2010	Honor & Memorialize	Technology	Data Reliability and Quality	Data Reliability and Quality	The total number of messages containing critical health care information will be determined and utilized as the new baseline.	The total nbr of msgs electronically transmitted containing critical health care info will increase by 5%. Supports Enabling Goal/Objective E.3- Implement a One VA technology framework that supports integration of information across business lines.	Results will be determined for measurement during the FY.

PART I - F

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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.

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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)

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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.3a) If "yes," provide the six digit code corresponding to the agency segment architecture. The segment architecture codes are maintained by the agency Chief Architect.
100-000
Segment Architecture Mapping Reference Table:

BUSINESS SEGMENT NAME	SEGMENT ARCHITECTURE CODE
1) Health Business Segment	100-000
2) Benefits Business Segment	200-000
3) Memorial, Burials & HQ Segment	300-000
4) Material Management Segment	400-000
5) Financial Segment	500-000
6) Human Resources Segment	600-000
7) Security Management Segment	700-000
8) Information Management Segment	800-000
9) Education & Training Segment	900-000

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	Partner Relationship Management	Team with DoD to provide VHA clinicians DoD clinical data through remote data views using FHIE.	Customer Relationship Management	Partner Relationship Management	Data Exchange		No Reuse	

2	Process Tracking	Processing is automated PowerChannel (COTS). DoD sends files to FHIE, which are automatically verified and loaded into the FHIE repository.	Tracking and Workflow	Process Tracking	Instrumentation and Testing		No Reuse	
3	Change Management	FHIE IPT uses Primavera IT Project Office, to monitor and track changes and proposed modifications to FHIE	Management of Processes	Change Management	Access Control		No Reuse	
4	Configuration Management	The FHIE IPT designed and implemented automatic data extraction and file transfer process, eliminating the use and transport of magnetic tape media.	Management of Processes	Configuration Management	Instrumentation and Testing		No Reuse	
5	Requirements Management	FHIE IPT reviews new requirements by determining business need and ensures additional requirements are integrated into the scope and the impact to FHIE in relation to cost, schedule and technology requirements.	Management of Processes	Requirements Management	Program / Project Management		No Reuse	
6	Program/Project Management	FHIE IPT has identified annual strategic and performance goals and monitors and tracks FHIE performance in relation to these goals using Primavera IT Project Office.	Management of Processes	Program / Project Management	Meta Data Management		No Reuse	

7	Governance/Policy Management	FHI adheres to all applicable Federal, VHA and DoD standards and regulations including OMB, NIST, FISMA, HIPAA.	Management of Processes	Governance / Policy Management	Configuration Management		No Reuse	
8	Quality Management	FHIE adheres to the established VHA Office of Information (OI) quality management processes.	Management of Processes	Quality Management	Knowledge Capture		No Reuse	
9	Risk Managment	FHIE IPT has identified project risks along with strategies for mitigation, costs associated with the risk, probability of occurrence and current status. FHIE has a Risk Management Plan which is updated annually.	Management of Processes	Risk Management	Process Tracking		No Reuse	
10	Workgroup/Groupeare	FHIE IPT collaborates on project related issues, which is facilitated using MS SharePoint and Primavera IT Project Office.	Organizational Management	Workgroup / Groupware	Workgroup / Groupware		No Reuse	
11	Stratgic Planning and Mgmt	The FHIE IPT consists of VHA and DoD team members who collaborate to monitor the status of the identified performance goals and objectives and life cycle costs. This is done using Primavera IT Project Office.	Investment Management	Strategic Planning and Mgmt	Loading and Archiving		No Reuse	

12	Performance Management	FHIE IPT measures the project cost and schedule using EVM to determine variances and if necessary identify any corrective actions and strategies.	Investment Management	Performance Management	Data Exchange		No Reuse	
13	Product Management	FHIE IPT continues identify other VHA programs that can leverage the existing FHIE architecture to provide increased efficiencies and effectiveness.	Customer Relationship Management	Product Management	Software Development		No Reuse	
14	Instrumentation and Testing	FHIE IPT has established performance metrics that are gathered and analyzed using daily usage statistics	Development and Integration	Instrumentation and Testing	Intrusion Detection		No Reuse	
15	Instrumentation and testing	FHIE monitors performance exception events	Development and Integration	Instrumentation and Testing	Audit Trail Capture and Analysis		No Reuse	
16	Document Library	FHIE stores documentation in HSD&D's TSPR document library, for FHIE IPT, stakeholders and clinicians to view securely	Collaboration	Document Library	Data Classification		No Reuse	
17	Data Exchange	FHIE Exchanges data between all systems connected to the FHIE framework	Data Management	Data Exchange	Data Exchange		No Reuse	
18	Data Recovery	FHIE uses high availability HealtheVet architecture for rapid data recovery.	Data Management	Data Recovery	Extraction and Transformation		No Reuse	

19	Extraction and Transformation	FHIE converts local records to and from the canonical form.	Data Management	Extraction and Transformation	Extraction and Transformation		No Reuse	
20	Meta Data Management	FHIE forms canonical records to metadata from an Information Model.	Data Management	Meta Data Management	Meta Data Management		No Reuse	
21	Loading and Archiving	FHIE loads patient repository records which have been transferred from DoD.	Data Management	Loading and Archiving	Loading and Archiving		No Reuse	
22	Data Integration	FHIE aggregates patient records from multiple sources and sorts the data.	Development and Integration	Data Integration	Data Integration		No Reuse	
23	Legacy Integration	FHIE connects to legacy VHA and DoD systems to exchange records	Development and Integration	Legacy Integration	Legacy Integration		No Reuse	
24	Software Development	FHIE functionality is enhanced with scheduled upgrades and deployments.	Development and Integration	Software Development	Software Development		No Reuse	
25	Issue Tracking	System issues are integrated into the FHIE established development process.	Systems Management	Issue Tracking	Process Tracking		No Reuse	
26	Access Control	Administrator and user access to FHIE is controlled with role based security controls.	Security Management	Access Control	Access Control		No Reuse	
27	Audit Trail and Capture Analysis	FHIE Administrator actions are logged, monitored and reviewed	Security Management	Audit Trail Capture and Analysis	Audit Trail Capture and Analysis		No Reuse	
28	Query	Clinicians may search FHIE for patient and date ranges and other identified values.	Search	Query	Query		No Reuse	

29	Classification	Clinicians may search using type of record criteria– Medications Lab etc	Search	Classification	Classification		No Reuse	
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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 level transferred to another agency to pay for the service.

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	Data Exchange	Service Access and Delivery	Service Transport	Service Transport
2	Instrumentation and Testing	Service Access and Delivery	Service Requirements	Legislative / Compliance
3	Access Control	Service Access and Delivery	Service Requirements	Authentication / Single Sign-on
4	Instrumentation and Testing	Service Access and Delivery	Service Requirements	Legislative / Compliance
5	Program / Project Management	Service Interface and Integration	Integration	Enterprise Application Integration
6	Meta Data Management	Service Interface and Integration	Interoperability	Data Format / Classification
7	Configuration Management	Service Platform and Infrastructure	Software Engineering	Software Configuration Management
8	Issue Tracking	Service Platform and Infrastructure	Software Engineering	Software Configuration Management
9	Workgroup / Groupware	Component Framework	Data Management	Reporting and Analysis
10	Loading and Archiving	Service Platform and Infrastructure	Database / Storage	Database
11	Data Exchange	Component Framework	Data Interchange	Data Exchange
12	Software Development	Component Framework	Business Logic	Platform Independent Technologies
13	Intrusion Detection	Component Framework	Security	Certificates / Digital Signatures
14	Audit Trail Capture and Analysis	Component Framework	Security	Supporting Security Services
15	Data Exchange	Service Interface and Integration	Integration	Middleware
16	Data Integration	Service Interface and Integration	Interoperability	Data Transformation
17	Extraction and Transformation	Service Interface and Integration	Interoperability	Data Transformation
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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)

FHIE leverages existing DoD services and applications including Defense Enrollment Eligibility Reporting System (DEERS), Defense Manpower Data Center (DMDC), and Composite Health Care System (CHCS). FHIE also leverages VHA services including the VHA Message Passing Interface (MPI), Computerized Patient Records System (CPRS), Rapid Design Visualization (RDV), and Veteran's Health Information System and Technical Architecture (VistA).

PART III - A

Part III: For "Operation and Maintenance" investments ONLY (Steady State)

Part III should be completed only for investments identified as "Operation and Maintenance" (Steady State) in response to Question 6 in Part I, Section A above.

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

Section A - RISK MANAGEMENT (All Capital Assets)

In order to successfully address this issue on the business case and capital asset plan, you must have performed a risk assessment at the initial concept, included mandatory risk elements defined below and demonstrate active management of the risk throughout the life-cycle of the investment.

For all investments, both IT and non-IT, you must discuss each of the following risks and present your plans to eliminate, mitigate, or manage risk, with milestones and completion dates. If there is no risk to the investment achieving its goals from a risk category, indicate so. If there are other risks identified, include them. Risk assessments should include risk information from all stakeholders and should be performed at the initial concept stage and then monitored and controlled throughout the life-cycle of the investment. Risk assessments for all investments must include: 1) schedule ; 2) initial costs; 3) life-cycle costs); 4) technical obsolescence; 5) feasibility; 6) reliability of systems; 7) dependencies and interoperability between this investment and others; 8) surety (asset protection) considerations; 9) risk of creating a monopoly for future procurements; 10) capability of agency to manage the investment; and 11) overall risk of investment failure.

In addition, for IT investments, risk must be discussed in the following categories 12) organizational and change management; 13) business; 14) data/info; 15) technology; 16) strategic; 17) security; 18) privacy; and 19) project resources. For security risks, identify under the Description column the level of risk as high, medium, or basic. What aspect of security determines the level of risk, i.e., the need for confidentiality of information, availability of information or the system, reliability of the information or system? Under the Current Status column, list the milestones remaining to mitigate the risk.

Moreover, for each risk category with a probability of occurrence of at least medium and impact of at least medium, please indicate whether or not the costs to mitigate the risk have been incorporated into your lifecycle cost estimates in the summary of spending stages section of this Exhibit 300. If not, please also indicate why in your response.

III.A.1) Does the investment have a Risk Management Plan?

Yes

III.A.1.a) If "yes," what is the date of the plan?

Mar 25, 2008

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

No

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

III.A.2) If there currently is no plan, will a plan be developed?

III.A.2.a) If "yes," what is the planned completion date?

III.A.2.b) If "no," what is the strategy for managing the risks? (LONG ANSWER)

PART III - B

Part III: For "Operation and Maintenance" investments ONLY (Steady State)

Part III should be completed only for investments identified as "Operation and Maintenance" (Steady State) in response to Question 6 in Part I, Section A above.

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

III.B) Cost and Schedule Performance:

III.B.1) Was operational analysis conducted?

Yes

III.B.1.a) If "yes," provide the date the analysis was completed.

Mar 31, 2008

III.B.2) 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").

Description of Milestone	Current BL Completion Date Planned	Current BL Completion Date Actual
Requirements and Development	Nov 30, 2000	Nov 30, 2000
Development and Implementation	Jul 31, 2002	Jul 31, 2002
Enhancements/Milestone 3	Mar 31, 2004	Mar 31, 2004
Maintenance and Operation FY04	Sep 30, 2004	Sep 30, 2004
Maintenance and Operation FY05	Sep 30, 2005	Sep 30, 2005
Maintenance and Operation FY06/Start Milestone 4	Sep 30, 2006	Sep 30, 2006
Maintenance and Operation FY07 (includes completion of the VA's milestone IV	Sep 30, 2007	Sep 30, 2007
Maintenance and Operation FY08	Sep 30, 2008	Sep 30, 2008
Maintenance and Operation FY09	Sep 30, 2009	
Maintenance and Operation FY10	Sep 30, 2010	