

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>I.A.1) Date of Submission (mm/dd/yyyy)</i>
Sep 27, 2008
<i>I.A.2) Agency</i>
029 - Department of Veterans Affairs
<i>I.A.3) Bureau</i>
00 - Agency Wide Initiatives
<i>I.A.4) Name of this Investment:(SHORT ANSWER)</i>
VistA Imaging-2010
<i>I.A.5) Unique Project(Investment) Identifier: Update the UPI using the Exhibit 53 tab.</i>
029-00-01-11-01-1181-00
<i>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.)</i>
Operations and Maintenance
<i>I.A.7) What was the first budget year this investment was submitted to OMB?</i>
FY2004
<i>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)</i>
<p>The Veterans Health Information Systems and Technology Architecture (VistA) Imaging investment funds the operations and maintenance of a veteran facing Information Technology (IT) medical care program; an agency-wide initiative that seamlessly integrates medical images such as x-rays, pathology slides, scanned documents, and test results immediately into the Computerized Patient Record System (CPRS). This investment directly impacts delivery of medical care services to veterans and supports VA's Medical Care program identified in the Department's Strategic Plan and Performance and Accountability Report.</p> <p>Vista Imaging supports VA's Strategic Goal 3 to serve veterans, Strategic Objective 3.1 to provide high-quality, reliable, accessible, timely, and efficient health care, and VA's Enabling Goal E.3 to support the integration of information across business lines and provide secure, consistent, reliable, and accurate information to all interested parties by using information technology by automating the collection of medical information and facilitate delivery of medical care to veterans, and providing economical, Windows-based imaging software that runs on COTS workstations and is integrated with the computerized patient record (CPRS) and other VA healthcare applications, thus enhancing workflow, clinical diagnosis and decision making capabilities.</p> <p>It closes in part the VA's performance gap to improve access to health care through the use of advanced technologies for diagnosis, testing, data exchange and scheduling by using information technology to provide medical information electronically to clinicians in real-time.</p> <p>This investment supports the President's Management Agenda initiative "Expanded E-Government" by better use and management of information technology resources that disseminate and share information more efficiently, automating processes and reducing overall costs to deliver services to veterans.</p>
<i>I.A.9) Did the Agency's Executive/Investment Committee approve this request?</i>
Yes
<i>I.A.9.a) If "yes," what was the date of this approval?</i>
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?

Senior/Expert-level

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

Mar 31, 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)

This investment supports Expanded Electronic Government by providing image-enabled medical records that enhance the functionality of an electronic patient record and improve quality and safety of medical care to veterans. This investment supports the Coordination of VA & DoD Programs and Systems by collaborated with HHS and DoD to develop standards for electronic exchange of imaging information.

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 1

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 FFIA (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

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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	0.000	0.000	0.000	0.000
Acquisition Total	94.323	0.000	0.000	0.000
Operations & Maintenance Total	100.811	15.800	14.000	14.880
Total, All Stages (Non-FTE)	195.134	15.800	14.000	14.880
Government FTE Costs	112.468	15.248	0.000	0.000
Govt. FTE Numbers	1,092	150	0	0
Total (FTE and Non-FTE)	307.602	31.048	14.000	14.880

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?

No

I.B.2.a) If Yes, How many and in what year? (MEDIUM ANSWER)

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

The Information Technology Leadership Board approved a modification to this investment's baseline to reflect changes due to the realignment of information technology resources under the Office of Information and Technology. The summary of spending and proposed baseline have been updated to reflect new cost projections for operations and maintenance activities to support Vista Imaging. In addition, the Government costs for FTE, and number of Government FTE have changed due to the reassignment of FTE to the investment.

Not funding Vista Imaging would cause an increase in physician costs (for face-to-face vs. digital screening), physician travel, and increase in number of bed days (cost per patient). There would also be a negative impact in timeliness and quality of service that could be delivered to veterans with imaging capabilities.

PART I - C

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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.

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
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2006	Public Health & Socioeconomic Wellbeing	Mission and Business Results	Record Retention	Record Retention: Availability of medical chart scanned documents and images which are official agency records with assigned retention schedules: Number of new images and documents acquired, stored and available online to clinicians.	The number of new electronic images and documents available online during FY2005 (104 million) will become the baseline for FY2006.	Number of new electronic images and documents available online will increase by 1% over the FY2005 baseline (to 105 million). This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	Exceeded goal: The number of new images available online was 155.6 million, exceeding the planned improvement to the baseline by 50 million images
2006	Public Health & Socioeconomic Wellbeing	Customer Results	Customer Impact or Burden	Customer Impact or Burden: Use of electronic images, reducing burden of storage and retrieval of paper or film images: Number of images viewed by medical center staff.	The number of image accesses reported for FY2005 (68.4 million) will be the baseline for FY2006.	Clinicians will expand their use of electronic images and documents by 2% over the FY2005 baseline (to 69,700,000 images). This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	Exceeded annual goal: 85 million images were viewed.
2007	Public Health & Socioeconomic Wellbeing	Mission and Business Results	Record Retention	Availability of medical chart scanned documents and images which are official agency records with assigned retention schedules: Number of new images and documents acquired, stored and available online to clinicians.	The number of new electronic images and documents available online during Fy 2006 (155.6 M.) will become the baseline for FY 2007.	Number of new electronic images and documents available online will increase by 1% over the FY2006 baseline (to 157 M.) This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	Exceeded goal: The number of new images available was 183 M., exceeding the planned improvement to the baseline by 26 M. images.
2007	Public Health & Socioeconomic Wellbeing	Customer Results	Customer Impact or Burden	Customer Impact or Burden: Use of electronic images, reducing burden of storage and retrieval of paper or film images: Number of images viewed by medical center staff.	The number of image accesses reported for FY2006 (85M.) will be the baseline for performance for FY2007.	Clinicians will expand their use of electronic images and documents by 2% more than the FY2006 baseline (to 86.7 M.) This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	Exceeded goal: 91 M. images were viewed.

2008	Public Health & Socioeconomic Wellbeing	Mission and Business Results	Record Retention	Availability of medical chart scanned documents and images which are official agency records with assigned retention schedules: Number of new images and documents acquired, stored and available online to clinicians.	The number of new electronic images and documents available online during the FY 2007 (183 M) will become the baseline for this year.	Number of new electronic images and documents available online will increase by 1% over the FY2007 baseline. This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	As of FY08 Qtr1, 59.3 million images, on track to exceed annual goal
2008	Public Health & Socioeconomic Wellbeing	Customer Results	Customer Impact or Burden	Use of electronic images, reducing burden of storage and retrieval of paper or film images: Number of images viewed by medical center staff.	The number of image accesses reported for FY2007 (91 M.) will be the baseline for performance for FY2008.	Clinicians will expand their use of electronic images and documents by 1% more than the FY2007 baseline to 92 M.	Images viewed as of FY2008 Qtr1 22.9 M. images
2009	Public Health & Socioeconomic Wellbeing	Mission and Business Results	Record Retention	Availability of medical chart scanned documents and images which are official agency records with assigned retention schedules: Number of new images and documents acquired, stored and available online to clinicians.	The number of new electronic images and documents available online during the previous year will become the baseline for this year.	Number of new electronic images and documents available online will increase by 1% over the FY2008 baseline. This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	Available 1st Qtr FY10
2009	Public Health & Socioeconomic Wellbeing	Customer Results	Customer Impact or Burden	Use of electronic images, reducing burden of storage and retrieval of paper or film images: Number of images viewed by medical center staff.	The number of image accesses reported for FY2008 will be the baseline for performance for FY2009.	Clinicians will expand their use of electronic images and documents by 1% more than the FY2008 baseline.	

2010	Public Health & Socioeconomic Wellbeing	Mission and Business Results	Record Retention	Availability of medical chart scanned documents and images which are official agency records with assigned retention schedules: Number of new images and documents acquired, stored and available online to clinicians.	The number of accesses reported for FY2010 will be the baseline for performance for this year.	Number of new electronic images and documents available online will increase by 1% over the FY2009 baseline. This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	
2010	Public Health & Socioeconomic Wellbeing	Customer Results	Customer Impact or Burden	Use of electronic images, reducing burden of storage and retrieval of paper or film images: Number of images viewed by medical center staff.	The number of image accesses reported for FY2009 will be the baseline for performance for FY2010.	Clinicians will expand their use of electronic images and documents by 1% more than the FY2009 baseline.	
2006	Public Health & Socioeconomic Wellbeing	Processes and Activities	Productivity	Percentage of image discrepancies identified in newly captured images requiring maintenance staff actions	The percentage of image discrepancies identified in newly captured images in FY2005 requiring maintenance staff actions (12%) shall be the baseline for FY2006	The percentage of image discrepancies identified in newly captured images requiring maintenance staff actions will decrease by 1% compared to the previous year. This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	Exceeded goal: The percentage of image discrepancies identified in newly captured images in FY2006 requiring maintenance staff actions is expected to be 9%, exceeding the planned improvement to the baseline by 8%.
2007	Public Health & Socioeconomic Wellbeing	Processes and Activities	Productivity	Percentage of image discrepancies identified in newly captured images requiring maintenance staff actions	The percentage of image discrepancies identified in newly captured images in FY2006 requiring maintenance staff actions shall be the baseline for FY2007	The percentage of image discrepancies identified in newly captured images requiring maintenance staff actions will decrease by 1% compared to the previous year. This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	The percentage of image discrepancies identified in newly captured images in FY2007 requiring maintenance staff actions: less than 9%

2008	Public Health & Socioeconomic Wellbeing	Processes and Activities	Productivity	Percentage of image discrepancies identified and fixed in newly captured images requiring maintenance staff actions	The percentage of image discrepancies identified and fixed in newly captured images in FY2007 requiring maintenance staff actions shall be the baseline for FY2008.	The percentage of image discrepancies identified and fixed in newly captured images requiring maintenance staff actions will decrease by 1% compared to the previous year. This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	Available 1st Qtr FY09
2009	Public Health & Socioeconomic Wellbeing	Processes and Activities	Productivity	Percentage of image discrepancies identified and fixed in newly captured images requiring maintenance staff actions	The percentage of image discrepancies identified and fixed in newly captured images in FY2008 requiring maintenance staff actions shall be the baseline for FY2009	The percentage of image discrepancies identified and fixed in newly captured images requiring maintenance staff actions will decrease by 1% compared to the previous year. This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	Available 1st Qtr FY10
2006	Public Health & Socioeconomic Wellbeing	Technology	Internal Data Sharing	Number of images that are viewed annually by offsite specialists.	The average number of images viewed annually by offsite specialists in FY2005 (101,000) will be the baseline for FY2006.	The average number of images viewed annually by offsite specialists will increase by 1% over the previous year (to 102,000 images). This improvement supports the VA Strategic Plan Enabling Goal, Objective E-3.	Exceeded goal: 112,462 studies were viewed by offsite specialists, equivalent to an increase of 11% over the planned improvement to the goal.
2007	Public Health & Socioeconomic Wellbeing	Technology	Internal Data Sharing	Number of images that are viewed annually by offsite specialists.	The average number of images viewed monthly by offsite specialists in FY2006 will be the baseline for FY2007 (112,462M studies) will be the baseline for FY2007.	The average number of images viewed monthly by offsite specialists will increase by 1% over the previous year (to 113.5M studies).	Exceeded goal: 160,800 studies were viewed by offsite specialists.

2008	Public Health & Socioeconomic Wellbeing	Technology	Internal Data Sharing	Number of images that are viewed annually by offsite specialists.	The average number of images viewed monthly by offsite specialists in FY2007 (160,800M studies) will be the baseline for FY2008.	The average number of images viewed monthly by offsite specialists will increase by 1% over the previous year (to 162.4M studies).	On track to meet goal: FY2008 Qtr1 40,352 studies
2009	Public Health & Socioeconomic Wellbeing	Technology	Internal Data Sharing	Increase number of images that are viewed annually by offsite specialists.	The average number of images viewed monthly by offsite specialists in FY2008 will be the baseline for FY2009.	The average number of images viewed monthly by offsite specialists will increase by 1% over the previous year.	Available 1st Qtr FY10
2010	Public Health & Socioeconomic Wellbeing	Technology	Internal Data Sharing	Increase number of images that are viewed annually by offsite specialists.	The average number of images viewed monthly by offsite specialists in FY2009 will be the baseline for FY2010.	The average number of images viewed monthly by offsite specialists will increase by 1% over the previous year.	

PART I - F

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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	Document Imaging and OCR	Scanning medical chart documents	Document Management	Document Imaging and OCR	Document Imaging and OCR		No Reuse	
2	Document Referencing	Linking medical documents to medical reports	Document Management	Document Referencing	Document Referencing		No Reuse	
3	Document Conversion	Change medical image file formats	Document Management	Document Conversion	Document Conversion		No Reuse	

4	Library / Storage	Storage and archiving of scanned medical documents	Document Management	Library / Storage	Library / Storage		No Reuse	
5	Document Review and Approval	Electronic documents and images shall comply with quality regulations	Document Management	Document Review and Approval	Document Review and Approval		No Reuse	
6	Classification	Assigning categories to scanned documents	Document Management	Classification	Classification		No Reuse	
7	Indexing	Retrieving images and documents using index terms	Document Management	Indexing	Indexing		No Reuse	
8	Mathematical	Measure features in medical images	Analysis and Statistics	Mathematical	Mathematical		No Reuse	
9	Mathematical	Capture of multimedia medical data	Visualization	Imagery	Imagery		No Reuse	
10	Multimedia	Display of multimedia medical data	Visualization	Multimedia	Multimedia		No Reuse	
11	Radiological	Support use of radiology images	Analysis and Statistics	Radiological	Radiological		No Reuse	
12	Record Linking / Association	Associate images with medical record elements	Records Management	Record Linking / Association	Record Linking / Association		No Reuse	
13	Document Classification	Categorize documents and images for retrieval at any site	Records Management	Document Classification	Document Classification		No Reuse	
14	Information Retrieval	Allow clinicians to view digital images and documents	Knowledge Management	Information Retrieval	Information Retrieval		No Reuse	
15	Information Mapping / Taxonomy	Allow use of images based on mapped categories	Knowledge Management	Information Mapping / Taxonomy	Information Mapping / Taxonomy		No Reuse	
16	Information Sharing	Support sharing of documents and images across facilities	Knowledge Management	Information Sharing	Information Sharing		No Reuse	
17	Knowledge Capture	Capture medical images and documents	Knowledge Management	Knowledge Capture	Knowledge Capture		No Reuse	

18	Contingent Workforce Management	Use telemedicine to utilize services of alternative clinical personnel	Human Capital / Workforce Management	Contingent Workforce Management	Contingent Workforce Management		No Reuse	
19	Data Warehouse	Storage of Multimedia Medical Data	Data Management	Data Warehouse	Data Warehouse		No Reuse	
20	Data Cleansing	Verify correctness of image and document data	Data Management	Data Cleansing	Data Cleansing		No Reuse	
21	Data Exchange	Interface to COTS medical devices	Data Management	Data Exchange	Data Exchange		No Reuse	
22	Data Recovery	Restore data integrity if necessary	Data Management	Data Recovery	Data Recovery		No Reuse	
23	Data Integration	Import of information from COTS systems	Development and Integration	Data Integration	Data Integration		No Reuse	
24	Instrumentation and Testing	Validation and testing of system	Development and Integration	Instrumentation and Testing	Instrumentation and Testing		No Reuse	
25	Software Development	Create VistA Imaging Software and Enhancements	Development and Integration	Software Development	Software Development		No Reuse	
26	Query	Allow clinicians to filter images and documents	Search	Query	Query		No Reuse	
27	System Resource Monitoring	Measure system usage	Systems Management	System Resource Monitoring	System Resource Monitoring		No Reuse	
28	Partner Relationship Management	Testing interfaces with commercial vendors	Customer Relationship Management	Partner Relationship Management	Partner Relationship Management		No Reuse	
29	Personalization	Allow users to customize VistA Imaging software	Customer Preferences	Personalization	Personalization		No Reuse	
30	Online Help	Provide online help for system users	Customer Initiated Assistance	Online Help	Online Help		No Reuse	
31	Process Tracking	Monitor of image interpretation activities	Tracking and Workflow	Process Tracking	Process Tracking		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	Document Imaging and OCR	Service Platform and Infrastructure	Hardware / Infrastructure	Peripherals
2	Document Referencing	Service Platform and Infrastructure	Database / Storage	Database
3	Document Conversion	Service Interface and Integration	Interoperability	Data Transformation
4	Library / Storage	Service Platform and Infrastructure	Hardware / Infrastructure	Servers / Computers

5	Document Review and Approval	Service Access and Delivery	Service Requirements	Legislative / Compliance
6	Classification	Service Platform and Infrastructure	Database / Storage	Database
7	Indexing	Service Platform and Infrastructure	Delivery Servers	Media Servers
8	Mathematical	Component Framework	Data Management	Reporting and Analysis
9	Imagery	Service Platform and Infrastructure	Hardware / Infrastructure	Peripherals
10	Multimedia	Component Framework	User Presentation / Interface	Content Rendering
11	Radiological	Component Framework	Data Management	Reporting and Analysis
12	Record Linking / Association	Component Framework	Data Management	Database Connectivity
13	Document Classification	Component Framework	Data Management	Database Connectivity
14	Information Retrieval	Component Framework	Data Management	Database Connectivity
15	Information Mapping / Taxonomy	Component Framework	Data Management	Database Connectivity
16	Information Sharing	Service Platform and Infrastructure	Hardware / Infrastructure	Wide Area Network (WAN)
17	Knowledge Capture	Service Platform and Infrastructure	Hardware / Infrastructure	Servers / Computers
18	Contingent Workforce Management	Service Platform and Infrastructure	Hardware / Infrastructure	Wide Area Network (WAN)
19	Data Warehouse	Service Platform and Infrastructure	Hardware / Infrastructure	Servers / Computers
20	Data Cleansing	Service Interface and Integration	Interoperability	Data Types / Validation
21	Data Exchange	Service Interface and Integration	Interface	Service Description / Interface
22	Data Recovery	Service Interface and Integration	Interoperability	Data Types / Validation
23	Data Integration	Service Interface and Integration	Interface	Service Description / Interface
24	Instrumentation and Testing	Service Platform and Infrastructure	Software Engineering	Test Management
25	Software Development	Service Platform and Infrastructure	Software Engineering	Integrated Development Environment
26	Query	Component Framework	Data Management	Reporting and Analysis
27	System Resource Monitoring	Service Platform and Infrastructure	Software Engineering	Test Management
28	Partner Relationship Management	Service Platform and Infrastructure	Software Engineering	Software Configuration Management
29	Personalization	Component Framework	Data Management	Reporting and Analysis
30	Online Help	Service Platform and Infrastructure	Software Engineering	Integrated Development Environment
31	Process Tracking	Service Access and Delivery	Access Channels	Collaboration / Communications
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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)

The VistA Imaging investment leveraged the collaborative effort between VA and other federal agencies related to the Consolidated Health Informatics (CHI) now part of Federal Health Architecture (FHA). VistA Imaging uses standards (DICOM and HL7) for communication of digital information related to health, and will continue to maintain these interfaces as a Maintenance and Sustainment investment.

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?

No

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

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

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?

Yes

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

Sep 30, 2009

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
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