

# **Expanding Electronic Government**

**Federal e-Gov Requirements  
IHS 2006 Accomplishments**

Presented to the IHS Information Systems Advisory  
Committee

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# The Electronic Government Act of 2002

- In his February 2002 budget submission to Congress, President Bush outlined a management agenda for making government more focused on citizens and results, which includes expanding Electronic Government - or E-Gov.

# E-Gov Is Not Just Putting Forms Online

- E-Gov does not mean putting scores of government forms on the Internet. It is about using technology to its fullest to provide services and information that is centered around citizen groups.

# What is E-Gov?

- E-Government uses improved Internet-based technology to make it easy for citizens & businesses to interact with the government, save taxpayer dollars, & streamline citizen-to-government communications.

# President's E-Government Strategy

Builds upon Administration's expanding E-Gov initiative by:

- Ensuring strong leadership of IT activities of Federal agencies,
- Comprehensive framework for information security standards & programs,
- Uniform safeguards to protect confidentiality of information provided by public for statistical purposes.

# President's E-Government Strategy

- Identified several high payoff, government-wide initiatives to integrate agency operations and information technology investments.
- Goal of initiatives—
  - to eliminate redundant systems
  - significantly improve the government's quality of customer service for citizens and businesses.

# E-Gov in HHS and IHS

- President's Management Agenda
- :HHS Management Plan Agreement
- HHS Proud-to-Be Goals
- HHS Top 20 "one HHS" objectives
- Performance Management
  - Performance Contracts & Appraisal Plans
  - E-Gov, Security, and CPIC Scorecards

# President's Management Agenda (PMA)

- Launched as a strategy for improving the management and performance of the Federal Government.
- Focuses on areas where deficiencies most apparent and where Government could begin to deliver concrete, measurable results.

# HHS Management Plan for Implementing PMA

- Annual Agreement the Department submits to OMB
- Focused on Expanding Electronic Government

# Management Plan Agreement Outcomes

- Outcome 1, IT Strategic Planning
- Outcome 2, Enterprise Architecture
- Outcome 3, Capital Planning and Investment Control
- Outcome 4, Security and Privacy
- Outcome 5, PMA and HHS Modernization

# Annual PMA Proud-to-Be (P2B) Goals

- Establish Expanded E-Gov GREEN Standards for Success (the quarterly PMA e-Gov Scorecard measures successes)
- Identify P2B Key Results- What We Would Be Proud to Achieve by the End of the Year

# P2B 2007 Key Results for Outcome 3: CPIC

- All major IT investments have acceptable business cases.
- 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.
- Firmly establish the use of EVM variance data in IT management decision processes, including capital planning and budgeting.

# P2B 2007 Key Results for Outcome 4: Security and Privacy

- IT Systems certified & accredited as secure
- 90% Privacy Impact Assessments conducted & publicly posted for applicable systems.
- 90% of systems with personally identifiable information develop systems of records which have been properly published.
- IT systems are installed & maintained in accordance with security configurations
- All systems retain a tested IT contingency plan
- 98% of all employees & contractors complete general security awareness training
- 90% of all employees & contractors with significant security responsibilities receive specialized or role-based training

# P2B 2007 Key Results for Outcome 5: Modernization/Consolidation

- Implements appropriate e-gov solutions in lieu of new, redundant initiatives

# Specific HHS PMA e-Gov Initiatives

- Federal Asset Sales
- Business Gateway
- E-Vital
- Grants.gov
- E-Training

# Specific HHS PMA e-Gov Initiatives

- Recruitment OneStop
- EHRI
- E-Travel
- E-Authentication
- Grants Management LoB

# One Department. One Mission. One HHS: FY07 Objectives

- **Expand Electronic Government**
- Meet the OMB mandated "Green" Standards for Success and Proud-To-Be 4 Goals.
- Implement the HHS E-mail Consolidation goal.
- Secure applications, data and systems to protect information entrusted to HHS, especially personally identifiable information.
- Prepare IT systems and processes for response to disasters, both to help respond to disasters and to ensure HHS business processes continue in the event of a disruption.

# E-Gov tied to IHS Performance Management

- HHS e-Gov objectives are cascaded to IHS Director and to the CIO
- CIO in turn cascades more detailed performance measures to OIT Division Directors
- Division Directors cascade to all OIT staff within their organizations

# IHS 2006 E-Gov Report

- In 2006, annual IHS e-Gov report was a section of the overarching HHS annual e-Gov Report
- Report highlighted modernization/consolidation initiatives unique to IHS (RPMS EHR, iCare, Clinical Reporting System, RPMS partnerships)
- HHS reported on all other “one HHS” initiatives/consolidations on behalf of its OPDIVs

# FY 2006 Performance Management Reports

- The following slides contain accomplishments on e-gov initiatives reported through the IHS Director and CIO contracts

# Outcome 1-Strategic Planning

- IHS 5-year Strategic IT Plan nearing completion, plan to update annually

# Outcome 2-Enterprise Architecture

- On July 18, CIO approved the IHS Enterprise Architecture (EA) v 6, which aligns the IHS with the Federal Enterprise Architecture, Federal Health Architecture, and HHS EAs. The IHS EA v6 is comparable to activities of other HHS OPDIVs.

# Outcome 3-CPIC Measures

- Both IOAT and RPMS continue to implement their corrective action plans as developed for the Independent Baseline Validation. Continue to complete FY 2008 Exhibit 300s by established due dates with acceptable scores as required by OMB Circular A-11. On 8/31 submitted Tier 1 investments (RPMS and IOAT) to HHS for yearly OMB submittal. Results of final HHS ITIRB: HHS ranked the IHS' RPMS as the Department's 3rd priority with NPIRS being 7 and IOAT 35. All were recommended for approval by the HHS Critical Partner review. (Rankings are based on business case quality and are out of a total of 107 HHS investments.)
- On 7/31/06, we completed the new 300 format in ProSight, the HHS' automated portfolio management tool for all investments. On 8/31/06, submitted Tier I, RPMS, & IOAT investments to HHS for annual OMB submittal. Implemented the IHS CPIC Council in Q3 and developed its charter. Completed 100% of EVM Artifacts as of June 30.

# Outcome 3-EVM Measures

- Consistently met monthly EVM reporting requirements throughout FY06.
- Volunteered the RPMS investment to pilot the new HHS enterprise-wide EVM tool, Dekker Tracker.
- No IHS investments exceeded cost or schedule variances by +/-10%. HHS approved investment budget reporting re-baselines for RPMS, IOAT and NPIRS during the third quarter.

# Outcome 4-Security & Privacy Measures

- Met FISMA, OMB, and HHS security, C&A, and contingency planning requirements. 100% of IHS employees completed annual security awareness training by 06/01/06, 3 months earlier than scheduled.
- NPIRS, RPMS, & IOAT systems have continuity of operations plans developed, implemented, tested, and integrated into the IHS-wide C&A process.
- OIT Albuquerque completed requirements by September 1, 2006.
- All known weaknesses for NPIRS and the GSS have been entered into the POA&M and reported by established due dates.
- Provided Areas with guidance and assistance in all C&A, COOP, FISMA, and PO&M efforts and aggregated Area results into Agency-wide reports by September 30, 2006.

# Outcome 5-Modernization/Consolidation

## HHSMail

- Tasked with migrating approximately 18,000 users at IHS Headquarters, 12 Area Offices, and 168 high-bandwidth sites in FY06
- Transitioned 8,571 HHSMail users by September 30.
- Areas completely migrated by September 30 include Albuquerque, Bemidji, Billings, California, All Headquarters locations, Nashville, Oklahoma, and Portland.
- Aberdeen and Phoenix Areas and the Navajo Area Office will complete their migrations in October bringing our total up to 10,000.
- Tucson Area and California Rural Indian Health Board, a Tribal site, will be complete by November 16.
- Project migration of remaining Navajo sites by mid-December, depending on completion of bandwidth upgrades on the Reservation.

## Outcome 5-Modernization/Consolidation United Financial Management System (UFMS)

- Proceeding to activate for IHS by Oct 2007.
- OIT leads the IHS Technical Analysis Team to convert our legacy financial and administrative systems to UFMS.

## Outcome 5-Modernization/Consolidation Learning Management System (LMS)

- OMB granted HHS a one-year extension on the deadline to turn off legacy training systems from September 30, 2006 to the first quarter of FY08.
- IHS now scheduled to decommission training modules in the IHS ARMS application concurrently with IHS UFMS activation in FY08Q1.
- IHS and HHS working on migrating historical training data from ARMS to the HHS LMS.

## Outcome 5-Modernization/Consolidation GovTrip

- As of August 18, IHS is running GovTrip live throughout all IHS locations.
- OIT simultaneously turned off the RPMS ARMS ability to create travel orders.
- ARMS travel vouchers are still being completed for orders already in the system; however, ARMS no longer supports any initiation of travel orders.
- Areas continue to close out travel vouchers and we anticipate full decommission of the legacy ARMS travel system by Q2FY07.

# E-Gov Websites

- <http://www.whitehouse.gov/omb/egov/>