



Facilitate Servicemembers, Veterans, and their families with access to care, services, and benefits, to include development of a congressionally-mandated Federal Individual Recovery Plan. Provide new capabilities for electronic information sharing to enhance the provision of care, disability evaluation, and delivery of benefits to better serve of Veterans.

- **The Nationwide Health Information Network (NwHIN)** will provide for the electronic exchange of standardized health records with other Federal and private providers, upon authorization of the Veteran.
- **Disability Benefits Questionnaires (DBQs)** are streamlined medical examination forms designed to capture essential medical information for purposes of evaluating VA disability compensation and/or pension claims from Veterans or Servicemembers and are a key component of the process by which a thorough review of each Servicemember's case is undertaken to determine the level of disability and entitlement for disability retirement.
- **Integrated Disability Evaluation System (IDES)** creates a tool used to track the disability evaluation claims of Servicemembers and Veterans.
- **NwHIN Direct** will benefit patients and providers by improving the transport of health information; making it faster, more secure, and less expensive. VA plans to use Direct to share medical information with local clinical practices that would not be able to fully transmit complete health records over the more complex Nationwide Health Information Network Connect Gateway.
- **BHIE** provides access to 31 domains of lifetime electronic health records and is the core provider of clinician to clinician electronic patient data exchange. It is designed to perform adaptive perfective maintenance required to maintain the systems viability.
- **VistAWeb PUE** provides VA clinicians the ability to see data retrieved from our NwHIN partners, along with BHIE and other data sources. It is an intranet web-based application used to review remote patient information found in VistA and the Health Data Repository (HDR), as well as an enhancement to the Computerized Patient Record System (CPRS) and Remote Data View (RDV), that enables a more timely retrieval of remote-site patient data.
- If unfunded we will have failed our Veterans, to include those severely wounded, ill, injured and those in crisis, by failing to streamline existing care and case management, disability evaluation, and benefits processes, enable information sharing with DoD and other partners, and assist in breaking the backlog of claims.



**Veterans Authorization and Preferences (VAP), Data Access Service (VLER DAS), and Network Adapter** are essential to VA's ability to execute its mission and proactively provide Veterans with the full continuum of services and benefits they have earned. These are critical components of the Virtual Lifetime Electronic Record and provides the backbone for information sharing between VA , DoD, and other partners.

**VAP II** will provide a centralized authorization portal, that supports a Service member and Veteran-centric customer service approach by expanding awareness and proactive outreach for all VA entitlements; the authorizations portal will contain applicable forms located within a centralized, user-friendly and easy to navigate system.

- Provides a mechanism to access the Electronic Record from all sources and aggregate results for the consumer.
- Enables Veterans to use web portals to authorize the release of their personal information held by VA to designated providers to facilitate the delivery of services and benefits.
- Provides a TurboTax-like work flow for the numerous forms a Veteran will complete in order to authorize the release of their information.
- Continues to be the primary foundation of health and benefits information exchange upon which VA shares information through enhancement and maintenance.
- Enhance VA/DoD Health Information Exchange providing traceability and user notification of DoD data source.
- Enhancements provide new architecture and provide new core capabilities. With enhanced access to health, benefits, personnel and administrative data, providers will be able to provide more effective services and benefits and increase Veteran satisfaction. Failure to fund will result in a loss of effort to streamline medical examination forms designed to capture essential medical information for purposes of evaluating VA disability compensation and/or pension claims from Veterans or Servicemembers. Additionally, benefits claims processing time would increase and experience greater uncertainty with the result that Patient safety would be seriously impacted, costs would increase, patient satisfaction would decrease, and wounded warriors would not receive timely or effective treatment or claims processing.



**MAPUE** will automate the Eligibility Office functions; provide pre-need capabilities to the public; and automate Presidential Memorial Certificates (PMC) program functions.

- Eliminates internal redundancy of Veteran data information and improves accuracy and timeliness of processing services.
- Remove the burden of eligibility verification for burial benefits from Veterans and families.
- Pre-need eligibility and preferences; grave site locator via mobile app, web, and kiosk; link to and improvement of Arlington National Cemetery System.
- Sharing eligibility determinations via the VLER framework will eliminate a redundant process in Memorials and reduce the complexity of the redesigned solution as well as the sustainment tail. Building upon an existing enterprise solution will reduce infrastructure and sustainment costs.
- If this effort is unfunded, then the redesign of the burial operations support system and related customer-facing applications will not occur and the burden on family members or designees upon the death of the Veteran will increase.
- If this effort is not funded, Veterans and eligible family members who file a pre-need eligibility application will have longer wait times for a determination to be made.
- ANC will not be able to directly connect to the BOSS Enterprise legacy system to facilitate the error-free transmission of monument orders.



**VLER EPMO Contract Support** enables VLER to have enough staffing to empower Veterans to securely access, and control the use and dissemination of their personal, personnel, health and benefit information; eliminate material and non-material barriers to information sharing across the VA enterprise including external partners; exploit information sharing to realize VLER and communicate the VA vision of VLER throughout the enterprise and to external stakeholders.

- This funding will help staff the VLER Enterprise Program Management Office (EPMO) to support business and functional management and oversight of VLER Program.
- It permit us to continue current activities within and across the VLER Programs and projects including: - Program Management Support - Project Management - Reporting Requirements - Strategic Planning and Analysis Support - Communications Support - Requirements Development and Management - Business Analysis - Architecture Support.
- VLER EPMO contractors provide critical support to Veterans and their families by providing necessary subject matter expertise in order to ensure that the VLER mission is implemented. If contractors are not provided to support the VLER EPMO, we will have failed Veterans by not being able to adequately meet many of the goals associated with the VLER area of responsibility.
- Veterans that will be impacted include the severely wounded, ill and injured, Veterans who rely on the VA in order to provide timely benefits and Servicemembers as they transition from active duty. VLER EPMO contract SMEs provide much needed information and advice while developing enterprise level strategic documents which enable the VLER mission to come to fruition; without these personnel, the EPMO will suffer greatly.



1. **VAP II** will provide a centralized authorization portal, that supports a Servicemember and Veteran-centric customer service approach by expanding awareness and proactive outreach for all VA entitlements; the authorizations portal will contain applicable forms located within a centralized, user-friendly and easy to navigate system. Enhancements provide new architecture and provide new core capabilities. With enhanced access to health, benefits, personnel and administrative data, providers will be able to provide more effective services and benefits and increase Veteran satisfaction. Failure to fund will result in a loss of effort to streamline medical examination forms designed to capture essential medical information for purposes of evaluating VA disability compensation and/or pension claims from Veterans or Servicemembers.
2. **VistAWeb PUE** provides VA clinicians the ability to see data retrieved from our NwHIN partners, along with BHIE and other data sources. It is an intranet web-based application used to review remote patient information found in VistA and the Health Data Repository (HDR), as well as an enhancement to the Computerized Patient Record System (CPRS) and Remote Data View (RDV), that enables a more timely retrieval of remote-site patient data. Failure to support VistAWeb PUE would result in VA clinicians being unable to view private sector medical records for Veterans.
3. **Disability Benefits Questionnaires (DBQs)** are streamlined medical examination forms designed to capture essential medical information for purposes of evaluating VA disability compensation and/or pension claims from Veterans or Servicemembers and are a key component of the process by which a thorough review of each Servicemember's case is undertaken to determine the level of disability and entitlement for disability retirement. If unfunded we will have failed our severely wounded, ill, and injured Veterans by not streamlining existing benefits processes, expediting VA disability compensation evaluations, or Veterans or Servicemembers pension claims processing in an efficient and effective manner. The current systems results in a backlog of claims that increases costs, results in poor patient satisfaction, and prevent our nations wounded warriors from receiving timely, effective treatment and claims processing.
4. **MAPUE** will automate the Eligibility Office functions; provide pre-need capabilities to the public; and automate Presidential Memorial Certificates (PMC) program functions. Sharing eligibility determinations via the VLER framework will eliminate a redundant process in Memorials and reduce the complexity of the redesigned solution as well as the sustainment tail. Building upon an existing enterprise solution will reduce infrastructure and sustainment costs. If this effort is unfunded, then the redesign of the burial operations support system and related customer-facing applications will not occur and the burden on family members or designees upon the death of the Veteran will increase
5. **VLER EPMO Contract Support** enables VLER to have enough staffing to empower Veterans to securely access, and control the use and dissemination of their personal, personnel, health and benefit information; eliminate material and non-material barriers to information sharing across the VA enterprise including external partners; exploit information sharing to realize VLER and communicate the VA vision of VLER throughout the enterprise and to external stakeholders. VLER EPMO contract SMEs provide much needed information and advice while developing enterprise level strategic documents which enable the VLER mission to come to fruition; without these personnel, the EPMO will suffer greatly.



6. Facilitate Servicemembers, Veterans, and their families with access to care, services, and benefits, to include development of a congressionally-mandated Federal Individual Recovery Plan. Provide new capabilities for electronic information sharing to enhance the provision of care, disability evaluation, and delivery of benefits to better serve of Veterans.
6. **The Nationwide Health Information Network (NwHIN)** will provide for the electronic exchange of standardized health records with other Federal and private providers, upon authorization of the Veteran.
6. **Veterans Authorization and Preferences (VAP), Data Access Service (VLER DAS), and Network Adapter** are essential to VA's ability to execute its mission and proactively provide Veterans with the full continuum of services and benefits they have earned. These are critical components of the Virtual Lifetime Electronic Record and provides the backbone for information sharing between VA , DoD, and other partners. Failure to fund will result in a loss of effort to streamline medical examination forms designed to capture essential medical information for purposes of evaluating VA disability compensation and/or pension claims from Veterans or Servicemembers. Additionally, benefits claims processing time would increase and experience greater uncertainty with the result that Patient safety would be seriously impacted, costs would increase, patient satisfaction would decrease, and wounded warriors would not receive timely or effective treatment or claims processing.
6. **Integrated Disability Evaluation System (IDES)** creates a tool used to track the disability evaluation claims of Servicemembers and Veterans. If unfunded we will have failed our Veterans, to include those severely wounded, ill, injured and those in crisis, by failing to streamline existing care and case management, disability evaluation, and benefits processes, enable information sharing with DoD and other partners, and assist in breaking the backlog of claims.
6. **BHIE** provides access to 31 domains of lifetime electronic health records and is the core provider of clinician to clinician electronic patient data exchange. It is designed to perform adaptive perfective maintenance required to maintain the systems viability.
7. **NwHIN Direct-Direct-VAP** will benefit patients and providers by improving the transport of health information; making it faster, more secure, and less expensive. VA plans to use Direct to share medical information with local clinical practices that would not be able to fully transmit complete health records over the more complex Nationwide Health Information Network Connect Gateway.



- If unfunded we will have failed our Veterans, to include those severely wounded, ill, injured and those in crisis, by failing to streamline existing care and case management, disability evaluation, and benefits processes, enable information sharing with DoD and other partners, and assist in breaking the backlog of claims.

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# Project Name: MI04 – VLER Core

## Project Rank:

**Summary:** VLER Core delivers a wide range of integrally linked, complementary capabilities that enable information sharing throughout VA and with its partners. Veterans Authorization and Preferences (VAP), Data Access Service (VLER DAS), and Network Adapter are essential to VA’s ability to execute its mission and proactively provide Veterans with the full continuum of services and benefits they have earned.

**Business problems/opportunities:** VLER Core consists of the critical components of the Virtual Lifetime Electronic Record and provides the backbone for information sharing between VA , DoD, and other partners.

- Business capabilities developed:**
- Provides a mechanism to access the Electronic Record from all sources and aggregate results for the consumer.
  - Enables Veterans to use web portals to authorize the release of their personal information held by VA to designated providers to facilitate the delivery of services and benefits.
  - Provides a TurboTax-like work flow for the numerous forms a Veteran will complete in order to authorize the release of their information.
  - Continues to be the primary foundation of health and benefits information exchange upon which VA shares information through enhancement and maintenance.
  - Enhance VA/DoD Health Information Exchange providing traceability and user notification of DoD data source.

### FY13 IT DME Budget Line Items and Dependencies

IT Budget Line Item Description	Explain linkage to or dependency on other budget line items listed in this table	Estimated Cost of Project
VLER DAS Performance and Usability Enhancement	VA/DoD Information Sharing, iEHR, VBMS, VRM, EVH, IVMH, NMOC, eBenefits, Blue Button	X,XXX,XXX
Turbo VAP	VBMS, VRM, VA/DoD Information Sharing, EVH, IVMH, NMOC, iEHR, eBenefits, MyHealththeVet	X,XXX,XXX
Network Adapter	VA/DoD Information Sharing, VBMS, VRM, NMOC, EVH, IVMH, iEHR, eBenefits	X,XXX,XXX
PMO	VBMS, VRM, VA/DoD Information Sharing, EVH, IVMH, NMOC, iEHR	X,XXX,XXX
EPMO	VBMS, VRM, VA/DoD Information Sharing, EVH, IVMH, NMOC, iEHR	X,XXX,XXX
		<b>Total XX,XXX,XXX</b>



# Prioritization Criteria

**Effectiveness of Support to Veteran:** Enhancements provide new architecture and provide new core capabilities. With enhanced access to health, benefits, personnel and administrative data, providers will be able to provide more effective services and benefits and increase Veteran satisfaction. If these enhancements were not funded, VLER would degrade and then fail. Any disruption to the enhancement funding stream would extend benefits claims processing times.

**Efficiency:** VLER Core breaks down barriers to information sharing to enable the proactive delivery of the full continuum of benefits and services to our Veterans, Servicemembers, and their families. The VLER Data Access Service, under construction, will be available to all other consuming and producing applications. Claims for benefits would be processed faster.

**Support to Initiative:** Mitigation of internal dependencies would require building separate, duplicate systems. Mitigation of dependencies outside the VA, such as DoD, are infeasible because no substitutes are possible.

Totally Dependent	Mitigation exists but at significant cost	Mitigation exists with minimal costs	Mitigation exists, minimal impact, no cost	Mitigation exists, no impact if not accomplished
CAPRI	X			
Veterans Tracking Application	X			
Federal Case Management Tool	X			
Army AWCTS	X			
Defense Health Information Mgt. System	X			
SDE – Operations & Maintenance	X			
CPRS	X			
Defense Health Information Management System applications XCA Data Services, DoD adapter; SHARE, TMDS, AHLTA, CDS,	X			

**Technical:** This effort is technically feasible, and has a high likelihood of success.

**Schedule:** This schedule is estimated to be achievable.

**Readiness:** This program is already underway, and has been in existence since 2003.



# Sunken Cost/ Impact Analysis

## Impact statement:

- If not funded, **VLER would degrade and fail.**
- Benefits claims processing time would not be reduced by new information sharing capabilities.
- Promised improvements of health information exchange would be lost, to include enhancements to patient safety and satisfaction levels.
- Insufficient resources will undermine strategic communications activities, which are critical to coordination of efforts within VA (e.g., between VLER and other MIs, with VSOs, etc.) and with partners outside of VA (e.g., VA, DoD, SSA, HHS, HUD, etc.).
- Servicemembers and Veterans would lack awareness of and ability to obtain services and benefits to which they are entitled.
- VA would renege on sharing information with DoD, violating NDAA legislation.

## Impact on FY13 program budget:

- There are no other costs budgeted in FY13 that will need to be reallocated if the IT project is unfunded.

## Previous investment:

- All work on the VLER architecture will be discontinued, as it will be incomplete and unrealized without the DAS being completed in FY 13. DAS is the critical keystone of the VLER architecture. The DAS itself will be deactivated as lack of maintenance and lack of planned evolution will force reversion to legacy systems or workarounds.



# Project Name: MI04 – VLER Memorials

## Project Rank:

### Summary:

VLER Memorials includes; the redesign BOSS Enterprise and its subsystems and improvements to the legacy BOSS Enterprise that both support Arlington National Cemetery (ANC). These efforts provide automated delivery of VA burial and memorial benefits to eligible Veterans and families. The redesign focuses on developing the Top 5 NCA strategic priorities while modernizing the existing legacy systems to facilitate data sharing across the VA to reduce cycle times for delivery of burial and memorial benefits.

### Business problems/opportunities:

Our current Memorials process is reactive and places undue burdens and great stress on grieving survivors at the worst possible time. In addition, it creates unnecessarily high labor costs. VLER Memorials transforms this process to make it proactive, thereby alleviating the stress on family members and reducing the need for manual processing. Modernizing this system will allow VA the flexibility to adapt to current needs and improve overall stability of the platform and consistency of services it provides to NCA users at over 180 locations, including 131 VA National Cemeteries as well as potentially 24M currently eligible Veterans. We want to position our system to leverage modern technologies with a web-based on-line application system designed for data flow interchange with VA's standardized modern platforms and interoperability with external systems.

### Business capabilities developed:

- Eliminates internal redundancy of Veteran data information and improves accuracy and timeliness of processing services.
- Remove the burden of eligibility verification for burial benefits from Veterans and families.
- Pre-need eligibility and preferences; grave site locator via mobile app, web, and kiosk; link to and improvement of Arlington National Cemetery System

## FY13 IT DME Budget Line Items and Dependencies

IT Budget Line Item Description	Explain linkage to or dependency on other budget line items listed in this table	Estimated Cost of Project
Memorial Affairs Redesign - Development	Complete redesign and replacement of the legacy system leveraging current VLER technology (VLER DAS) VBMS, VRM, Arlington National Cemetery, VA/DoD Information Sharing	X,XXX,XXX
Memorials Affairs Performance and Usability Enhancements (MAPUE)	VA/DoD Information Sharing Required for MAR enhancements Bilateral link and dependency on VLER DAS, eBenefits, VBMS and VRM	X,XXX,XXX
EPMO	VBMS, VRM, VA/DoD Information Sharing, EVH, IVMH, NMOC	X,XXX,XXX
		<b>Total XX,XXX,XXX</b>



# Prioritization Criteria

**Effectiveness of Support to Veteran:** VLER Memorials leverages VLER's data sharing capabilities to alleviate the burden of eligibility determinations from Veterans and their families, eliminating the stressful burden of making final arrangements on grieving survivors in their time of need. Veterans will be placed or given a pre-need eligibility status, reducing processing times.

**Efficiency:** Sharing eligibility determinations via the VLER framework will eliminate a redundant process in Memorials and reduce the complexity of the redesigned solution as well as the sustainment tail. Building upon an existing enterprise solution will reduce infrastructure and sustainment costs.

## Support to Initiative:

Totally Dependent	Mitigation exists but at significant cost	Mitigation exists with minimal costs	Mitigation exists, minimal impact, no cost	Mitigation exists, no impact if not accomplished
		X		

## Technical:

**1. Risk:** If NCA programmers/operators are not trained, then they will not have the expertise to program and maintain the new system. **Mitigation:** Incorporating training into the project plan will ensure that programmers/operators have the working knowledge to maintain the new system. Contractor SME assistance will supplement and provide any cross-training necessary at "go live" milestone.

**2. Risk:** If the implemented system cannot meet VA's minimum security requirements, then customers and Veterans are at risk. **Mitigation:** System requirements will include all FIPS 200 security controls for NCA's FIPS 199 MODERATE categorized system. All required control features must be tested and delivered before VA acceptance.

**3. Risk:** If the new web site generates too much traffic, then downtime and server errors could occur affecting the customer, Veterans and 'image' of VA. **Mitigation:** BETA test the system, along with a major "stress test" using dozens of representatives from our largest cemeteries and National Cemeteries Scheduling Office .

**Schedule:** There are no significant schedule risks that may impact project milestones.

**Readiness:** All prerequisites will be in place to support scheduled project launch.



# Sunken Cost/ Impact Analysis

## Impact statement:

- If this effort is unfunded, then the redesign of the burial operations support system and related customer-facing applications will not occur and the burden on family members or designees upon the death of the Veteran will increase.
- If this effort is not funded, Veterans and eligible family members who file a pre-need eligibility application will have longer wait times for a determination to be made.
- ANC will not be able to directly connect to the BOSS Enterprise legacy system to facilitate the error-free transmission of monument orders.
- Added burden on the NCSO Eligibility Office as they have refined their operating practices to meet the workload demands of the impending influx of pre-need eligibility applications expected from [www.ebenefits.va.gov](http://www.ebenefits.va.gov). Improvements to the BOSS Enterprise system will allow it to stay in sync with the business process it supports.

## Impact on FY13 program budget:

- The nature of this project is to transform a 14-year-old system into a service-oriented architecture, develop five new capabilities and facilitate data sharing. If unfunded, all costs are sunk and VA would accept the risk of continued operation of a fragile burial support system for our nation's Veterans.

## Previous investment:

- It is estimated that \$XX.XM would be lost. MAR is scheduled to be in the middle of Increment 3 in FY13. It is estimated that the MAR project will include 6-10 increments across the project lifecycle to reach full operational capability in FY15.



# Project Name : MI04 – VLER Benefits

## Project Rank:

**Summary:** VLER Benefits is critical to establishing a lifelong, two-way relationship with Veterans and Servicemembers that facilitates the proactive delivery of services and benefits (e.g., homelessness outreach, job training, substance abuse programs, etc.). It provides a continuum of capabilities to all Veterans and Servicemembers, especially during times of crisis.

**Business problems/opportunities:** The goal of VLER Benefits is to assist Servicemembers, Veterans, and their families with access to care, services, and benefits, to include development of a congressionally-mandated Federal Individual Recovery Plan. These efforts are also foundational to the President’s goal of developing the Virtual Lifetime Electronic Record (VLER) for all Veterans.

- Business capabilities developed:**
- Provides a process by which a thorough review of each Servicemember’s case is undertaken to determine the level of disability and entitlement for disability retirement.
  - Creates a tool used to track the disability evaluation claims of Servicemembers and Veterans. Critical enabler of the Integrated Disability Evaluation System (IDES) process.
  - Disability Benefits Questionnaires (DBQs) are streamlined medical examination forms designed to capture essential medical information for purposes of evaluating VA disability compensation and/or pension claims.

### FY13 IT DME Budget Line Items and Dependencies

IT Budget Line Item Description	Explain linkage to or dependency on other budget line items listed in this table	Estimated Cost of Project
FRCP	VA/DoD Information Sharing, VBMS, VRM, NMOC, IVMH, EVH, eBenefits, iEHR	X,XXX,XXX
VTA	VA/DoD Information Sharing, VBMS, VRM, NMOC, IVMH, EVH, eBenefits, iEHR	X,XXX,XXX
FCMT	VA/DoD Information Sharing, VBMS, VRM, NMOC, IVMH, EVH, eBenefits, iEHR	X,XXX,XXX
DBQ Infrastructure	VA/DoD Information Sharing, VBMS, VRM, eBenefits, iEHR	X,XXX,XXX
DBQs	VA/DoD Information Sharing, VBMS, VRM, eBenefits, iEHR	XXX,XXX
DES	VA/DoD Information Sharing, VBMS, VRM, iEHR, IVMH, EVH, eBenefits, iEHR	X,XXX,XXX
EPMO	VBMS, VRM, VA/DoD Information Sharing, EVH, IVMH, NMOC	X,XXX,XXX
		<b>Total X,XXX,XXX</b>



# Prioritization Criteria

**Effectiveness of Support to Veteran:** VLER Benefits directly impacts Veterans and Servicemembers by proactively providing them with the benefits they have earned. Leveraging the capabilities afforded by VBMS, VRM, Eliminating Veteran Homelessness, Improving Veterans' Mental Health, among others, VLER Benefits also provides Veterans and Servicemembers with more timely and accurate decisions on their claims for benefits by providing adjudicators with the information they require to perform that function rapidly and accurately.

**Efficiency:** VLER Benefits will provide improved case management abilities and will reduce the time spent by adjudicators in reviewing claims and making determinations.

## Support to Initiative:

Totally Dependent	Mitigation exists but at significant cost	Mitigation exists with minimal costs	Mitigation exists, minimal impact, no cost	Mitigation exists, no impact if not accomplished
X				

**Technical:** There is a high likelihood of success from a technical perspective. Risks to the project are manageable.

**Schedule:** There is high likelihood of success from a schedule perspective. Risks to the project are manageable.

**Readiness:** This project is well prepared to proceed as planned.



# Sunken Cost/ Impact Analysis

## Impact statement:

- If VLER Benefits is not funded we will have failed our Veterans, to include those severely wounded, ill, injured and those in crisis, by failing to streamline existing care and case management, disability evaluation, and benefits processes, enable information sharing with DoD and other partners, and assist in breaking the backlog of claims.
- VLER Benefits provides capabilities that are integrally linked to other services and capabilities delivered by other MIs and programs with the VA, and other federal, state, local, and other partners.

## Impact on FY13 program budget:

- The nature of this project is to provide new capabilities for electronic information sharing to enhance the provision of care, disability evaluation, and delivery of benefits to better serve of Veterans.

## Previous investment:

- Basic infrastructure is established in FY12; if this is not funded in FY13, the sunk cost is the amount spent on the initial infrastructure capability and impact is on realization of the infrastructure.