

U.S. DEPARTMENT OF VETERANS AFFAIRS

FY 2024 BUDGET SUBMISSION



Information Technology Programs and Electronic Health Record Modernization

Volume 5 of 5

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Information Technology Programs and Electronic Health Record Modernization

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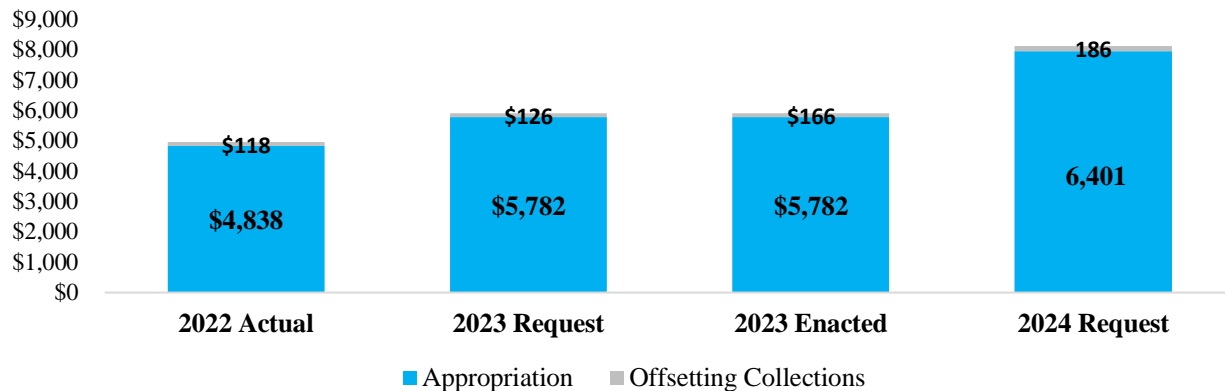
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Information Technology

Budget Authority and Appropriation Language

Information and Technology Budget Authority
\$ In Millions



Appropriation Language

For necessary expenses for information technology systems and telecommunications support, including developmental information systems and operational information systems; for pay and associated costs; and for the capital asset acquisition of information technology systems, including management and related contractual costs of said acquisitions, including contractual costs associated with operations authorized by section 3109 of title 5, United States Code, [\$5,782,000,000] \$6,401,000,000, plus reimbursements: Provided, That [\$1,494,230,000] \$1,606,977,000 shall be for pay and associated costs, of which not to exceed 3 percent shall remain available until September 30, [2024] 2025: Provided further, That [\$4,145,678,000] \$4,668,373,000 shall be for operations and maintenance, of which not to exceed 5 percent shall remain available until September 30, [2024] 2025, and of which \$75,288,000 shall remain available until expended for the purpose of facility activations related to projects funded by the "Construction, Major Projects", "Construction, Minor Projects", "Medical Facilities", "National Cemetery Administration", "General Operating Expenses, Veterans Benefits Administration", and "General Administration" accounts: Provided further, That [\$142,092,000] \$125,650,000 shall be for information technology systems development, and shall remain available until September 30, [2024] 2025: Provided further, That amounts made available for salaries and expenses, operations and maintenance, and information technology systems development may be transferred among the three subaccounts after the Secretary of Veterans Affairs [requests from] notifies the Committees on Appropriations of both Houses of Congress [the authority to make the transfer and an approval is issued]: Provided further, That amounts made available for the "Information Technology

Systems" account for development may be transferred among projects or to newly defined projects: Provided further, That no project may be increased or decreased by more than \$3,000,000 of cost prior to submitting [a request]notification to the Committees on Appropriations of both Houses of Congress [to make the transfer and an approval is issued, or absent a response, a period of 30 days has elapsed: Provided further, That the funds made available under this heading for information technology systems development shall be for the projects, and in the amounts, specified under this heading in the explanatory statement described in section 4 (in the matter preceding division A of this consolidated Act)]. (Military Construction, Veterans Affairs, and Related Agencies Appropriations Act, 2023.)

Explanation of Language Change

The Department of Veterans Affairs (VA) is proposing a multi-year appropriation for Information Technology (IT) activation costs required to support VA Administrations' construction projects, non-recurring maintenance (NRM) projects, and leases. These funds would still be part of the IT appropriation but provided with and fenced off solely for construction IT activation, NRM projects and leases. The proposed legislation would tie IT funding to a specific construction, NRM, or lease project, and provide multi-year appropriation for IT activation funds. Office of Information and Technology (OIT) needs the same type of flexibility to fund IT activation costs that the VA Administrations have to fund construction related costs. Multi-year appropriation structure would afford the flexibility that this proposal seeks.

Social Security Number (SSN) Reduction Legislative Proposal

VA proposes to reduce or eliminate the use of SSNs to safeguard Veterans and their dependents, employees, contractors, and volunteers privacy. This proposal would amend Consolidated Appropriations Act 2023 Pub. L. 117-328 Sec. 237, to discontinue collecting and using SSNs to authenticate individuals (i.e., Veterans, Veterans dependents, employees, contractors, and volunteers) in all VA IT Systems. This Legislative Proposal is also covered in Volume 1 "Supplemental Information & Appendices" of the VA Budget Submission.

Appropriation Highlights

Office of Information Technology Appropriation Highlights (\$ in thousands)							
	2022 Actuals	2023 Request	2023 Enacted	2024 Request	2024 Request vs. 2023 Enacted		
					\$	%	
BASE APPROPRIATIONS							
Budgetary Resources:							
Development	\$297,000	\$142,092	\$142,092	\$125,650	(\$16,442)	-11.6%	
Operations and Maintenance	\$3,131,585	\$4,145,678	\$4,145,678	\$4,668,373	\$522,695	12.6%	
Staffing and Administrative Services	\$1,414,215	\$1,494,230	\$1,494,230	\$1,606,977	\$112,747	7.5%	
Subtotal, Appropriation ^{1/}	\$4,842,800	\$5,782,000	\$5,782,000	\$6,401,000	\$619,000	10.7%	
Base Development	\$12,383		\$41,836		(\$41,836)	-100.0%	
Base Operations and Maintenance	\$15,000		\$649		(\$649)	-100.0%	
Base Staffing and Administrative Support Services	\$10,040		\$5,312		(\$5,312)	-100.0%	
Transformational Fund Operations and Maintenance			\$44,691		(\$44,691)	-100.0%	
Technology Modernization Fund (P.L. 117-2 Section 4011)			\$5,895		(\$5,895)	-100.0%	
OEFO/OIF Emergency Appropriation (P.L. 110-28)	\$2,283		\$2,061		(\$2,061)	-100.0%	
Choice Act Section 801	\$1,026		\$1,026		(\$1,026)	-100.0%	
Subtotal, Unobligated balance brought forward, Oct 1	\$40,732		\$101,471		(\$101,471)	-100.0%	
Base Development	\$3,552						
OEFO/OIF Emergency Appropriation (P.L. 110-28)	\$288						
Choice Act Section 801	\$60						
Subtotal, Recoveries	\$3,900						
North Chicago Facility Transfers	(\$7,993)	(\$8,085)	(\$8,085)	(\$8,085)			
Technology Modernization Fund (P.L. 117-2 Section 4011)	\$5,895		\$4,655		(\$4,655)	-100%	
Transformational Fund Operations and Maintenance	\$670,000						
VHA Transfer (P.L. 117-43 Section 151)	\$9,493						
Collections for Reimbursable	\$118,385	\$126,037	\$166,037	\$186,499	\$20,462	12%	
Subtotal, Budgetary Resources	\$5,683,212	\$5,899,952	\$6,046,078	\$6,579,414	\$533,336	8.8%	
Base funding	(\$317)						
Subtotal, Unobligated Balance Expiring							
Base Development	(\$41,836)						
Base Operations and Maintenance	(\$649)						
Base Staffing and Administrative Support Services	(\$5,312)						
Transformational Fund Operations and Maintenance	(\$44,691)						
Technology Modernization Fund (P.L. 117-2 Section 4011)	(\$5,895)						
Choice Act Section 801	(\$1,026)						
OEFO/OIF Emergency Appropriation (P.L. 110-28)	(\$2,061)						
Subtotal, Unexpired Unobligated Balance	(\$101,471)						
Total, Obligations	\$5,581,425	\$5,899,952	\$6,046,078	\$6,579,414	\$533,336	8.8%	
Obligations by Program Activity:							
Development	\$271,099	\$142,092	\$183,928	\$125,650	(\$58,278)	-31.7%	
Operations and Maintenance	\$3,142,568	\$4,142,015	\$4,156,302	4,664,710	\$508,408	12.2%	
Staffing and Administrative Support Services	\$1,414,571	\$1,489,808	\$1,495,120	\$1,602,555	\$107,435	7.2%	
Transformational Fund Operations and Maintenance	\$625,309		\$44,691		(\$44,691)	-100.0%	
VHA Transfer (P.L. 117-43 Section 151)	\$9,493						
Subtotal, Direct Obligations	\$5,463,040	\$5,773,915	\$5,880,041	\$6,392,915	\$512,874	8.7%	
Reimbursable Obligations by Program Activity							
IT Systems, Reimbursable Obligations	\$118,385	\$126,037	\$166,037	\$186,499	\$20,462	12.3%	
Subtotal, Reimbursable Obligations	\$118,385	\$126,037	\$166,037	\$186,499	\$20,462	12.3%	
Total, Obligations	\$5,581,425	\$5,899,952	\$6,046,078	\$6,579,414	\$533,336	8.8%	
Full Time Equivalent (FTE):							
Direct	7,897	8,918	8,918	9,177	259	2.9%	
Reimbursable	61	75	87	65	(22)	-25.5%	
Total FTE	7,958	8,993	9,005	9,242	237	2.6%	

Office of Information Technology Appropriation Highlights - American Rescue Plan (\$s in thousands)						
	2022 Actuals	2023 Request	2023 Enacted	2024 Request	2024 Request vs. 2023 Enacted	
					\$	%
AMERICAN RESCUE PLAN - SECTIONS 8002 AND 8003 (MANDATORY)						
Budgetary Resources:						
American Rescue Plan Section 8002						
American Rescue Plan Section 8003						
Subtotal, Appropriation ^{1/}						
American Rescue Plan Section 8002	\$1,437,578	\$630,057	\$769,242		(\$769,242)	-100.0%
American Rescue Plan Section 8003	\$100,000					
Subtotal, Unobligated balance brought forward, Oct 1	\$1,537,578	\$630,057	\$769,242		(\$769,242)	-100.0%
Recoveries						
Subtotal, Recoveries						
Rescission from Unobligated Balance American Rescue Plan Section 8003	(\$76,105)					
Subtotal, Rescissions	(\$76,105)					
Subtotal, Budgetary Resources	\$1,461,473	\$630,057	\$769,242		(\$769,242)	-100.0%
American Rescue Plan Section 8002	(\$769,242)					
American Rescue Plan Section 8003						
Subtotal, Unexpired Unobligated Balance	(\$769,242)					
Total, Obligations	\$692,231	\$630,057	\$769,242		(\$769,242)	-100.0%
Obligations by Program Activity:						
American Recovery Plan Section 8002	\$668,336	\$630,057	\$769,242		(\$769,242)	-100.0%
American Recovery Plan Section 8003	\$23,895					
Total, Obligations	\$692,231	\$630,057	\$769,242		(\$769,242)	-100.0%

Office of Information Technology Appropriation Highlights - Toxic Exposure Fund (\$\$ in thousands)						
	2022 Actuals	2023 Request	2023 Enacted	2024 Request	2024 Request vs. 2023 Enacted	
					\$	%
PACT ACT - TOXIC EXPOSURE FUND (MANDATORY)						
Budgetary Resources:						
Development	\$6,250		\$2,000	\$16,404	\$14,404	720.2%
Operations and Maintenance	\$113,056		\$645,123	\$1,155,777	\$510,654	79.2%
Staffing and Administrative Services	\$3,747		\$8,877	\$70,819	\$61,942	697.8%
Subtotal, Appropriation ^{1/}	\$123,053		\$656,000	\$1,243,000	\$587,000	89.5%
Development			\$6,250		(\$6,250)	-100.0%
Operations and Maintenance			\$113,056	\$70,610	(\$42,446)	-37.5%
Staffing and Administrative Services			\$3,747		(\$3,747)	-100.0%
Subtotal, Unobligated balance brought forward, Oct 1			\$123,053	\$70,610	(\$52,443)	-42.6%
Recoveries						
Subtotal, Recoveries						
Subtotal, Budgetary Resources	\$123,053		\$779,053	\$1,313,610	\$534,557	68.6%
Development	(\$6,250)					
Operations and Maintenance	(\$113,056)		(\$70,610)		\$70,610	-100.0%
Staffing and Administrative Services	(\$3,747)					
Subtotal, Unexpired Unobligated Balance	(\$123,053)		(\$70,610)		\$70,610	-100.0%
Total, Obligations	\$0		\$708,443	\$1,313,610	\$605,167	85.4%
Obligations by Program Activity:						
Development			\$8,250	\$16,404	\$8,154	98.8%
Operations and Maintenance			\$687,569	\$1,226,387	\$538,818	78.4%
Staffing and Administrative Support Services			\$12,624	\$70,819	\$58,195	461.0%
Total, Obligations			\$708,443	\$1,313,610	\$605,167	85.4%
Full Time Equivalent (FTE):						
Direct			139	341	202	145.3%
Total FTE			139	341	202	145.3%

Numbers may not add due to rounding

1/ Numbers exclude reimbursements. Numbers shown are prior to transfers to and from other accounts

Budget Overview

<u>2024 Budget Request at a Glance</u>	
(\$s in thousands)	
2023 Enacted Budget	\$5,782,000
Program Changes	\$619,000
2024 Request	\$6,401,000
Change from 2023 Budget	11%

Budget Request

The 2024 budget of \$6.401 billion is an increase of \$619 million (11%) above the 2023 enacted level. The budget will support the OIT commitment to meeting VA’s strategic goals and objectives to include the ability to meet the needs of stakeholders, including VA Administrations Veterans Health Administration (VHA), Veterans Benefits Administration (VBA), National Cemetery Administration (NCA) and staff offices. OIT’s budget request includes emerging business requirements and accelerates adoption and rollout of VA Administrations requested re-platforming of VA's oldest legacy systems onto modern Platform as a Service (PaaS) and Software as a Service (SaaS), including Low-Code/No-Code platforms. OIT will continue to support the VA’s Enterprise Cloud Solution (VAEC) Migration Initiative's goal of 350 application migrations, building common application delivery infrastructure and working down IT defect backlogs. This is necessary to satisfy the increased demand for new IT capabilities, increased growth identified by OIT business partners requesting new or reconfigured space and medical facility activations, and increased modernization to enhance and optimize IT infrastructure.

The 2024 budget request supports business automation initiatives with agile/modernized IT platforms that allow OIT to transition to a “buy before build” model and invest in “buy” solutions that reduce further accumulation of technical debt by placing the requirement on vendors to continuously modernize their offerings. OIT’s budget request supports an ongoing increase in “buy” solutions. The number of “buy” solutions has been increasing year after year: 57 in 2020, 68 in 2021, 95 in 2022, and projecting 125 net new SaaS/PaaS products in 2023.

Critical OIT investments driving cost increases include:

- Increased cyber investments to address increasing cyber threats, to improve security incident management response, to implement Veteran data loss prevention, and to mitigate or reduce network, system, and software vulnerabilities
- Increased digital telecommunications, modern self-service applications, connected mobile platforms, and telehealth services for Veterans
 - Increases in telehealth access, management, and reporting
 - VA.GOV, expansion and enhancement of VA Clinical Contact Centers (CCCs)
- Increased network engineering resilience for continuous workforce collaboration to meet remote access and increased bandwidth demand

- Increased health, clinical, and veteran experience web application, mobile, and cloud-based platforms
- Increased Veteran data integration, product development and engineering, application delivery and clinical decision support
- Continued technical refresh and replacement of the IT infrastructure for common core technology such as endpoint laptops/desktops, network infrastructure, and unified communications
- Continued business transformation and government modernization efforts for enterprise supply chain, financial management, and human resource IT systems.

The 2024 request allows OIT to support existing IT infrastructure and recurring operational expenses, focus IT growth identified by OIT stakeholders, and transform IT with investments in new service capabilities. The budget request is separated into the following subaccounts:

Development – The request of \$125.7 million is \$16.4 million (12%) below the 2023 enacted budget. The decrease in funding is to align to VA’s business line requirements more appropriately by prioritizing Commercial Off the Shelf (COTS) products and shifting from developing new software, getting out of the business of building new applications, and relying more on cloud managed and shared services to accelerate product and software release. The request of \$125.7 million supports mission-critical areas, including Operational Support, Care Coverage Services, Health Delivery Support, Digital Experience, and Loan Guaranty.

Operations and Maintenance (OM) – The request of \$4.668 billion is \$523 million (13%) above the 2023 enacted budget. The increase in funding supports critical VA IT infrastructure modernization to support the growth and demand of mission partners, the continued reduction of the technical debt, increase VA cyber investments, and the ability to stay current with more affordable, secure, and scalable technology and new capabilities. OM funding is necessary to support demand and growth in critical programs, including continued support for Supply Chain Management, Financial Management Business Transformation (FMBT), Infrastructure Readiness Program (IRP), End User Software, Network Services, Care Coverage Services, Benefits Enterprise Support, the transition to VAEC and existing maintenance activities that support Enterprise Systems across VA.

Staffing and Administrative Support Services – The request of \$1.607 billion, which funds 9,177 full-time equivalents (FTE) (259 FTE above the 2023 enacted level), is \$113 million (8%) above 2023 enacted levels. The request includes \$1.6 million to transfer the Identity, Credential, and Access Management (ICAM) Program Management Office (PMO) (9 FTE) to OIT from Human Resources and Administration/Operations, Security, and Preparedness (HRA/OSP) as a response to VA Office of Inspector General (OIG) recommendations. The majority of these resources fund the hospital and regional office IT staff responsible for supporting VAMCs, address portfolio and product line technical workforce gaps to meet demand for new IT capabilities and technical skills to become a high-performing product-oriented organization, and to keep up with VA’s mission growth, and invest in growing VA’s cyber workforce responsible for implementation of the Federal Zero Trust Architecture (ZTA) strategy, rapid response to security emergencies, and maintaining network security and resolving incidents expeditiously.

Reimbursements – In addition to the appropriated level, OIT anticipates \$186.5 million in reimbursements, which is \$20.5 million (12%) above the 2023 estimated reimbursements amount: \$172.9 million for non-pay and \$13.6 million for pay. Reimbursements occur within VA, other Federal agencies, credit reform programs and non-appropriated insurance benefits programs. The increase in 2024 reflects funds received from the Loan Guaranty Program to support the VBA credit reform requirements.

PACT Act – The 2024 request includes \$1.243 billion to cover requirements associated with the Honoring our Promise to Address Comprehensive Toxics Act of 2022 (PACT Act). The funding will focus on modernizing IT systems and infrastructure to support expected increased claims processing, including investment in claims automation. Funding will also provide IT equipment, facility provisioning, system functionality, capacity, and bandwidth to support the anticipated growth in the new VBA and staff office hires who will process the increased claims and appeals for disability compensation across VA and VHA staff who will provide care to PACT Act eligible Veterans. OIT also plans to use the PACT Act funding to increase Veteran interaction and outreach that will allow for timely access to benefits and care for Veterans impacted by service-related toxic exposure. Further, funding will be used for research and Veteran data management and integration analytical tool capabilities aimed to identify the legal nexus of medical conditions and toxins as they relate to both current and former service member location and time of service and to improve patient outcomes in eligibility, efficacy, and efficiency of health services as well as benefits and Veterans Experience services via data analysis. The 2024 PACT Act Request section provides additional details supporting this request.

Executive Summary

The following section describes OIT's mission, vision, and strategy that are enabled through the budget requests articulated in this submission.

Mission

The mission of OIT is to collaborate with business partners to create the best experience for all Veterans.

Vision

To become a world-class organization that provides a seamless, unified Veteran experience through the delivery of state-of-the-art technology.

CIO's Vision for OIT Digital Transformation

OIT's only mission is to deliver IT products and services to VA and the Nation's Veterans, caregivers, and survivors. OIT seeks to ensure that every ounce of energy expended and every resource deployed is focused on this essential mission. The vision of OIT's Digital Transformation is getting back to basics to make VA OIT the best IT organization in government and in the industry at-large.

As VA continues its drive toward Digital Transformation, early investments in this transformation have paid dividends to the Veterans and caregivers that VA is charged with serving. For example, work to improve performance monitoring helped OIT know when and where to burst capacity to support an influx of Veterans needing video telehealth appointments, and OIT's investment in the cloud provided a robust solution for ensuring VA could support an exponential increase in telehealth usage during the early days of the COVID-19 pandemic.

Additionally, a large portion of VA's workforce continues to work remotely. Prior year investments into remote access, teleconferencing and other collaboration and communication tools, have allowed VA employees to continue supporting mission essential work from home without disruption to business operations.

OIT's Digital Transformation Priorities:

OIT accomplishes the mission and vision by focusing on four core pillars:

Vision-driven Execution

Executing against myriad daily deliverables that are not connected to comprehensive plans, which in turn lack clearly articulated vision, wastes time, money, and the good faith of stakeholders. Every dollar not spent on the mission is detracting from OIT's ability to deliver services to Veterans. OIT must be trustworthy stewards of resources and advocate for mission-driven decisions. Each team will have a clearly articulated vision for the products and services delivered. That vision will connect with an explicit multi-year roadmap and outcomes-based progress metrics, aligned with stakeholder expectations and consistent with current resource constraints.

Portfolio visions are aligned to VA's strategic plans, and OIT builds explicit connections between those strategic plans and visions and execution roadmaps. These plans are both near-term as well

as far-reaching, so that OIT continues to build the capabilities needed for VA to succeed in the future.

Operational Excellence

Operational excellence is at the heart of a world class engineering organization. OIT focuses intensively on how to execute the mission, ever focused on successive improvement. In OIT, this operational excellence has three primary components:

- **Engineering Excellence**

OIT will drive toward reducing avoidable major incidents to zero. OIT will target 100 percent of incidents or outages to be caught via monitoring and alerting rather than end user reports of an outage. OIT will establish a world-class level of systems and infrastructure uptime and will invest in critical infrastructure capabilities that enable a more agile, resilient IT environment at VA

- **Security Excellence**

OIT will establish a clear security strategy founded around the Zero Trust Architecture (ZTA) and will identify and execute a clear, risk-based roadmap that implements the key pillars of that strategy. OIT will further strengthen procedures that enable OIT to identify and respond rapidly and decisively to new security threats and incidents.

At the heart of strategy is Zero Trust. This increasingly popular approach to security provides a powerful way to frame the broad set of investments needed to secure the organization. It starts with a simple premise: there are so many ways that a bad actor can compromise a network that OIT must assume the network will be breached. In a Zero Trust environment, security comes not solely from protecting the perimeter but rather from ensuring that perimeter breach will not reward the threat actor because all systems are designed to be secure. Excellence in Zero Trust drives a clear, risk-based set of investments that will unfold over multiple years.

- **Effective Resource Allocation**

OIT will institute a culture of relentless prioritization, so that resources are allocated effectively. Assigning resources against the top priorities and transparently reporting resource usage to stakeholders will engender trust from customers while directing organization focus and speed to the building and supporting of IT services most critical to VA's mission. OIT will strive to assure that every dollar is invested in the highest priority work of the organization to ensure success of the VA's strategic plans, adjusting as new circumstances develop.

Delightful End User Experience

OIT will continue to pursue nothing less than an exceptional customer experience for the end users of VA products and services, as well as the Veterans and caregivers that VA serves. This means developing Veteran-facing products with their early input, so OIT can deploy apps and services that are accessible and accomplish what Veterans need, and it means developing VA employee-facing products that work as expected, help make their time more productive, and bring new capabilities that help VA reimagine the Future of Work.

OIT must also innovate around different delivery models for providing VA IT support — both to make operations more efficient and make getting IT support a more seamless experience for employees. This means leveraging digital technologies to assess the quality of the compute experience of end users, so that OIT can proactively address any issues they experience. It could also in the future include more kiosk support rather than at-desk support, which would speed access to pre-positioned replacement devices and equipment in a centralized way, and reduce the time and resources required to enable more efficient IT support.

People Excellence

OIT will renew its commitment to the workforce because the people are the core of its operations, and its operations advance VA's mission to serve the Nation's Veterans. OIT will advance a compelling and competitive workforce development program that can attract and retain some of the best industry talent and will celebrate the diversity of the workforce and pursue a more inclusive, accessible workplace. OIT intend to advance a compelling and competitive workforce development program that can attract and retain some of the best industry talent, and OIT will celebrate the diversity of the workforce and pursue a more inclusive, accessible workplace.

IT Budget Restructure

In 2024, OIT implemented a new budget structure which is tied to VA's stakeholders' business objectives and key requirements to enable greater IT spend transparency and data-driven for internal and external VA IT stakeholders to clearly understand the IT budget request, its priorities and intended outcomes for Veterans as well as to demonstrate OIT's continued leadership in advancing VA's digital transformation.

The benefits of the new IT budget structure:

- Prioritization of technical debt for remediation based on business impact
- Identification/understanding of dependencies across budget lines
- Identification of potential redundancies in IT capabilities
- Documented alignment of IT spending to business capabilities, so all elements are assigned the same priority
- Integration/reuse of IT resources across multiple programs and across Administrations
- Identification of IT investments with relevant business sponsors

The specific changes include:

- Realigned the budget requests between portfolios
- Created the new Veteran Experience portfolio (separate from the Benefits Portfolio) which includes the budget requests from Benefits, Health, and Information Technology Infrastructure and Network (ITIN) (formerly known as the Enterprise) portfolios
- Realigned the budget requests from the ITIN Portfolio to the Corporate and Veteran Experience portfolios
- Shifted the budget requests from the Administrative sub-account to the Corporate portfolio

Under the leadership of the CIO, OIT will continue to work with VA Administrations and staff offices on the refining the budget structure to make lines understandable to VA IT stakeholders. Please see Appendix Q for the Budget Restructure Matrix.

IT Budget Submission Improvement and Prioritization

To improve the detail, quality, and organization of information in the IT Budget justification materials submitted to Congress as required by the Department of Veterans Affairs Information Technology Reform Act of 2022 (within the Joseph Maxwell Cleland and Robert Joseph Dole Memorial Veterans Benefits and Health Care Improvement Act of 2022), the Secretary, acting through the Chief Information Officer (CIO) of the Department, worked with VA Administrations and staff offices on the developing universal prioritization criteria and the robust budget prioritization process.

New in this year's budget, the 2024 Prioritized List of Unfunded Projects section contains summary descriptions and a strictly prioritized 1:N list of every unfunded information technology project of the Department, proposed or intended to be proposed for the following one, two, or three fiscal years, that is unfunded as of the time of the budget submission. Also new in this submission, please see Appendix P for the 1:N list of every information technology project funded in the 2024 Budget to meet OIT and VA requirements.

Under the leadership of the CIO, OIT will continue to work with VA Administrations and staff offices on the refining the budget structure to make lines understandable prioritization of unfunded IT projects.

President’s Management Agenda

OIT supports the President’s Management Agenda (PMA) toward achieving a more equitable, effective and accountable government that delivers results for all by (1) strengthening and empowering the Federal workforce, (2) delivering excellent Federal services and improved customer experience, and (3) managing the business of Government to build back better. OIT’s 2024 budget request will allow VA to directly support the PMA by making investment proposals in the following priority areas:

PMA Priority: Strengthening and Empowering the Federal Workforce	
Human Resources	Supports the implementation of modernized, automated, and standardized systems, tools, and capabilities to deliver a world-class workforce
PMA Priority: Delivering Excellent, Equitable, and Secure Federal Services and Customer Experience	
VA Health Connect Customer Relationship Management (VAHC CRM)	The VA is modernizing Clinical Contact Centers (CCCs) to serve as a virtual front door to VA health care, providing Veterans additional choices for meeting clinical, pharmacy, scheduling and administrative needs.
Telehealth	Expands the ability to remotely diagnose, consult, treat, transfer medical data, and provides patient education both synchronously and asynchronously
Customer Data Management Experience	Products within this project support systems across the VA, shared with DoD and used to support user-friendly channels through which data can be submitted and consumed by customers and their advocates.
Veterans Benefits Management	Ensures Veterans and their families continue receiving accurate and up-to-date information about benefit decisions and supports the processing of new compensation, pension and fiduciary claims
VHA Mobile Application Platform (MAP)	Connected Health/Mobile Apps supports the VA Mobile Application Platform (MAP) which is essential to VA telehealth visits, mobile applications for Veterans and staff members, Veteran facing websites, plus supporting databases and services.
VA.GOV	Integrates customer self-service applications and information, for use by Veterans, into one modernized platform
PMA Priority: Managing the Business of Government to Build Back Better	
Supply Chain	Enables the delivery of clinical care to Veterans by managing the flow of medical supplies and equipment
Infrastructure Readiness Program (IRP)	Identifies the current state of the IT infrastructure and manages the modernization strategy for IT assets
Information Security	Reduces information security risks across VA programs and systems and complies with Federal security and privacy regulations
Financial Management Services	Provides VA with a modern financial management solution by transforming and standardizing business processes and capabilities

Staffing and Administrative Support Services

In 2024, the OIT Staffing and Administrative Support Services request of \$1.607 billion supports 9,177 direct FTE, which is an increase of 259 FTE above the 2023 enacted level. The 65 FTE funded via reimbursement is a decrease of 22 FTE from the 2023 estimate. The request also includes an additional 341 FTE for requirements associated with the PACT Act.

The modest increase in funding will allow OIT's workforce transformation to respond to the demand for new IT capabilities and continued growth in VA's administrations and staff offices. Although the staffing levels have drastically increased in the health and benefits mission partners, the OIT workforce has remained flat in OIT. OIT will follow an agile approach in monitoring the IT workforce demand signal, periodically measuring and evaluating staffing levels and workload in support of the IT mission. An independent assessment of IT staffing requirements and results of the pre-COVID-19 OIT workforce planning analysis identified the need for additional skilled IT staff; a need that was exacerbated by the pandemic response. Other workload drivers include increasing telework support due to higher levels of mobile remote and telework employees and associated devices as well as the need for continued modernization of the infrastructure.

The additional IT staff will enable OIT organizations to rapidly respond to emergencies, maintain its security posture and resolve incidents expeditiously, enabling service providers to maintain the capabilities required to provide data privacy and identity protection to Veterans. The new IT personnel will staff all major VA facilities. Some facilities currently lack requisite IT support onsite, causing delayed incident resolution due to the IT professional's need to travel to get onsite, meaning every incident requiring deskside support calls for an IT employee to travel to the facility and potentially extend resolution timeframes and pulling resources away from services needed at their primary sites.

In addition to salaries, the Staffing and Administrative Support Services budget provides funding for travel, training, administrative support contracts, leases (including those supporting data centers), office equipment, and supplies. It also supports the mass transit benefits program and worker's compensation for OIT employees. With the requested funding, OIT will continue to provide strategy and technical direction, guidance, and policy to ensure that IT resources are acquired and managed for the VA in a manner that adheres to applicable federal laws, regulations, and policies.

Since OIT reprogrammed \$6.3M to VHA for the initial HR services in 2014, VHA has provided HR services to OIT. Currently, VA is pursuing the establishment of a centralized HR service office for Department and Staff Office employees. As such, OIT includes the HR service request while VHA will exclude this amount from the 2024 Human Capital Management budget request.

This request also includes \$1.6 million to transfer the ICAM PMO (9 FTEs) to OIT as a response to VA OIG recommendations. Requested funds will be used to address the findings of the OIG report on VA's ICAM issued on August 3, 2022. The OIG recommended to designate roles and responsibilities for all program offices involved in VA's ICAM program; provide appropriate oversight and ensure coordination between designated program offices to implement a comprehensive ICAM policy; OIT will update VA Directive and Handbook associated with IAM

to meet NIST requirements; and HRA/OSP will update VA Directives and Handbooks associated with HSPD-12 and personnel security and suitability.

Additional detail on the Staffing and Administrative Support Services sub-account can be found in Appendices (I-K).

OIT Workforce Realignment

As part of OIT’s continued digital transformation, it became imperative for OIT to optimize the overall organization structure and transform the OIT team into a modern IT organization to effectively accomplish the singular mission — delivering IT products and services to VA and the nation.

To accomplish this purpose, OIT needed to renew its focus on several critical areas to enhance decision-making and accelerate delivery, clearly define the mission of critical service lines, and improve collaboration between the service providers and the customers. OIT also reduces management layers at the senior leadership level, realigning each functional team to a single direct report necessary to streamline the change of command and increase productivity (see Appendix S for the new OIT Organization Chart).

After OIT implements this change, the organization will look for additional opportunities to support and align existing work groups so they can accomplish their missions with fewer handoffs to other teams.

The table below displays Budget Authority (BA) FTE for all major organizational components within OIT:

OIT Organizational Components	2022 Actuals	2023 Request	2023 Enacted		2024 Request		2023-2024
	Base Appropriation	Base Appropriation	Base Appropriation	PACT ACT	Base Appropriation	PACT ACT	BA Increase / Decrease
End User Services (EUS)			3,601	40	3,601	98	
Software Product Management (SPM)			1,535	10	1,535	25	
Infrastructure Operations (IO)			755	10	755	25	
Information Security (IS)	245	281	678	31	678	76	
Compliance, Risk, and Remediation (CRR)	254	287	408		417		9
People Science			557	10	807	25	250
Connectivity and Collaboration Services (CCS)			498	18	498	43	
Product Engineering (PES)			253	14	253	34	
Strategic Sourcing (SS)	159	157	204		204		
Business Integration and Outcomes Services (BIOS)	71	79	150		150		
IT Budget and Finance (ITBF)			140		140		
Chief Technology Officer (CTO)			135	6	135	15	
Strategic Initiatives			4		4		
Development, Security, and Operations (DevSecOps)	6,940	7,603					
IT Resource Management	228	261					
To be allocated		250					
Total FTE	7,897	8,918	8,918	139	9,177	341	259

Table includes Budget Authority (BA) FTE only

Note: Numbers may not add due to rounding

1/ In 2024, the additional 250 FTE were added to the People Science organization. They will be allocated to OIT organizations based on the CIO's strategic priorities (please refer to the additional IT staff justification above)

The table below displays Reimbursable Authority (RA) FTE for all major organizational components within OIT:

OIT Organizational Components	2022	2023		2024	2023-2024
	Actuals	Request	Enacted	Request	Increase / Decrease
End User Services (EUS)			87	65	-22
Development, Security, and Operations (DevSecOps)	61	75			
Infrastructure Operations (IO)					
Compliance, Risk, and Remediation (CRR)					
Information Security (IS)					
Chief Technology Officer (CTO)					
Strategic Sourcing					
Business Integration and Outcomes Services (BIOS)					
People Science					
IT Budget and Finance (ITBF)					
Product Engineering (PES)					
Software Product Management (SPM)					
Connectivity and Collaboration Services (CCS)					
Strategic Initiatives					
Quality, Performance and Oversight					
IT Resource Management					
Total FTE	61	75	87	65	-22

Note: Numbers may not add due to rounding

End User Services (EUS)

Provides centrally managed services to enable a delightful end user experience with assured services and products available anytime, anywhere, and for anyone. EUS is comprised of End User Operations (EUO) and Enterprise Command Operations (ECO) and aims to produce uninterrupted services by enabling a system of people, equipment, and processes to operate at peak performance. EUS establishes a system of interconnected practices to work to continuously to improve how products and services work and deliver value to customers and enable VA to optimize service delivery to Veterans. Ultimately, EUS endeavors to ensure all end users in VA have their IT needs represented and understand how to navigate to the services and products they require.

Software Product Management (SPM)

SPM manages acquisitions and orchestrates human capital to deliver and sustain software products to, and in support of, Veterans. Software products include Managed Services, SaaS, COTS, Low-code/No-code, and custom-developed applications. SPM is organized by Product Teams (scrum teams), Product Lines (groups of product teams), and Portfolios (groups of Product Lines). SPM's most common interactions are with Infrastructure Operations (IO) and Product Engineering (PE). IO provides the hosting services (on & off prem) for SPM applications and Product Engineering provides solutioning with SaaS and Low-code/No-code configuration. SPM is a customer of both organizations and orchestrates activities so that business customers have a "one stop shop" for applications.

Infrastructure Operations (IO)

IO is a customer-centric organization focused on efficiently delivering secure and high availability infrastructure solutions supporting VA's mission. IO is responsible for implementing and

sustaining several key technical, management and operational security controls and supporting processes that protect mission critical networks, systems, and applications throughout the enterprises. The organization serves as an operational service provider of foundational compute, storage, physical database and client management components for the VA enterprise. IO provides advanced network support and management to more than 1,800 VA facilities, 3,000 circuits, 44,000 network devices, and 140,000 wireless access points.

Information Security (IS)

IS manages VA's cybersecurity program and is committed to protecting Veteran data and VA information systems. IS is comprised of three (3) service lines: Information Security and Policy Strategy (ISPS), Information Security Programs and Logistics (ISPL), and Information Security Operations (ISO). IS delivers enterprise-wide strategy, policy, governance, and network defense through collaboration with the VA and the OIT.

Compliance, Risk, and Remediation (CRR) [formerly Office of Quality, Performance, and Risk (QPR)]

The Deputy Chief Information Officer (DCIO) for CRR advises the VA Assistant Secretary for Information and Technology/Chief Information Officer (AS/CIO) on complex and sensitive compliance and risk issues that cross organizational boundaries within the Department. CRR establishes the path forward for the OIT by leading governance efforts within OIT, supported by an internal data analytics and performance reporting program to ensure comprehensive oversight of IT investments and functions. Staff within CRR additionally serve as the OIT Chief Risk Officer (DCIO), OIT Chief Audit Executive (DCIO), VA Senior Agency Official for Controlled Unclassified Information (CUI) (DCIO), VA Chief Privacy Officer (DCIO for FRAC), VA Agency Records Officer, VA Mail Manager, and VA Common Data Steward for IT Management. CRR co-chairs the Standards and Architecture Council (SAC), the Quality and Risk Committee (QRC), the Analytics and Performance Management Committee (APMC), and the Enterprise Risk Management Working Group (ERMWG) and chairs the Compliance, Risk and Remediation Working Group (CRRWG). CRR Interfaces with the public, Veteran stakeholders, and external agencies, to include, but not limited to Congress, the Executive Office of the President (EOP), the Office of Management and Budget (OMB), the Government Accountability Office (GAO), the VA OIG, the Department of Justice (DOJ), the National Institute of Standards and Technology (NIST), and the National Archives and Records Administration (NARA) to assure Department-wide compliance with applicable laws, policies, best practices, and standards. CRR is divided into four divisions with 20 directorates and has a staff allocation of 392 full-time personnel.

People Science

The Office of People Science (OPS) leads and formulates the strategic direction, policy, processes, technology systems, data science, employee and customer and facilitates OIT's ability to develop, recruit and retain a highly qualified workforce.

Business Functions: Integration of policy, operations, and oversight on People Science activities; training and professional development; recruitment and talent acquisition support; workforce planning; identify and monitor talent needs, and link succession planning and business strategies, presenting OIT with the opportunity to reach long-term goals and achieve human capital objectives both strategic and practical.

Connectivity and Collaboration Service (CCS)

CCS designs and maintains world-class connectivity, collaboration, and support services that produce measurable business value with secure, redundant, and reliable connections across the enterprise. SD aims to deliver a delightful user experience, empowering internal and external VA customers, with robust offerings for Web Conferencing, Telephony, Secure Messaging, Collaboration, and more built on a resilient Network Infrastructure.

Product Engineering (PES)

PES delivers innovative products using SaaS, low-code, and a shared delivery infrastructure with highly differentiated products that provide key applications and data for customers. Success is measured by leveraging emerging technology, methodologies, and trends found in private sector that deliver unparalleled value to Veterans and those who care for them.

Office of Strategic Sourcing (OSS)

OSS is responsible for facilitating the execution of OIT's IT procurement obligations of approximately \$6.5 billion per year via collaboration with requirements owners and the contracting office(s). The organization is engaged in contract management oversight to over 400 OIT Contracting Officer Representatives (CORs) assigned to more than 1,200 OIT active contracts totaling \$278.9 billion in total contract lifecycle value; and provides guidance and opportunities to assist the CORs in contractor performance and monitoring, timeliness of contract deliverables, invoice acceptance, and resolving Unliquidated Obligations (ULO)/Undelivered Orders (UDO) in coordination with Budget & Finance, and the requiring activity. Strategic Sourcing ensures that OIT and its customers are compliant with the Federal Information Technology Acquisition Reform Act (FITARA) enacted by Congress in December 2014. OSS is organized into two directorates: Acquisition Strategy and Category Management and Contract and Operations Management.

Business Integration & Outcome Services (BIOS) [formerly Account Management Office (AMO)]

BIOS serves as a customer service organization that liaises between OIT the VA's three Administrations, VHA, VBA and NCA as well as 17 Staff Offices referred to as business partners.

BIOS serves as the gateway to IT success and is dedicated to understanding the business partner's needs. BIOS has Account Groups (AG), Information Technology Account Managers (ITAMs) and Business Relationship Managers (BRMs) who establish and maintain strategic partnerships, ensure an understanding of OIT's governance processes, and serve as a trusted advisor. These relationships drive strategic alignment and prioritization of work in progress, as well as planning for future operations. The AGs represent their business partners' interests and communicate their requirements to OIT's AS/CIO. BIOS's efforts and partnerships enhance services and quality of care provided to the Nation's 19 million Veterans and their families.

IT Budget and Finance (ITBF)

ITBF works with the Office of Management and Budget and Congress to ensure the IT appropriation is transformed into an executable Budget Operating Plan (BOP) and funding is aligned to development and sustainment activities across the VA.

Chief Technology Officer (CTO)

CTO serves as a principal advisor to the AS/CIO. CTO provides expertise and knowledge of new and emerging technologies and leverage that knowledge to help OIT achieve its strategic objectives through the effective use of technology architecture and engineering. The Office of the CTO works closely with core program portfolios across the VA to examine the short and long-term needs of the Department, and to identify and fill gaps in VA's technology portfolio. OCTO takes an approach to problem-solving, teamwork, and leadership that is built on agile development and results in ongoing improvement.

OCTO was created in OIT in 2020 and is a matrixed organization comprised of four units (Digital Transformation, Architecture and Engineering Service, Chief Strategy Office, Chief of Staff Office) and four communities of practice (UX Design, Engineering/Technical, Product, Data).

Strategic Initiatives

OIT is responsible for developing, managing, and maintaining a world-class enterprise IT service for the use of all VA stakeholders. OIT is charged to collaborate with its business partners to create the best experience for each Veteran, VA employee, and industry partner. That is not possible without the intentional and willing participation of those stakeholders in promoting the security, sustainability, and utility of the network and the systems. In response to this need, the Strategic Initiative Office (SIO) was developed to improve the integration of IT compliance, security, and standardization. The SIO consists of experienced and dedicated matrixed IT subject matter experts (SMEs) from across several OIT divisions. They work cross-functionally between divisions and with their stakeholders to decrease the risk of non-compliant or unknown IT services.

2024 Health Portfolio

The Health Portfolio provides advanced technology solutions positioned to ensure high-quality and efficient medical care delivery capabilities to the Nation’s Veterans. The 2024 Budget request includes continued support for VHA priorities while also supporting the maintenance of existing major medical systems.

This section does not include the PACT Act funding request. See the 2024 PACT Act Request section for additional details supporting this request.

The 2024 Health Portfolio Budget Request consists of the following projects details:

Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Health Delivery Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23,599	\$ 94,468	\$ 118,067
Operational Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23,137	\$ 159,692	\$ 182,829
Care Coverage Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,608	\$ 73,887	\$ 87,495
Clinical Care Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,949	\$ 42,211	\$ 50,160
Common Health Care Workflows	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,594	\$ 17,293	\$ 24,887
Common Health Care Specific Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,100	\$ 18,641	\$ 25,741
Health Administration	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,920	\$ 42,905	\$ 49,825
Enterprise IT Infrastructure	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,000	\$ 107,379	\$ 109,379
Patient Management Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 559	\$ 15,720	\$ 16,279
Health Care Infrastructure	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 397,785	\$ 397,785
Virtual Veteran Record	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34,312	\$ 34,312
Quality Systems	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14,968	\$ 14,968
Community Care	\$ 35,614	\$ 91,969	\$ 14	\$ -	\$ 37,879	\$ 102,591	\$ -	\$ -	\$ (140,470)
Community Care - American Rescue Plan	\$ -	\$ 834	\$ -	\$ -	\$ -	\$ 870	\$ -	\$ -	\$ (870)
Supply Chain Management	\$ 42,294	\$ 34,057	\$ 35,934	\$ -	\$ 33,223	\$ 63,282	\$ -	\$ -	\$ (96,505)
Supply Chain Management - American Rescue Plan 8003	\$ -	\$ 23,895	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telehealth Services	\$ 6,781	\$ 8,614	\$ -	\$ -	\$ 13,657	\$ 9,104	\$ -	\$ -	\$ (22,761)
Telehealth Services - American Rescue Plan	\$ -	\$ 7,900	\$ -	\$ -	\$ -	\$ 8,657	\$ -	\$ -	\$ (8,657)
Healthcare Administration Systems	\$ 20,697	\$ 58,985	\$ 21	\$ -	\$ 10,054	\$ 80,991	\$ -	\$ -	\$ (91,045)
Healthcare Administration Systems - American Rescue Plan 8002	\$ -	\$ 6,885	\$ -	\$ 5,153	\$ -	\$ 12,373	\$ -	\$ -	\$ (12,373)
Purchased Care	\$ 6,886	\$ 21,486	\$ -	\$ -	\$ 10,000	\$ 19,475	\$ -	\$ -	\$ (29,475)
Patient Records [System (CPRS)]	\$ 7,070	\$ 1,863	\$ 4,415	\$ -	\$ 9,200	\$ 7,608	\$ -	\$ -	\$ (16,808)
Research	\$ 8,592	\$ 16,496	\$ 104	\$ -	\$ 5,209	\$ 23,855	\$ -	\$ -	\$ (29,064)
IT Support Contracts	\$ -	\$ 77,785	\$ -	\$ -	\$ -	\$ 179,012	\$ -	\$ -	\$ (179,012)
Software Maintenance	\$ -	\$ 185,128	\$ -	\$ -	\$ -	\$ 149,753	\$ -	\$ -	\$ (149,753)
Software Maintenance - American Rescue Plan 8002	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,064	\$ -	\$ -	\$ (5,064)
Health Data Interoperability	\$ 4,142	\$ 92,240	\$ -	\$ -	\$ -	\$ 103,979	\$ -	\$ -	\$ (103,979)
Health Data Interoperability - American Rescue Plan 8002	\$ -	\$ 19,119	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Digital Health Platform	\$ 12,175	\$ 63,547	\$ -	\$ -	\$ -	\$ 50,504	\$ -	\$ -	\$ (50,504)
Digital Health Platform - American Rescue Plan 8002	\$ -	\$ 11,445	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Hardware Maintenance	\$ -	\$ 19,717	\$ -	\$ -	\$ -	\$ 43,000	\$ -	\$ -	\$ (43,000)
Hardware Maintenance - American Rescue Plan 8002	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,415	\$ -	\$ -	\$ (2,415)

Projects (continued) (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
My HealtheVet	\$ 4,687	\$ 12,962	\$ 8	\$ -	\$ -	\$ 20,366	\$ -	\$ -	\$ (20,366)
My HealtheVet - American Rescue Plan 8002	\$ -	\$ 5,321	\$ -	\$ -	\$ -	\$ 8,650	\$ -	\$ -	\$ (8,650)
Pharmacy	\$ 2,000	\$ 13,176	\$ -	\$ -	\$ -	\$ 18,263	\$ -	\$ -	\$ (18,263)
Connected Health/Mobile Apps	\$ -	\$ 10,052	\$ -	\$ -	\$ -	\$ 14,950	\$ -	\$ -	\$ (14,950)
Connected Health/Mobile Apps - American Rescue Plan 8002	\$ -	\$ 8,000	\$ -	\$ -	\$ -	\$ 9,000	\$ -	\$ -	\$ (9,000)
Scheduling	\$ -	\$ 19,501	\$ -	\$ -	\$ -	\$ 13,110	\$ -	\$ -	\$ (13,110)
Registries	\$ -	\$ 6,580	\$ -	\$ -	\$ -	\$ 8,330	\$ -	\$ -	\$ (8,330)
Genomic Information System for Integrative Service (GenISIS)	\$ -	\$ 2,371	\$ -	\$ -	\$ -	\$ 5,500	\$ -	\$ -	\$ (5,500)
Genomic Information System for Integrative Service (GenISIS) - American Rescue Plan 8002	\$ -	\$ 9,713	\$ -	\$ -	\$ -	\$ 290	\$ -	\$ -	\$ (290)
Beneficiary Travel	\$ -	\$ 2,748	\$ -	\$ -	\$ -	\$ 5,031	\$ -	\$ -	\$ (5,031)
Beneficiary Travel - American Rescue Plan 8002	\$ -	\$ 3,698	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Access & Billing	\$ -	\$ 3,693	\$ -	\$ -	\$ -	\$ 4,514	\$ -	\$ -	\$ (4,514)
Lab	\$ -	\$ 3,897	\$ -	\$ -	\$ -	\$ 4,200	\$ -	\$ -	\$ (4,200)
Registration, Eligibility, Enrollment	\$ -	\$ 863	\$ -	\$ -	\$ -	\$ 2,000	\$ -	\$ -	\$ (2,000)
Registration, Eligibility, Enrollment -ARP 8002	\$ -	\$ 1,112	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total Health Portfolio	\$ 150,938	\$ 845,652	\$ 40,496	\$ 5,153	\$ 119,222	\$ 976,737	\$ 92,466	\$ 1,019,261	\$ 15,768

Notes:

1. The 2022 Actuals and 2023 Enacted columns reflects projects reported prior to the budget restructure and will be executed as is
2. The 2024 Request column reflects projects in the new IT budget structure. Please refer to the Appendix Q Budget Restructure Matrix for the alignment of the old budget structure to the new 2024 IT budget structure
3. In 2024, MyHealtheVet will be realigned to the Veteran Experience portfolio under Digital Experience project due to the budget restructure

The Project detail tables below display 2022 Actuals and 2023 Enacted sub-projects aligned to the Projects in the new 2024 budget structure for comparison purposes.

Health Delivery Support - \$118.1 million (Development - \$23.6 million, Operations and Maintenance - \$94.5 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Outbound eRx	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,908	\$ -	\$ 12,908
VHA Innovation Ecosystem	\$ 5,592	\$ 2,408	\$ 104	\$ -	\$ 5,209	\$ 4,795	\$ 5,385	\$ 5,385	\$ 766
VA PMP Gateway (VAPMPG)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,600	\$ 4,477	\$ 7,262	\$ 5,139
Bereavement Care - National Chaplain Service (NCS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 800	\$ -	\$ 800
Research Resource Center - Knowledge Sharing Forum/Hub	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 29	\$ -	\$ 29
VA Health Connect Customer Relationship Management (VAHC CRM)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 19,972	\$ 19,972
Office of Healthcare Innovation and Learning	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,595	\$ 12,595
Genomic Information System for Integrative Sciences (Genesis)	\$ -	\$ 2,371	\$ -	\$ -	\$ -	\$ 5,500	\$ -	\$ 8,000	\$ 2,500
Genomic Information System for Integrative Sciences (Genesis) - Section 8002	\$ -	\$ 9,713	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VHA Research IT Support	\$ -	\$ 5,872	\$ -	\$ -	\$ -	\$ 6,529	\$ -	\$ 6,503	\$ (26)
Home Telehealth Reporting (HTR)	\$ 4,200	\$ 636	\$ -	\$ -	\$ 5,000	\$ 1,725	\$ -	\$ 6,043	\$ (682)
Million Veteran Program Online/ CHAMPION IAA (MVP Online)	\$ -	\$ 5,570	\$ -	\$ -	\$ -	\$ 7,400	\$ -	\$ 6,000	\$ (1,400)
National Clozapine Registry(NCR)	\$ 2,101	\$ 1,274	\$ -	\$ -	\$ -	\$ 5,508	\$ -	\$ 4,867	\$ (641)
Methadone Dispensing Tracking	\$ -	\$ -	\$ -	\$ -	\$ 3,200	\$ 2,250	\$ -	\$ 4,715	\$ (735)
Web VistA Remote Access Management (WebVRam)	\$ 181	\$ 2,483	\$ -	\$ -	\$ -	\$ 1,679	\$ -	\$ 2,506	\$ 827
VA-Academic Collaboration Space - Box Cloud Content Management (Box)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,618	\$ -	\$ 2,184	\$ (434)
Delivery Operations Claims Management Platform (DOCMP)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,000	\$ 2,000
4-SIGHT Automated Eyeglass Ordering	\$ 463	\$ 1,424	\$ -	\$ -	\$ -	\$ 949	\$ -	\$ 1,986	\$ 1,037
Advanced Medication Platform (AMPL) - Pharmacy Graphic User Interface (GUI)	\$ -	\$ 1,703	\$ -	\$ -	\$ -	\$ 1,650	\$ -	\$ 1,650	\$ -
Inbound ePrescribing (eRx)	\$ 600	\$ 4,816	\$ -	\$ -	\$ -	\$ 2,350	\$ -	\$ 1,350	\$ (1,000)
eScreening	\$ -	\$ 275	\$ -	\$ -	\$ -	\$ 200	\$ -	\$ 600	\$ 400
Research Electronic Data Capture (VA REDCap)	\$ -	\$ 459	\$ -	\$ -	\$ -	\$ 200	\$ -	\$ 500	\$ 300
Cardiac Device Monitoring System (CDMS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 150	\$ -	\$ 350	\$ 200
Big Four	\$ -	\$ -	\$ -	\$ -	\$ 2,249	\$ -	\$ -	\$ -	\$ (2,249)
Pharmacy Automated Dispensing Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,313	\$ -	\$ -	\$ (4,313)
Pharmacy Operational Updates	\$ 1,400	\$ 506	\$ -	\$ -	\$ -	\$ 2,200	\$ -	\$ -	\$ (2,200)
VistA - Pharmacy Inpatient Medications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,150	\$ -	\$ -	\$ (1,150)
Homeless Management Information System (HMIS)	\$ -	\$ 226	\$ -	\$ -	\$ -	\$ 275	\$ -	\$ -	\$ (275)
Events Management Analytics Platform (EMAP)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 101	\$ -	\$ -	\$ (101)
MHV Infrastructure and Interface	\$ 681	\$ -	\$ 8	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VA-Academic Collaboration Space for Research, Education and Innovation	\$ 2,999	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
National Clozapine Coordination	\$ 2,017	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Veterans Transportation Service (VTS) Integration	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Voluntary Service System (VSS)	\$ -	\$ 3,111	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Status Query and Response Exchange (SQUARES)	\$ -	\$ 1,611	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Machine Learning Decision System (MLDS)	\$ -	\$ 1,152	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
eScreening Alternative Suicide Prevention Efforts	\$ -	\$ 63	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health Delivery Support	\$ 20,235	\$ 45,675	\$ 112	\$ -	\$ 15,658	\$ 58,142	\$ 23,599	\$ 94,468	\$ 44,267

Outbound eRx is an electronic pathway that allows for electronic prescription submissions to community pharmacies and the ability to receive information from those pharmacies so that any issues can be addressed timely and documented in the patient medical record. It will also ensure compliance with mandated e-prescription use, make prescription information available for providers to review in the patient's chart, support increased communication with the external pharmacy to confirm the patient is getting the prescription needed, support access to care by partnering with the patient's preferred provider, and eliminate the manual, paper prescription process which introduces the risk of misuse and delay of patient medication/care/treatment. As states move toward mandating the adoption of electronic prescriptions, VA needs the ability to electronically prescribe medication for Veterans to community pharmacies of the Veteran's choice

and receive and send communications with the community pharmacies. This project will develop a solution which would enable VA providers to submit electronic prescriptions to community pharmacies via industry standard EDI transactions. The accomplishment is that Veterans will be able to utilize external community pharmacies to fulfill prescriptions without paper prescriptions. Currently, this is managed using manual, paper-driven interactions between VHA and those pharmacies and external pharmacies are mandating electronic prescriptions. This will ensure Veterans continue having a choice to use external pharmacies.

VHA Innovation Ecosystem (VHA IE) will leverage existing VA strategic priorities such as the Innovators Network Portfolio (iNet), VA's Diffusion of Excellence (DoE), and Care & Transformational Initiatives (CTI) to build comprehensive and collaborative innovation communities that engage the broader VHA innovation community. It will oversee the innovation landscape while providing integration of all VHA Innovation activities through improved planning, coordinating, organizing, leading, and controlling of all innovation activities within the Innovation Lifecycle. Due to the increase in demand for cutting-edge health care technologies, VHA IE is requesting additional funding for development of new capabilities, operations and maintenance. The new capabilities include providing operational efficiency to streamline and automate inefficient and/or non-value add processes reducing administrative burnout and increasing time available for medical appointments. Additionally, these capabilities will provide personalized medical solutions that enable the accumulation of knowledge of the biology of diseases for use with improving care and treatment. These new capabilities also will enable virtual, asynchronous, remote care solutions that enable digital models of care supporting telemedicine and virtual care.

The VA Pain Management, Opioid Safety, and Prescription Drug Monitoring Program (VA PMP) Gateway provides a means for state Prescription Monitoring Program (PMP) administrators to actively share PMP data with authorized users such as Integrated Healthcare Delivery organizations, state health information exchanges (HIEs), and Medicaid fee-for-service and managed care entities. PMPs are a significant risk mitigation tool associated with prescribing controlled substances like opioids, stimulants, benzodiazepines, etc. The first step toward adhering to best practices and achieving higher query compliance rates is the ability to query Prescription Drug Monitoring Program (PDMP) efficiently and effectively in real time with access to the most complete information available. The PMP Gateway allows clinicians to view patient demographic information and dispensation information. VA PMP Gateway is fundamental to integrating PDMP query functionality into both VA Veteran Integrated System Architecture (VistA) and Oracle Cerner's VA Electronic Health Record (EHR) settings. VA PMP Gateway has increased visibility into the Veteran's complete prescription history which reduces the likelihood of over-prescription or abuse of medications on average of 260 thousand inquiries per month. Trends have continued to query upwards since solution launch and are now occurring between 105 thousand and 120 thousand queries every two weeks. Currently, 51 individual PDMPs are participating, with expectations that 2 of the remaining states (NY and CA) – both home to large populations of Veterans - will be joining soon. The VAPMPG expansion will implement updated functionality into the existing Integrated PMP solution to support monitoring and reporting of inpatient and outpatient opioid-related outcomes, pain management, clinical workflows, risk mitigation activities, and prescribing results.

The Bereavement Care – VA National VA Chaplain Service (NCS) is requesting an automated solution to manage initial and continued bereavement care for Veteran Next-of-Kin (NOK) and Caregivers (CG), including reporting from a single system. There are several issues with the current process, namely that facility Chaplain staff are not informed of a Veteran death in a timely manner. There is no way to effectively track continued bereavement care for NOK or CG in a single application location. Staff are currently documenting the initial point of death care in the Veteran record, but any continued bereaved care should be documented in a unique NOK or CG collateral health record, per Office of Community Care (OCC) policy. NCS Program Office is looking to automate many of the functions and services provided by VA Facility Chaplain Service (FCS) Staff for initial and continued bereavement care from the time of death of the Veteran to the one-year anniversary date of the death of the Veteran, including documenting continued bereavement care in a NOK or CG unique health record. The request will improve the current process by ensuring Veteran NOK and CG are automatically informed of and provided bereavement care services. Automation will ensure that letters and mailings are sent to NOK and CG on an established schedule and those letters and mailings will be created from templates with the ability to be customized. NCS Program Office oversight will be improved through receipt of reports from FCS Staff.

Research Resource Center – Knowledge Sharing Forum/Hub is a learning healthcare system which enhances VA's Research ability to communicate, grow, and remain relevant by replacing the legacy HSRData Listserv with a vendor provided knowledge sharing platform. It supports knowledge engagement and turns knowledge into a more effective, renewable and reusable resource for Health Services Research & Development Service (HSR&D) Centers, across Office of Research and Development (ORD) program areas, and ORD Electronic Health Record Modernization (EHRM) efforts.

Clinical Contact Centers (CCCs) will serve as a virtual front door to VA health care. They will provide Veterans and their caregivers immediate, 24/7, on-demand access to clinical and administrative services to address urgent and episodic health care needs over the phone, chat, video, and/or email. The modern VA Health Connect Customer Relationship Management (VAHC CRM) solution, which is used in all CCCs, will enable VA to seamlessly manage customer interactions and relationships through a data-driven approach. Pharmacy capabilities will be implemented within VAHC CRM, enabling CCCs agents to refill, track and manage Veterans' prescriptions online and over the phone. The new platform capabilities will improve existing functions and enable new functions, most notably to implement a Veteran appointment scheduling solution for internal VA scheduling. It will provide a single unified engagement layer for managing schedules and appointments in real-time across the VA's entire network of sites, whether those sites are using VistA Scheduling, Cerner Scheduling, or in transition from one to the other. The new capabilities will support a fully integrated network between VHA and its external providers to address the challenges of coordinating care across networks for healthcare organizations, providers, and locations. When referring and scheduling Veterans to VA's community care network, it will provide a single user interface for viewing real-time appointment availability and scheduling desired appointments directly into the receiving provider's Electronic Medical Record (EMR) with the critical referral details. This funding provides the continued use of the CCC Production Salesforce module by over seven thousand VA Clinical users. Additional clinical workflows and roles will be supported in areas including Administration, Scheduling, Pharmacy,

Tele-urgent care, and Telephone based clinical support. The following capabilities will be delivered to all Veterans Integrated Services Networks (VISN) utilizing VAHC CRM:

- Search and book available appointment slots
- Search, edit, reschedule, and cancel booked appointments
- Appointment search value set management

The Simulation Learning, Evaluation, Assessment and Research Network (SimLEARN) national program office is VHA's premiere clinical education asset for the advancement and innovation of VHA healthcare. SimLEARN supports VHA's journey as a high reliability and learning organization through the coordination of all national VHA simulation-based clinical education products and activities supporting enterprise level innovative healthcare solutions. The SimLEARN Emerging Health Technology Integration team accelerates the adoption of emerging health technology through simulation and learning, assessing the technology landscape and identifying solutions that advance the standard of clinical learning and simulation. SimLEARN faculty instructors serve as liaisons, consultants, and SMEs, leveraging clinical and Health Profession Education expertise to enable stakeholders to build and sustain innovative simulation-based trainings. SimLEARN also provides a robust resuscitation training portfolio through the Resuscitation Education and Innovation (REDI) program for VHA-wide oversight and support of all resuscitation educational programs. SimLEARN Health Education Specialists enable VA medical centers and facilities to identify and mitigate potential hazards related to the medical emergency care response through focused quality reviews to drive performance improvement at the local level. IT support is critical for the Office of Healthcare Innovation and Learning to successfully accomplish their mission to advance innovative interventions and solutions across VHA.

Genomic Information System for Integrative Sciences (GenISIS) is the platform used by ORD to support the Million Veteran Program (MVP) and genomic science at VA. This includes sequencing the COVID-19 virus genome and working with the Centers For Disease Control and Prevention (CDC). There is ongoing maintenance and IT support to maintain scientific software, applications and support platform modifications, components, correct faults, increases to cloud storage based on increasing data usage, maintain cloud professional services, license maintenance, software updates, patches as needed to maintain a secure up-to-date computing environment for the Genomic Medicine Program and research as a whole. GenISIS' platform needs to keep pace with the research methods and requirements, support and maintain the scientific software, and ensure approved projects have effective, efficient support to support Veteran outcomes.

Home Telehealth Reporting (HTR) is a cloud-hosted, web-based system under the VHA Office of Connected Care's Telehealth Services. It is comprised of two components: Home Telehealth Census and Survey (CNS) and Integrated Home Telehealth Application (IHTA). CNS is a database and web portal for reporting of Home Telehealth aggregate data. IHTA is a web-based portal application designed to provide a flexible, maintainable, and resilient platform for Home Telehealth (HT) business functions. Each business function supported by IHTA is constructed as an application module of IHTA. Current IHTA modules include: My Profile, Administration, Inventory Tracker, and Disease Management Protocol. As a supplement to in-person healthcare, HTR provides the capability, telehealth tools, devices, and processes allowing providers to provide quality healthcare efficiently and effectively to Veterans irrespective of the provider or the

Veterans location across the enterprise. Home Telehealth improves clinical outcomes and access to care by reducing complications, hospitalizations, and clinic or emergency room visits, particularly for those with chronic disease and/or in underserved, remote areas thus allowing Veterans to continue to live independently and spend less time at medical visits. HTR also assists with educating Veterans with the knowledge and skills needed to self-manage their own health care needs more effectively. HTR provides additional functionality and enables expansion, increasing opportunities within the Home Telehealth / Remote Patient Monitoring program to improve care for more than 71 thousand Veterans, 45% of whom live in rural areas where traveling to traditional medical appointments is difficult. The intended outcome will be a more robust resource management and decision-making tool and provide more options for home monitoring of Veterans.

Million Veteran Program Online (MVP Online)/ Computational Health Analytics for Medical Precision to Improve Outcomes Now (CHAMPION) Interagency Agreement (IAA) requires ongoing support to maintain the analytics, data management, and information technology to support MVP CHAMPION. This effort is required to support joint VA VHA and Department of Energy (DOE) medical research projects utilizing Veteran donated DNA, DOE Oak Ridge National Labs (ORNL) hosted Genome and Phenome Data types within the supercomputing enclave developed by VA and DOE at DOE ORNL. It includes data analytics expertise for extremely large data sets provided by the DOE ORNL. MVP CHAMPION supports the VA-DOE Interagency Agreement supporting the following ORD Strategies: make VA data a national resource; make VA data more widely available; make clinical trials of quality more available to Veterans; (CRADO 3); transform VA Research into a Data Science Program for Big Data; fulfill the goal of the VHA Health Informatics Strategic Plan (HISP); and advance VA-DOE Objective for Healthcare and National Strategic Computing goals (VA-DOE). The 2024 request is aligned with ORNL & ORD Interagency Agreement budgets. MVP has collected genetic samples from 925 thousand Veterans to create the largest and most diverse genomic specimen repository on the planet. The MVP researchers work to better Veteran lives by looking for better ways to diagnose suicide ideation, actively participate with the Cancer Moonshot, and establish a phenotype library that will help both Veterans and society discover the parts of disease and how to deliver precision medicine.

The National Clozapine Registry (NCR) allows VA to maintain compliance with the Clozapine Risk Evaluation and Mitigation Strategy (REMS), which was mandated by the Food and Drug Administration (FDA). NCR does this by providing enterprise-wide tracking of clozapine prescriptions, monitoring of compliance with FDA requirements, and the workflow for approving clozapine medication orders for Veterans who are at high risk for suicide as part of their mental health treatment. Users can access NCR through a browser where they enter data and generate reports about clozapine patients and their prescriptions. The complete integration with the Master Person Index in 2021 automated the synching of patient identity information with the authoritative source. Major cost drivers are future changes and requirements from the FDA Clozapine REMS system to ensure VA's continued compliance.

Methadone Dispensing Tracking automates surveillance of medication-assisted treatments of opioid use disorders across the Veteran population served by VA thereby minimizing risk of drug-to-drug interactions and allowing well-coordinated healthcare for Veterans involved with

methadone treatment under VA's Opioid Treatment Program (OTP). This system also removes VA's dependency on a third-party software solution that is not standardized across programs and provides a solution for a small subset of the OTPs as they transition to Millennium. Operations and maintenance will support a secure and fully functioning interface as medical devices are added or changed as well as ensure continuous integration with other application dependencies and continuous operation to meet the current state needs for the remaining OTP clinics within CPRS.

The Web VistA Remote Access Management (WebVRAM) application enables Telehealth providers and staff to access one or multiple VA instances of a medical record using an intuitive user interface. The maintenance function ensures continued access by clinicians who support Veterans to use this solution. Maintaining the WebVRAM product will prevent delay in providing clinicians access to multiple VistA instances and ensure no impact to Veterans receiving much needed care from the VA. The Office of Telehealth Services within the Office of Connected Care requires the WebVRAM application to continue to function, be hosted in the VA Enterprise Cloud, and to maintain an Authority to Operate (ATO) to support the clinicians using this application. The WebVRAM user base has been increasing at a rate of approximately 4% each month. For this reason, the cost of Cloud hosting is expected to increase. Furthermore, the infrastructure will be expanded to support testing of Disaster Recovery in the pre-production environment. As each VistA site transitions to Cerner, WebVRAM is modified to support the transition.

VA-Academic Collaboration Space - Box Cloud Content Management (Box) enables integration with collaboration tools (approved SaaS applications) located outside of VA firewall to allow VA investigators, educators, innovators and non-VA colleagues in academic affiliates and other agencies [such as National Institutes of Health (NIH), National Cancer Institute (NCI)] to collaborate on grant writing, publication writing and other shared document tasks. It includes a SharePoint-like document library with document version control, calendaring, reminders, as well as chat, message and video/teleconference features with users outside the VA firewall who do not have VA credentials but are affiliated with the VA's research, education and innovation mission. Box facilitates cross-organizational cooperation and allows VA's ability to participate in advanced, ground-breaking research. Other stakeholders for this project include the two external Federal Advisory Committee Act advisory panels [The National Research Advisory Council (NRAC) and the National Academic Advisory Council (NAAC)] that advise the VA Secretary on Research and Education missions. Box enables a virtualized business workflow that minimizes paper and physical case and claims management, thereby improving operational efficiency. Additionally, the solution facilitates the transfer and sharing of large files that would otherwise be non-transferable. This enables new business operations in media and academic/healthcare research. It also provides a secure document repository with multi-factor authentication for external parties, and web portal-based user interaction that are essential for managing and improving seamless delivery to Veterans. Box will provide growth in licensing for the VHA Research and Education user base, since document sharing is a necessary part of delivering patient care and is also fundamental to the research, education and innovation missions. Additionally, a centralized, facility-based collaboration workspace is necessary for those documents, opinions, and ancillary products that would not be part of the medical record. Sustainment costs are directly tied to the number of integrations between Box.com and external systems.

The Delivery Operations Platform (DOCMP) is a suite of claims processing components and related applications within Community Care which support the Delivery Operations Claims Processing products. This platform assists with the adjudication of claims by allowing business rules to be implemented resulting in quicker processing. In addition to the business rule process, these components allow for reports, pulling necessary information as it relates to all aspects of claims including cost, eligibility, and payment data. Major cost drivers include the ongoing maintenance and support of the DOCMP system to assist with claims processing workflow, which currently is more than 2 million paper claims per year.

4-SIGHT Automated Eyeglass Ordering is a business model that promotes standardization of procurement of eyeglasses for Veterans through automation actions in VistA. The purpose of the project is to decrease the amount of open eyeglass orders by reducing the processing time associated with eyeglass ordering for Prosthetics. 4-SIGHT is currently in use at approximately 18 facilities and will be expanded to 20 additional facilities. The 2024 funds will be used to acquire cloud credits, which will continue operation of the system and allow Veterans to obtain eyeglasses in an efficient and timely manner.

Advanced Medication Platform (AMPL) - Pharmacy Graphic User Interface (GUI) provides a user interface to present data from multiple data sources which pharmacists currently must search for. This will save time and help prevent human error. The product will include the Immunization Calculation Engine (ICE) tool used to determine what immunizations to recommend based on the patient's information. Major cost drivers are cloud hosting, VistA interface support, and support for break fixes.

The Inbound ePrescribing (eRx) sub-project allows community providers to send electronic prescriptions to VA Pharmacists, reducing the manual entry of paper prescriptions, which is both time consuming for the VA pharmacist and error-prone which can have negative consequences for the Veteran. This interaction with the patient's healthcare helps provide better service without repeated intervention from the patient. The major cost driver is funding the certification to allow the VA to participate in the electronic receipt of prescriptions from community providers to VA pharmacists. The project will provide an accredited connection to the national database of prescriptions so that the VA can fill orders placed by community care providers.

eScreening supports access to care by providing the ability for Veterans to provide health data to VA for use by medical staff for the appropriate medical care and treatment. The ability for Veterans to complete screenings in advance of their medical exam will allow the results to be provided to clinicians to inform the areas of focus during the exam. This capability will increase the amount of time that is focused on the exam versus spending time on administrative tasks. Remote monitoring of Veterans includes the use of third part medical devices and services that expands Veterans' access to care by enabling care to be provided at home. The medical data from the devices and services is provided to the VA health care providers for use with monitoring progress and determining treatment plans that could provide better outcomes. eScreening is used in conjunction with virtual medical appointments and increases the ability to provide medical care to Veterans in rural areas. eScreening also improves operational efficiency by streamlining and automating inefficient and/or non-value add processes, reducing administrative burnout and increasing time available for medical appointments. Additionally, eScreening enables virtual,

asynchronous, digital care models of care supporting telemedicine and virtual care. The 2024 funding is requested for the system maintenance and the cost of hosting the application in the cloud environment.

Research Electronic Data Capture (VA REDCap) will provide the capability to collect data outside of the VA firewall, to connect to the VA Informatics and Computing Infrastructure (VINCI) Workspace inside the VA firewall, and to host the system in the secure VAEC to support collection of protected health information (PHI) and potentially identifiable information (PII) via electronic surveys. The system will be configured to allow survey responses without authentication to maintain anonymity and accessibility to Veterans completing electronic surveys, allow use of Computer Adaptive Tests (CATs) and auto-scoring instruments, and allow use of the e-Consent Framework and capture of the Internet Protocol (IP) address of survey participants that certify using the e-Consent process. However, Single Sign On (SSO) with two-factor authentication (2FA) will be required for VA staff logging into the VA REDCap system to create projects, administer surveys, and access data. Cost drivers are the sustainment team delivered under the existing acquisition's option year cost structure, including increase cloud costs to support increased user demands, and the VA Zero Trust Architecture effort.

Cardiac Device Monitoring System (CDMS) supports the National Cardiac Device Surveillance Program (NCDSP) which was created by Congress in 1982 and operational as of January 1983. The Program was charged with following Veterans throughout the country with implanted pacemakers, verifying that their devices were giving appropriate therapy and notifying the referring medical center when there were problems or the patient's batteries were reaching end-of-life. That role has expanded to now include defibrillators and other heart monitoring devices. Currently, the two centers (San Francisco and Washington, DC) are performing remote at home clinical follow-up of over 55,000 Veterans. On average, each patient is reviewed five times per year. To perform this vital clinical service, NCDSP is dependent on specialized software, a 3 Terabyte database that contains data on 195 thousand patients and is growing at 3 gigabytes per day, data links to the device manufactures, and a web portal available to local VA clinics. Over the last several years, NCDSP has experienced a 10% annual growth in the population it serves and the number of patient transmissions it processes each year. A key accomplishment is ongoing maintenance and support of the CDMS application that provides Veterans with access to, and the support of, a dedicated team well versed in the anxieties and fears of a device patient. Additional accomplishments include a centralized program that follows Veterans throughout the country, allows for collaboration with other VA and national programs such as the VA National Center for Patient Safety and the FDA and thereby reducing adverse effects and providing a source for patient/device information when needed by VA and third-party physicians.

Operational Support - \$182.8 million (Development - \$23.1 million, Operations and Maintenance - \$159.7 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Enterprise Supply Chain (eSC)	\$ 40,300	\$ 5,965	\$ 35,934	\$ -	\$ 33,223	\$ -	\$ 23,137	\$ -	\$ (10,086)
Enterprise Supply Chain (eSC) - Section 8003	\$ -	\$ 23,895	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Supply Chain Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 85,150	\$ 85,150
Medical Care Collections Fund Transactions Applications Suite (MCCF EDI TAS)	\$ 50	\$ 21,485	\$ -	\$ -	\$ -	\$ 19,475	\$ -	\$ 18,971	\$ (504)
VHA Mobile Application Platform (MAP)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 15,698	\$ 15,698
Supply Chain GUI (SC GUI)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,000	\$ -	\$ 11,679	\$ 679
MAXIMO Enterprise Asset and Work Management (EAWM)	\$ -	\$ 6,149	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,000	\$ 10,000
Clinical Trainee Registration and Tracking System (CTRTS)	\$ 4,301	\$ 8,540	\$ -	\$ -	\$ 3,000	\$ 1,000	\$ -	\$ 4,955	\$ 955
Environment of Care Assessment Compliance Tool (EOC)	\$ -	\$ 2,439	\$ -	\$ -	\$ -	\$ 2,600	\$ -	\$ 4,000	\$ 1,400
Veteran Co-Payment Lockbox (VCPL)	\$ -	\$ 1,368	\$ -	\$ -	\$ -	\$ 3,000	\$ -	\$ 3,500	\$ 500
Strategic Equipment Planning Guide - Enterprise Equipment Request (SEPG-EER)	\$ -	\$ 1,359	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,500	\$ 2,500
Real Time Location System (RTLs)	\$ -	\$ 456	\$ -	\$ -	\$ -	\$ 935	\$ -	\$ 1,805	\$ 870
Community Care Veteran Billing System (CCVBS)	\$ -	\$ 1,246	\$ -	\$ -	\$ -	\$ 1,255	\$ -	\$ 1,434	\$ 179
Medical Care Collections Fund (MCCF) EDI Transaction Applications Suite	\$ 6,836	\$ -	\$ -	\$ -	\$ 10,000	\$ -	\$ -	\$ -	\$ (10,000)
Supply Chain Management	\$ 1,994	\$ 10,242	\$ -	\$ -	\$ -	\$ 52,282	\$ -	\$ -	\$ (52,282)
Community Care (CC) Integrated Billing (IB) Accounts Receivable (AR)	\$ -	\$ 5,189	\$ -	\$ -	\$ -	\$ 3,436	\$ -	\$ -	\$ (3,436)
VAEC Mobile Application Platform (VAEC MAP)	\$ -	\$ 10,052	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VAEC Mobile Application Platform (VAEC MAP) - Section 8002	\$ -	\$ 8,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Defense Medical Logistics Standard Support (DMLSS)	\$ -	\$ 6,641	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
National COVID-19 Request Tool (NCRT)	\$ -	\$ 3,701	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Operational Support	\$ 53,482	\$ 116,727	\$ 35,934	\$ -	\$ 46,223	\$ 94,983	\$ 23,137	\$ 159,692	\$ 41,623

VA needs a modern end-to-end health care logistics solution that will enable VA medical logistics modernization and directly impact the quality of care, patient safety, and access to health care. Development of Supply Chain Enterprise Solution is the conversion of all legacy, on-premises functionality to the single, cloud-based application. Supply Chain Enterprise Solution is an enterprise-wide Health Care Logistics Solution which includes Supply Chain Management which will ensure effective management and maintenance of the VA's valued facilities, allow effective analysis of ownership costs, and enable prioritization of investments based on asset conditions. Supply Chain Enterprise Solution will provide the VA's overall ability to effectively deliver world-class benefits and services to the nation's Veterans, Active Duty, and authorized beneficiaries. Supply Chain Enterprise Solution will provide a Total Asset Management solution for the VA which will also be cost savings as well as interface with VA EHR and Integrated Financial Acquisition Management System (iFAMS) to enable the simplification of required interfaces with the supply chain management system. Interface activities with partner systems will require deep

dives into legacy and synchronization of data, testing, and governance activities. The major cost drivers are supporting the development of the requirements and implementation of the new supply chain logistics solution for the VA. Accomplishments include the conversion of all legacy, on-premises functionality to the single, cloud-based application.

Medical Care Collections Fund (MCCF) supports VHA's collection of health insurance copayments for services Veterans receive from the VA but are not covered by the Veteran's benefit. MCCF also supports VHA's implementation of the Health Insurance Portability & Accountability Act (HIPAA) which requires industry-wide standardization of Electronic Data Interchange (EDI) Transactions to achieve improved efficiency and cost effectiveness in US healthcare. This project operates and maintains those systems in a good optimal operational state. Sustaining the EDI Standards and Operating rules allows VHA to continue exchanging data with insurance payers. VHA must implement periodic changes to standards and implement new data fields and data field values to exchange data. This maintains the flow of revenue to VA. The major cost driver is due to the start of meeting Federal and National New Medical/Pharmacy Standards which must be addressed in 2024. Sustainment of the new Medical/Pharmacy Standard and the newly implemented IBM Sterling software enables the VHA Office of Community (OCC) to continue to collect third party insurance for healthcare rendered by the VA and remain in compliance with national standards. Accomplishments include maintaining HIPAA compliance through implementation of standards and new data fields and data field values. In addition, implementing the new Medical/Pharmacy Standards will allow continuous data exchange with insurance payers, maintaining the flow of revenue to VHA. Compliance is dictated by the Administration Simplification portion of the HIPAA X12 EDI transactions, as amended by the Patient Protection and Affordable Care Act (PPACA).

The VHA Mobile Application Platform (MAP) is the platform that hosts Mobile/Web applications such as Telehealth, Scheduling, Service Providers, Lighthouse and other enterprise applications/services for both VHA and OIT primarily servicing Veterans directly. It is critical to expand Veteran access to care and provide virtual healthcare services to Veterans who would rather not seek care in the community. Funding is required to sustain the existing Mobile Health Development/Operations (DEVOPs) infrastructure and will support infrastructure for Mobile applications which includes Mobile Cloud pipeline hosted in Amazon Web Services (AWS), Mobile Applications contract, licenses for the active databases and Tier II/Tier III helpdesk support. This is the mobile infrastructure that supports all current mobile applications delivered to Veterans and delivers the IVS (Image Viewing System), VA Online Scheduling (VAOS), Annie and the entire portfolio of mobile applications, including applications such as Post traumatic stress disorder (PTSD) that are prescribed to Veterans.

Supply Chain GUI (SC GUI) - The Supply Chain Enterprise Solution project is focused on identifying, delivering, and sustaining an easy to use, integrated, intelligent Enterprise Supply Chain Modernization (ESCM) and Management solution that is cloud based. The VA Supply Chain manages the flow of goods, services, and information between all stakeholders, including within VA, external suppliers and service providers, and the ultimate customer – the Veteran. This includes, but is not limited to, Prosthetics, Pharmacy, Information Technology (IT), Healthcare Technology Management (HTM)/ Bio-medical Equipment Repair and Supplies, Facilities Management (VA-wide, e.g., VA medical centers (VAMC), clinics, Regional Offices, Staff

Offices, etc.), Medical/Surgical, Distribution, Burial and Benefit equipment and supplies, as well as administration of the same. The goal of this effort is for VA's Supply Chain to become an industry leader in supply chain solutions through innovation and collaboration with federal and industry partners. VA seeks to meet this goal by implementing the most operationally effective/optimal ESCM performance-based solution meeting the needs of all VA stakeholders involved in supporting Veterans. VA's medical supply chain is the second largest expense in the VA budget and if left unchanged, the medical supply chain may become the largest expense category over the next decade. Sustainment of this new solution is required as system implemented across VA. The major cost drivers are the operation and maintenance of hosting a new supply chain system and product licensing, refining the supply chain system for VA intended use, sustainment of interfaces to VA and partners, and implementation of Supply Chain Enterprise Solution across VA.

The MAXIMO Enterprise Asset and Work Management (EAWM) - formerly called SOARD - provides the VHA an integrated asset management capability. This capability includes the ability to perform service and maintenance requisitioning, work order management, inventory management, facilities management, equipment management, and related workforce management. This capability enhances the VHA's ability to serve Veterans by creating and maintaining an effective, integrated, Administration-wide management capability to make data-driven decisions, allocate resources, and manage results. The crux of the system is IBM's Maximo EAM Commercial COTS solution. The software is an intranet web-based application that is entirely contained within the VA Wide Area Network (WAN). The Maximo product delivers Out of the box (OOB) capabilities, and only cosmetic changes to screen layout have been tailored to VA preference. The underlying Oracle database easily accommodates new data fields and has been expanded to include relevant VA data fields unique to the mission (e.g., EIL, CMR, VA MDNS, etc.). The major cost driver is the Maximo EAWM Technical Support which serves a critical function providing lifecycle support for more than 158 thousand active users in the Maximo system with over \$4.6 billion in managed asset value. Those users are reporting and solving on average 27 thousand service requests per month and 85 thousand work orders per month. Maximo is used by Biomedical Engineering, Facilities Management, and Environmental Management to manage work orders, schedule maintenance, safety recalls, and other functions necessary to provide a safe and effective environment of care. The 2024 request will fund ongoing maintenance and support for the MAXIMO application. Accomplishments include supplying support services and management capabilities that empower site leaders and logisticians to enable clinicians to provide health care and medical services to Veterans that are timely, responsive and effective. This addition to the medical supply management capabilities will enable VA to expedite future order of supplies and delivery methods.

Clinical Trainee Registration and Tracking System (CTRTS). VHA has a statutory mission to develop health professionals for VA. Beginning in 1946, VA began to affiliate with educational institutions to increase the capacity of VA to care for returning Veterans of World War II. Over the past 70 years, the affiliation process has been extended to over 1,800 universities, medical, and other professional schools, and in over 40 different health disciplines. Annually, the Office of Academic Affiliations (OAA) manages appointments for approximately 130 thousand Health Professions Trainees (HPTs). Trainees include physician residents, dental residents, medical students, nurse trainees of all levels, and trainees in psychology, optometry, podiatry, pharmacy,

social work, audiology, speech pathology, and many other health disciplines. VA also brings on a mix of approximately 20 thousand researchers and health care providers. The investment in CTRTS will fund maintenance of an automated, enterprise-wide electronic system of records to provide reporting, tracking and functionality needed to support needs of the Office of Academic Affiliations.

The Environment of Care Assessment Compliance Tool (EOC) is a web-based solution that improves efficiency related to the management of Environment of Care compliance, Annual Workplace Evaluations (AWE), Police Program Inspection Compliance (PPIC) for VHA nationwide at all 18 Veterans Integrated Service Networks (VISNs), 171 facilities, and 1,100+ outpatient facilities. AWE licenses will allow Safety specialists to consolidate their inspections into a single platform and align with EOC. The platform addresses Joint Commission and OSHA regulations concerning the healthcare environment. Additionally, the EOC platform is required per VHA Directive 1608. A funding increase is needed in 2023 and beyond to meet the growing needs and increased scope of the new CEOC contract. In addition, due to the platform's success, there are continued requests to expand the platform checklist and overall capabilities. In 2024, operations and maintenance funding will allow administering a mobile capability in managing EOC compliance as it relates to patient care, employee, and visitor activities; capturing deficiency data in real-time; and generating time-sensitive corrective actions to remediate identified potential patient safety risks and other EOC deficiencies.

Veteran Co-Payment Lockbox (VCPL) requires the operations and maintenance funding for processing of Veteran copayments for medical services and ensures revenues from Veteran copayments are applied to the correct VA medical center for the services received. VCPL will be used by payment processing personnel at all VAMCs, allows for processing of Veteran copayments for medical services, and ensures revenues from Veteran copayments are applied to the correct VAMC for services received. Sustainment of the VCPL allows Veterans to have their mail-in and pay.gov copays processed by the VA. VCPL processes over 1 million mail-in and pay.gov payments monthly, which totals nearly \$1 billion annually in revenue for VAMCs. As FMBT takes over for the Financial Management System, OIT will be able to update system interfaces so Veteran financial payment data is reflected in the proper systems in the future. Major cost drivers are attributed to licensing, cloud services and cloud resources. Accomplishments include continued maintenance, which allows for Veterans to have their mail-in and pay.gov copays processed by VA.

The Strategic Equipment Planning Guide - Enterprise Equipment Request (SEPG-EER) tool integrates two legacy applications into one application tool. The Strategic Equipment Planning Guide (SEPG) is an equipment planning portal and form tool that allows VA medical centers and stations the ability to efficiently identify equipment critical needs, select required equipment and technology, perform budgeting and financial planning, and plan new equipment acquisition deployment for given fiscal years. This is accomplished via the SEPG station review process which moves strategic equipment planning from initial equipment selection to station committee review, to a final review and approval by the station director. The EER portion of the application uses the SEPG equipment approval, or a manually input emergency request for equipment in an enterprise-wide equipment request portal for use in VHA facilities to request, review and approve new equipment acquisition. EER includes the equipment information and allows for attachment of

supporting documentation, including vendor quotes, market research, approvals, and other required contracting paperwork. EER provides the workflow needed by facility Equipment Committees or the Equipment Life Cycle Management Directorate to make informed decisions for local or national approval and investment of funds. Cost drivers are Cloud Operation and Migration Services (COMS), Azure Cloud Credits and application support. Without the tool, VHA's approximately 35 thousand users' ability to ensure consistent equipment availability, provide efficient allocation of resources, promote accurate demand planning, facilitate equipment cost reduction, and enhance proper management of facility equipment would be impacted.

The Real Time Location System (RTLS) interface applications connect VA legacy systems to RTLS. The RTLS interface applications orchestrate specific Mule Enterprise Service Bus (ESB) process flows to support the following functional areas: Automated Engineering Maintenance System/Medical Equipment Record System (AEMS-MERS) equipment synchronization with RTLS; Generic Inventory Package (GIP) Inventory supply synchronization with WaveMark; Search of VistA employee data from within the WaveMark system; and Search of VistA patient data from within the WaveMark system. Also included in the RTLS ESE interface application is an interface that provides the Cardiovascular Assessment, Reporting, and Tracking System for Cath Labs (CART-CL) application with supply usage information related to a patient captured by the WaveMark system. The described solution requires maintenance and support to preserve the value of the solution over time

Community Care Veteran Billing System (CCVBS) provides online access for the Veteran to view, print and pay their bills on the VA.gov via AccessVA portal. Millions of Veterans receive health care services from the VA Medical Centers each year. When Veterans have a cost-sharing responsibility for health care received, the VHA's Consolidated Copayment Processing Center (CCPC) sends the Veteran a patient billing statement since VA is required to collect debts owed to the government. Action must be taken within 60 days from the initial billing statement to pay the debt in full or establish a repayment plan or the account may be referred for further collection action. CCVBS enables Veterans to view, print and pay their consolidated services bill online from any location with an internet connection. CCVBS also allows for 24-hour access to Veterans' information. The 2024 funding will support sustainment for the CCVBS, purchase of licenses, integration of software products and will include license costs for the Video on Demand (VOD) and Veterans Video Conference (VVC) capabilities.

Care Coverage Services - \$87.5 million (Development - \$13.6 million, Operations and Maintenance – \$73.9 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (Ss in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Community Care Reimbursement System (CCRS)	\$ -	\$ 2,926	\$ -	\$ -	\$ -	\$ 10,500	\$ 8,608	\$ 14,093	\$ 12,201
Community Care Reimbursement System (CCRS) - Section 8002	\$ -	\$ 834	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Community Care Referral and Authorization (CCRA)	\$ 7,350	\$ 34,333	\$ -	\$ -	\$ 7,500	\$ 35,200	\$ 5,000	\$ 38,270	\$ 570
Payer Electronic Data Interchange Transactions Applications Suite (Product Engineering and Community Care - Provider Profile Management System (PPMS))	\$ -	\$ 2,615	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,000	\$ 6,000
Claims Processing & Eligibility System (CP&E)	\$ -	\$ 8,516	\$ -	\$ -	\$ -	\$ 8,760	\$ -	\$ 5,041	\$ (3,719)
Program Integrity Tool (PIT)	\$ -	\$ 3,693	\$ -	\$ -	\$ -	\$ 4,514	\$ -	\$ 4,649	\$ 135
Fee Basis Claims Archive (FBCA)	\$ -	\$ 5,123	\$ -	\$ -	\$ -	\$ 6,900	\$ -	\$ 4,188	\$ (2,712)
Community Care (CC) Electronic Data Interchange (EDI)	\$ -	\$ 216	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,646	\$ 1,646
Claims Processing Business Transformation (CPBT)	\$ 10,315	\$ -	\$ 14	\$ -	\$ 9,800	\$ -	\$ -	\$ -	\$ (9,800)
Community Care (CC) Provider Payment Business	\$ 3,648	\$ 4,848	\$ -	\$ -	\$ 6,830	\$ 2,470	\$ -	\$ -	\$ (9,300)
Community Care - Electronic Data Interchange Gateway (EDI GW)	\$ 9,316	\$ -	\$ -	\$ -	\$ 6,500	\$ -	\$ -	\$ -	\$ (6,500)
Megabus Legislative Actions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,000	\$ -	\$ -	\$ (6,000)
Workload Reporting and Productivity (WRAP)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,701	\$ -	\$ -	\$ (4,701)
Care Coverage Services	\$ 30,628	\$ 63,776	\$ 14	\$ -	\$ 30,630	\$ 79,045	\$ 13,608	\$ 73,887	\$ (22,180)

The Community Care Reimbursement System (CCRS) solution is a highly automated system used by VA facilities to validate invoices submitted by contracted Community Care Network (CCN) for Fraud, Waste and Abuse (FWA), data analytics and financial systems. The system improves reimbursement oversight and reduces the risk to the VA of inappropriate care or claim disbursement. The primary functions of CCRS are: 1) operate data integration and validation of electronic data transitions between CCNs and VA; 2) accelerate claim reimbursement; 3) use analytics to monitor performance and accountability to incentivize payment timeliness and accuracy; 4) integrate with VA's Program Integrity Tools (PIT) to support fraud prevention to VA; and 6) support the program offices oversight and management of Community Care invoices. The funding will be used for software licensing, cloud hosting, end user support, application management, training, and patching for system maintenance.

The Community Care Referral and Authorization (CCRA) is an enterprise-wide system used by facility community care staff to generate referrals and authorizations for Veterans receiving care in the community. CCRA enables the ability for Veterans to seek medical care outside the VA in the event a service is not offered at his/her assigned VA facility. The CCRA suite of products provides an automated tool that generates, monitors, tracks, and processes referrals and authorizations to community care network providers. CCRA has reached 18 million referrals and over 2 million authorizations have been submitted using the CCRA suite of products. Over 4 million Veterans seeking care in the community have been impacted averaging 560 thousand referrals per month and saves VA staff time for every referral. Through the elimination of the manual emergency care authorization process, VA has realized considerable labor savings and has been able to reassign more than 200 FTEs to other duties. Additionally, CCRA is an integral component of VA's strategy to meet the requirements of the MISSION Act and Compact Act.

Payer Electronic Data Interchange (EDI) Transactions Applications Suite (Product Engineering and Development TAS) is a cloud-based service-oriented architecture system that delivers

Community Care Payer business services. The platform transitions business logic from existing capabilities to a modernized solution. The solution provides an EDI gateway to send and receive transactions to industry partners, ensures X12 compliance, and routes and maps data to appropriate repositories and systems. All information processed by this platform is only accessible by authorized users on the VA network. This system also supports financial transaction processing to/from the Financial Services Center in Austin and other web services. The Payer EDI TAS is key to timely payments to industry providers offering healthcare services to Veterans - an incentive for the private healthcare community to welcome Veteran business. The Payer EDI TAS administers the Veteran Access to Community Care program to maintain compliance with federal health care regulations required for ACA/HIPPA and VACAA (Veterans Access Choice and Accountability Act)/MISSION Act Congressional mandates. The OCC uses systems such as Claims Receipts, Claims Adjudications, and Claims Payment. These systems require daily operations, periodic maintenance, recurring, and mandated updates to maintain regulatory compliance. Through Payer EDI TAS, VA has given providers a way to file for reimbursement of care provided to Veterans. It accomplished the newly implemented Medical/Pharmacy national EDI standards. Payer EDI TAS has also reduced wait times for care as a result of automated (i.e., expedited) referral certifications and authorizations. Cost drivers include changing the system to satisfy new legally Federal mandated requirements for EDI transaction processing under HIPAA. Cost drivers also include required maintenance, performance of routine patches and fixes in order to meet continuous or recurring operational requirements for the systems.

Maintenance of the Community Care (CC) - Provider Profile Management System (PPMS) focuses on continued system support of the Non-VA Provider directory used by multiple VHA portfolios such as CCN, TriWest Patient-Centered Community Care (PC3) and Choice Program, Veteran Care Agreements (VCA), VA Medical Center Local Contracts, Indian Health Service (IHS) Providers, Department of Defense (DoD) facilities, and VA Medical Center providers. Community Care is essential for Veteran's seeking care but are not equipped to visit a VA facility in their area because of geographical restraints. PPMS is a comprehensive storehouse of provider's administrative information and the authoritative source of Non-VA Providers for VHA. There are 1.6 million providers and 21 thousand provider services currently in the PPMS system. PPMS currently has 11 thousand licenses for system users and/or facilities to access the PPMS system for scheduling community care for Veterans. PPMS offers the ability for workflow management to collect, validate, and track Non-VA provider information. Downstream systems such as Healthcare Referral Manager (HSRM), VA.gov, and the Community Provider Locator rely on PPMS to complete their business process to directly support the Veteran seeking care in the community. Accomplishments include continued support and maintenance of the system as it is a SaaS product that resides on a PaaS environment. Sustainment Steady-State includes operations support, annual Microsoft CRM (Dynamics 365) license renewals, cloud hosting environments, and Azure cloud consumption costs.

The Claims Processing & Eligibility System (CP&E) system enables timely processing of eligibility checks to ensure continuity of care for Veterans and Veteran family members and timely reimbursement to providers for Community Care obtained by Veterans and Veteran family members in foreign locations. The CP&E system also handles the eligibility and claims payments functions for five Congressionally mandated programs: Civilian Health and Medical Program of the VA (CHAMPVA); CHAMPVA Caregiver; Children of Women Vietnam Veterans (CWVV);

Foreign Medical Program (FMP); and Spina Bifida. The primary application is CHAMPVA, a comprehensive health care program in which the VA shares the cost of covered health care services and supplies with eligible beneficiaries. The current number of claims (approximately 900 thousand per month) is expected to increase in 2024 as more Veterans and their family members choose Community Care providers. The Sustainment funding will support ongoing maintenance of the CP&E system that handles the eligibility and claims payments functions for five Congressionally mandated programs.

The Program Integrity Tool (PIT) supports automated checks for FWA in Community Care healthcare claims payments. This system supports the scoring of claims, pre-payment analytics, and real-time reporting and analytics that is critical to decision making for the management of local and enterprise evaluation of FWA activities. The maintenance of this system facilitates reviews and claims payment dispositions, prevents improper payment, and streamlines funds recovery. This supports VA compliance with agreed upon reimbursement timeframes, good stewardship of taxpayer dollars and integrity within government finances with contracted entities.

The Fee Basis Claims Archive (FBCA) is a reporting system containing extracted community care claims data from the legacy Fee Basis Claims System (FBCS). The FBCA allows claims processing departments to review historical Community Care claims in an electronic environment and provides the capability to perform analysis, investigations, and audit response on historical claims that were processed in the decommissioned legacy FBCS. This system provides Veterans the ability to request historical information on previously paid Community Care claims. The major cost drivers include on-going maintenance and support. Accomplishments will include allowing claims processing departments to review historical Community Care claims in an electronic environment and providing the capability to perform analysis, investigations, and audit response on historical claims that were processed in the decommissioned legacy FBCS.

Clinical Care Services - \$50.2 million (Development - \$8.0 million, Operations and Maintenance – \$42.2 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Women's Health Interactive Management System	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,987	\$ -	\$ 2,987
Computerized Cognitive Behavioral Psychotherapy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,250	\$ 400	\$ 2,650
Anesthesia Quality Improvement Program & Analytics Database	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,500	\$ -	\$ 1,500
VA Endoscopy Quality Improvement Program (VA EQUIP)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,212	\$ -	\$ 1,212
Occupational Health Record-Keeping System 2.0 (SF - OHRS2.0)	\$ -	\$ 1,270	\$ -	\$ -	\$ 3,194	\$ 3,000	\$ -	\$ 7,410	\$ 1,216
Occupational Health Record-Keeping System 2.0 - Section 8002	\$ -	\$ 3,908	\$ -	\$ 5,153	\$ -	\$ -	\$ -	\$ 2,812	\$ 2,812
Caregiver Record Management Application (CARMA)	\$ -	\$ 7,920	\$ -	\$ -	\$ -	\$ 5,900	\$ -	\$ 8,139	\$ 2,239
Mental Health Assistant	\$ 168	\$ 2,281	\$ -	\$ -	\$ -	\$ 7,150	\$ -	\$ 6,616	\$ (534)
Vista - Blood Establishment Computer Software (VBECS)	\$ -	\$ 5,558	\$ -	\$ -	\$ -	\$ 5,800	\$ -	\$ 6,000	\$ 200
Vista - Imaging (IMAGE)	\$ -	\$ 8,693	\$ -	\$ -	\$ -	\$ 4,800	\$ -	\$ 4,952	\$ 152
Laboratory System Reengineering PathNet (LSRP)	\$ -	\$ 3,897	\$ -	\$ -	\$ -	\$ 4,200	\$ -	\$ 4,884	\$ 684
Health Information Gateway and Exchange	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 598	\$ 598
Blind Rehabilitation Services (BRVS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,297	\$ -	\$ 400	\$ (897)
Caregiver Record Management Application (CARMA) - Caregivers Expansion	\$ 11,876	\$ -	\$ 21	\$ -	\$ 2,260	\$ -	\$ -	\$ -	\$ (2,260)
Patient Centered Management Module Web (PCMM Web)	\$ -	\$ 2,152	\$ -	\$ -	\$ -	\$ 610	\$ -	\$ -	\$ (610)
Vista - Radiology/Nuclear Medicine (RAD/NM)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 500	\$ -	\$ -	\$ (500)
Radiation Oncology	\$ -	\$ 435	\$ -	\$ -	\$ -	\$ 280	\$ -	\$ -	\$ (280)
Posttraumatic Stress Disorder Checklist 5 (PCL-5)	\$ 3,345	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Blind Rehabilitation/VIST	\$ -	\$ 994	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Clinical Care Services	\$ 15,389	\$ 37,108	\$ 21	\$ 5,153	\$ 5,454	\$ 33,537	\$ 7,949	\$ 42,211	\$ 11,169

The Women's Health Interactive Management System project creates an interactive interface for end users with views that present, in a snapshot format, what care is needed specific to women's health, ability to track that care and to notate within the tool, by patient, needed next actions, follow-up, and reminders. The system also allows end users to view patients they care for or are tracking, allows filtering by clinical area, present views that prioritize patients due or near due for next actions or tracking activities, shows information from the clinical records needed to make decisions around screening, evaluation, treatment, and surveillance.

Computerized Cognitive Behavioral Psychotherapy (CCBP) is a web-based capability for the enterprise-wide delivery of computerized Cognitive Behavioral Therapy (cCBT) and other asynchronous psychotherapies. In the contexts of industry-wide migration from office-based healthcare to remote healthcare delivery and prolonged obstacles to in-person care, VA can leverage technologies to enhance ability to meet the needs of Veterans. Studies have provided evidence of the effectiveness of asynchronous psychotherapies, meaning therapies provided

through a combination of asynchronous communications, online assignments and exercises, and live interactions through video telehealth. CCBP will improve timeliness of access to mental health services by reducing delays in access to clinic appointments and provide between-visit access to evidence-based mental health resources that can be accessed 24/7. CCBP will closely align to two VA Strategic goals by facilitating timely, accessible, and high-quality mental health care to Veterans and their loved ones, meeting them where they are, and if this requirement is built by VA, rather than a third party, OIT can ensure compliance with systems, data, and management best-practices as well as improve experiences, satisfaction, accountability, and security. This includes 508 compliances for Veterans with disabilities, and compliance with VA IT privacy and security requirements. Computerized delivery of mental health interventions produces clinical outcomes and patient satisfaction ratings comparable to those of traditional psychotherapy while costing significantly less and creating new access to mental health care for patients who cannot travel or participate in face-to-face care delivery. 2024 funding will provide access to evidence-based care in mental health which requires timely access, the ability to engage Veterans in mental health treatment at the soonest availability, and access for the Veteran to receive a full course or episode of evidence-based treatment. This requires adequate planning and resources to meet current and projected demand, efficient and well-managed business operations, and a system of care that engages the full continuum of services to ensure Veterans receive the right treatment at the right time in a way that best meets their needs and supports recovery. This platform provides an IT system that will enable Veterans to engage in evidence-based psychotherapies through asynchronous communications such as video message exchanges, secure chats, online assignments, and exercises. This product will fill in a gap that currently prevents VHA from adequately engaging Veterans in need of mental health care.

The Anesthesia Quality Improvement & Analytics Database will improve VA's ability to effectively and efficiently fulfill the responsibilities of quality improvement oversight ensuring that Veterans get optimal, safe, and efficient anesthesia care. The service is responsible for “conduct of research and collaboration in research efforts at the clinical and basic science level in order to proactively identify gaps in evidence and practice, then measure the impact of filling these gaps and linking evidence to practice. Relevant research findings and quality improvement results can then be systematically fed back to providers and patients, as appropriate.” Almost all VA facilities have electronic Anesthesia Record Keepers (ARKs). These electronic record keeping systems will allow the analysis of intraoperative and postoperative anesthesia care. The major cost drivers for Anesthesia Quality Improvement Program & Analytics Database are mainly based on the number of data analysts needed to develop, maintain and run reports for all facilities/VISNs after the development work has been done to get the data into the Corporate Data Warehouse (CDW). The accomplishments for Anesthesia Quality Improvement Program & Analytics Database include the data from all ARKs will be standardized to a single format and stored in CDW or equivalent databank. Once this is established, some early analysis can be started. Data extraction from the ARK system can then begin and be linked to outcome data and preoperative risk data from VISTA CPRS data stored in the CDW.

The VA-Endoscopy Quality Improvement Program (VA-EQuIP), housed within the National Gastroenterology and Hepatology Program (NGHP) Office, will standardize collection, monitoring, analysis, and reporting of colonoscopy quality indicators to ensure Veterans are receiving high quality colonoscopy. The program will fulfill the recent OIG requirement for VA

to strengthen requirements for colonoscopy quality assurance. To address this issue, NGHP has identified a process by which data from commercial software products currently in use across VHA can be uploaded into a database for ongoing quality assurance. However, the development and maintenance of this database will require IT support. This will be a national database to receive and store all of the data transfers from endoscopy information systems across VHA. The enterprise analytics tools are also required for running reports. Costs drivers are estimated to be cloud or server storage for data from approximately 420 thousand procedures annually. Accomplishments include standardize collection, monitoring, analysis, and reporting of colonoscopy quality indicators to ensure Veterans are receiving high quality colonoscopies.

Occupational Health Record-Keeping System 2.0 (SF - OHRS2.0) provides Occupational Health Staff the ability to create, maintain, and monitor medical records for VA employees and generate site-specific reports at the national, VISN, and facility levels. It includes features such as CDC reporting, compliance with influenza and COVID-19 vaccination documentation, and fulfilling federal requirements for the separation of occupational and personal health records. In 2023, OHRS accomplished the inclusion of employee tuberculosis screening, medical surveillance, integration with the voluntary service system, migration of the legacy OHRS 1.0 data, CPRS/VistA integration, and documentation of work-related visits (administrative and injury assessments). OHRS ensures Veterans are not exposed to life-threatening communicable diseases such as influenza and COVID-19 from VA employees. A healthy and protected workforce allows the staff to provide quality care to Veterans. OHRS's CDC reporting keeps the VA eligible for needed supplies such as vaccines and associated tools for administering vaccines. Employee health and safety is a key driver of the VA Secretary's initiative to provide better access to care for Veterans. Cost drivers include maintaining the current system until it can be transitioned to its replacement, called Electronic Solution for Healthcare and Occupational Recordkeeping of Employees (eSHORE). While eSHORE is being developed, OHRS 2.0 will require Tier 2 and 3 end user support, product monitoring, break fix, defect repair, ATO support, user adoption, usability metrics, and operational communications.

Caregiver Record Management Application (CARMA) offers resources including education, respite care, and in some cases, financial stipends, and other benefits to eligible caregivers of Veterans. Caregivers work in collaboration with the Veteran's health care team and are recognized as critical partners in the Veteran's care. They assist in navigating the complex health care system, ensuring Veterans have increased access to the care they need and have better treatment compliance which has the potential to impact long term costs. Caregivers also help Veterans maintain their independence to the extent possible and enable Veterans who may otherwise require institutional long-term care to remain in their homes. The growth in the number of Caregivers since the expansion, coupled with the benefits changes stemming from revised regulatory changes, has resulted in a trebling of the stipends disbursed to Caregivers. As additional functionality is added in preparation for the next phase of the mandated expansion, there will be an increased need and urgency to address accrued technical debt and support the expected acceleration in the delivery of services and benefits to new and existing Caregivers. In 2024, operations and maintenance funding will allow performing routine patches and fixes to meet continuous or recurring operational requirements.

The Mental Health Assistant (MHA) provides a graphical user interface (GUI) for VistA and Non-VistA mental health assessment and scoring information. The application provides a real-time web-based interface for assessing patient mental health and determining mental health and suicide risk factors. MHA supports the Office of Mental Health and Suicide Prevention by providing the IT platform (including kiosks and mobile devices) specific to VA's suicide prevention efforts. The system captures the "Capture At-Risk Veteran Data Initiative" data elements, which are used for aggregating screening, referral, and assessment data for at-risk Veterans throughout their course of treatment. The system utilizes standardized assessment tools and risk assessments to reduce Veteran suicide rates by early identification of Veterans at high risk for suicide. Cost drivers for MHA are Azure Cloud hosting and Design and Deployment Flex Credits (DDFC) and a support team to maintain the application. Accomplishments include clinicians to assess a Veteran's mental state and overall risk of suicidality quickly and accurately. Clinicians will be able to apply meaningful and, where appropriate, aggressive intervention strategies – ultimately reducing veteran suicide rates across the country.

The VistA Blood Establishment Computer Software (VBECS) maintenance project produces patches to correct defects and maintains regulatory compliance for the transfusion of blood products by the VA Blood Bank hematologists. Regulatory inputs include College of American Pathologists, Food and Drug Administration, International Council for Commonality in Blood Banking Automation, and Joint Commission. The 2024 funding will provide ongoing oversight, security, and support, for any deployed VHA Blood Bank software product including regulatory compliance required as the medical device manufacturer. If VA did not complete maintenance for this product, it would not be allowed to continue using it, forcing VA to use a manual process for requesting and administering blood products at a much greater cost. Additionally, this product provides automated clinical decision support to assure that the right blood product is administered at the right time to the right patient using barcode scanning technology. Without it, Veterans are at a much higher risk of inappropriate administration of blood products. Cost drivers consists of Azure cloud credits, sustainment support to provide patches for regulatory compliance, apply security and critical updates to the VBECS product to ensure compliance with FDA and VA regulations related to use of this product, licenses and auditing solutions.

VistA - Imaging (IMAGE) is the VHA-developed vendor neutral Picture Archiving and Communication System (PACS) system that is mandated as the Primary Storage/System of Record for a Veteran's medical images, electronic healthcare documents, and medical procedure evidence. IMAGE utilizes standards based medical imaging and information technologies for acquiring, storing, retrieving, displaying, and sharing images for all medical specialties within the VA and DoD. Registered third-party sites can request access through the Image File Exchange Service. The Vista Imaging system stores approximately 45 Petabytes (45,000 Terabytes) of data. There are four outcomes to VistA Imaging: Tier I for images that are up to 5 years old, Tier II for long-term storage, VistA Application Package for graphical user interface (GUI) applications installed on all clinician desktop computers and accessed from the Computerized Patient Record System (CPRS), and Vista Radiology (VistARad), also a GUI for radiologists' use on Diagnostic Reading Stations for image interpretation. VistARad also provides backup reading capabilities Commercial PACS (cPACS) systems. VistA – Imaging (IMAGE) accomplishments are increasing the number of imaging procedure reports that can be transferred electronically with minimal user intervention, reduced use of CD/DVDs to transfer imaging data with community providers, and productivity increased in these processes allow higher volumes with current staffing while maintaining

improved Veteran patient outcomes. The major cost drivers include software costs to maintain VistA applications used for exchange of diagnostic imaging data with the community, Cloud Hosting, and licenses.

Laboratory System Reengineering PathNet (LSRP) delivers an industry-leading commercial Laboratory Information Management System for the Pathology & Laboratory Medicine Services for VA. It is interfaced with the VA EHR and is focused on patient-centric reporting and correcting patient safety issues. The Pathology and Laboratory Service uses this product to process and deliver results for all laboratory tests conducted at the facility. This product allows Veterans to receive timely and accurate care based on their lab test results. In 2008, Huntington was an Alpha site for LSRP with the intent of rolling out across enterprise. However, due to costs, VA halted the roll out. Currently, over 10 thousand per year Veterans receive timely and accurate care based on their lab values reported through the Laboratory System Reengineering Project at Huntington. This provides better information to clinicians, leading directly to improved outcomes for Veterans. LSRP could not be backed out and thus VA has been required to sustain Huntington and LSRP since that time. Without funding for the Laboratory System Reengineering Project, the VA facility will lose access to the software product and be unable to process and report lab test results. The anticipated migration to the Cerner Electronic Health Record will provide for this function once the facility migrates in 2028. Costs drivers are mainly licensing, sustainment and hosting of the LSRP product to deliver the industry-leading commercial Laboratory Information Management System for the Pathology & Laboratory Medicine Services at the VA.

The Health Information Gateway and Exchange (HINGE-VARQOS) platform streamlines and enhances clinical documentation using web-based disease site specific data entry templates. These templates will be utilized in routine clinical care documentation and structured data entry by the VA Radiation Oncology clinicians. The abstracted data will be utilized to score disease site specific clinical quality measures and perform case-based peer review for quality improvement purposes. HINGE will improve clinical documentation and simultaneously populate the database for practice improvement and assessment purposes. High-quality patient care is important to any medical discipline but is of particular concern in radiation oncology given the potential for serious harm in the event of a treatment-related error. Radiation treatment planning is a complicated process with many safety aspects involved and with the increased application of more sophisticated technologies in radiation therapy, concerns have arisen about whether radiation is being used appropriately. Quality-assurance procedures must evolve with complex radiotherapy planning and delivery systems to ensure that consistently effective and safe therapy is delivered. The major costs drivers are cloud storage and hosting services, such as data base growth. This data once entered will be maintained so that a history and specific data retrieval of radiation oncology clinical data can be utilized and analyzed in outlying years. This data is imperative to furthering the continued peer-to-peer reviews for staging, risk group, diagnostic test results, performance scores, and toxicities in patient treatment. Accomplishments are sustainment of software and hardware for remote peer review of radiation oncology treatment plans across the enterprise. Additionally, Sustainment-Steady-State funding will provide routine patches and fixes to meet continuous or recurring operational requirements.

The Blind Rehabilitation Services (BRVS) application coordinates a healthcare service delivery system that provides a continuum of care for blind and visually impaired Veterans served by VA, extending from their home environment to the local VA facility and to the appropriate

rehabilitation setting. BRVS serves as a registry that collects demographic and clinical data as well as monitors patient care through enhanced tracking and reporting from Visual Impairment Services Team (VIST) Coordinators, Blind Rehabilitation Outpatient Specialists (BROS), Intermediate and Advanced Low Vision Clinics, Visual Impairment Services Outpatient Rehabilitation (VISOR) programs, and inpatient/residential Blind Rehabilitation Centers (BRCs). VA will be able to provide the following services: Adjustment to blindness counseling, patient and family education, benefits analysis, comprehensive residential inpatient training, outpatient rehabilitation services, the provision of assistive technology, and research that assists the veteran in acquiring the skills and capabilities necessary for development of personal independence and emotional stability. Operations and maintenance of this application is required for Cloud credits for hosting BRVS in the VAEC, as well as Cloud hosting support through the Austin Information Technology Center (AITC).

Common Health Care Workflows - \$24.9 million (Development - \$7.6 million, Operations and Maintenance - \$17.3 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects ((\$s in thousands))	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Community Care (CC) One Consult	\$ 4,985	\$ -	\$ -	\$ -	\$ 5,000	\$ 2,750	\$ 5,994	\$ -	\$ (1,756)
Cancer Care Tracking System	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,600	\$ -	\$ 1,600
Consult Toolbox (CTB)	\$ -	\$ 6,871	\$ -	\$ -	\$ -	\$ 3,160	\$ -	\$ 7,617	\$ 4,457
VistA - Scheduling (VSE)	\$ -	\$ 3,365	\$ -	\$ -	\$ -	\$ 6,500	\$ -	\$ 6,048	\$ (452)
Community Care Referral Documentation (REFDOC)	\$ -	\$ 2,097	\$ -	\$ -	\$ -	\$ 2,350	\$ -	\$ 2,478	\$ 128
Community Care - Standardized Episodes of Care (CC-SEOC)	\$ -	\$ 3,322	\$ -	\$ -	\$ -	\$ 1,550	\$ -	\$ 1,150	\$ (400)
Common Health Care Workflows	\$ 4,985	\$ 15,654	\$ -	\$ -	\$ 5,000	\$ 16,310	\$ 7,594	\$ 17,293	\$ 3,577

Community Care (CC) One Consult and the Consult Toolbox (CTB) standardizes the documentation process and workflow of VA staff (clinical and administrative) managing referrals for internal care and community care. One Consult (OC) utilized DevSecOps delivery process for enhancements, revisions and deployments that allows One Consult to reduce Level of Effort (LOE) and provide quick adjustments to Consult Toolbox’s user interface and integrations to meet VHA consult management needs and initiatives. New CPRS consult capability provides comprehensive consults to community care and provide consult tracking, monitoring, and engagement with community providers. One Consult also provides for a more manageable project profile allowing products to fall under one product umbrella including Decision Support Tool (DST), CTB Phase 2 and Can Score. This streamlines administrative activities to produce multiple consults determining where the Veteran will be seen. In conjunction, CTB works within two components the DST and the Decision Support Viewer (DSV). DST enables VA care providers to determine whether a given Veteran is eligible for and would be best served by utilizing the Veterans Community Care Program, in real-time, with the Veteran in the exam room. This tool helps the

Veteran and VA provider to decide if a consult service should be referred to the local VA facility, a near-by VA facility, or to a community provider. Consult Toolbox supports MISSION Act requirements and provides the ability to use a single consult both internally and externally for care coordination, reducing the administrative burden of producing multiple consults depending on where the Veteran will be seen. Within CC One Consult the Consult Toolbox enables better decision making through analytics for care coordination and Veteran health outcomes, resulting faster care for the Veteran. This product processes over 2 million consults per month which directly supports Veterans to receive the best care in a timely manner. The 2024 expected accomplishments for CTB are ongoing maintenance and support for the Consult Toolbox System which includes Tier 2/3 services in order provide operations and end users support for product issues.

The Cancer Care Tracking System (CCTS) program addresses the critical patient safety issue of delays in cancer detection and treatment in VA by improving and integrating access to high-quality care for cancer and complex diseases. Therefore, it is critical to support this product at an enterprise level and to further enhance the User Interface (UI). OIT is currently migrating CCTS to the Rockies cloud-based platform which will allow for enhanced agility, performance, and stability of CCTS and use of high-level analytic tools. In addition, this migration has presented opportunities to engage in collaboration with experts on the cutting edge of natural language processing, machine learning, and clinical decision support to further enhance cancer screening, detection, and treatment.

The Office of Connected Care requires the continuous availability of the VistA Scheduling Enhancement (VSE) application to continue to provide capability to schedule appointments and to maintain ATO to support thousands of Veterans.

VA is experiencing a steep increase in demand for care, where more VA facilities are in search of a tool that assists with a high-speed, principle-based streamlined portable referral PDF web application. The local VA medical centers require the ability to quickly pull information from VistA and CDW based on an individual's health record and place that information into a PDF that can be shared with Community Providers for care coordination when a Veteran will be utilizing Community Care. This delays the ability to adequately share Veteran information with community providers, thereby not meeting Section 131 of the MISSION Act. The Community Care Referral Documentation (REFDOC) project provides end-users (i.e., VHA medical, clinical and admin staff) with the ability to generate electronically a consolidated PDF file that contains information relevant to the Veteran's community-care appointment such as patient demographics, authorization, consult, progress notes, medication list, lab work, imaging results, and any additional PDF documents. This system automates and digitizes a manual process for extracting this information from at least five different hard copy/printed sources to provide external Community Care Program providers timely information on Veterans entrusted to their care. Funds provide continuous operation support within the VA Azure Cloud. Accomplishments include providing end-users (i.e., VHA medical, clinical and admin staff) with the ability to generate electronically a consolidated PDF file that contains information relevant to the Veteran's community-care appointment such as patient demographics, authorization, consult, progress notes, medication list, lab work, imaging results, and any additional PDF documents.

The Community Care - Standardized Episodes of Care (CC-SEOC) system, implements a reference database for managing care bundles for use by VistA and other VA systems. SEOC meets the requirement for a system that bundles approved services so that clinicians can add these bundles to patient’s consult records in a standardized fashion, reducing the amount of time spent manually entering consult instructions and providing uniformity among the patient records and across facilities. VA requires SEOC reference database to provide a centralized and standardize description of care, procedural overview, and payable billing codes. SEOC is used by VistA, CPRS and other VA systems so that users of downstream applications can access the centralized data. This consistency allows VA to effectively manage patient care, improve the quality and timeliness of care provided in the community, provides easier traceability. Funding request includes application maintenance, VAEC AWS hosting and service support for affected end users’ production incidences. Accomplishments include providing a centralized and standardize description of care, procedural overview, and payable billing codes.

Common Health Care Specific Services - \$25.7 million (Development - \$7.1 million, Operations and Maintenance - \$18.6 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
National Oncology Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,700	\$ -	\$ 3,700
Cancer Registry Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,800	\$ -	\$ 1,800
Implant Tracking Registry and Alert System (ITRAS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,600	\$ -	\$ 1,600
Veterans Integrated Registries Platform (VIRP)	\$ -	\$ 5,008	\$ -	\$ -	\$ -	\$ 6,455	\$ -	\$ 10,054	\$ 3,599
Clinical Decision Support Platform	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,315	\$ 2,315
COVID-19 Patient Manager - Clinical Decision Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,315	\$ 2,315
VHA Geographic Information System	\$ -	\$ 1,419	\$ -	\$ -	\$ -	\$ 1,668	\$ -	\$ 1,751	\$ 83
Clinical Case Registries (CCR)	\$ -	\$ 740	\$ -	\$ -	\$ -	\$ 815	\$ -	\$ 956	\$ 141
Veteran Re-Entry Search Service (VRSS)	\$ -	\$ 531	\$ -	\$ -	\$ -	\$ 555	\$ -	\$ 650	\$ 95
VHA Support Service Center (VSSC) - Replace Old Servers	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 500	\$ 500
Veterans Administration Central Cancer Registry (VACCR)	\$ -	\$ 76	\$ -	\$ -	\$ -	\$ 80	\$ -	\$ 100	\$ 20
Common Health Care Specific Services	\$ -	\$ 7,774	\$ -	\$ -	\$ -	\$ 9,573	\$ 7,100	\$ 18,641	\$ 16,168

National Precision Oncology Program provides access to cutting-edge molecular testing which informs precise care and treatment options for Veterans with cancer using Clinical Pathways, a decision support tool that ensures standardized evidence-based cancer care across VA. Precision Oncology's business case is therefore centered around the delivery of evidence-based, cutting edge, Veteran-tailored, high quality, accessible care. Fundamental to the success of precision oncology is the role of patient data, allowing for health information from patient electronic health records to come together with “omics” information to provide timely clinical decision support at the intersection of research and clinical practice within VHA. It is also critical that learnings from a

precision oncology diagnostic test do not end with the single patient and can be used to inform the care of the next patient, particularly for rare cancers where the number of patients may be small. To realize the vision of Precision Oncology, VA needed to develop a cancer registry software that can capture, store and make usable the large amount of complex data generated from these programs. Accomplishments are to develop processes to increase the efficiency of abstraction for the cancer registry in order to standardize data collection methods, monitor the data quality, increase training for the cancer registrars, and develop the ability to share data from state cancer registries and national registries. These registries have information collected from facilities outside the VA that will add value to VA's registry and provide a more complete picture of Veterans cancer care; expand the use of genomic testing by adding more cancer types, tests for rare cancers and test for women's cancers; increase the understanding and application of the genomic test results through tumor boards and clinical decision support in the EMR; and develop a learning healthcare system for oncology using the data collected. VA will use the findings to develop a personalized approach to cancer care using therapies targeted to specific clinical and genetic characteristics; expand the use of evidence-based guidelines; expand the numbers of Veterans who receive care by oncology specialists through the TeleOncology program; and extend the access for clinical trials to Veterans across the system and eliminate the geographic boundaries that often restrict clinical trial opportunities to major referral centers.

The new Implant Tracking Registry and Alert System (ITRAS) will allow VHA facilities to track implants placed in Veterans. The purpose of the system is to establish a national registry for implants (both biologic and non-biologic) and establish a web-based alert processing system for implant safety communications that will be centrally managed by the National Center for Patient Safety (NCPS). Currently, there is no effective way for VHA to ensure that patients impacted by an implant recall or safety issue can be tracked and notified. This registry will receive, store and track implant data. ITRAS will provide a standardized, electronic documentation process for the key data elements for medical device implants and populate a national implant registry. This will allow for both the identification of patients with specific implants and the ability to alert these patients and their providers in the event of an implant recall or known safety issue. ITRAS will decrease risk of preventable harm to Veterans from known problems associated with their implants and ensure that affected patients receive clinical care in a timely manner. Cost drivers are mainly based on the number of data analysts needed to develop and maintain the application.

The Veterans Integrated Registries Platform (VIRP) is a centralized architectural platform and follows the cohort principle aligned with population health. Individual registries are comprised of standardized common patient data and registry-specific data elements. Registries residing on VIRP provide clinicians, researchers, and other end users with access to Veterans electronic health record data imported nightly from the CDW. Clinicians and technical staff have the capability to perform research on data collected based on cohort criteria, create reports and analyze data through a single user interface that utilizes single sign-on and role-based access. The ability to access a large pool of cohort data allows for targeted research leading to improved Veteran treatment options and opportunities for providers to learn about treatment options that had been successful for patients. VIRP accomplishments include capabilities, performance, and platform are required to keep the Health Registries current to the needs of clinicians, researchers, and other end users. The capabilities and features to be provided by VIRP will minimize the duplication of effort among the various registries and maximize VAs ability to support the rapid development of new quick

reaction registries. Specifically, the VIRP Framework consolidates all registries into one web portal that utilizes common business logic and data using design patterns.

The Clinical Decision Support Platform (CDSP) solves a major problem within VA: currently, development and deployment of clinical applications within the electronic health record is a long and tedious process. CDSP enables the development of workflow-based clinical tools (software apps) that are standards-based, web app-first, a way to future proof CPRS, and a way to bridge clinicians' experiences between CPRS and Cerner. Furthermore, VA will be transitioning from CPRS to Cerner over the next decade, and it is essential that clinical sites using either technology can have fast access to valuable clinical care applications. CDSP enables that access. Operationally CDSP will also provide VA with the following benefits: 1) the agility to respond to dynamic requirements including those related to emerging pandemics and other rapidly evolving healthcare emergencies, the ability to rapidly spin up new capacity, and rapid API/integration reuse and improved time to value; 2) allow stakeholders to run robust analytics for internal and external facing data; 3) collaborating patient data from a single point of engagement; 4) platform encryption, event monitoring and field audit, and protection of sensitive data including PII and PHI. The 2024 funding are requested for the operations and maintenance.

COVID-19 Patient Manager - Clinical Decision Support originated in 2021 as a response to COVID-19. It is a web-based, clinician-facing, decision support tool to assist with evidence-based clinical care that integrates with the VA's electronic health record CPRS. The solution will provide computerized decision support (CDS) to providers to aid in the diagnosis, treatment, and risk mitigation of patients with various clinical conditions. Initial use cases include admission to the hospital and treatment inside the hospital for respiratory infectious disease. The capabilities this tool provides will help VA be proactive in responding to a future pandemic or other rapidly evolving healthcare emergency, rather than reactive. Patient Manager will improve patient outcomes, maintain patient safety, improve efficiency of care delivery, and increase Veteran trust in VA. The 2024 funding are required for the operations and maintenance.

VHA's Office of Policy and Services established the VHA Geographic Information System (GIS) program to provide essential geographic information and analyses for VHA operations and initiatives. Currently, VHA's Chief Strategy Office (CSO) expanded the GIS platform, software, and services to include all VHA offices and programs. By consolidating GIS resources across VHA, the CSO is promoting data sharing and reuse, expanding access to GIS resources, increasing collaboration and return on investment while improving the overall performance of GIS services. VHA-GIS supports VA's MISSION Act obligations by providing geospatial data/tools for analyzing care by type, need, provider and wait times to optimize facility placement, resources, and services based on the location of Veterans. By applying GIS capabilities to targeted patient populations, VHA gains understanding of patient service areas and can optimize service delivery methods (tele-med), transportation services, and service area boundaries, potentially improving access to and quality of care. In addition, the VHA-GIS supporting infrastructure consolidates and federates a cloud environment to better serve customers, improve operational performance, and ensure compliance with VA's security protocols. The VHA-GIS provides an Enterprise GIS solution to all VHA program offices that engage in spatial visualization and analysis (including Women's Health, Readjustment Counseling Services, Homelessness, Office of Academic

Affiliations, et. al). Facilities Management and VAMC space managers use GIS to increase efficiency of operations. The 2024 request will fund mission critical data and services that are used extensively across the agency for analysis, reporting and decision making. Additionally, funds will service enterprise licenses, cloud resources including platforms, data, security, storage, and tools to all VHA programs and medical centers, efficiently and cost effectively.

Clinical Case Registries (CCR) provides a centralized system registry to track Hepatitis C and HIV across the veteran population. This system allows for researchers to query for various quality, safety, and access to care initiatives. CCR is the primary source for data used by Veterans Equitable Resource Allocation (VERA) for the high-cost group of Hepatitis C antiviral drugs and the high-cost group of HIV/AIDS drugs. There are currently over 400 thousand and 70 thousand Veterans in the Hepatitis C and in the HIV registry portions of CCR respectively. The CCR includes local registries at each VA medical facility as well as the national registry of aggregated data for population management. The VA is required to provide ongoing annual maintenance and IT sustainment support to CCR to respond to service desk tickets, triage IT issues, and provide defect repair. The accomplishments for CCR include ongoing annual maintenance and IT sustainment to files and codes to maintain the accuracy, quality and functionality of the Clinical Case Registries.

Veteran Re-Entry Search Service (VRSS) is an automated interface systems used to identify Veterans who are incarcerated or under supervision in the courts. VRSS is designed to allow federal, state, and local correctional facility staff to upload their inmate registry listings at regularly scheduled intervals. Information about incarcerated Veterans provided by VRSS is used by the Veterans Justice Outreach (VJO) and the Healthcare for Re-entry Veterans (HCRV) organizations as part of their outreach activities to reduce and prevent Veteran homelessness. Ongoing maintenance and IT support is required in order to respond to IT support calls, service desk tickets, triage issues, user documentation updates and end-user VRSS training/webinars.

The 2024 funding request for VHA Support Service Center (VSSC) - Replace Old Servers will support the critical refresh of outdated VSSC Premise Servers and migration of a large number of servers into the cloud environment to enable utilization of the Azure advanced analytics capabilities since the current capabilities are near the end of their life cycle.

The Veterans Administration Central Cancer Registry (VACCR) receives and stores information on cancer diagnosis and treatment constraints compiled and sent in by the local cancer registry staff at each of the Veterans Affairs Medical Centers that diagnose and treat Veterans with cancer. VACCR provides surveillance of Veterans with cancer and is for VA health professionals, policy administrators, researchers, and the public as it provides vital information about newly diagnosed cancer cases (incidence), treatment of cancer, recurrence of cancer and deaths from cancer (mortality). VACCR requires specialized software [currently, Rocky Mountain Cancer Data Systems (RMCDS)] to format the VA data to synchronize with the National Cancer Registry. The encoded information sent must meet the site-specific requirements for registry inclusion as established by several oversight bodies, including the North American Association of Central Cancer Registries, the American College of Surgeons' Commission on Cancer, and the American Joint Commission on Cancer, among others. Details collected include extensive demographics, cancer identification, extent of disease and staging, first course of treatment, and outcomes. Data extraction is available to researchers with VA approved Institutional Review Board studies, peer

review, and Data Use Agreements. Cost drivers are on-going maintenance and support of the application and specialized software [currently, Rocky Mountain Cancer Data Systems (RMCDS)] that's required to format the VA data to synchronize with the National Cancer Registry. Accomplishments for VACCR are to understand and address the VA's cancer burden, patient management, program assessment and planning.

Health Administration - \$49.8 million (Development - \$6.9 million, Operations and Maintenance - \$42.9 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Vista - Computerized Patient Record System (CPRS)	\$ 7,762	\$ 1,800	\$ 4,415	\$ -	\$ 6,000	\$ 2,000	\$ 6,060	\$ 2,500	\$ 560
VA Policy Library	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 860	\$ -	\$ 860
Joint Longitudinal Viewer	\$ -	\$ 13,884	\$ -	\$ -	\$ -	\$ 13,002	\$ -	\$ 8,443	\$ (4,559)
Telehealth Management Platform (TMP/CVT-TSS)	\$ 2,400	\$ 5,494	\$ -	\$ -	\$ 8,657	\$ 5,700	\$ -	\$ 8,357	\$ (6,000)
Telehealth Management Platform (TMP/CVT-TSS) - Section 8002	\$ -	\$ 7,900	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VA Online Scheduling (VAOS)	\$ -	\$ 13,984	\$ -	\$ -	\$ -	\$ 6,000	\$ -	\$ 6,000	\$ -
Enterprise Wide Speech Recognition (EWSR)	\$ -	\$ 3,860	\$ -	\$ -	\$ -	\$ 4,000	\$ -	\$ 4,644	\$ 644
Bed Management Solution (BMS)	\$ -	\$ 863	\$ -	\$ -	\$ -	\$ 2,000	\$ -	\$ 2,366	\$ 366
Bed Management Solution (BMS) - Section 8002	\$ -	\$ 1,112	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Vista Integration Adapter (VIA)	\$ -	\$ 987	\$ -	\$ -	\$ -	\$ 765	\$ -	\$ 3,000	\$ 2,235
Enterprise Precision Scanning and Indexing (EPSI)	\$ 1,600	\$ 2,706	\$ -	\$ -	\$ 1,600	\$ 2,100	\$ -	\$ 2,392	\$ (1,308)
Enterprise Precision Scanning and Indexing Automation (EPSI) - Section 8002	\$ -	\$ 2,977	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Status Query and Response Exchange (SQUARES)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,583	\$ -	\$ 1,713	\$ 130
Business Information Office Business Intelligence Solution (BIO BIS)	\$ -	\$ 1,179	\$ -	\$ -	\$ -	\$ 1,870	\$ -	\$ 1,654	\$ (216)
Clinical Staffing and Scheduling	\$ 600	\$ -	\$ -	\$ -	\$ -	\$ 364	\$ -	\$ 700	\$ 336
Automated Patient Discharge	\$ 200	\$ 1,569	\$ -	\$ -	\$ -	\$ 605	\$ -	\$ 636	\$ 31
Emergency Department Integration System (EDIS)	\$ -	\$ 1,548	\$ -	\$ -	\$ -	\$ 1,900	\$ -	\$ 500	\$ (1,400)
Veterans Data Integration and Federation Enterprise Platform (VDIF-EP)	\$ -	\$ 23,976	\$ -	\$ -	\$ -	\$ 23,000	\$ -	\$ -	\$ (23,000)
Veterans Data Integration and Federation Enterprise Platform (VDIF-EP) - Section 8002	\$ -	\$ 12,545	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Center for Development and Civics Engagement	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,538	\$ -	\$ -	\$ (2,538)
Clinical Data Repository/Health Data Repository	\$ -	\$ 1,252	\$ -	\$ -	\$ -	\$ 2,000	\$ -	\$ -	\$ (2,000)
Fee Basis Claims System (FBCS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,925	\$ -	\$ -	\$ (1,925)
Health Data Repository (HDR II)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,174	\$ -	\$ -	\$ (1,174)
APPRISS Health PMP Gateway	\$ -	\$ 6,151	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health Data Repository (HDR II)	\$ -	\$ 1,404	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health Administration	\$ 12,562	\$ 105,191	\$ 4,415	\$ -	\$ 16,257	\$ 72,526	\$ 6,920	\$ 42,905	\$ (38,958)

Vista - CPRS provides an integrated patient record for clinicians, managers, Quality Assurance (QA) staff, and researchers. It is a fast and easy-to-use application that gives healthcare providers information needed in the clinical workflow process. For example, CPRS products are used by clinicians for outcomes such as requests for medications, laboratory orders, and radiology referrals, and to document progress notes, immunizations, vitals, allergies, and any sort of medical event. Along with its core functionality, CPRS outcomes also include the implementation of New Service Requests (NRSSs) for consults, ordering, alerts, notifications, clinical reminders, women's health, and clinical decision support functionality. CPRS also provides patient safety updates, corrected

field reported issues, application maintenance, VistA standards compliance, and other software sustainment services critical to clinical health care providers for accomplishing their mission to provide world class health care to Veterans. VistA-CPRS accomplishes approximately 10 software patches/releases a year or as needed to address on-going maintenance and support for Patient Safety, Section 508 accessibility, and field reported issues. In 2023, VistA-CPRS released software that improved reporting and traceability of Health Data Repository (HDR) requests. VistA-CPRS's cost drivers are based on the maintenance of their current core functionality and the number of requests for new functionality. In 2024, OIT will work on defect repair, break fix, application maintenance, standards compliance, and other Tier 3 support services. CPRS also provides post release life-cycle support for deployed VistA health applications, which is essential to ensure that users have a reliable system to execute the business and clinical operations.

The Office of Regulations, Appeals, and Policy in conjunction with the Office of Enterprise Integration wants to maintain a centralized platform for the VA to store and search policies and associated content (Directives, Handbooks, manuals, Memorandums, and linkage to Regulations, Legislation, Associated Guidance Documents, Workforce Management Materials, Quality measures policy, Internal controls standards, Oversight & Accountability information). VA Policy Library needs to automate and streamline archiving and record retention requirements systemwide and to implement a public facing intranet site. VA Policy Library will address GAO's High-Risk List for ambiguous policies and inconsistent procedures and for inadequate oversight and accountability which is foundational to both responses. This would require an internal and external view to be established with the public having access to policy documents with the improved access and searchability without having access to internal processes and process documents in compliance with statutory requirements. This request is designed to take the library from the intranet to the internet as well as strengthen the analytic capabilities necessary to support strategic planning consistent with statutory and regulatory authorities under which the VA operates.

VA Policy Library would significantly increase the uniform implementation of evidence-based standards, processes, and supporting documents that reflect a commitment to provide high quality care, benefits, and business practices that have integrity. It would also facilitate oversight and accountability and allow for timely responses to respond where there are identified deficiencies, improve communications on urgent matters requiring redress, and provision of accurate or complete responses when risks or issues are identified through a robust set of internal controls. Pooling VA resources to support a VA Policy Library eliminates the need for each Administration to fund this service and maintain multiple and duplicative web pages and other resources. Anticipated cost drivers are that the pilot will continue to ingest policies based on the existing Salesforce framework.

Joint Longitudinal Viewer (JLV) is a web-based read-only application that displays in real-time integrated health records across VA, DoD, and Community Partners for over 100 thousand users monthly. JLV users retrieve critical health information, accessing over five million health records per month, to provide healthcare services to Veterans. JLV supports the Congressional interoperability requirement for VA and DoD to share and display health data through an integrated viewer. Additionally, JLV is the main clinical viewer during VA's transition to Cerner. JLV allows users at non-Cerner VA sites to view Cerner data and Cerner transitioned VA sites to view Veterans Health Information Systems and VistA data. JLV sustainment work consists of

continued performance monitoring to ensure JLV remains operational in the Cloud, maintenance of monitoring tools for early detection of potential risks, upkeep, and potential troubleshooting with integrated partner services, such as Single Sign-On Integration (SSOi) from Identity Access Management (IAM), and continued compliance with VA Information Assurance standards. JLV expects the user base and usage to grow as more VA sites transition to Cerner. This will increase the demand on the JLV application placing more importance on keeping JLV operational to ensure health records are accessible when Veterans receive healthcare services.

Telehealth Management Platform (TMP/CVT-TSS) is a customer relations management software system which supports the delivery of virtual care services that are a part of overall Telehealth program growth and enables more efficient use of these services between over the 900 VHA sites. TMP allows Veterans to choose the location where health care services are provided which is part of an increasingly broad spectrum of non-face-to-face care (i.e., Virtual Care) services that VA must provide to Veteran patients to keep pace with their expectations and stay current with private industry standards. TMP automates three elements of virtual care (non-face-to-face) services: 1) scheduling; 2) resource management; and 3) administrative management. The third element, administrative management, includes workload management, credentialing and privileging, telehealth service agreements and data management to support telehealth business processes. TMP allows sites sharing resources to communicate critical information to activate, manage and support Veteran virtual care/remote services. This automation of the organizational elements of providing clinical video Telehealth services is essential to meeting the expected significant increase in use. The major costs drivers for TMP are the increase in demand of telehealth services which are projected to more than double in the next few years as VHA faces the challenge of meeting the access needs of the 33% of Veterans who live in rural areas and the 12% who live more than three hours from a tertiary care facility.

VA Online Scheduling (VAOS) allows for self-scheduling and tracking the status of appointment requests, messages, and notifications about appointments. It also allows Veterans to determine and request access to Community Care, allows requests and communication of Community Care appointments and helps manage and schedule Telehealth services and appointments. It is critical to expand Veteran access to care and provide virtual healthcare services to Veterans who would rather not seek care in the community. Funding is required to sustain the existing Mobile Health DEVOPS infrastructure and will support the infrastructure for mobile applications which includes Mobile Cloud pipeline hosted in Amazon Web Services (AWS). Without funding, all current VA mobile applications will be shut down and will be completely unavailable to Veterans and staff. Mobile apps and specifically VA Video Connect will no longer be supported.

Enterprise-Wide Speech Recognition (EWSR) is a speech recognition system utilized by clinicians for non-Radiology applications. To ensure continuation of quality patient care, VA seeks to maintain and support the Medical-Specific Enterprise-wide Front-End Speech Recognition System, optimizing an enterprise-wide system that improve productivity and user satisfaction of clinicians, reduces cost of transcription, improves accuracy and quality of medical documentation, and ultimately enhances patient-centered care. This system helps with sharing best practices, achieving operational efficiencies, and leveraging economies of scale. Cost drivers consist of on-going maintenance and support, break-fixes, adaptive maintenance, and compliance with security, technology, section 508, and other federal and VA technology standards.

The Bed Management Solution (BMS) is a graphical user interface (GUI) for VistA and Non-VistA bed and patient movement information. The application provides a real-time web-based interface for tracking patient movement and determining bed availability. BMS pulls all bed status from VistA via a unidirectional feed and provides reporting and other key features including individual Veteran's clinical needs during evacuation to optimize patient movement in response to local, regional, and national disasters. BMS improves the physical infrastructure of VHA facilities by providing a critical operational tool to meet VA's commitment to maintain real-time inventory of VHA in-patient beds, which improves access to medical care. BMS is the mandated VHA software, per VHA Directive 1002, for the patient/bed tracking and management purpose. Bed Management Solution (BMS) requires continuous bug fix and defect repair sustainment support for vital operational needs. It expedites safe patient flow/transfers within, between and among VA medical facilities and community care medical facilities nationally, to include VISNs. 2024 cost is related to maintaining the application, continuous bug fixes and defect repair sustainment for vital operational needs.

VistA Integration Adapter (VIA) is a system of middleware used to transport clinical and non-clinical electronic information between producing and consuming applications in VA systems. VIA creates a set of common web services that allow consuming applications to securely retrieve data from VistA systems. VIA is the legacy system that will not be absorbed by Cerner and will be decommissioned. The plan going forward is for all applications using VIA to utilize other methods, one of which is migration to Veterans Data Integration and Federation (VDIF) Web Service Layer (VWSL) VIA cloud solution. VWSL will be able to supply VistA data or Cerner Data via the VDIF Edges. VWSL VIA, which is a set of services, methods, classes and operations that will allow calling architecture and addresses system maintenance due to increased adoption of the services VDIF-EP and VWSL provide.

The Enterprise Precision Scanning and Indexing (EPSI) is a critical link supporting the incorporation of medical records from community-based providers into the VA electronic health records - VistA, and Oracle Cerner. EPSI streamlines VA acceptance, connection/indexing of documentation received from community-based providers back to the originating VA community care consult request, and storage of consult results and documentation into the appropriate VistA patient record. Sustainment funding for EPSI continues the iterative evolution of the product to meet customer requirements and improved interoperability and integration between Oracle Cerner, VDIF, HealthShare Referral Manager (HSRM) and JLV, and supports VA's mission to deliver quality care to the Veteran. The major cost driver of EPSI is to ensure the availability of comprehensive medical records for the growing number of Veterans who receive care in the community, and updates to support VA's integration into the Oracle Cerner product set.

Status Query and Response Exchange (SQUARES) is a web-based application that provides VA employees and external homeless service organizations with reliable, detailed information about Veteran eligibility. SQUARES is built on the Salesforce platform and allows users to retrieve reliable Master Patient Index (MPI) data for Veteran eligibility homeless status. VA employees, homelessness program grantees and other external organizations can apply for SQUARES access, streamlining eligibility determinations and delivering care and services to approximately 200 thousand homeless Veterans more quickly. There are about 1,000 external homelessness agencies across the entire United States; hence, users conducted over 100,000 searches to assist homeless

Veterans. To increase awareness and usage of SQUARES by more homelessness service organizations and VA employees, several initiatives are underway as part of the transformation, including better reporting tools, and logic/User Interface improvements. The 2024 funding will allow continued hosting and monitoring of the application.

Business Information Office Business Intelligence Solution (BIO BIS) and the supported application Mobile Performance and Operational Web-Enabled Reports (mPOWER) support VHA's efforts to improve performance in its revenue collections business operations by providing accurate, reliable, and up-to-date outcome and performance measure information. The system provides performance information that allows VHA management to create reports to manage, analyze, and monitor metrics for revenue tracking. The previous reporting system, Performance and Operational Web-Enabled Reports - POWER Plus was on a legacy platform with very limited support. Creation of the mPOWER application moved revenue collections reporting to the modern Cloud platform, providing greater efficiencies in the collection process and ensuring a more streamlined reporting process, utilizing minimum resources. mPOWER provides critical tracking and collections reporting, tracking over \$3 billion per year in revenue collections. The performance of this system and its reporting capabilities are critical to maximizing revenue collections. As the data source for revenue metrics, the over-arching goal is to support the achievement of optimal performance in revenue collections. The 2024 cost drivers for BIO BIS are maintaining the infrastructure in the Azure Cloud environment including cloud credits and infrastructure support hosting for the mPOWER application used by VHA for reporting/metrics.

The Clinical Staffing and Scheduling effort provides operations and maintenance support for interface capabilities supporting VHA sites using the AcuStaf COTS application for automation of scheduling clinical staff in hospitals and long-term care (LTC) facilities. Maintain existing interfaces to related systems such as HR Smart (HRIS)/HR Personnel Accounting System (HR-PAS), VA Time and Attendance System (VATAS), Single Sign On (SSOi), Talent Management System (TMS 2.0), BMS, Employee Performance Appraisal Management System (ePerformance), Managerial Cost Accounting Office (MCAO), Vocera, Scheduling, Elsevier, and VetPro. The effort provides services to ensure that the solution is properly secured and Authority to Operate (ATO) is maintained.

The Automated Patient Discharge project provides interface capabilities to support for integrating VistA with the Ensocare Solution COTS application to support of Automated Discharge Planning (ADP). These electronic systems will leverage industry standard technology to allow the social worker to make accurate and efficient referrals for a hospitalized Veteran to multiple post-acute extended care facilities with one step, thereby multiplying the work action to a significantly higher order of magnitude. The ADP allows Veterans to be assigned in a timely manner and with the ideal appropriate levels of care after clinical social workers address their psychosocial issues in an effective and efficient manner. VA Social workers routinely coordinate discharge of Veterans from medical, psychiatric, surgical, spinal cord injury, rehabilitative medicine, and other specialty units every day to thousands of Assisted Living Facilities (ALF) and Skilled Nursing Facilities (SNF) throughout the country. VHA clinical social workers using this tool will make one electronic referral for a Veteran in need of SNF or ALF placement to an established referral network. Accomplishments will be on-going operations and maintenance including minor bug fixes of interface integrations of the Ensocare COTS application.

Emergency Department Integration System (EDIS) is an extension to CPRS for managing and improving the delivery of care to patients in VA's Emergency Departments (EDs) and Urgent Care Clinics (UCCs). The current system tracks patients during their visits, displays status in receiving care, and provides reporting and analysis tools for managing patient flow and operational performance at the local, VISN, and National levels. The system will include full interoperability with BMS, National Utilization Management Integration (NUMI), and VistA, real-time operational dashboards, and tools for managing time-critical care in the Emergency Department. It will also include mobile access to EDIS capabilities and interfaces to RTLS technology for capturing data. Without the EDIS, the emergency department operations would be disrupted, risking patient harm. EDIS cost drivers are related to maintaining the required support and repair maintenance for vital operational needs. Accomplishments will improve the emergency department care to the Veteran patient by introducing the systematic collection, display, and reporting of patient status information. This allows for efficient tracking and placement of the patient throughout the care lifecycle.

Enterprise IT Infrastructure - \$109.4 million (Development - \$2.0 million, Operations and Maintenance – \$107.4 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects ((\$s in thousands))	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
VHA Employee Education System (106B) - Training Governance and Oversight System	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,000	\$ -	\$ 2,000
VHA IT Support Contracts	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 66,275	\$ -	\$ 53,358	\$ (12,917)
Corporate Data Warehouse (CDW)	\$ 24	\$ 29,845	\$ -	\$ -	\$ -	\$ 26,314	\$ -	\$ 22,199	\$ (4,115)
Corporate Data Warehouse (CDW) - Section 8002	\$ -	\$ 6,574	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VA Informatics and Computing Infrastructure (VINCI)	\$ -	\$ 6,907	\$ -	\$ -	\$ -	\$ 8,842	\$ -	\$ 9,300	\$ 458
Health Data and Analytics Platform	\$ 6,402	\$ 10,039	\$ -	\$ -	\$ -	\$ 17,557	\$ -	\$ 8,169	\$ (9,388)
Health Data and Analytics Platform - Section 8002	\$ -	\$ 11,445	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
James A. Lovell Federal Health Center (JAL FHCC)	\$ -	\$ 2,200	\$ -	\$ -	\$ -	\$ 1,800	\$ -	\$ 3,644	\$ 1,844
ReachVet	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,591	\$ 2,591
Corporate Data Warehouse (CDW) Mental Health (MH) Service Transition	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,300	\$ -	\$ 2,415	\$ 115
VA Patient Account Resource System (VAPARS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,548	\$ 2,548
CPAC Revenue Workflow Tools (ROWT)	\$ -	\$ 7,104	\$ -	\$ -	\$ -	\$ 4,895	\$ -	\$ 2,203	\$ (2,692)
Salesforce - Oversight and Accountability Reporting and Visualization Platform (OARVP)	\$ 812	\$ 1,583	\$ -	\$ -	\$ -	\$ 600	\$ -	\$ 952	\$ 352
Consolidated Patient Account Center Patient Account Resource System (CPAC PARS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,550	\$ -	\$ -	\$ (2,550)
Collaborative Terminology Tooling Data Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,030	\$ -	\$ -	\$ (2,030)
Mental Health (MH) Screening and Identification	\$ 1,915	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Consolidated Patient Account Center (CPAC)	\$ -	\$ 2,467	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Enterprise IT Infrastructure	\$ 9,153	\$ 78,163	\$ -	\$ -	\$ -	\$ 133,163	\$ 2,000	\$ 107,379	\$ (23,784)

VHA requires a comprehensive, sustainable, effective, and efficient training management system to support the standardization and management of training across the VHA. VHA Employee Education System (106B) - Training Governance and Oversight System will be a single system to

support VHA's training prioritization, planning, budgeting, contracting, assessment, evaluation, standards, design, development, and implementation.

The 2024 budget request for VHA IT Support Contracts sub-project represents the steady-state funding to support unique VHA legacy systems that were not included in the OIT Consolidated Agreement, aka Service Level Agreement (SLA). This request includes two contracts: (1) Health Information Coding, Billing and Auditing (HICBA) software suite provides VA coding professionals the ability to accurately and consistently code health care encounters and inpatient stays. (2) The Catherization Laboratories (CART-CL) Services system provides direct clinical support for clinical staff evaluating veterans as candidates for cardiovascular procedures.

The 2024 funding is needed to operate and maintain the CDW Systems including Data Architecture, Data Integration, Database Administration, System Administration, Reporting, Analytics and Support for over 5 trillion rows of data consumed by over 5,600 Workgroups and over 100,000 Customers. The services provided by CDW are critical to the day-to-day operations of VA.

VA Informatics and Computing Infrastructure (VINCI) provides critical services to day-to-day operations for health research across the VA Services that include access to secured environment, designed to carefully balance the needs of the researchers by providing the resources and tools necessary to conduct studies and analyze data with the VA's requirement to maintain security and privacy of that data. The VINCI environment consists of extensive storage area networks, drives, file shares, databases, a SharePoint farm for collaboration and correspondence sites, Statistical Analysis System (SAS)/Grid for advanced analytics and contains both physical and virtual machines with an extensive collection of software, including Government of the shelf (GOTS), COTS, and homegrown applications. Current demand in VA comprises on average 200+ active health research studies per month.

Health Data and Analytics Platform (HDAP) is an open-architected, multi-cloud, data management and analytics platform used for consolidating, curating, and analyzing data from multiple sources throughout the VA. HDAP is designed to use advanced analytic processes including predictive analytics, artificial intelligence/machine learning (AI/ML), and natural language processing (NLP) to make inferences on individuals or groups of Veterans. Program offices across the VA can leverage raw data, data products, and models already curated by HDAP, ingest additional data, or build and publish their own data assets. The platform enables evidence-based decision making to improve outcomes for Veterans and their families by providing VA data analysts, data scientists, and product teams access to a data lake. OIT will request funding for 2024 to perform day-to-day operations to ensure the continued availability and reliable operation of the platform.

The 2024 request for the JAL FHCC system will allow OIT to fund maintenance and repair of changes made to the VA Electronic Health Record system to support the unique mission of the JAL FHCC. VA and DoD health care providers use this system to provide comprehensive health care for Veterans and Servicemembers. The purpose of this funding request is to continue to provide sustainment services on the JALFHCC applications (Joint Patient Registration, Orders Portability, Laboratory and Financial Management Reconciliation systems). It also provides sustainment to the bi-directional connection and messaging between VA's VistA applications and

DoD's Armed Forces Health Longitudinal Technology Application (AHLTA) as well as the Composite Health Care System (CHCS) applications.

Suicide prevention is one of the VA's highest priorities. As part of VA's commitment to put resources, services, and all technology available to reduce Veteran suicide, VA has launched an innovative set of clinical programs and practices that utilize big data to enable novel proactive prevention and population health approaches to care. ReachVet supports platforms and models responsible for proactive care. The programs include the targeted prevention programs based on the Recovery Engagement and Coordination for Health Veterans Enhanced Treatment (Reach Vet) and Stratification Tool for Opioid Risk Mitigation decision support tools. These programs utilize predictive models embedded in clinical decision support dashboards to trigger and guide clinician outreach and review of vulnerable patients nationwide. A second set of tools uses population management approaches to ensure optimum care and care engagement for high-risk patients under VA care. The High-Risk Flag Tracker, Post-Discharge Engagement Tracker, and the Suicide Prevention Population Risk Identification and Tracking for Exigencies (SPPRITE) Report are used nationally to ensure that high risk patients get services found to reduce risk of suicide and enable VA clinicians to hand-hold patients through challenging care transitions and anticipate needs. The CAPRI, REACH VET, Risk Indicators, Stratification Tool for Opioid Risk Mitigation (STORM) Tool for Analytic Lookup (CRISTAL) supports the Veterans Crisis Line in risk assessment, crisis response, care coordination, and follow-up for VA patients that call the crisis line.

VA Patient Account Resource System (VAPARS) (formerly known as CPAC) is part of a VA initiative that allows VHA to improve billing and collection activities throughout its 170 medical centers and more than 1,200 clinics across the United States. VAPARS (7 sites nation-wide) collects approximately \$3.4 Billion dollars annually for VA, has approximately 4,500 customers at its locations, and deals both directly and indirectly with Veterans and outside insurance companies regarding reimbursements and collections of funds. The 2024 sustainment request will allow maintenance of the applications that are mission critical to the VAPARS revenue collection efforts.

Corporate Data Warehouse (CDW) Mental Health (MH) Service Transition supports one of the highest priorities of suicide prevention. CDW MH closely aligns to four VA Strategic goals by providing a data exchange which will enable triggers for action by Mental Health Programs, Homeless Programs, Primary Care teams, VBA teams, VHA Eligibility Enrollment staff, and other programs that provide outreach and intervention to identified Veterans and provide Veterans with access to mental health and suicide prevention resources. This will enable VA and DoD to make full use of their already substantive investment in shared predictive models by enabling clinical deployment of these models in VHA clinics. By working with data from ReachVet, the VA will be increasing its ability to identify patients at high risk of suicide-related events, overdoses, substance use disorders and other negative outcomes after transition from service to proactively engage patients in tailored services to minimize adverse events. Migration to the cloud will reduce calculation time. 2024 funding will provide an active data exchange between VA, DoD, and Department of Homeland Security (DHS) will enable these agencies to comply with the requirements of Executive Order 13822 and the subsequent Joint Action Plan signed by the Secretaries of all three Departments. This will additionally complete requirements for data sharing

and project maintenance outlined in the Opioid Management and Safety Initiative and Interagency Collaboration for Advancing Predictive Analytics Joint Incentive Funded projects.

2024 funding for maintenance of the Consolidated Patient Account Centers (CPAC) Revenue Workflow Tools (ROWT) will enable it to continue support for accurate billing at the seven regionally aligned CPAC and to align with the Community Care Non-Network migrating into the new claims adjudication system Electric-claims adjudication system health care engine (e-CAM). This will allow implementation of industry best practice standards in healthcare revenue business tools. Business tools support the entire revenue cycle by providing work drivers, modeling of payments and robotic process automation. The 2024 sustainment request will allow maintenance of the applications that are mission critical to the CPAC revenue collection efforts.

Salesforce - Oversight and Accountability Reporting and Visualization Platform (OARVP) is critical for achieving the mission of the Office of Compliance and Business Integrity (CBI), and VHA's larger goal of being an accountable, learning organization. The OARVP will consist of an interactive web application that will initially allow VHA leadership, CBI Officers, and key internal stakeholders access to VHA compliance program management and leadership reports and underlying data in an interactive and dynamic manner. With such capability, CBI seeks to increase awareness, transparency and accountability and to promote actions towards achieving an integrated VHA-wide compliance program.

Patient Management Services - \$16.3 million (Development - \$0.6 million, Operations and Maintenance – \$15.7 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (S\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Veteran Benefits Handbook Portlet	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 559	\$ -	\$ 559
Informed Consent Web (ICW)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,371	\$ 7,371
Community Living Centers Resident Assessment Instrument	\$ -	\$ 3,755	\$ -	\$ -	\$ -	\$ 4,200	\$ -	\$ 4,867	\$ 667
Vet Ride (VTSHS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,283	\$ -	\$ 1,682	\$ (601)
Beneficiary Travel Self-Service System (BTSSS)	\$ -	\$ 2,748	\$ -	\$ -	\$ -	\$ 2,748	\$ -	\$ 1,800	\$ (948)
Beneficiary Travel Self-Service System (BTSSS) - Section 8002	\$ -	\$ 3,698	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Signature Informed Consent (SIC)	\$ -	\$ 6,441	\$ -	\$ -	\$ -	\$ 7,500	\$ -	\$ -	\$ (7,500)
LGBT Program (10P4Y)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,030	\$ -	\$ -	\$ (3,030)
Patient Management Services	\$ -	\$ 16,643	\$ -	\$ -	\$ -	\$ 19,761	\$ 559	\$ 15,720	\$ (3,482)

Development and implementation of the Veterans Health Benefits Handbook Portlet will provide Veterans the ability to electronically request and view their personalized 'Veterans Health Benefits Handbook.' This initiative is critical to ensure all Veterans understand their VA health care benefits and responsibilities.

Signature Informed Consent Web (ICW) software provides VA practitioners with an electronic consent product customized to interface with CPRS and VistA Imaging. The Informed Consent software is used by VA providers and their Veteran patients to complete more than 3.3 million consent forms each year for treatments and procedures (e.g., colonoscopies, transfusions, and opioids prescriptions). For treatments requiring signature consent, ICW generates a customizable electronic consent form that is automatically populated with VA-approved information. This helps to standardize the consent processes to ensure patients receive high-quality, consistent consent forms. ICW allows clinicians to meet ethical standards of practice required by law, regulation, and policy. It is needed to provide VHA physicians with essential tools to ensure Veterans receive consistent, legible, high-quality information regarding the healthcare options proposed by the healthcare team. In 2024, funding will be used for continued maintenance and the VAEC. Cloud credits will be used for data base and web service expertise, Central Processing Unit (CPU) usage, network bandwidth consumption, storage capacity, and systems administration of the overall cloud environment.

Community Living Centers Resident Assessment Instrument (CLC-RAI) provides a standard health assessment for Community Living Center residents. The application is required for Veteran-centric care that is personalized, proactive, and patient-driven by capturing the voice of the CLC resident, enabling monitoring of functional status, facilitating evaluation of the quality of care received, and determining appropriate nurse staffing resources. In 2024, the funding request includes supports and licenses for operations and maintenance activities.

Veterans Transportation Program (VTP) vision explores the establishment of a network of community transportation service providers, community, commercial transportation providers, and federal, state, and local government transportation services. The failure of this service network to address accessibility of VA facilities where they are authorized treatment and compensation to Veterans and family members will negatively affect VTP, thereby hindering reliable transportation options for Veterans to their appointments using Vet Ride. The sustainment use of these funds is to (a) continue to track and monitor Veteran travel requests within VA Medical Centers and (b) prevent improper payment for beneficiary travel.

Beneficiary Travel Self-Service System (BTSSS) helps to automate the manual and labor-intensive claims processing environment by providing program integrity tools to detect fraud, waste, and abuse; automating waiver exceptions; electronically passing vouchers for direct deposit; enhancing the audit process; and streamlining current work processes as listed:

- Move to Self-Service
- Automate recurring manual processes
- Lower operating costs
- Reduce cash payments
- Redirect staff availability to patient support and care

Health Care Infrastructure - \$397.8 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (Ss in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
VHA Software License Maintenance	\$ -	\$ 185,128	\$ -	\$ -	\$ -	\$ 149,753	\$ -	\$ 166,555	\$ 16,802
VHA Software License Maintenance - Section 8002	\$ -	\$ 5,214	\$ -	\$ 81,576	\$ -	\$ -	\$ -	\$ -	\$ -
Service Level Agreement (SLA) - Health	\$ -	\$ 71,899	\$ -	\$ -	\$ -	\$ 106,208	\$ -	\$ 113,179	\$ 6,971
Veterans Data Integration and Federation Enterprise Platform (VDIF-EP)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 45,733	\$ 45,733
Veterans Health Information Systems and Technology Architecture (Vista)	\$ -	\$ 27,804	\$ -	\$ -	\$ -	\$ 29,113	\$ -	\$ 39,814	\$ 10,701
VHA Hardware Maintenance	\$ -	\$ 19,717	\$ -	\$ -	\$ -	\$ 43,000	\$ -	\$ 23,304	\$ (19,696)
Health Application Project Management and Product Support	\$ -	\$ 10,415	\$ -	\$ -	\$ -	\$ 8,500	\$ -	\$ 8,500	\$ -
Vista Audit Solution (VAS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,500	\$ -	\$ 700	\$ (1,800)
Computerized Patient Record System - CPRS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 328	\$ -	\$ -	\$ (328)
Vista Audit (VSRA)	\$ -	\$ 2,691	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health Care Infrastructure	\$ -	\$ 322,870	\$ -	\$ 81,576	\$ -	\$ 339,402	\$ -	\$ 397,785	\$ 58,383

The VHA Software License Maintenance sub-project represents the steady-state charges to support the unique VHA legacy systems that were not included in the OIT Consolidated Agreement. The Service Level Agreement (SLA) – Health sub-project is comprised of steady state charges for Health Portfolio. This is an OIT Consolidated Agreement, also known as the Service Level Agreement, that comprised sustainment-steady-state funding for continued operations and includes IT Provisioning costs, storage, licenses, Hardware, and Software maintenance.

Veterans Data Integration and Federation-Enterprise Platform (VDIF-EP) federates patient record data from all Vista instances and caches the data to improve response times for customers querying for clinical data. Federated data allows interoperability and information sharing between internal VA organizations and external organizations like DOD, CDC, etc., with the ability to aggregate data from disparate sources in a virtual database so it can be used for business intelligence or other analysis. The program supports the integration of health records data with COTS and non-COTS products requiring data access methods, governance and standardization of tools sets, governance of the application programming interfaces, and other technologies required for the federation of data. The end users are the healthcare professionals who access Veteran-patient health records. VDIF-EP enables an accurate joint healthcare records database, elimination of paper records, sustainment of operable VA healthcare applications, and ease of access for Veterans and healthcare professionals to VA records and products. VDIF-EP is a middleware component that addresses the need for Cerner Joint HIE and other applications to access federated electronic medical records from a single, performant source rather than create individual connections to all the Vistas and compile the data at each application. The program aggregates and normalizes data from 130 different electronic medical record instances that support 172 VA medical centers and over thousand outpatient clinics which effects millions of Veterans.

The Vista sustainment effort provides the delivery of full life-cycle support for deployed Vista products. It is essential to ensure that users have a reliable system with which to execute the business operations of VHA. The operations and maintenance provide comprehensive support for defect resolution and bug repair for over 100 Vista applications. This sustainment function

ensures that all deployed VistA applications are responsive to VHA's needs to successfully execute its mission to care for Veterans. VistA is deployed across VHA at more than 1,500 sites of care, including each VAMC, Community Based Outpatient Clinics (CBOC) and CLC as well as at nearly 300 VA Vet Centers.

The VHA Hardware Maintenance sub-project represents the estimated steady-state charges for legacy system support for the specific and unique VHA systems that were not included in the SLA. The services have been consolidated and are managed, acquired, and provided centrally at Enterprise level rather than the organizational level. VHA Hardware Maintenance includes:

- 1) VistA Maintenance for maintenance and support services for the VistA System in VA facilities across the nation, which provide care to Veterans twenty-four hours per day, 365 days per year. The VistA system is comprised of Primary VistA and VistA Imaging (Tier 1 and Tier 2), the group of solutions that constitute the backbone of Healthcare IT throughout VA.
- 2) The VistA Maintenance Recover provides a complete VistA system that can be deployed to any site in an emergency.

Major cost drivers are for VistA Imaging Tier 1 and Tier 2 Storage. Augmentation VistA Imaging Tier 1 consists of a HP-based solution which is responsible for the retrieval of patient imaging for consumption by Primary VistA as well as the short-term storage of patient imaging. VistA Imaging Tier 2 consists of a NetApp based solution which is responsible for the long-term storage. Accomplishments are assisting VA hospitals to store electronic records practice/procedures and avoid conflict with Federal requirement (A-COP, B-OSHA, and C-HIPPA).

The Health Application Project Management and Product Support service provides full life-cycle support for Health Services Portfolio systems. It ensures users have reliable systems to execute the business operations of VA/VHA. Funding is needed to ensure the availability, reliability, security, and efficiency of the over 400 VHA health care systems that aid in the delivery of critical services to Veterans. As a mandatory keep the lights on requirement, this funding supports all aspects of the VA Strategic Healthcare Goals by ensuring reliability and availability of all the systems that support the Veterans and clinicians providing greater choice and access to care. These systems provide the support tools that make all the VAMCs run smoothly and efficiently with the many tools for clinicians, including for surgery, radiology and vitals measurement, and case management of homeless Veterans. The major costs driver is an increased workload because of the expansion from the original 79 managed VHA owned health care systems under the prior Transition Release Support (TRS) portfolio to the much larger 400 system Health Services Portfolio. Accomplishments include keeping IT systems current with security practices and Veteran data safe from cyberattack which requires constant software release and production support.

The VistA Audit Solution (VAS) is a real-time web-based interface that has dependencies on VistA- Admission Discharge Transfer (ADT) patient data. VAS end-users are Privacy Officers and Information Systems Security Officers (ISSO) and their authorized representatives who need the ability to view the log of Create, Read, Update and/or Delete (CRUD) operations on patient information to respond to Freedom of Information Act (FOIA), HIPAA, employee and Inspector General (IG) requests. This data originates from VistA and flows through in-memory database servers to be stored in the VAEC AWS. A Congressional report on VistA security identified a security vulnerability due to lack of Audit logging, which essentially identifies who has accessed

a VA patient record, and VAS should resolve that vulnerability. The outcome is a way to track patient record access across VistA and designed to improve data security and assurance. VAS has a single internal portal which helps track access for all records instead of only “Sensitive Patients”, eliminating the need to manually piece together information from individual disparate sites. VA achieved a nationwide HIPAA compliant Audit Tracking Solution with the ability to track and report on Protected Health Information (PHI)/Personal Identifying Information (PII) across all VistA applications and utilize cloud storage for searching and retrieving. The cost drivers will primarily come from the massive amount of data flowing through VistAs through 2 Information Technology Centers (ITCs) to the VAEC cloud. The data is the collection of every create, read, update, and delete on the VistA patient demographic record for every VistA system. Other cost drivers include technical support, on-going maintenance, and hosting in the VAEC AWS to ensure VAS remains operational for its growing user base.

Virtual Veteran Record - \$34.3 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Standards and COTS Integration Platform (SCIP)	\$ -	\$ 12,670	\$ -	\$ -	\$ -	\$ 15,000	\$ -	\$ 15,093	\$ 93
Veterans Health Information Exchange (VHIE)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,020	\$ -	\$ 11,000	\$ 6,980
Health Data Quality Tools	\$ -	\$ 4,385	\$ -	\$ -	\$ -	\$ 4,600	\$ -	\$ 5,290	\$ 690
Direct Secure Messaging (DSM)	\$ -	\$ 4,955	\$ -	\$ -	\$ -	\$ 5,935	\$ -	\$ 2,929	\$ (3,006)
Standards and Terminology Services (STS)	\$ -	\$ 2,510	\$ -	\$ -	\$ -	\$ 2,570	\$ -	\$ -	\$ (2,570)
Virtual Veteran Record	\$ -	\$ 24,519	\$ -	\$ -	\$ -	\$ 32,125	\$ -	\$ 34,312	\$ 2,187

Standards and COTS Integration Platform (SCIP) is utilized by VA clinicians to provide a comprehensive view of clinical data within their EHR. SCIP is the only VA service for DoD data that populates data directly to VistA CPRS where clinicians have read and write capabilities. SCIP supports end-user viewer applications including CPRS, JLV (VA & DoD), VistA Imaging, Health Artifact and Image Management Solution (HAIMS), and VistA Web.

Veterans Health Information Exchange (VHIE) enables VA, participating community care providers, governmental agencies, and Veterans to securely share Veteran's health data electronically through query-based Health Information Exchange (HIE), directed exchange VA Direct, and patient-mediated Consent reports/exchange through My HealtheVet. It supports VHIE Community Coordinators, VHA Privacy and HIMS resources in conducting privacy investigations and consent for information sharing tasks for selected Veterans. VHIE Portal has accomplished the VHA business need to capture the information sharing preferences for Veterans who do not have access to the MHV portal; store Veterans’ consent preference and disclosures over time in a secure system with privacy controls; and have the capability to generate, export and print reports in response to data privacy investigations and for compliance monitoring. The VHIE Portal also

provides the ability to generate, download, and print VDIF Clinical Document Architecture (CDA) documents. VA will be able to comply with 21st Century Cures Act provisions including 1) management of business exceptions to information blocking (e.g., preventing sharing a patient's record known to contain erroneous or corrupt data such as an incorrectly merged record, preventing sharing to avoid patient harm); 2) Ability to 'feed' updates for terminology changes, mappings, etc. for USCDI upgrades; 3) VA clinicians will not receive event notifications for their patients' community emergency room visits and hospitalizations, nor send these notifications for follow up care in the community, precluding critical continuity of care. The expected outcomes of the VHIE Portal are that Veterans' information sharing preferences are honored by the Joint Health Information Exchange and VHIE Community Coordinators, VHA Privacy and HIMMS resources that have a secure and reliable system for the data capture of Veterans' information sharing preferences; secure storage and reporting of consent and disclosure activity over time, and a mechanism for generating and printing VDIF CDAs. Cost drivers for VHIE Portal steady state include increased costs associated with maintaining a secure, reliable, and efficient system for data capture, secure storage and reporting of consent and disclosure activity as well as maintaining a mechanism for generating and printing VDIF CDAs.

The Health Data Quality Tools enables VA, participating community care providers, governmental agencies, and Veterans to measure and increase the quality of the medical data that is securely shared with external care providers. By identifying quality problems and working with external providers to fix them, the quality of the data shared is improved and community care providers are better able to coordinate and improve Veterans' overall quality of care. The Health Data Quality tools enhance the value of the information shared between the VA and non-VA health care providers as well as provide real-time data quality analyses, scoring, and labeling of records so that clinicians are provided a complete picture of the Veteran's medical history. This tool inspects 9.6M records a year to ensure accuracy and completeness to the HL7 standard. The major cost drivers are continued sustainment and VAEC AWS support is needed to ensure DQT remains operational, maintenance of monitoring tools to detect early potential risks, upkeep and potential troubleshooting with integrated partner services such as Single Sign-On Integration (SSOi) from Identity Access Management (IAM), and continued compliance with VA Information Assurance standards.

Direct Secure Messaging (DSM) is a secure health-industry-standard transport mechanism for the exchange of patient health information between VA and external care providers with approximately 2 million addresses and 300K+ organizations in the Direct Trust network. The timely and accurate exchange of electronic patient data with the external care providers avoids inconveniencing Veterans with unnecessary duplicate medical testing as well as providing cost savings to the VA. Through utilization of DSM, patients receive better coordinated care which leads to better outcomes and overall increased patient and provider satisfaction. Cost drivers for DSM are continued support and maintenance of the DSM application and increased system use within the VA.

Quality Systems - \$15.0 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (S\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Check-in Experience (CIE)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,700	\$ 10,700
Community Care Clinical and Business Intelligence Solution (EPRS)	\$ -	\$ 4,011	\$ -	\$ -	\$ -	\$ 4,400	\$ -	\$ 2,401	\$ (1,999)
Salesforce - National Center For Patient Safety Tools (SF - NCPS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,867	\$ 1,867
National Center for Patient Safety (NCPS) Patient Safety Operations	\$ 1,530	\$ 655	\$ -	\$ -	\$ -	\$ 3,130	\$ -	\$ -	\$ (3,130)
Office of Integrity - Risk Management System	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 500	\$ -	\$ -	\$ (500)
Quality Systems	\$ 1,530	\$ 4,666	\$ -	\$ -	\$ -	\$ 8,030	\$ -	\$ 14,968	\$ 6,938

The Check-in Experience (CIE) systems provide VHA patients with the ability to check in for scheduled health appointments and conduct check-in related activities from personal mobile devices. CIE utilizes a combination of existing systems, including VEText, VA.gov, VistA, and VA Profile and new subsystems to deliver this functionality. These new subsystems are:

- Check-in Integration Point (CHIP), which is a new back-end subsystem that interfaces with VistA, VA.gov, VA Profile, and other VA-controlled systems to gather appointment and patient-related information and process patient check in activities
- Low Risk One Time Authentication/Authorization (LoROTA), which is a new back-end subsystem that enables patients to access a limited set of low-risk information about their appointment and patient profile upon establishing their identity through use of device- and secrets-based factors

CIE IT will be focused on continuing to enhance and evolve functionality of the Check-in ecosystem that supports over 50 million health care appointments per year to further streamline health care operations, improve patient experience, and reduce costs.

Community Care Clinical and Business Intelligence Solution Enterprise Program Reporting System (EPRS) provides automated, accurate, and complete views of data from multiple data sources, presented in a single, consolidated data visualization with reporting capability. This allows VA leadership and management to obtain a high level of performance and success metrics related to the Community Care Network (CCN) contract and Community Care Program (CCP). The solution displays adoption and success metrics from individual VHA Office of Community Care (OCC) projects. EPRS is critical to the Office of Community Care's ability to oversee the CCN contracts which are essential to ensuring a high-quality provider network to care for Veterans in the community. EPRS is the primary source for receiving and reporting information from CCN contractors regarding their performance of contractual requirements. The major cost drivers for EPRS are maintaining the application in steady-state mode and VAEC Azure hosting and service support for affected end users' production incidences. EPRS accomplishments provide automated, accurate, and complete view of data from multiple data sources presented in a single, consolidated data visualization to track on average over 30,000 Veteran claims per month.

VHA's Salesforce - National Center for Patient Safety Tools (SF - NCPS) serves as an enterprise safety support system for a VHA wide network of VISN Patient Safety Officers, facility Patient Safety Managers, VISN Chief Logistics Officers, facility logistics staff and other VISN and facility safety personnel trained to facilitate documentation and analysis of adverse events related to patient healthcare. NCPS accomplishes this mission in large part using core IT web-based applications. VHA learns about adverse events through these applications by reporting, investigating safety events or vulnerabilities occurring outside and within VHA facilities, analyzing high risk events to understand the root cause, sharing lessons learned across VHA, and communicating actions to prevent and mitigate risks. Continued steady state sustainment ensures the proper operations and maintenance performing routine patches and fixes meet continuous or recurring operational requirements.

2024 Benefits Portfolio

The Benefits Portfolio addresses the technology needs for the lines of business managed by the VBA: Compensation and Pension, Loan Guaranty, Insurance, Education, and Appeals. The Benefits Portfolio provides support for essential programs and services to Veterans and their families. In 2024, the Benefits Portfolio funding will be used to support the Veterans Benefit Management System (VBMS), Digital GI Bill, Benefits Infrastructure Services, Housing Grants and Benefits Cloud Platform.

This section does not include the PACT Act funding request. See the 2024 PACT Act Request section for additional details supporting this request.

The 2024 Benefits Portfolio Budget Request consists of the following Projects details:

Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Loan Guaranty	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 16,000	\$ -	\$ 16,000
Compensation and Pension	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 53,380	\$ 53,380
Benefits Integration and Administration	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 37,530	\$ 37,530
Education Veterans Readiness and Employment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 17,925	\$ 17,925
VBA Finance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,460	\$ 11,460
Benefits Enterprise Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,984	\$ 7,984
Appeals	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,322	\$ 7,322
Benefits Experience	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,369	\$ 2,369
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 515	\$ 515
Other Benefits IT Systems	\$ -	\$ 21,098	\$ -	\$ -	\$ 8,000	\$ 41,489	\$ -	\$ -	\$ (49,489)
Veterans Customer Experience - VCE	\$ 10,097	\$ 91,307	\$ -	\$ -	\$ 7,222	\$ 90,899	\$ -	\$ -	\$ (98,121)
Veterans Customer Experience - VCE - American Rescue Plan 8002	\$ -	\$ 73,181	\$ -	\$ -	\$ -	\$ 84,899	\$ -	\$ -	\$ (84,899)
Benefit Systems	\$ 9,896	\$ 12,240	\$ -	\$ -	\$ 5,505	\$ 37,688	\$ -	\$ -	\$ (43,193)
Veterans Benefits Management	\$ 14,575	\$ 79,830	\$ -	\$ -	\$ -	\$ 80,464	\$ -	\$ -	\$ (80,464)
Veterans Benefits Management - VHA Transfer (P.L. 117-43 Section 151)	\$ -	\$ 9,493	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
IT Support Contracts	\$ -	\$ 18,513	\$ -	\$ -	\$ -	\$ 79,000	\$ -	\$ -	\$ (79,000)
Benefits Appeals	\$ 3,476	\$ 15,015	\$ -	\$ -	\$ -	\$ 13,397	\$ -	\$ -	\$ (13,397)
Benefits Appeals - American Rescue Plan 8002	\$ -	\$ 1,616	\$ -	\$ -	\$ -	\$ 2,820	\$ -	\$ -	\$ (2,820)
Education Benefits	\$ 48,661	\$ -	\$ 1,339	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Colmery Act	\$ 965	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total Benefits Portfolio	\$ 87,670	\$ 322,294	\$ 1,339	\$ -	\$ 20,727	\$ 430,656	\$ 16,000	\$ 138,485	\$ (296,898)

Notes:

1. The 2022 Actuals and 2023 Enacted columns reflects projects reported prior to the budget restructure and will be executed as is
2. The 2024 Request column reflects projects in the new IT budget structure. Please refer to the Appendix Q Budget Restructure Matrix for the alignment of the old budget structure to the new 2024 IT budget structure
3. The 2024 funding level is below the 2023 level in the amount of \$296.898M resulting from the IT budget restructure and projects realignment to the Veteran Experience portfolio
4. In 2024, the sub-projects from Veterans Customer Experience – VCE project were realigned to the new projects such as Contact Center Experience, Customer Data Management Experience and Digital Experience in the Veteran Experience portfolio

The Project detail tables below display 2022 Actuals and 2023 Enacted sub-projects aligned to the Projects in the new 2024 budget structure for comparison purposes.

Loan Guaranty - \$16.0 million (Development)

The 2024 Budget Request includes the following sub-project:

Sub-Projects ((\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Housing Grants	\$ -	\$ -	\$ -	\$ -	\$ 8,000	\$ 1,052	\$ 16,000	\$ -	\$ 6,948
Special Adapted Housing/Special Housing Adaptation (SAH/SHA)	\$ -	\$ 915	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Loan Guaranty	\$ -	\$ 915	\$ -	\$ -	\$ 8,000	\$ 1,052	\$ 16,000	\$ -	\$ 6,948

VBA’s Home Loan Program helps Service members, Veterans, and eligible surviving spouses become homeowners by providing home loan guarantees and other housing-related programs. With Housing Grants and Loan Guarantee project changes and modernization, Veterans will be better positioned to apply for a Special Adapted Housing/Special Housing Adaptation (SAH/SHA) application grant more quickly with fewer impediments and shorter grant cycle time while also being able to obtain a Certificate of Eligibility (COE) in a timely manner. The SAH/SHA grant program ensures Veterans who have service-connected disabilities and require home/living accommodations will be better positioned to receive special adapted housing and/or special housing adaptations grants in a more expeditious manner. With an increasing population of Veterans living with service-connected disability(s), special adapted housing and/or special housing adaptation grant requests are increasing.

Compensation and Pension - \$53.4 million (Operations and Maintenance)

VBA’s Compensation program provides monthly benefits to Veterans in recognition of the effects of disabilities, diseases, or injuries incurred or aggravated during active military service. VA’s Pension programs provide needs-based benefits to wartime Veterans and their survivors. VBA’s Compensation and Pension project supports solutions which enable greater efficiency in processing claims for Veterans and deliver high quality platform system integration, data and analytics, and administrative products supporting efforts to deliver benefits to Veterans as well as decommissioning or refactoring systems that employ legacy technology and shift to modern technology and software development methods.

The Compensation and Pension project enables communication with Veterans and their families to provide information on benefits eligibility and how to apply for their earned benefits, increases efficiencies for Veteran disability claims processing, improves quality of service for end-users and Veterans, reduces inventory backlog of Veteran claims and ensures the timely and accurate delivery of monthly disability benefits to Veterans. The project enables holistic agile approaches to development of single capabilities without impacting existing system functionality and reliability.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Veterans Benefits Management	\$ 405	\$ 79,954	\$ -	\$ -	\$ -	\$ 65,770	\$ -	\$ 41,407	\$ (24,363)
Disability Examination	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,774	\$ -	\$ 5,629	\$ (2,145)
Legacy Claims Processing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,522	\$ -	\$ 3,303	\$ (1,219)
VA Discharge	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,208	\$ -	\$ 3,041	\$ 833
Imaging	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,420	\$ -	\$ -	\$ (2,420)
Pension and Fiduciary Automation	\$ 11,380	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Beneficiary Identification Records Locator Subsystem (BIRLS)	\$ 2,988	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Veterans Service Network	\$ 586	\$ 6,772	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other VBA Legacy System	\$ 71	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Migration Decommissioning	\$ -	\$ 3,203	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Virtual VA	\$ -	\$ 2,774	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Compensation and Pension Record Interchange (CAPRI)	\$ -	\$ 445	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Veterans Assistance Discharge	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Compensation and Pension	\$ 15,430	\$ 93,149	\$ -	\$ -	\$ -	\$ 82,694	\$ -	\$ 53,380	\$ (29,314)

The Veterans Benefits Management sub-project request for sustainment-steady-state will ensure continued viability of the primary functionalities of VBA claims processing. VBMS is the core business system supporting disability compensation and pension benefits processing as well as VBA’s fiduciary program. Key business drivers for the VBMS are the number of disability compensation, pension and fiduciary claims, the total number of Veterans in receipt of benefits for those benefits programs, and the number of VBA users processing those claims and supporting post-award benefits delivery. Additionally, VBMS’s document repository and VBMS-Core identity management and centralized printing components additionally support the Veteran Readiness and Employment benefits program, partially support the Board of Veterans Appeals, and will soon support the Education Benefits program. VBMS subproject will ensure the following: a seamless, integrated, and responsive customer service experience for Veterans by providing the back end single authoritative data source; eliminating burdens and errors associated with frequent duplicative data entry; ongoing support for eFolder; access for the Veteran through Veteran facing applications; security and integration of data and work queues enabling more automated workflows and support tools. In 2024, the sub-project will address the continued and future operational position of the system by correcting new defects, resolving root cause issues, and assisting in the resolution of user tickets to improve application operations and performance. This operational posture is key because VBMS has over 26 thousand daily users between VBA, BVA, NCA and VHA.

Disability Examination comprises the Compensation and Pension Record Interchange (CAPRI), VistA – CAPRI and CLAIMS.

The Compensation and Pension Record Interchange (CAPRI) serves as the key linkage between VBA disability compensation and pension claim processing and VHA medical data and disability examinations. VBA users use CAPRI to retrieve medical records of Veterans from VistA and to submit and process disability examination requests being satisfied by VHA providers. Key business drivers for the CAPRI are the number of disability compensation, pension and fiduciary

claims, the total number of Veterans in receipt of benefits for those benefits programs, and the number of VBA users processing those claims and supporting post-award benefits delivery. This project supports the VA's strategic goal to transform legacy systems and processes, facilitate VA/DoD collaboration, and business transformation. CAPRI also supports the organizational goal for standardized accessible data and seamless data sharing which enables users and decision makers to make timely Veteran-focused decisions based on comprehensive, single source data. CAPRI will also drive data governance standards for disability examinations for VA, private sector care providers and system integrators such as EHRM. CAPRI sustainment-steady-state is required to provide critical customer focused updates to the Disability Benefits Questionnaire (DBQ) used by VHA, VBA, and DoD. CAPRI is the authoritative source for the DBQ which provides medical evidence to support Veteran disability claims and these updates maintain compliance with VHA, VBA, and DoD requirements. The required work includes updates for data accuracy, data security, and data standardization with all necessary systems, as well as necessary ongoing daily system support, defect remediation, and day to day management. Funding this project will ensure cohesive integration with VistA application to prevent/remediate outages and errors that prevent critical input and decisions on Veteran claims. CAPRI will remain necessary until EHRM is fully deployed across VHA.

CLAIMS project supports the VA's strategic goals by enabling business operations for other IT systems and facilitating more efficient and timely resources utilization to provide competitive and world-class service to Veterans and VA employees. CLAIMS sustainment-steady-state will continue to support and facilitate claims processing with VHA, VBA and VBMS. CLAIMS will continue to be relied upon to enable other applications such as Vista Remote Access Management (VRAM), JLV and Suicide Hotline to continue operations and support the authentication of approximately 40,000 remote users across the VA Enterprise.

VistA - CAPRI: Automated Medical Information Exchange (AMIE) ensures that AMIE and the supporting applications are responsive to VHA, and VBA needs to successfully execute the mission of caring for Veterans. This project provides post release life-cycle support for AMIE and the sub-components which are essential to execution of business operations for VA, VHA, and VBA. The AMIE application provides a vast number of benefits to the VHA and VBA users who support veterans for compensation and pension services to include exam management creation, record search and retrieval, general updates to kernels and APIs that support AMIE, CAPRI, VRAM, JLV, and other essential services. It also provides support tools for clinicians such as reports, exams, data collections, form creation, and data transmission.

Legacy Claims Processing, key business drivers for the Legacy Claims Processing are the number of disability compensation, veteran readiness and employment, pension and fiduciary claims, as well as the total number of Veterans in receipt of benefits for those benefits programs, as well as concurrently the number of VBA users processing those claims and supporting post-award benefits delivery. Veterans Service Network (VETSNET) is the critical application that must continue to be delivered and maintained so that VA can continue to deliver the benefits that the veterans have earned and interact with Internal Revenue Service (IRS), Social Security Administration (SSA), Defense Financial Accounting System (DFAS), Defense Manpower Data Center (DMDC) and other agencies. VETSNET is a custom-built, mature suite of inter-related applications designed and implemented to facilitate the entire Compensation and Pension (C&P) claims process by

delivering critical business systems from claim establishment through the payment and accounting of benefits. Within the suite, end users can establish and develop Veteran claims; the rating decision, award, and notification letter are documented, and payment information is transmitted to Treasury, accomplishing the necessary accounting. Throughout these activities, data is shared and passed between the applications to support end-to-end claims processing, customer service, and notification. VETSNET is a fundamental component of VA's Enterprise Architecture in providing critical C&P informational support to its customers through an integrated and technologically sound environment. VETSNET sustainment-steady-state is required to maintain the lifecycle management of the VETSNET suite of applications (except for Finance and Accounting System (FAS) and Tuxedo). This project also supports approximately 60 batch processes and Oracle support for VBMS products. VETSNET applications are being modernized into the Veterans Benefits Management System and will eventually be sunset – already, multiple VETSNET applications (Search and Participant Profile, Awards, RBA2000) have been retired, with the balance to be retired by the end of VBA's modernization directed by the PACT Act. Once the applications have been retired, their legacy Tuxedo must also be decommissioned and removed from the middleware stack supporting VBMS. However, until that time, the remaining VETSNET applications and Tuxedo will require continued sustainment to ensure no capability gaps.

VA Discharge, Veterans Assistance Discharge System (VADS) sustainment-steady-state supports and maintains the existing VADS features in production. VADS benefit eligibility notifications are an essential part of VBA claims processing and necessary to the delivery of timely and immediate benefits to Veterans. VADS provides the VA with a way to effectively communicate those changes and encourage Veterans and their families to apply for the benefits they earned fighting for the country. Key drivers for VADS are the number of separating servicemembers, as well as VBA initiatives to more effectively communicate benefits eligibility and ensure effective transition.

Benefits Integration and Administration - \$37.5 million (Operations and Maintenance)

The Benefits Integration and Administration (BIA) project provides new features and capabilities that current and future tenants are required to run, significantly reducing technical debt and promoting the ability of the platform to support critical VBA business priorities and initiatives. This directly benefits Veterans by improving the timeliness and accuracy of the delivered benefits. As a result, this allows VBA to be in a better position to deliver benefits to Veterans, beneficiaries, and their family members as the Veteran population grows, benefits legislation evolves, and citizen expectations for timely and accurate benefits processing and delivery increases. IT systems hosted in the cloud lead to performance advantages such as increased scalability, increased security, and the ability to leverage economies of scale (lower hosting costs). A cloud system will better serve its customers through improved service delivery, data security, and more cost-effective data management capabilities, leading to a faster, more agile response to business changes. Ultimately, moving to the cloud will lead to more reliable processing and payment of Veteran benefits.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Benefits Infrastructure Services	\$ -	\$ 9,057	\$ -	\$ -	\$ -	\$ 11,743	\$ -	\$ 19,557	\$ 7,814
Benefits Cloud Platform	\$ 1,027	\$ 5,721	\$ -	\$ -	\$ 5,505	\$ 17,799	\$ -	\$ 16,973	\$ (6,331)
VBA Data Analytics	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000
Other VBA System Transformation	\$ 7,884	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Corporate Database CRP SuperCluster M8 Migration	\$ -	\$ 719	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Benefits Integration and Administration	\$ 8,912	\$ 15,496	\$ -	\$ -	\$ 5,505	\$ 29,542	\$ -	\$ 37,530	\$ (5,331)

Benefits Infrastructure Services. Benefits Enterprise Platform (BEP) is a unified service provider of Corporate Database (CRP) benefits data and underlying business logic to VBMS and other critical VBA systems. This includes VBA’s benefit delivery programs of Disability Compensation, Pension, Fiduciary, Education, and others. BEP’s mission is to provide secure, governed, and authoritative web services in an agile manner that helps VBA transition into a modern, highly efficient benefits processing entity. Benefits Gateway Services (BGS) is a major sub-component for BEP largely responsible for providing these authoritative web services. BGS integrates several different technologies to support the VBA business line applications and leverages a single system of record (SORN) with shared, managed resources in order to provide a single view of veterans and their beneficiaries. This allows for the efficient processing of benefits while minimizing waste, fraud, and abuse. BGS stays abreast of burgeoning data stores within CRP and provides analysis on how to put a layer of abstraction over the underlying CRP data. BGS works in progress include continued delivery of engineering services, independent verification, and validation (IV&V) testing for BGS web services, and continued BGS web service refactoring. BEP migration to the cloud will increase agility and flexibility and reduce costs by eliminating dependencies on legacy and outdated platforms (i.e., Tuxedo, WebLogic). This increases the seamless integration between VBA program applications, data bases, and systems of record used to process Veterans benefits in the variety of VBA benefit delivery programs. Furthermore, VA will benefit from better network performance, stronger uptime guarantees, faster product development and deployment, increased security, and increased ability to scale to meet capacity demands.

Benefits Cloud Platform. Benefits Integration Platform (BIP) is a cloud-based platform that allows teams to develop quickly and easily, build, test, deploy, scale and manage modern applications in the cloud. Currently, VBMS, Memorials Benefits Management System (MBMS), Pension Automation, and Claims Service are the key tenants on the platform. This platform provides the agility and abilities to focus in on solving business problems in real-time, meet VA compliance, keep controls, and supports other key utilization of other standard functions and logistics already incorporated into the platform. Key business drivers for the BIP are the number of disability compensation, pension, veteran readiness and employment, education and fiduciary claims, the total number of Veterans in receipt of benefits for those benefits programs, and the number of VBA users processing those claims and supporting post-award benefits delivery.

Additionally, BIP is also being significantly driven by the increased complexity and processing demands by VBA of their claims processing platforms as they drive for increased automation,

which requires more compute and also greater integration in an attempt to identify employee efficiencies everywhere. It also supports the Veterans Benefits Improvement Act of 2008, expediting the treatment of fully developed claims through more efficient, modern solutions. This subproject is also critical to VA's strategic goal to transform legacy systems and processes, as the BIP platform's primary function is to enable product teams of legacy applications to build, deploy, and manage modern container-based applications and APIs in the cloud quickly and easily. BIP Sustainment-Steady-State supports the Modernization Act of 2017, ensuring that mission critical modernized components of applications such as VBMS and MBMS are operational to simplify and streamline Legacy appeals processes.

VBA Data Analytics. Performance Analysis and Integrity (PA&I) Business Intelligence (VD3) utilizes Tableau COTS software as the analytic tool environment that uses benefits related data from VBA Data Warehouse (VD2) to provide near-real time ad hoc reporting, analysis, and payment data to various VA organizations and the Executive and Legislative branches. PA&I Business Intelligence (VD3) allows individuals and projects to create and subsequently modify their own data dashboards and reports without having to submit requests to a central location and wait for their creation. These two capabilities together serve as the principal source of data analytics for the entirety of VBA, providing both operational reporting and strategic business intelligence necessary for VBA to understand its workload, identify operational improvements or efficiencies, plan new projects, including automation and deliver strategic forecasts related to future benefits projections. Additionally, the capability was utilized to create Blue Water Navy data for Veterans. The 2024 budget request includes continued maintenance and technical support that enables analysis of secured data through visualizations and dashboards using computing power and data analytics which allow for decision making and highly valuable reports used by VBA, Board of Veterans Appeals (BVA), OIG, and NCA.

Key business drivers for VBA Data analytics are the number of disability compensation, pension, veteran readiness and employment, education and fiduciary claims, the total number of Veterans in receipt of benefits for those benefits programs, and the number of VBA users processing those claims and supporting post-award benefits delivery. VD2 and VD3 capacity is also being driven by the additional data created and being maintained in an effort to drive further automation, which itself requires computable data that must then be analyzed to identify performance optimizations. VBA users processing claims use VD3 as a mechanism specifically to check their individual performance and concurrently VD3 load is scaling as VBA adds capacity to process PACT.

Education Veterans Readiness and Employment - \$17.9 million (Operations and Maintenance)

Education Veteran Readiness and Employment (EVRE) project provide greater access to Education benefits and independent living for Veterans, service members and eligible dependents in addition to assisting Veterans and Service members with service-connected disabilities and barriers to employment so they can prepare for, obtain, and maintain suitable employment. Enhancements will support processing Veterans and Beneficiaries claiming benefits associated with Chapter 31, Chapter 35 (The Survivors and Dependents Educational Assistance Program), Chapter 36 (Educational and Career Counseling) and Chapter 18 (Benefits for Certain Children with Disabilities Born of Vietnam and Certain Korea Service Veterans). These projects will

enhance data integration, improve automated decision processing, use business intelligence to monitor and measure school and student outcomes, and electronic outreach and communications to provide timely responses to Veterans' requests.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects ((\$s in thousands))	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Digital GI Bill	\$ 49,625	\$ 172	\$ 1,339	\$ -	\$ -	\$ 18,562	\$ -	\$ 10,242	\$ (8,320)
Veteran Readiness and Employment (VR&E)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,234	\$ -	\$ 7,683	\$ 449
Corporate WINRS (CWINRS)	\$ -	\$ 2,843	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Quality Assurance Web Application (QAWEB)	\$ -	\$ 1,767	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Federal Case Management Tool (FCMT)	\$ -	\$ 1,698	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Veterans Readiness and Employment Case Management Solution (VRE_CMS)	\$ -	\$ 1,559	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Education Veterans Readiness and Employment	\$ 49,625	\$ 8,040	\$ 1,339	\$ -	\$ -	\$ 25,796	\$ -	\$ 17,925	\$ (7,871)

Digital GI Bill (DGIB) is a Managed Service solution to modernize the processing of education benefits for Veterans, Service members, and their dependents. DGIB will improve the user experience, provide faster and easier access to benefits, cut claims processing times, improve automation, and enhance VA's tools to aid Veterans in their educational and career goals. Currently, DGIB processes the Chapter 33/Post 9/11 GI Bill benefit. DGIB will eventually replace all the claims processing products within EVRE. The Digital GI Bill project is a joint effort between Education Services and the OIT to implement VBA Education Claims and Technology Services solution. DGIB will provide operation and maintenance support of the DGIB business capabilities, expedite education claims and award processing, improve communications across various stakeholders, provide business analytics and reporting services as well as customer outreach services to schools and educational institutions. DGIB project will continue to enhance VBA Education Claims and Technology Services to provide world-class customer and financial services. The solution will enhance the DGIB capabilities, expedite education claims automation, award processing, improve communications across various stakeholders, provide business analytics and reporting services as well as customer outreach services to schools and educational institutions. The Technology Services will continue to focus on interface development and integration with the required systems in compliance with any new legislative mandates.

Education Legacy System Decommissioning will facilitate the migration and transition of Education legacy systems' capabilities into DGIB Managed Services. The decommission tasks include the disconnection of system end points, termination of system operation, retirement of hardware, archival of data, system procedure and documentation, etc. Funding for DGIB enables the decommissioning of legacy systems and consolidates them into DGIB. Additionally, funding provides sustainment support as enhancements are made to enrich user experience through improvements in business analytics, reporting and claims & awards processing. DGIB sustainment will have 4 major releases to support system operation and maintenance, ATO updates, Software updates, Security scans and 508 compliances. DGIB enhancement planned

accomplishments for 2024 include improvement of education claims automation and performance, completion of the data migration of BDN, WEAMS and WEAMS Public and WSMS functionalities to Managed Services.

Key business drivers for Digital GI Bill are the number of education claims, as well as the total number of Veterans in receipt of education benefits. Additionally driving Digital GI Bill costs is the work to modernize and increase automation for education benefit processing and concurrently also the drive to significantly improve education beneficiary and claimant customer experience.

Veteran Readiness and Employment (VR&E) program provides case management, training and consultation services for Veterans and tracks services for disabled Veterans and includes the Corporate Waco, Indianapolis, Newark, Roanoke, Seattle System (CWINRS), Federal Case Management Tool (FCMT) and Quality Assurance Web Application (QAWEB) systems. The application provides VRE counselors with a claims processing system, communications platform, and case management toolset. This is an electronic case management system that supports training and counseling services to disabled veterans who are eligible for the benefits of Chapter 31, Chapter 35, Chapter 36, and Chapter 18. This is a VBA system that maintains an interface with FMS to make payments for individuals who are eligible under this program.

CWINRS is the primary claims processing system for the Veteran benefits included in Chapter 31 (VR&E), Chapter 35 (The Survivors and Dependents Educational Assistance Program), Chapter 36 (Educational and Career Counseling) and Chapter 18 (Benefits for Certain Children with Disabilities Born of Vietnam and Certain Korea Service Veterans). CWINRS is strategically designed into separate modules that allow for processing of critical factors: Generated Eligibility Determination (GED) Processing, Case Management, Voucher Processing, Setup and Administrations and Subsistence Allowance Awards Processing. CWINRS provides access for more than 2,500 system users at the VA Central Office (VACO), 57 of VA's Regional Offices (VARO) including National Capital Region Benefits Office (NCRBO) and their out-based locations. The 2024 budget request will provide operations, maintenance, and enhancement support for CWINRS system, necessary for Veteran Readiness and Employment benefits processing and case management worldwide. CWINRS is considered a legacy system as it is not web-based or cloud-based, but there is no immediate retirement plan for CWINRS and therefore updates are required for compliance with VA mandates, Technology Reference Model (TRM) changes and best practices, as well as expected maintenance and support such as trouble ticketing. Additionally, funding enables enhancements that are needed for CWINRS to communicate with the new Readiness and Employment System (RES) Managed Service which will eventually replace CWINRS' Ch.31 functionality.

FCMT system is a web-based application supporting multiple VA programs, initially built for the Federal Recovery Coordination Program (FRCP). The Service Member information is transferred from Veterans Affairs/Department of Defense Identity Repository (VADIR) - DoD's personnel record system - to FCMT during the client registration process. FCMT provides non-clinical case management tracking including goal documentation, progress monitoring, client tracking, performance measurement, and staff workload monitoring for Veterans and Service Members. The 2024 budget request will support system operation and maintenance, ATO updates, software updates, security scans and 508 compliances.

QAWEB is VBA’s intranet application which captures the results and analysis of both National and Local VR&E case reviews for quality assurance in support of service-disabled Veterans, eligible service members and their dependents. Quality Assurance (QA) reviews identify areas at the local and national level, allowing intervention and training which may assist with improving benefits and services. This application facilitates detailed analysis of case review results and tracks accuracy scores at each level to assist with identifying potential areas of improvement.

Key business drivers for Veteran Readiness and Employment are the number of veteran readiness and employment claimants and program participants. Additionally, these costs are being driven over the next few years by VBA’s modernization of key Veteran Readiness and Employment systems, with the end goal of improving program outcomes for participants.

VBA Finance - \$11.5 million (Operations and Maintenance)

VBA Finance enables VBA’s mission critical payment and financial accounting system, Enterprise Management of Payments, Workload, and Reporting (eMPWR-VA). As the primary system for disbursement of VA benefits & pension, sustainment services are required to ensure mission continuity and compliance with legislative mandates and VA policies.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Benefits Payment Modernization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 17,659	\$ -	\$ 11,460	\$ (6,199)
Enterprise Management of Payments, Workload, and Reporting (eMPWR-VA)	\$ -	\$ 2,694	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VBA Finance	\$ -	\$ 2,694	\$ -	\$ -	\$ -	\$ 17,659	\$ -	\$ 11,460	\$ (6,199)

Benefits Payment Modernization. eMPWR-VA is required to maintain the operational readiness of VBA's mission-critical payment and financial accounting system. This is the primary system for paying out benefits, compensation, and military retirements. eMPWR-VA is required to continuously comply with legislative mandates, regulatory updates, or VA policies to ensure the system processes payments properly and meets all future expectations. eMPWR-VA system will require sustainment to ensure the system continues to meet the benefits mentioned and is updated as needed based on changes to policy or procedures that includes operations and maintenance services, related testing services, help desk support and software license maintenance.

Benefits Enterprise Support – \$8.0 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Benefits System Support Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,984	\$ 7,984
Service Line Agreement (SLA) - Benefits	\$ -	\$ 12,094	\$ -	\$ -	\$ -	\$ 70,789	\$ -	\$ -	\$ (70,789)
VBA & NCA IT Support Contracts	\$ -	\$ 6,419	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Benefits Enterprise Support	\$ -	\$ 18,513	\$ -	\$ -	\$ -	\$ 70,789	\$ -	\$ 7,984	\$ (62,805)

Benefits System Support Services sub-project funding provides support for integration, collaboration, and configuration focused on delivering high-performing, business-sponsored systems that are optimized for the end user and therefore experience fewer defects. Investment in this project ensures that all VBA IT service and product providers operate effectively and efficiently to deliver faster end-user products and features. Solutions at the Benefits Portfolio level enable more efficient and effective strategy development for achieving Benefits mission delivery. This strategy development is mission-critical because increasingly it supports integration amongst the various key systems in the benefits portfolio. This system integration has been and continues to increase annually due to: 1) the reuse of shared services; 2) the increased focus on automation and highly complex systems as VBA focuses on ever-increasing user efficiency, as well as legislative dependencies between different benefits programs which requires additional integrations to prevent employee rekeying of data.

Appeals - \$7.3 million (Operations and Maintenance)

The Appeals project efforts are radically improving and streamlining the multi-step appeals process. As of May 2022, VA had an inventory of almost 200 thousand appeals. Roughly 10% of those cases involve high risk Veterans due to age, health and/or financial concerns. While this legacy inventory is trending downward, the Appeals Modernization Act (AMA) inventory handled by Caseflow continues to grow. This Board of Veterans' Appeals initiative resulted in the creation of Caseflow, which will replace Veterans Appeals Control and Locator System (VACOLS) by facilitating the tracking and movement of appeals throughout the appeals process with greater efficiency and effectiveness. The new technology will be both secure and ensure end-to-end accountability of appeals to better serve Veterans and their families.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Appeals Processing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,397	\$ -	\$ 7,322	\$ (6,075)
Appeals Modernization - Board of Veterans' Appeals (BVA)	\$ 3,476	\$ 15,015	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Appeals Modernization - Board of Veterans' Appeals (BVA) - 8002	\$ -	\$ 1,616	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Appeals	\$ 3,476	\$ 16,630	\$ -	\$ -	\$ -	\$ 13,397	\$ -	\$ 7,322	\$ (6,075)

The goal of the Appeals project is to deliver timely, accessible, high-quality benefits, care, and services to meet the unique needs of Veterans and all eligible beneficiaries. This goal will be advanced through operations and maintenance support of the Appeals Products and by minimizing the dependency on legacy systems. The Appeals Products will support and maintain decision output by the Board and maintain system availability to continue to meet and exceed existing productivity levels of VA Board members. Improving the appeals process through the enhancement of Caseflow will minimize the dependency on legacy systems and eliminate using two systems to process appeals. Automation of the new process will also improve system availability and decrease wait times for appeals to include: 1) Integrating Caseflow with NCA systems; 2) Automatically processing intake of Notice of Disagreements; 3) Identifying and automating appeals-processing tasks subject to human error or inaccuracy; 4) Discontinuing use of the SSN as the person identifier and integrate with Master Person Index; 5) Customizing the third-party integration of partnering products/applications for Appeals Resource Management System (ARMS).

Benefits Experience - \$ 2.4 million (Operations and Maintenance)

The Benefits Experience project supports the integration and interfaces between disparate sources which enable improved claims processing and assists with case management of service members enrolled in the Integrated Disability Evaluation System. It also assists with the evaluation for possible medical discharge and transition to the VA for care and/or benefits.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Veterans Tracking Application (VTA)	\$ -	\$ 2,329	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,369	\$ 2,369
Contact Centers - Benefits	\$ -	\$ 2,032	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Benefits Experience	\$ -	\$ 4,361	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,369	\$ 2,369

Service members that are medically discharged from DoD need smooth transition to VA services and benefits. The Veterans Tracking Application (VTA) case management system ensures that the transition takes place efficiently and seamlessly so there is no gap in the services and benefits for those eligible Service members and their family members. Sustainment of VTA will ensure timely system maintenance that allow medically separated Servicemembers to receive all benefits they have earned.

Insurance - \$0.5 million (Operations and Maintenance)

The Insurance Service administers life insurance programs that provides financial security and peace of mind for Service members, Veterans, and their families. Electronic Insurance (EIN) is a suite of web applications/services to support internal (Insurance) as well as external (Veterans) customers. Veterans and their beneficiaries can apply for benefits (e.g., disability, life, mortgage insurance, etc.) online 24/7 from the comfort of their home. They can also self-serve their

existing insurance policies, update their contact information, beneficiary and perform other communications with Insurance. This allows quicker access to benefits and frees up VA employees. Life Insurance Policy Administration Solution (LIPAS) supports the OIT Priority Decommissioning Legacy Systems by decommissioning and replacing Insurance's aging mainframe and client-server applications and modernizing Insurance's business processes. The LIPAS solution will address material weaknesses in Insurance's existing legacy mainframe system that endangers continued operation of the Insurance Line of Business. LIPAS also supports the OIT Priority Migrating to the Cloud by hosting the COTS solution in the VAEC.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Life Insurance Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 498	\$ -	\$ 515	\$ 17
Electronic Insurance (EIN)	\$ -	\$ 39	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ 39	\$ -	\$ -	\$ -	\$ 498	\$ -	\$ 515	\$ 17

Life Insurance Benefits. The goals of LIPAS are to replace Insurance's aging mainframe and client server applications, to improve Insurance's business processes, and to integrate Veterans' insurance records with the VBMS eFolder and VBA Corporate database to provide Veterans with the world-class service. LIPAS will provide a sustainable solution to support the continued efficient operation of the Insurance Service. LIPAS will provide the ability to perform routine, preventive, predictive, scheduled, and unscheduled actions aimed at preventing system/production failure and correcting software defects with the goal of increasing efficiency and reliability on a continuous basis. Vital sustainment support allows LIPAS to maintain insurance records that will allow insurance employees to manage insurance policyholder records, process insurance claims, process insurance payments, and generate letters to policyholders and beneficiaries.

Electronic Insurance (EIN) allows Veterans to apply for insurance and update their data electronically/online within VA secured infrastructure. This protects the data and privacy of Veterans and their beneficiaries without the need to visit VA facilities or call centers. EIN supports over 500 thousand Veterans and their beneficiaries who can apply for benefits (e.g., disability, life, mortgage insurance, etc.) online or from the comfort of their home.

2024 Memorials Portfolio

The Memorials Portfolio provides support for the modernization of applications and services for National Cemeteries cared for by the NCA nationwide. In 2024, the Memorial Affairs Portfolio funding will be used to support the Agency’s priority of replacing the Burial Operations Support System (BOSS) with the MBMS.

This section does not include the PACT Act funding request. See the 2024 PACT Act Request section for additional details supporting this request.

The 2024 Memorial Affairs Portfolio Budget Request consists of the following Projects details:

Projects ((\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Memorial Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 21,156	\$ 21,156
Memorial Enterprise Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,207	\$ 6,207
Memorial Operation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 575	\$ 575
Memorials Automation	\$ 9,435	\$ 18,061	\$ -	\$ -	\$ -	\$ 31,218	\$ -	\$ -	\$ (31,218)
IT Support Contracts	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,133	\$ -	\$ -	\$ (9,133)
Memorials Legacy	\$ -	\$ 4,000	\$ -	\$ -	\$ -	\$ 3,649	\$ -	\$ -	\$ (3,649)
Total Memorials Portfolio	\$ 9,435	\$ 22,061	\$ -	\$ -	\$ -	\$ 44,000	\$ -	\$ 27,938	\$ (16,062)

Notes:

1. The 2022 Actuals and 2023 Enacted columns reflects projects reported prior to the budget restructure and will be executed as is
2. The 2024 Request column reflects projects in the new IT budget structure. Please refer to the Appendix Q Budget Restructure Matrix for the alignment of the old budget structure to the new 2024 IT budget structure

The Project detail tables below display 2022 Actuals and 2023 Enacted sub-projects aligned to the Projects in the new 2024 budget structure for comparison purposes.

Memorial Support – \$21.2 million (Operations and Maintenance)

The Memorial Support Project delivers the full decommissioning of the Burial Operations Support System - Enterprise (BOSS-E), the system which includes multiple sub-systems and components along with the implementation of BOSS-E’s successor, the MBMS. BOSS-E is a 25-year-old legacy system that is unable to be compliant with VA technical, security, and accessibility directives. It is not fully integrated with other benefits systems, difficult to connect to VA enterprise services, and requires users to follow manual processes. The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Field Programs	\$ -	\$ 4,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,223	
Veterans Memorialization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,108	\$ -	\$ 7,031	\$ 923
Data Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,549	\$ -	\$ 2,902	\$ 353
Memorial Benefits Management System (MBMS)	\$ 9,435	\$ 11,334	\$ -	\$ -	\$ -	\$ 25,685	\$ -	\$ -	\$ (25,685)
Veterans Legacy Memorial	\$ -	\$ 6,727	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Memorial Support	\$ 9,435	\$ 22,061	\$ -	\$ -	\$ -	\$ 34,342	\$ -	\$ 21,156	\$ (24,409)

Field Programs is comprised of the products responsible for daily NCA benefit operations as well as the product intended to provide a modern unified platform for all NCA benefit capabilities. The BOSS-E system provides maintenance and support to keep NCA applications functional. This functionality includes providing nationwide burial tracking and maintenance of complete historical burial records at the over 155 national cemeteries, scheduling over 160 thousand yearly burials, providing over 350 thousand applications for government furnished monuments (i.e., headstones and markers) for graves of Veterans and Veterans beneficiaries buried in national, state Veterans, Arlington National Cemetery, Department of Army, Department of Interior, tribal, and private cemeteries. Additionally, BOSS-E enables the determination of eligibility for pre-need and time of need benefits, provides presidential memorial certificates (approx. 550 thousand annual requests), and publishes burial schedules and gravesite locator information. The system generates gravesite assessments and tracks cemetery workload and administrative data. Sustainment of BOSS-E will continue until the ultimate decommissioning and will assist the National Gravesite Locator and National Cemetery Kiosks migration to updated platforms.

Veterans Memorialization supports the Veterans Legacy Memorial (VLM), an online memorialization platform to maintain Veterans’ legacies and enables the general populace to share in NCA’s mission to “honor all Veterans in perpetuity”. Via the VLM portal, families, colleagues, friends, other VA stakeholders, and the public may search and contribute information and imagery via the VLM digital memorial space which includes a profile page for each of the approximately 4.2M Veterans enabling a significantly elevated outreach, visibility, and digital presence. The platform is designed to honor the service and sacrifice of the nation’s Veterans by paying their respects to Veterans interred/inurned at VA national cemeteries state, and tribal cemeteries. VLM’s online portal includes digital pictures of headstones and markers as well as burial records which family members, survivors, and friends may view. VLM has incorporated architecture and functionality specializing in Cloud infrastructure, principles of user-experience (UX), and human-centered design. The 2024 funding will add remaining federal cemeteries into VLM, adjust VLM data rules to normalize incoming BOSS data to increase accuracy and reduce duplicates and errors, and will launch a Mobile Site (versus an application) for “mobile device responsive”. VLM will research and determine requirements to add private cemeteries to the VLM website.

Data Management supports Business Intelligence National Cemetery Administration (BINCA) by leveraging Tableau server and software, which provides data analysis capability via a cloud-based

business intelligence and reporting platform to transform data from multiple sources into actionable reports, and senior executive and senior leadership management dashboards to support and facilitate the NCA mission and business decisions impacting VA national cemetery operations. Through near-real time, statistical dashboards, data analysis, and reporting, VA may evaluate and aggregate multiple data points to provide real-time data analysis capabilities via cloud-based dashboards to transform data from multiple sources into actionable views accessible to senior executive leadership, which are instrumental in making relevant, improved, and timely decisions impacting the care, services, and memorial benefits of Veterans. BINCA identifies data impacting projections of space and availability at NCA locations and improves the overall customer experience to stakeholders in need of NCA metrics. The 2024 funding will improve customer service, business transformation, and improve overall timeliness. Continued maintenance and technical support enable the ability to analyze secured data through visualizations and dashboards using computing power and data analytics that allow for decision making and highly valuable reports used by NCA.

Memorial Enterprise Support - \$6.2 million (Operations and Maintenance)

Memorial Enterprise Project enables the enterprise-wide curation of key Veteran-centric data sets that ensure the most accurate picture of the Veteran is available to key IT systems powering the moments that matter in the Veteran’s experience journey with the VA.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (Ss in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Service Level Agreement (SLA) - Memorial Affairs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,133	\$ -	\$ 6,207	\$ (2,926)
Memorial Enterprise Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,133	\$ -	\$ 6,207	\$ (2,926)

Service Level Agreement (SLA) - Memorial Affairs is the operations and maintenance funding for applications aligned to the Major Customer Codes (MCC) NCA/Memorial Affairs Portfolio which are germane and unique to NCA. Specifically, this requirement funds the ten applications hosted by the Infrastructure Operations – Franchise Fund (IO-FF) Enterprise Center within the OIT Consolidated Agreement between IO-FF and OIT. SLA – Memorial Affairs includes application hosting services, application management, information assurance, data storage/back-up, and webhosting to deliver accessible, high-quality benefits, care, and services to meet the unique needs of Veterans, beneficiaries, and other VA partners and customers.

Memorial Operation - \$0.6 million (Operations and Maintenance)

NCA Geographic Information System (GIS) is comprised of enterprise services, architecture, infrastructure, and technical execution to support the global positioning system (GPS) collection of cemetery activities which includes onboarding national cemeteries onto the GIS Burial and Marker Accuracy Review Tool (GBMART). This is an application to validate and verify burial activity, GPS locations, and photographs for all interments and markers. This allows continuous Geographic Information System Business Intelligence Service Line (GeoBISL) enterprise services

and infrastructure via the following: 1) support for GPS collection of cemetery activities; 2) development of GIS-based products to view, report, and analyze stored geospatial and photographic data; and 3) ongoing support of GPS grave marker and internment collection at VA’s national cemeteries.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Enterprise Administration Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 525	\$ -	\$ 575	\$ 50
Memorial Operation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 525	\$ -	\$ 575	\$ 50

The Enterprise Administration Management sub-project will ensure that the VA GeoBISL creates, supports, and maintains the GIS program and cemetery viewer system and provides background IT support to operate and maintain NCA GIS programs. These functions are required to meet NCA’s Long Range Strategy 4.1.1 Modernize NCA technology and provide tools that improve business processes, analysis, and decision making. OIT requested funding will support the automation of eligibility determination and additional automation of planned self-service capabilities for pre-need as well as time of need benefit delivery to offset the anticipated increase in utilization of these benefits.

2024 Corporate Portfolio

The Corporate Portfolio consists of the back-office operations that are major contributors to running the business lines of the Department and support for the Office of Management, Office of Acquisition, Logistics and Construction, General Counsel, Human Resources, etc. In 2024, the Corporate Portfolio funding will be used to support the replacement of FMS with iFAMS and maintaining existing major corporate systems.

This section does not include the PACT Act funding request. See the 2024 PACT Act Request section for additional details supporting this request.

The 2024 Corporate Portfolio Budget Request consists of the following Projects details:

Projects ((\$s in thousands))	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Financial Management Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,000	\$ 146,855	\$ 149,855
Corporate Enterprise Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 75,564	\$ 75,564
TAC Fees	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 65,468	\$ -	\$ 60,419	\$ (5,049)
Human Resources ^{1/}	\$ 489	\$ 32,763	\$ -	\$ 36,368	\$ 2,143	\$ 62,293	\$ -	\$ 38,511	\$ (25,925)
Property and Facility Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 38,078	\$ 38,078
Software Product Management Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27,744	\$ 27,744
Privacy & Records Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27,641	\$ 27,641
CRR Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 21,235	\$ 21,235
Budget Formulation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18,033	\$ 18,033
General Counsel	\$ 2,147	\$ 6,935	\$ -	\$ -	\$ -	\$ 18,517	\$ -	\$ 14,111	\$ (4,406)
Human Capital Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,485	\$ 12,485
Product Engineering and Development Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,304	\$ 7,304
OIS Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,985	\$ 5,985
OIT Front Office Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,316	\$ 4,316
Budget Execution	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,930	\$ 2,930
CTO Support	\$ -	\$ 2,418	\$ -	\$ -	\$ -	\$ 18,050	\$ -	\$ 2,000	\$ (16,050)
Management Information Systems	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,246	\$ 1,246
OIT Administration Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,177	\$ 1,177
ITBF Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000
Acquisition and Property Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 731	\$ 731
IT Support Contracts	\$ -	\$ 494,552	\$ -	\$ -	\$ -	\$ 145,846	\$ -	\$ -	\$ (145,846)
IT Support Contracts - American Rescue Plan 8002	\$ -	\$ 32,579	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Financial and Acquisition Management Modernization ^{1/}	\$ 802	\$ 20,893	\$ -	\$ -	\$ -	\$ 122,886	\$ -	\$ -	\$ (122,886)
Other Corporate IT Systems	\$ -	\$ 128,730	\$ -	\$ -	\$ -	\$ 24,167	\$ -	\$ -	\$ (24,167)
Construction and Facilities Mgmt	\$ -	\$ 507	\$ -	\$ -	\$ -	\$ 465	\$ -	\$ -	\$ (465)
Total Corporate Portfolio	\$ 3,438	\$ 719,375	\$ -	\$ 36,368	\$ 2,143	\$ 457,692	\$ 3,000	\$ 507,365	\$ 50,530

1/ In 2022, Congressional Projects were funded either partially or completely by Recurring Expenses Transformational Fund

Notes:

1. The 2022 Actuals and 2023 Enacted columns reflects projects reported prior to the budget restructure and will be executed as is
2. The 2024 Request column reflects projects in the new IT budget structure. Please refer to the Appendix Q Budget Restructure Matrix for the alignment of the old budget structure to the new 2024 IT budget structure
3. The 2024 request is above the 2023 Enacted level in the amount of \$50.530M as a result of the IT budget restructure. Projects were realigned to the Corporate Portfolio from ITIN (formerly Enterprise) portfolio and Administrative Support Services sub-account
4. In 2024, (a) the Privacy and Record Management project, sub-projects from the Data Integration and Management and IT Support Contracts projects were realigned to the Corporate portfolio from the ITIN (formerly Enterprise) portfolio; (b) the Administrative Support Services requests were realigned to the new AMO Support and OIT Front Office Support in the Corporate portfolio

The Project detail tables below display 2022 Actuals and 2023 Enacted sub-projects aligned to the Projects in the new 2024 budget structure for comparison purposes.

Financial Management Services - \$149.9 million (\$3.0 million - Development, \$146.9 million - Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (Ss in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Debt Management	\$ -	\$ 77	\$ -	\$ -	\$ -	\$ 161	\$ 3,000	\$ -	\$ 2,839
Financial Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 129,570	\$ -	\$ 146,855	\$ 17,285
Real Property Tools	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,287	\$ -	\$ -	\$ (1,688)
Financial Reporting	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 671	\$ -	\$ -	\$ (671)
Financial Management Business Transformation (FMBT)	\$ 802	\$ 104,487	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Integrated Financial Acquisition Management System (iFAMS)	\$ -	\$ 19,637	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Financial Management System (FMS)	\$ -	\$ 6,122	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Strategic Capital Investment Planning (SCP)	\$ -	\$ 4,446	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Capital Asset Management System Business Intelligence (CAMS-BI)	\$ -	\$ 1,141	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Centralized Administrative Accounting Transaction System (CAATS)	\$ -	\$ 546	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Financial Management Services	\$ 802	\$ 136,456	\$ -	\$ -	\$ -	\$ 134,689	\$ 3,000	\$ 146,855	\$ 17,765

Debt Management supports PayVA, formerly known as VA Debt Management Center (DMC), a site that collects basic debt information from users, redirects them to pay.gov for online payments and collects responses from pay.gov. The production site with a secure certificate has been created already. It is a custom-made application for DMC to verify debts are active at DMC before Veteran makes a payment to avoid pay.va.gov over collecting and creating more refunds than are necessary. Funding provided will provide PayVA sustainment-steady-state for over 1,500 users ensuring VA is not over collecting from veterans.

Financial Management supports the FMBT program, providing VA with a modern financial and acquisition management solution that transforms and standardizes business processes and capabilities, enabling VA to meet its goals and objectives in compliance with financial management legislation and directives. The FMBT program is delivering iFAMS across the VA enterprise in a phased implementation approach, with each discrete system delivery known as a “wave.” Deployment of iFAMS is taking place over 21 implementation “waves” across the NCA, VBA, VHA, and Staff Offices. Changes reflect an expedited timeline to support congressional mandates calling for the decommissioning of legacy systems. Four waves have been completed as of May 2022, including NCA financials, a two-stage go-live for the VBA General Operating Expenses (GOE) fund, and NCA enterprise acquisition. Each wave go-live provides end users with full capabilities across eight business processes and transitions daily financial management work from the legacy FMS to iFAMS while also supporting business intelligence (BI) requirements. In 2023, wave implementations with VBA Loan Guaranty and Insurance, OIT, OIG, CFM, VHA Central Office, and VBA enterprise acquisition drive up the scope and complexity of execution, which has a direct correlation with costs. In 2024, five concurrent waves are scheduled with one go live. The final system deployment is scheduled for 2028, at which time the final legacy system decommissioning process will commence.

iFAMS is a modern financial and acquisition management solution that transforms and standardizes business processes and capabilities, enabling VA to meet its goals and objectives in compliance with financial management legislation and directives. iFAMS provides end users with full capabilities across eight business processes; normalizes best practices by standardizing, integrating, and streamlining financial processes, including budgeting, procurement, accounting, and financial reporting; facilitates effective management by providing stronger analytics and projections for planning purposes; advances customer service and support of goods, supplies, and services for the Veteran and VA at large; and improves the speed and reliability of communicating financial information both within and without VA through timely, robust, and accurate financial reporting.

Corporate Enterprise Support - \$75.6 million (Operations and Maintenance)

The Corporate Enterprise Support Project is comprised of recurring payments for existing contracts for services and support for implemented IT systems in support of the Enterprise, VA Administrations and Staff Offices. IT Support Contracts is considered a ‘must pay’ requirement to support customer service level agreements.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Service Line Agreement (SLA) - Corporate	\$ -	\$ 358,609	\$ -	\$ -	\$ -	\$ 57,143	\$ -	\$ 75,564	\$ 18,421
SLA - Corporate - American Rescue Plan 8002	\$ -	\$ 32,579	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Corporate System Support Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 545	\$ -	\$ -	\$ (545)
Corp IT Operations Mgmt Support	\$ -	\$ 1,998	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Quality Assurance Release Readiness Support	\$ -	\$ 544	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Corporate Enterprise Support	\$ -	\$ 393,730	\$ -	\$ -	\$ -	\$ 57,688	\$ -	\$ 75,564	\$ 17,876

The Service Line Agreement (SLA) – Corporate sub-project is comprised of steady-state charges for Corporate Portfolio. This is an OIT Consolidated Agreement that is considered Must-Pay Sustainment funding for continued operations. Items include IT Provisioning costs, storage, licenses, Hardware and Software maintenance.

TAC Fees - \$60.4 million (Operations and Maintenance)

This agreement is authorized pursuant to 38 U.S.C. § 8121, which allows OIT to procure normal and customary acquisition-related services including, but not limited to, pre-solicitation; solicitation; award; terminations, routine post-award procurement activities; contract administration and associated support services provided by Office of Procurement, Acquisition and Logistics (OPAL) personnel. OIT requires acquisition support to develop and maintain OIT operations. The Technology Acquisitions Center (TAC) Fees will provide - through the assignment of Federal and acquisition staff - normal, routine, and customary acquisition-related services to obtain contractor services and/or supplies as required by the OIT, hereafter referred as "Customer". OPAL is the designated acquisition office to manage and administer IT Support

contracts that have been acquired to support VA Programs that are developed to better serve Veterans and their families. OPAL TAC Fees will also provide other non-routine services that are related to the acquisition process and contract administration. These services may include, but are not limited to, emergency/urgent acquisition support, consultation services and non-routine contract administration functions such as protests, administering contractor claims, and requests for equitable adjustments.

Human Resources – \$38.5 million (Operations and Maintenance)

Continued investment and sustainment of Human Capital systems for improved management and optimization of HR Enterprise solutions will result in the following: enhanced employee experience, reuse of data across Enterprise systems, less manual data entry, fewer data errors, more accurate personnel records and a decrease in HR Specialist transactional workload through workflow process automation. Investment in Human Capital Management (HCM) continues the collaboration with VA Administrations and Staff Offices to implement automated and modernized HR-IT solutions supporting VA front-line HR specialists and VA employees. These automated and modernized HR solutions improve HR data quality, decrease the use of redundant, obsolete technologies, automate HR processes, and decrease the number of employee data and pay errors. The data from these solutions are also used by VA's current payroll provider supporting biweekly payroll processing and they interface with over 60 systems providing reliable data across VA HR systems to include identity and access management, on-boarding, hiring, credentialing medical personnel, and financial management, etc.

The Human Resources project supports the VA's Office of Human Resources and Administration (HR&A) mission of leading human resource management strategies, policies, and practices that cultivate an engaged, proficient, and diverse workforce to transform and continually improve services to Veterans and their families. The individual efforts directly align with the VA's "Enter Data Once" initiative, less manual data entries resulting in fewer data errors and more accurate personnel records, decreased HR Specialist transactional workloads, improved retention of VA's workforce, and a reduction to the Time to Hire model. These modernization efforts will improve services to veterans through increased timeliness and efficiency of the overall customer service experience for Veterans. While the benefits to the Veteran are indirect, it does have a direct impact on the employees which provide the direct high-level support to the veterans. Investments in HCM will improve recruitment and retention of the entire VA workforce to include health professionals in critical medical positions providing the highest quality care to Veterans.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Human Capital Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 38,660	\$ -	\$ 17,300	\$ (21,360)
Workforce Analytics and Employee Records	\$ -	\$ -	\$ -	\$ -	\$ 2,143	\$ 13,125	\$ -	\$ 9,708	\$ (5,560)
Employee Performance Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,853	\$ -	\$ 4,659	\$ (194)
New Hire In-Processing and Onboarding	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 500	\$ -	\$ 3,000	\$ 2,500
Security and Preparedness	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,024	\$ -	\$ 2,627	\$ (1,397)
Compensation and Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 412	\$ -	\$ 744	\$ 332
Work-Life Wellness/Employee Assistance Programming	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 461	\$ -	\$ 473	\$ 12
Position Classification and Position Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 758	\$ -	\$ -	\$ (758)
Human Resources Information System (HR Smart) (HRIS)	\$ -	\$ 2,822	\$ -	\$ 36,368	\$ -	\$ -	\$ -	\$ -	\$ -
VA Centralized Adjudication Background Investigation System (VA-CABS)	\$ -	\$ 9,898	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Human Resources - Payroll Application Services (HR-PAS)	\$ -	\$ 9,926	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Enterprise Performance Management System (ePerformance)	\$ -	\$ 4,482	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Data Warehouse & Business Intelligence	\$ -	\$ 3,992	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
eClassification360 (eClass360)	\$ -	\$ 459	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Child Care Records Management System	\$ -	\$ 294	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Police Program Inspection Compliance (PPIC)	\$ -	\$ 227	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Workers Compensation - Occupational Safety Health Management Information System (WC-OSH)	\$ -	\$ 104	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Human Resources	\$ -	\$ 32,203	\$ -	\$ 36,368	\$ 2,143	\$ 62,793	\$ -	\$ 38,511	\$ (26,425)

Human Capital Management. Investment into a Human Capital Management Data Warehouse (HCM-DW) solution will equip VA with one central location to retrieve all human capital OPM BRM-related data. The DW serves as the access point and integrates all HR systems, which either feed or receive data from the DW. A business intelligence tool accompanies the DW to empower HR executives, officers, managers, employees and other stakeholders with the ability to run reports consisting of data from disparate HR systems to aid in strategic human capital decision making. Additionally, security provisions control the flow and access of data to ensure integrity and safekeeping of personal information. HCM-DW will improve interoperability of those human relations products that process, store, consume, and transmit this data in support of VA business processes across the enterprise. HCM-DW enables data sharing, data analytics, data mining, business intelligence, reporting, and long-term storage. In 2024, the major cost drivers for the Data Warehouse will include implementing an Intake Process to improve capturing the requirements of customers of Human Relations and Payroll data.

Human Resources Information System (HR Smart) (HRIS) provides shared services to VA's Human Resources Administration as the system of authority for all VA employee personnel transactions and employee information. HR Smart is VA's core HR transactional processing system that lays the foundation for expansion of enterprise capabilities such as enhanced position management, recruitment, and onboarding. HR Smart is the VA's system of record and authoritative source for all HR employee data. HR Smart replaced the Legacy system Personnel and Accounting Integrated Data (PAID). In 2024, the budget request for HR Smart will include sustainment for continued operation of the VA's HRIS legacy solution and at the same time build an upgraded solution that is scheduled to go live in 2025 and eventually replace the legacy system.

Workforce Analytics and Employee Records serves as the middleware for combined human resource and payroll data. Human Resources - Payroll Application Services (HR-PAS) retains over

30 years of historical HR and payroll data. HR-PAS receives data from VA HR and payroll source systems and provides data to internal and select external systems.

Enterprise Performance Management System (ePerformance) is a web-based application designed to compartmentalize the five elements of performance management: planning, performance monitoring, standards development, evaluation, and reward. It will standardize the performance management lifecycle and improve organizational performance by eliminating the current paper-based workflow to one that is seamless and fully automated.

New Hire In-Processing and Onboarding effort provides the delivery of an automated On-/Off-Boarding workflow system that will streamline interfacing systems and create consistencies for documentation of records to improve efficiency, expeditiousness and accountability of the process supporting both new and existing employees. This solution will resolve the current lack of oversight of critical processes, lack of integration with supporting systems (e.g., single-input USA Staffing Hire documentation flow), and non-prioritization of non-essential to mandatory Off-boarding steps. The increased automation and improvements in the workflow processes will result in key metrics such as improvements in time to hire.

Security and Preparedness supports the VA Centralized Adjudication Background Investigation System (VA-CABS) 2.0, which is the system of record for background investigations and adjudications of all VA employees, affiliates, and contractors. VA-CABS 2.0 currently maintains current and historical data for over 700,000 employees and contractor subject profile records. VA-CAB 2.0 provides the continued configuration, hosting, and sustainment support needed for continued compliance for Federal Information Security Modernization Act (FISMA) requirements and integration efforts with other VA and Federal agencies for enhancing interoperability. The investment will reduce data quality issues and remediate material weaknesses.

Compensation and Benefits supports the VA Transit Benefits Program Application Portal (VA-TBP) for the National Capital Region (NCR). This portal provides the NCR System with an electronic replacement of VA form 0722 for those applicants applying for this program. VA-TBP conducts Transit Subsidy Account Set-Up and Maintenance to enable applicants to prepare and submit applications for new requests, processing an applicant's request for changes to existing accounts, and establishing and enforcing threshold limits. Conducting Transit Subsidy Media Issuance and Support includes procuring and distributing transit subsidy media, providing transit subsidy use support and guidance; and maintaining and providing transit subsidy use policy, procedures, and training.

Property and Facility Management Project - \$38.1 million (Operations and Maintenance)

The VA OIT provides all the IT tools and supports VA needs to serve Veterans. VA OIT occupies 1M rentable square feet (RSF) within this space as IT professionals support the whole VA mission. This support includes Infrastructure support to National and Regional Data centers as well as house software developers and IT operations support personnel. This Project retains current occupancy agreements with GSA for lease space and security agreements with DHS and Federal Protective Service. Major cost drivers for Space and Facilities Management are based on rate increases from GSA, DHS, and vendors. Occupancy Agreements with GSA are established for the

occupied space, and those agreements have per square foot rate increases that have been agreed upon by both parties. In addition, security, utilities, maintenance, and support to facilities are also a factor in cost increases.

Software Product Management Support - \$27.7 million (Operations and Maintenance)

Software Product Management (SPM) Support provides services that are instrumental to achieving VA's business transformation and digital modernization goals, which will continue to enhance VA's posture as a world-class customer service organization that is technology driven and Veteran focused. The sub-projects allow SPM to increase the VA OIT security posture, mitigate software defects, coordinate and integrate enterprise-wide initiatives, meet Section 508 requirements, and undergo configuration management testing, development, and delivery for improved system and data integrity.

SPM Operations Support will continue providing instrumental strategy, integration, development, implementation, and oversight of over 800 IT products that directly support Veterans, family members, and VA staff. SPM will also continue to renovate/automate outdated processes while optimizing cybersecurity in product development and delivery.

VA has a legal mandate for meeting the Section 508 Requirements for all electronic and information technology procured, used, maintained or developed by the VA. The 508 Program Office provides accessibility guidance and support for all projects under the Secretary's Initiatives, including over 450 Hypertext Markup Language (HTML) Web environments; training and support for 11,000 employees with targeted disabilities; and tools to help developers achieve 508 compliance in application development. Section 508 Enablement will support an array of VA applications, including 508 Accessibility Compliance Scanning and Services, New NASA SEWP Buy for Software License Upgrade and Maintenance - Common Look, New NASA SEWP Buy for Software License Upgrade and Maintenance - Dragon Professional, New NASA SEWP Buy for Software License Upgrade and Maintenance of JAWs, and Section 508 Accessibility, Tools and Training Support.

The Software Configuration Management (CM) program will be expanding stewardship, transparency, and accountability capabilities that provide reliable Veteran access to VA systems and improve the Veteran experience when using VA systems. This effort supplements product CM and automation programs for growing CI/CD, modernization and automation demand for enhanced product management and operational reliability.

Enterprise Testing Service Development and Acquisition Support (ETS D&AS) helps to mitigate the risk of software defects (bugs) entering live systems. ETS supported over 2,000 of OIT's projects built over the past five years and over 1,600 of EHRM's projects built in the past three years. Over ETS conducted hundreds of system test events for OIT and EHRM, discovering or facilitating the discovery over 15,000 defects. EHRM schedules over 170 site deployments through 2028. OIT will become responsible for the sustainment of a multitude of OIT/EHRM system interfaces at each site which will require ETS D&AS services to support OIT responsibilities to assure minimal impact and disruption as VA transitions, ingests, and interfaces IT systems with the EHRM commercial systems

Privacy & Records Management - \$27.6 million (Operations and Maintenance)

Refer to Information Security details table in Appendix L for additional details

The purpose of the CRR Cybersecurity Framework is strict adherence and compliance with federal mandated laws, regulations, and policies. Furthermore, to posture OIT with achieving VA's four priorities, there is an emphasis placed on improving customer service and remaining compliant with the following legislatively mandated requirements, FOIA, Federal Records Act (FRA), Release of Names and Addresses (RONA), and Controlled Unclassified Information (CUI), all while transforming VA's business systems. Each of these mandated requirements continue to evolve based on continued Congressional, GAO and OIG oversight. FOIA processing of Veterans Claims folders has been modified based on an OIG recommendation, which immediately generated a significant ongoing negative impact on the FOIA backlog and the need for additional resources and improved processing tools. The backlog is tracked by Congress and is reportable to the Department of Justice annually by the VA Chief FOIA Officer (Assistant Secretary or higher mandate).

Furthermore, CRR will oversee the enterprise-wide CUI program and provide supervision of the VA Agency Records Officer while continuously improving OIT capabilities by focusing on the CIO's five imperatives. Current and proposed systems will accurately process and track FOIA requests, legally release names and addresses, enhance role-based training, and provide Veteran services within the law and as allowed by policy. The compliance requirements are set forth by various statutes and regulations to include the Privacy Act, HIPAA, FISMA, FOIA, Clinger Cohen Act, OMB Circular A-108, OMB Circular A-130, FITARA, and various OMB mandates for records management activity to include electronic recordkeeping capabilities by the close of each calendar year.

Additionally, the office evaluates and delivers enterprise-wide reporting with current compliance and sustainability postures of privacy, FOIA and records management programs. It also ensures that all VA records are managed in the most effective and cost-efficient manner. This ensures that VA's records management practices comply with the Federal Records Act of 1950. This project will enhance and sustain performance efforts of modernization within cybersecurity regarding the following sub projects, CIO Balanced Score Card, CIO Strategic Support Contract Federally Funded Research and Development Center (FFRDC), Quality Continues Improvement Organization (QCIO), and IT Investment Board (Governance) Support.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
OIT Front office - ITPI Support Contract	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,694	\$ 6,694
OIT-Wide Communication Support	\$ -	\$ 6,220	\$ -	\$ -	\$ -	\$ 6,143	\$ -	\$ 4,161	\$ (1,982)
VA Interoperability, Standards Development and Coordination	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,643	\$ -	\$ 2,943	\$ (5,700)
Data Analytics Contract	\$ -	\$ 2,932	\$ -	\$ -	\$ -	\$ 5,050	\$ -	\$ 1,542	\$ (3,508)
CIO Strategic Support Contract_FFRDC	\$ -	\$ 1,795	\$ -	\$ -	\$ -	\$ 3,570	\$ -	\$ 1,233	\$ (2,337)
Grant Thornton Support to Quality, Performance, and Risk (QPR)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,396	\$ -	\$ 1,051	\$ (2,345)
Investment Review Board (IRB) Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,080	\$ -	\$ 928	\$ (2,152)
Cyber Workforce Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 909	\$ 909
National Institute of Standards and Technology (NIST) Audit Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 896	\$ 896
RMD Risk Analyst Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 862	\$ 862
Federal Managers Financial Integrity (FMFIA) - Statement of Assurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,378	\$ -	\$ 736	\$ (1,642)
CIO Balanced Score Card	\$ -	\$ 2,276	\$ -	\$ -	\$ -	\$ 2,228	\$ -	\$ 689	\$ (1,539)
E-FOIA Express	\$ -	\$ 2,141	\$ -	\$ -	\$ -	\$ 1,850	\$ -	\$ 574	\$ (1,276)
Release of Names and Addresses (RONA) (Legal Requirement)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 502	\$ 502
Enterprise IT Support Contracts - Privacy & Records Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 417	\$ 417
Freedom of Information Act (FOIA) Support Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,125	\$ -	\$ 417	\$ (708)
OIT Front Office Enterprise Architecture (EA) Support Contract	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,210	\$ -	\$ 412	\$ (798)
IT Governance Support Contract	\$ -	\$ 2,745	\$ -	\$ -	\$ -	\$ 1,350	\$ -	\$ 410	\$ (940)
Systems Quality Assurance Service (SQAS) - IV&V Support Contract	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,263	\$ -	\$ 391	\$ (872)
Web and Applications Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 313	\$ 313
Paper Reduction Act Support Contract	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 287	\$ 287
Control Unclassified Information	\$ -	\$ 751	\$ -	\$ -	\$ -	\$ 852	\$ -	\$ 259	\$ (593)
Business Office Budget Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 825	\$ -	\$ 249	\$ (576)
OIT Enterprise Roadmap Contract	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 223	\$ 223
OIG FISMA Federal Information System Controls Audit Manual (FISCAM) Audit Support Contract	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 879	\$ -	\$ 186	\$ (693)
Enterprise Risk Management (ERM) - Technology Risk Registry Service Level Agreement SLA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 177	\$ 177
Privacy, Records Assessment Data Analytics and Risk (PRADAR)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 153	\$ 153
DOJ required Public Access Link	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 61	\$ -	\$ 19	\$ (42)
Cloud Credit in support of the Enterprise Risk Registry	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27	\$ -	\$ 8	\$ (19)
Information Security Operations (ISO) - Privacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,894	\$ -	\$ -	\$ (9,894)
Quality Continuous Improvement Organization (QCIO)	\$ -	\$ 4,515	\$ -	\$ -	\$ -	\$ 4,636	\$ -	\$ -	\$ (4,636)
CIO Front Office Cyber Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,000	\$ -	\$ -	\$ (3,000)
IT Strategic Support Services - OIT Front Office	\$ -	\$ 548	\$ -	\$ -	\$ -	\$ 1,720	\$ -	\$ -	\$ (1,720)
Gartner support for Front office and Quality, Performance, and Risk (QPR)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 900	\$ -	\$ -	\$ (900)
Service Level Agreement (SLA) - Enterprise Risk Management - Technology Risk Registry	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 320	\$ -	\$ -	\$ (320)
ERM - Technology Operations & Maintenance Support Contract	\$ -	\$ 268	\$ -	\$ -	\$ -	\$ 275	\$ -	\$ -	\$ (275)
CIO Front Office Site B Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7	\$ -	\$ -	\$ (7)
OIT Front Office EA Support Contract	\$ -	\$ 2,393	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
OIG FISMA/FISCAM Audit Support Contract	\$ -	\$ 1,399	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SQAS - IV&V Support Contract	\$ -	\$ 1,141	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Business Office Acquisition and Budget Support	\$ -	\$ 1,036	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
FOIA Support Services	\$ -	\$ 529	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Grant Thornton Support to QPR	\$ -	\$ 500	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Privacy & Records Management	\$ -	\$ 31,190	\$ -	\$ -	\$ -	\$ 64,682	\$ -	\$ 27,641	\$ (37,041)

OIT Front Office - ITPI Support Contract will provide strategy, communications, continuity of operations planning, and program management support which will enable ITPI to foster collaboration on complex, cross-organizational initiatives, deliver an exceptional customer experience to build trust in the brand, and to maintain OIT's essential business operations. Also, it will establish and enable a resilient culture of collaboration across OIT Pillars through repeatable integration processes, clear communications channels, and increased transparency. OIT's Office of IT Program Integration (ITPI) Service is developing and improving a Continuity and Mission Assurance program will provide expert continuity planning, management and senior executive

leadership is required in accordance with the Homeland Security Act, Presidential Policy Directive (PPD-40), Federal Continuity Directive 1 and 2 and Secretary VA Master Continuity Plan to quickly reach a resilient continuity operation. The OIT/ITPI Business Office is tasked with coordinating, validating, supporting and tracking continuity operations. Improving the Continuity of Operations Program ensures risk reduction to life and safety of key personnel, workforce, communications and facilities; thus, necessitating continuity support beyond that which is currently available in-house. ITPI manages the strategic alignment of all OIT investments.

The expected result in the continuity of operations program effectiveness results in organizational resiliency to include leadership, workforce/staff/facilities and communications in times of an emergency event, sustaining and protection of variety of systems to safeguard Veterans and eligible family members benefits, healthcare and memorial services and the protection of personal identifying information, sensitive corporate information, assets and medical information. CRR reports activities, vulnerabilities, and progress to the VA CIO and OMB. Robust expert acquisition planning and management support for CRR contracts involving these complex systems and products are required to support sound business decisions ensure compliance with laws and regulations, and successfully support VA's mission. ITPI intends to produce a wholistic depiction of all OIT investments and their strategic alignment to the VA. 2024 major cost drivers are increased labor costs for contractor support to effectively collect and compile project data. Subject Matter Expertise Availability: In order to be successful, subject matter experts are required to have experience and knowledge of the task.

OIT-Wide Communication Support sub-project will support world-class delivery of care and benefits to more than 21 million Veterans. Every day, the OIT team supports each of the VA lines of business. OIT's 8,000 employees and 8,000 contractors enable the largest integrated healthcare system in the United States; a benefits processing organization equivalent to a medium-size insurance company; and one of the largest integrated memorial and cemetery organizations in the country. To facilitate this transformation, OIT established a centralized, integrated communications office for the first time since IT centralization in 2006. IT Strategic Communications (ITSC) launched in November 2015 with a charter to develop OIT's communications strategy and implementation plan as well as to manage all tactical operations associated with VA IT's identity, internal and external to VA. ITSC is responsible for engagement with employees, business partners, oversight bodies, and media, and is accountable for the delivery of all products associated with that engagement on a daily, weekly, monthly, quarterly, annual, and even ad hoc basis. 2024 major cost drivers are increased contract support costs as well as new resources needed for communication to employees and community partners. Failure to execute this contract will result in a reduction of adequate resources needed to develop and implement a variety of IT-related communication strategies and services to a multitude of Federal and community organizations, Veterans and their families and friends, and policymakers that support the Veteran community.

VA Interoperability, Standards Development and Coordination is required for Program Management, subject matter expertise, technical support, and Acquisition Support. The work performed supports Veterans' access and Veterans' experience standards and creates a way to measure interoperability improvements across the VA enterprise.

The Data Analytics and Performance Management (DAPM) Directorate provides analytic solutions to internal (OIT) and external (VA), which include reporting, data visualization, prescriptive/predictive modeling, and advanced analytics. The sub-project not only includes leading technologies to collect, process, organize and make data available to processes and users, but also includes analytic technologies and techniques used to transform data into insights and decisions in alignment with the customer-centric conceptualization of analytics and data science envisioned within OIT. This sub-project is also used to identify and appropriately integrate and support the adoption of best practices in data analytics and data science in alignment with a wide range of related data management activities, to include data quality, analytic maturation, platform and architecture, and analytics governance. Further, the sub-project captures and deploys relevant performance management data in a consumable framework supporting decision-making by providing insights and visibility into a range of performance metrics/indicators associated with operational efficiencies and effectiveness, particularly those related to business processes, major IT investment decisions and strategic outcomes. Data Analytics Contract project will allow compliance with White House, Congressional, OMB and Agency Reform Plan requirements for IT performance reporting and modernization. Funding for this sub-project is strongly justified by the customer-centric approach to data analytics envisioned by OIT as well as overarching VA Strategy that highlights the critical role of analytics in improving outcomes and decision-making across tactics/strategy. VA Strategy highlights the importance of data analytics in supporting the goal of transforming business operations and decision-making through system modernization and use of analytics – specifically noting the role that analytics plays in making “smart, implementable, and relevant business decisions,” (p. 32, VA Strategy) and “quantify improved outcomes for Veterans that are efficiently and effectively using taxpayer funds and reduce non-monetary costs” (p. 42). Underscoring VA’s emphasis on analytics, the VA Strategy ties use to multiple Strategies (See Goal 4 – VA Will Transform Business Operations by Modernizing Systems and Focusing Resources More Efficiently to be Competitive and to Provide World-Class Customer Service to Veterans and Its Employees and Business Strategy 4.4 – VA Will Institutionalize Data Supported and Performance Focused Decision Making that Improves the Quality of Outcomes, Business Strategy 4.4.1 – Institutionalize Value Management, Analytics and Data Practices, and Business Strategy 4.4.3 – Institutionalize Consistent Modeling/Predictive Analytics).

First, the cost-driver is directly tied to VA Strategy that specifically includes the use of analytics across multiple goals/objectives. Second, this MYP submission represents an increase from the prior MYP submission driven by an increase in new requirement for the implementation of several critical technologies, including technology for (a) objectives and key results (OKR), (b) risk analytics, (c) next generation data science/operations research. Last, costs associated with this submission are driven by the way the Data Analytics and Performance Reporting organization within OIT envisions employment of analytics – the expansion of functional responsibilities and set of common expectation of analytics involving both federation and functional alignment significantly increase cost estimates for the relevant period. Support for CRR analytic requirements span multiple high visibility, high value Directorate missions including 508 compliance/reporting, FOIA, Audit, and Risk Management.

CIO Strategic Support Contract FFRDC supports OIT in its role as the steward of VA's IT assets and resources and the responsible party for ensuring the efficient and effective operation of VA's IT Management System to meet the mission requirements of the Secretary, Under Secretaries,

Assistant Secretaries, and other key officials. OIT leadership is committed to Veteran-centric digital transformation. Digital transformation is more than just changing processes, it seeks to translate the organizations capabilities into the greatest benefit for the VA mission. To better position VA for digital transformation, OIT enhanced its enterprise-level IT governance and risk management by restructuring the functions of the Office of the Deputy CIO for CRR. FFRDC plays a critical role in the development of CRR's new and expanded mission role which is outward facing - extending across the VA IT enterprise. This business problem requires FFRDC's cross-VA strategic relationships with multiple OIT organizations (e.g., OIS, Strategic Sourcing), OEI and Administrations, necessitate broad strategic and technical skills, independent conflict-free advice, and access to VA proprietary planning and budgets. FFRDC recommendations may influence the strategic direction (e.g., vision, goals, outcomes, planned IT investments) and accelerate strategic implementation in support of the VA IT enterprise. It is therefore imperative that the FFRDC be used as an "honest broker" for strategic advice to ensure freedom from potential commercial interests. The FFRDC brings extensive VA/OIT-wide domain knowledge in critical areas (e.g., VA administrations, OEI (mission act), OTIS, Product Line Management, VA Enterprise Risk Profile, Quadrennial Review, Presidents Management Agenda, PPBE, Strategic Planning Guidance). Together, this FFRDC domain knowledge; forward-looking expertise; access to proven Government solutions and associated personnel; and access to custom research connecting government, academia and industry provide critical assurance for achieving sought after mission improvements.

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Investment Review Board (IRB) Support provides governance support to include: governance action items, governance meeting minutes, governance meeting schedules, governance meeting agendas, governance presentations, governance meeting engagement support (chat monitoring, quorum establishment), governance meeting facilitation, consultation and analysis of governance inputs/outputs, technical documentation and processes for governance bodies, electronic voting, governance communication materials (Governances Month in Review), and governance knowledge articles. The end users include all VA employees/stakeholders who participate in governance. All governance meetings include SES leaders, CIO, and soon VHA SES, CFO, and CXO of the VA (IT Investment Board). The contractor captures all records pertaining to governance so the VA can meet the following Federal Requirements: FITARA legislation of Dec 2014, requiring the CIO to manage department IT, acquisitions, data center consolidation, and IT cost reporting to OMB, OMB Memorandum M-15-14: Management and Oversight of Federal Information Technology, requiring the CIO to implement governance and strategies to manage department IT IAW law and OMB guidance, and GAO findings: Multiple GAO engagements over the last five years underscore the need for a robust, effective IT governance framework and associated processes. The Program & Acquisition Review Council provides Strategic Direction to all OIT portfolios and delegates and approves acquisitions based on their contract award amount.

The Information Security Committee is part of the governance framework that reports to Standards and Architecture Council regarding recommendations for the responsible management processes for Information Security (improving cybersecurity, and operations and maintenance) and offers valid reasoning for the effectiveness of Information Security enterprise wide. By using board governance, OIT is decreasing the time it takes to make decisions and facilitates collaboration among leadership. The board, councils, and committees that make up the structure support the ability to monitor program performance and progress against expectations and outcomes. Finally, they ensure compliance with regulatory requirements.

Cyber Workforce Services supports the Cyber Workforce Management strategy, which translates into three design elements: Policy, Processes, and Training. These provide a foundation to launch an integrated delivery model of programs that strengthen VA's security posture. This sub-project will provide the following:

- Cybersecurity support with analysis of current processes, policies and plans regarding the cyber workforce and their effects on the VA Cyber Security Program and VA's overall security posture. Research and trend analysis shall cover efforts related to establishing an effective cyber workforce plan and strategy, the makeup and shaping of how the Cyber strategy, policies, and the Cyber Workforce Management (CWM) program may impact how the VA meets its cyber security roles and responsibilities.
- Assistance in the training and education of VA Information Security Professionals - including the development of SOPs and Enterprise Training materials - through the development of a list of critical security-related job functions of positions within VA and the development of a list of skills and knowledge deemed necessary to perform each of the job functions at one or more levels.
- Identification of existing training materials and mapping of existing professional Training, assessments, and related developmental programs - including Rotational Programs - to cyber workforce/information security job functions. Determination of which trainings support the qualifications to meet requirements for skills and knowledge necessary to achieve Information Security job functional understanding of risks and overall security posture.
- Support development of, needed revisions to, and staffing of, relevant VA Directives and other policy issuances that support the on-going development and maintenance of Cyber Workforce strategy and management. This will support VA's overall security posture in support of the implementation of Technical and Administrative controls recommended in FISMA.
- Support cyber workforce-related reporting, including FISMA, and responses to inquiries from Congress and other elements by coordinating the integration of Cybersecurity workforce data. This includes activities external to VA in partnership with DoD, Department of Homeland Security (DHS), NIST, the State Department, allies, training vendors and certification providers in support of cybersecurity training, education, awareness, and workforce activities.

The VA Cyber Workforce Management Services sub-project creates the capabilities to expand technology related work role skills development and close the gap for entry-level cyber talent to be competitive in the cyber talent market. It will also be instrumental in creating a cyber workforce to meet the needs of the VA mission in support of Veterans; implementing the fundamental cyber policies in development that will provide the foundational framework needed for VA's Digital Transformation Strategy (Imperative 5. IT Workforce Transformation and Focus Area 6, recruit and retain a World-Class IT Workforce), and the accompanying VA cyber workforce

developmental resources and programs (e.g., NexGen, mentoring, and on-the-job) that create the critical components to achieve Imperative 5 and Focus Area 6 of VA's Digital Transformation Strategy. Thereby, the sub-project will support the strength and maturity of VA's existing and future cyber workforce and consequently VA's overall security posture.

Federal Agencies are facing an Information Security workforce crisis. Cyber-attacks are growing at exponential rates and workers with cybersecurity skills frequently have the choice of numerous employers, with many offering lucrative rewards to choose employment outside of the federal sector. The gap between VA OIT's mission to protect the PII and PHI of Veterans, their families, and VA employees, as well as VA information systems and infrastructure and the diverse cross-skilled Information Security workforce necessary to fulfill that mission, is palpable. Informed governance for managing the information security workforce will mitigate cybersecurity workforce risks and increase effectiveness. Workforce risk management is a systematic way for organizations to address talent shortages by designing and implementing strategies to transition the current workforce to the desired future workforce – and monitoring shifts on an ongoing basis. A clearly articulated approach can overcome the lead-lag effect between necessary talent and changing cyber threat priorities. In addition, workforce strategies can become a key input into the cyber mission strategy – instead of just being derived from it. It is imperative that VA builds opportunities to grow its cybersecurity capabilities in support of the VA Information Security Program by designing and deploying a comprehensive approach to the processes, policies and plans for managing the information security workforce. Otherwise, it could risk VA's overall security posture.

NIST Audit Support provides management support to CRD. This support consists of both ongoing audit support activities, improvement of CRD's technical tools (Audit Portal, PowerApps, Power Automate Workflows, and PowerBI Dashboards used during the audit) for audit management and stakeholder engagement, and implementation of a communications strategy to keep 900+ stakeholders updated and informed. Outcomes are business process workflows, audit documentation manuals, role-based audit stakeholder training. While this does enable VA/OIT to satisfy the following Congressionally mandated requirements of compliance with OIG, FISMA, VA Financial Statement, the Federal Information System Controls Audit Manual (FISCAM), IRS Federal Tax Information Safeguards Audit, and Federal Managers Financial Integrity Act (FMFIA) Audits, this project also aligns with OIT strategic goals and CIO priorities.

The deliverables in this contract enable the VA to stabilize and streamline core processes and platforms (Strategic Goal 1) for OIG audits by supporting audit portal functioning, improvement to applications, and documenting processes. Every deliverable directly supports eliminating the material weakness (Strategic Goal 2) by enhancing streamlined communication between the security control implementors and the OIG auditors. The goal of all deliverables on this project is to drive improved outcomes of audit deficiencies through new capabilities (Strategic Goal 3). The sub-project allows the CIO's vision-directed execution in connecting an actual plan to execution of Federal audits. Of the many goals, one is to provide a delightful end user experience to the audit stakeholders enabling them to be the most effective in their role as Cybersecurity Framework Champions and Enterprise Control Leaders thus accurately depicting the VA's security state that results in accurate associated findings and streamlined communication between the security

control implementors and the OIG auditors. The project delivers a clear vision and roadmap for successful audits and inspections throughout the VA.

On an annual basis, the VA OIG and IRS conducts audits of IT systems, programs, and procedures to identify material weaknesses in VA's IT system security. The NIST Audit Support project will support the timely responses to FISMA, FISCAM, IRS, and FMFIA audits and provide auditors with the data they require to understand VA's OIT environment.

The FMFIA program, as required by law, provides critical oversight of OIT mission operations including OIT's role in providing information system infrastructure that enables the Administrations and Staff Offices to provide support to America's Veterans. The FMFIA Section II assessment, conducted in accordance with OMB Circular A-123, assists OIT in determining whether its operations are efficient and effective, whether the organization produces accurate and reliable financial and non-financial reporting, and whether OIT is compliant with all applicable laws and regulations that govern OIT's operations. FMFIA Section IV, in accordance with OMB Circular A-123, Appendix D, Assessment review assists VA in determining whether the VA's overall financial management system substantially complies with FFMIA (Strategic Goal #1). In addition, FFMIA requires management to determine whether non-compliance with FFMIA should be reported as non-conformance with Section IV of the FMFIA. The assessment directly supports reducing significant deficiencies directly related to the IT Material Weakness as reported by OIG (Strategic Goal 2). The program assists with ensuring remediation strategies are in place to reduce the risks of noncompliance with FFMIA (Strategic Goal #3). OMB Circular A-123, Appendix D - Compliance with the Federal Financial Management Improvement Act of 1996 provides the Compliance Determination Framework to assist agencies in determining whether the agency's overall financial management system substantially complies with FMFIA. In addition, FFMIA requires management to determine whether non-compliance with FFMIA should be reported as non-conformance with Section IV of the FMFIA. Both business problems must be addressed annually with supporting documentation to OIG and in the Annual Financial Report. OIT uses the Compliance Determination Framework to determine which financial management goals the VA was at risk for being substantially non-compliant on. For those goals, CRR gathered information and performed an analysis for the in-scope financial management systems per a phased approach in accordance with Federal Financial Management System Requirements (FFMSR) guidance to support the determination of compliance with FFMIA.

From the Value Management perspective, the CIO Balanced Score Card benefits include the ability to (a) achieve compliance with White House, Congressional, OMB and Agency Reform Plan requirements for IT performance reporting and modernization; (b) increase accountability and transparency across the organization for existing and planned investments; (c) improve IT investment decisions based on the highest value to Veterans; and (d) understand the outcomes that IT projects are providing to the Veterans and identify areas of improvement.

The CIO's Vision for Digital Transformation, particularly in the space of analytics, underscores observations about analytics generated in VA Strategy and further justifies funding for this sub-project. Further, the current contract expires in 2024, funding for this sub-project is imperative to support VA Strategy, the CIO's Vision, and the provision of core/advanced analytics within the scope/requirements associated with the newly created Data Analytics and Performance Reporting

organization. This sub-project is also used to identify and appropriately integrate and support the adoption of best practices in data analytics and data science in alignment with a wide range of related data management activities to include data quality, analytic maturation, platform and architecture, and analytics governance. Further, the sub-project captures and deploys relevant performance management data in a consumable framework supporting decision-making by providing insights and visibility into a range of performance metrics/indicators associated with operational efficiencies and effectiveness, particularly those related to business processes, major IT investment decisions and strategic outcomes.

E-FOIA Express

Non-compliance and potential litigation. Violation of current regulations and statutes affecting the Freedom of Information Act and Administration emphasis on transparency and openness

CRR Support - \$21.2 million (Operations and Maintenance)

The Agile Center of Excellence (ACOE) DevOps/SAFe/Agile Transformation sub-project supports the implementation of Senior Executive Service (SES) priorities and VA strategic goals by ensuring data and management best practices strengthen the customer experience and increase accountability, security, quality and service across VA. This sub-project directly supports Scale Agile Framework (SAFe) as the framework for IT product-line management. SAFe shifts the focus from disparate projects to functional products through training, mentoring, and auditing; ensuring faster delivery of a more reliable and higher quality product. ACOE DevOps/SAFe/Agile Transformation supports integrated software development, security and operations teams build, test and release software more efficiently, securely, expeditiously, and reliably through mentoring, training, and enablement.

The VA Product Line Accountability & Reporting System (VA PARS) provides for monitoring and reporting of IT product/project performance and supports the strategic initiatives for transparency as well as accountability. This system provides the ability to track and monitor IT product/project performance in support of leadership oversight and governance. In addition, this sub-project supports reporting of IT Investments on the Federal IT Dashboard.

The ACOE Technical Solutions Support sub-project provides technical support services for a combination of services that will include proof of concept (low code/no code solutions), testing software solutions, tiered help desk, information security, software development, operations, maintenance, and disposal of information systems.

The Business Rules Engine Tools Licensing provides continued implementation of IBM Operational Decision Management Server as VA's selected enterprise-level business rules engine.

ACOE Advanced Tools and Support provides for the procurement, management, coaching, mentoring, and contractor support of the future enterprise Project Portfolio Management (PPM) tool suite. These tools will provide critical performance metrics to facilitate structured decision-making regarding work priorities and requirements. The sub-project will support the procurement of these tools, management of licensing for tools procured, as well as the training, migration,

mentoring, configuration, integration, support, and operations/maintenance as needed for the implementation of the PPM tools for use by VA product teams.

Budget Formulation - \$18.0 million (Operations and Maintenance)

The Budget Formulation project uses contracts and services to establish and plan out multi-year budgets throughout OIT by creating MYPs and reporting proposed budgets for approval. ITBF and the CIO require objective, data-driven, transparent analysis to inform strategic investment decisions by the Secretary and Deputy Secretary of the VA. Major cost drivers for ITBF stem from proposed action for APPTIO IT Cost Transparency, Foundation Applications and Service Business Units, and IT Benchmarking SaaS application.

General Counsel IT Systems - \$14.1 million (Operations and Maintenance)

VA is legally responsible for providing electronic data in response to congressional and judicial inquiries. Projects under General Counsel are mandated by laws to ensure timely submission of requested data.

The VA is experiencing serious application instability and capacity issues with its current eDiscovery system. The current eDiscovery system is incapable of processing large datasets running in parallel without undergoing substantial loss of performance and degradation of operational capability, as well as a shortage in capacity to handle the ever-growing data requirements necessary to fulfill the increasing number of cases moving through the system. As a result, VA is struggling to meet the overwhelming demands of the four leading sources requesting electronic information (OGC litigation, external investigatory and administrative agencies, congressional requests for information, and FOIA requests). A modernized eDiscovery tool will replace the current inadequate eDiscovery Clearwell (SCW) application. It is a tool required by the Federal Rules of Civil Procedure to manage legal cases. It will be a SaaS solution, including software subscriptions for 100 Concurrent Users or over 1000 Named Users, and 30 Terabytes (TB) of data, as well as the following professional services: Software Implementation, Configuration, Data Migration, and Training. This application will be used by Office of General Counsel (OGC) and Office of Accountability and Whistleblower Protection (OAWP). The sustainment steady-state funding will be used for operations and maintenance of eDiscovery and eDiscovery Clearwell platform solution.

General Counsel Legal Automation Workload System (GCLaws) enables the Office of General Counsel to provide timely, accurate, and consistent legal advice and representation to the Department for more than 55,000 active/pending legal matters. GCLaws sustainment-steady-state funding is required for services and support needed to keep the system and its databases online and operational while maintaining technical and security documentation for ATO authorization.

Human Capital Management - \$12.5 million (Operations and Maintenance)

The Human Capital Management project is managed by Talent Management Organization (TMO) which ensures OIT supports the employee and provides the management and leadership to successfully implement the strategy. TMO ensures that VA is positioned and resourced to hire,

develop, and retain a world-class workforce in service to Veterans. The 2024 funding will support the IT Workforce Development's Professional Development Training Support Services and IT Training Certifications & Communications.

Product Engineering and Development Support - \$7.3 million (Operations and Maintenance)

Product Engineering and Development Support provides real and lasting value to the Veteran by delivering secure and reliable IT products and services with measurable business value. This is accomplished by delivering innovative products using SaaS, low-code and a shared delivery infrastructure with highly differentiated products that provide key applications and data for the customers. Success is measured by leveraging emerging technology, methodologies, and trends found in the private sector that deliver unparalleled value to Veterans and those who care for them. PE supports VA's digital transformation strategy, technology modernization initiatives and the VA Strategic goals through the following initiatives:

- Stronger strategic partnerships with business customers to proactively solve business problems using emerging technology
- Centers of excellence will be established, and industry trends leveraged to increase OIT's efficiency and effectiveness
- Vertical stovepipes will be eliminated and coalitions with other OIT and external organizations will be strengthened

Project Engineering will maximize knowledge and data reuse, providing enterprise modernization that results in commercial-grade products and will gain efficiencies of scale with standardization of data and analytics.

Capacity and Performance Engineering Services (CPE)'s IT system capacity and performance monitoring capabilities provide visibility for measuring and predicting system capacity and performance against the cost to support the Agency's strategic objectives and needs. CPE consistently communicates with its customers and partners to assess and maximize performance and evaluate capacity and performance needs to build long-term relationships and trust. CPE leverages direct and collaborative communication channels to ensure, from the service request to the deliverable, that its work products and services are accessible and actionable. As a result of this emphasis on communication coupled with capacity management services, CPE projects and anticipates infrastructure and product service demand to enable delivery of effective and agile solutions that improve their outcomes and experiences.

Office of Information Security (OIS) Support - \$6.0 million (Operations and Maintenance)

The OIS Support Project provides a mechanism for tracking ATO maintenance and progress for over 650 systems to ensure the VA does not have systems operating in production without an ATO. Additionally, it provides reoccurring ATO performance reports to Authorizing Officials (AOs) across the enterprise. Information Assurance (IA) collaborates with its business partners to create the best experience for all Veterans by endeavoring to provide a seamless and unified Veteran experience via state-of-the-art IT solutions and service delivery.

OIT Front Office Support - \$5.5 million (Operations and Maintenance)

Enterprise Architecture Program Execution Support is tasked with building and using an Enterprise Architecture (EA) that enables better informed investment decision-making, faster and more efficient delivery of value-added solutions, and enables VA to decrease its technical debt. The EA enables these things by 1) providing the decision support capability that enables Account Managers and Portfolio Directors to make investment decisions that support the VA's strategic direction; 2) providing and maintaining target architectures and roadmaps that describe VA's target state and the means to achieve it; 3) maintaining an authoritative inventory of systems, associated interfaces and technologies that is segmented by product line and includes authoritative data sources and application program interfaces; 4) helping to identify technologies that are nearing end of life or are no longer competitively priced; and 5) identifying replacement technologies and identifying impacted VA systems and planning technology migration.

Budget Execution - \$2.9 million (Operations and Maintenance)

The Budget Tracking Tool (BTT) provides the automation necessary to implement and operate a single, automated, integrated, standard business process and supporting relational data repository. BTT facilitates management at the project, program, and executive levels. BTT provides a standardized, automated tool for program, budget, contract development, tracking, and other management information across a diverse group of organization and accounting activities.

CTO Support - 2.0 million (Operations and Maintenance)

The VA's Office of the Chief Technology Officer (OCTO) deploys Presidential Innovation Fellows (PIF) against high-priority initiatives and projects where the Veteran is ultimately the end-user/beneficiary. These initiatives and project vary depending on the need, and the PIFs OCTO details-in are matched to that need as its identified. PIFs advise, rapidly prototype, and scale solutions using industry best practices across data science, design, engineering, product, and systems thinking. Fellows serve as both strategic advisors and leaders who can build, test, and ship solutions.

Management Information Systems – \$1.3 million (Operations and Maintenance)

VA Historian Office External Website Content Management System (EWCMS): VA Directive 7777 dated February 9, 2021, mandates the establishment of The VA History Program. The VA formally established the VA History Office (VAHO), on April 10, 2020, to formally collect, preserve and provide access to VA's relevant historical records and artifacts to tell a comprehensive story of VA and its predecessor organizations. The VAHO requires the capability to: 1) Facilitate the collection of historical artifacts and archival materials for preservation related to the response to national emergencies by VA; 2) Prepare catalogue and archive printed and digital (video, audio, and other electronic formats) histories of major Departmental actions, including the history of VA predecessor agencies; 3) Prepare pamphlets, books, monographs, articles, catalogues, chronologies, bibliographies, and special studies of importance to the Department for public and stakeholder benefit; 4) Identify, collect, accession, preserve and organize digital and

textual archives. This effort supports established VA records management schedules; and 5) Create and maintain historic data and records searchable to researchers, writers, historians, and the public.

Organizational Management supports One VA Electronic Forms (VA Forms). The VA Forms system consists of the web pages and infrastructure need to serve public and internal VA populations by providing needed forms conveniently for Veterans and their families via the internet and for internal VA users via an intranet site. This system is how people (Veterans and their families, as well as internal VA users) get the forms the VA requires them to complete. The system includes browser accessible form sites, an administrative front end for loading forms, browser-accessible Adobe Reader Extensions software, and a database which contains forms/metadata about forms which are served via the web.

OIT Administration Support - \$1.2 million (Operations and Maintenance)

The Enterprise IT Support Contracts – OIT Administrative Support Project represents the estimated charges for IT Support contracts used by various Organizations to support operations across the VA. Cost drivers include Enterprise Licensing Program Management Contract Support, DevSecOps Technical and Business Management Support, and the CIO Executive Support Contract (ESS). Almost every VA service to, or interaction with, Veteran clients is supported by VA’s operational IT systems. This Project provides the ongoing operations and maintenance of the OIT Admin Support Contracts. The beneficial impacts on the Veteran/beneficiary/family members are derived from the individual applications themselves. OCTO's utilization of the Digital Corps program provides VA direct day-to-day access to talented early-career technologists, designers, and strategists passionate about solving Veteran problems and addressing their needs.

ITBF Support – \$1.0 million (Operations and Maintenance)

This task order provides staffing support Program Planning and Oversight (PPO) uses to assist investment and project teams to meet the requirements of the OMB monthly and annual submissions to the Federal IT Dashboard as required by the Clinger Cohen Act. The vendor monitors data quality issues between VA Product (Line) Accountability and Reporting System (VA PARS) and the Federal IT Dashboard (ITDB) ensuring that the data submissions of Major IT Business Case Details (MITBCD) are complete and accurate. The task order supports MYP build and the investment restructuring work that is underway and the alignment of projects to products within the VA System Inventory (VASI). PPO updates the alignment of pay and non-pay dollars to the Technology Business Management (TBM) framework in the Formulation year using Apptio for both Annual and Passback submissions.

Product Engineering (PE) and Software Product Management (SPM) have 12 Major and 4 Non-Major Information Technology Business Case (MITBC) Investments that are reported to the OMB Federal IT Dashboard for monthly, Annual and Passback submissions. Within those Investments there are 151 development, modernization, and enhancement projects and 197 sustainment efforts that Program Planning and Oversight (PPO) supports daily. PPO is engaged with the OIT Investment Restructuring workgroup focusing on restructuring the OIT Investments to align to Product Lines (PL) and Technology Business Management (TBM) frameworks. PPO consolidates, ensures proper budget alignment of, and submits the PE and SPM Multi-Year Programming

(MYP) and Budget Formulation (BF) budget requests several times a year. It maintains close collaboration with project teams entering new and updated data in VA PARS, and with investment teams to build the MITBCs submitted in Folio. Enterprise Project Structure (EPS) support is required to track and ensure proper alignment of approved/funded projects and MYP data collection and entry in support of the out-year budget request.

Acquisition and Property Management - \$0.7 million (Operations and Maintenance)

Property Acquisition and Control Reporting Project supports the Corporate and Regional Matrixed Budget System (CRMBS/CFM) tool sustainment, which is critical to support the mission of the Office of Construction and Facilities Management (CFM), which has more than doubled over the last 10 years. CFM uses CRMBS to provide basic real-time hierarchical approvals and access to budget and fiscal information, making it more efficient and easier to account for all funds. This application provides an authoritative source for data to be used in critical, time sensitive congressional requests and audits such as Financial Statements, Improper Payment Elimination and Recovery Act, OIG/ GAO.

Property and Facility Services supports the Veterans Canteen Service (VCS) which is a self-sustaining entity providing merchandise and services to Veterans enrolled in VA's Health Care system, their families, caregivers, VA employees, volunteers and visitors (about 24.5 million VCS benefit users). Tracking inventory, managing financial transactions, and supporting sales for VCS are paramount in growing revenue. Revenues generated from VCS are used to support a variety of health, rehabilitation, and homelessness programs (i.e., Homeless Assistance Suicide Prevention, Substance Abuse, National Rehab, and Women Vet). It meets special management attention because of its importance to the mission or function of the VA (providing revenue to support Veteran Health Programs). If the system is not supported, VCS cannot align with VA OIT processes and procedures to maintain an ATO nor streamline or improve any existing components. VCS has collaborated with OIT to invest in and modernize aging technologies, Veterans will be directly impacted if products are not available.

2024 Information Technology Infrastructure and Network (ITIN) Portfolio

The ITIN Portfolio (formerly known as the Enterprise Portfolio) provides the underlying infrastructure necessary to perform business functions and maintains a robust technology infrastructure for the Department. It includes cybersecurity, data centers, cloud services, telephony, enterprise software, end-user hardware, data connectivity and the IT activations program. The ITIN Portfolio includes capabilities that comprise VA's core IT infrastructure and services. These capabilities underpin VA's IT mission application environment and are essential to VA's ability to deliver a secure, seamless, and unified Veteran experience through the delivery of state-of-the-art technology.

This section does not include the PACT Act funding request. See the 2024 PACT Act Request section for additional details supporting this request.

The 2024 ITIN Portfolio Budget Request consists of the following Project details:

Projects (Ss in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Cyber Security Operations ^{1/}	\$ -	\$ 244,714	\$ 1	\$ -	\$ -	\$ 402,341	\$ -	\$ 575,965	\$ 173,624
Cyber Security ^{1/} - American Rescue Plan 8002	\$ -	\$ 10,918	\$ -	\$ -	\$ -	\$ 9,663	\$ -	\$ -	\$ (9,663)
Cyber Security ^{1/} - Technology Modernization Fund	\$ -	\$ -	\$ -	\$ 5,895	\$ -	\$ 4,655	\$ -	\$ -	\$ (4,655)
Network Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 463,196	\$ 463,196
End User Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 315,098	\$ 315,098
Foundation Platforms	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 248,298	\$ 248,298
End User Operations	\$ -	\$ 49,055	\$ -	\$ -	\$ -	\$ 50,021	\$ -	\$ 165,633	\$ 115,612
IT Service Management	\$ -	\$ 63,898	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 139,726	\$ 139,726
Infrastructure Operations (IO) Hardware Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 133,859	\$ 133,859
Storage Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 114,000	\$ 114,000
Awareness, Governance, Risk, Compliance	\$ 11,200	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 100,307	\$ 100,307
Infrastructure Operations (IO) Software Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 97,260	\$ 97,260
Solution Delivery (SD) Software Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 77,000	\$ 77,000
Activations	\$ -	\$ 78,206	\$ -	\$ -	\$ -	\$ 25,000	\$ -	\$ 75,288	\$ 50,288
Activations - American Rescue Plan 8002	\$ -	\$ 30,000	\$ -	\$ -	\$ -	\$ 66,494	\$ -	\$ -	\$ (66,494)
Enterprise Service Level Agreement (SLA)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 52,160	\$ 52,160
Service Desk	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 51,880	\$ 51,880
Application Delivery Infrastructure	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 49,419	\$ 49,419
Decision Intelligence	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 39,490	\$ 39,490
Shared Devices	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 37,543	\$ 37,543
Solution Delivery (SD) Hardware Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25,450	\$ 25,450
Unified Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24,000	\$ 24,000
End User Compute	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,500	\$ 13,500
Infrastructure Operations Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,819	\$ 9,819
Operations Triage Group	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,288	\$ 9,288
Software Maintenance	\$ -	\$ 431,857	\$ -	\$ -	\$ -	\$ 442,767	\$ -	\$ -	\$ (442,767)
Software Maintenance - American Rescue Plan 8002	\$ -	\$ 87,532	\$ -	\$ 86,049	\$ -	\$ -	\$ -	\$ -	\$ -
Infrastructure Readiness Program (IRP) ^{2/}	\$ -	\$ 337,759	\$ -	\$ 8,323	\$ -	\$ 477,543	\$ -	\$ -	\$ (477,543)
Telecommunications	\$ -	\$ 251,543	\$ -	\$ 649	\$ -	\$ 241,894	\$ -	\$ -	\$ (241,894)
Telecommunications - American Rescue Plan 8002	\$ -	\$ 43,146	\$ -	\$ 4,455	\$ -	\$ 42,236	\$ -	\$ -	\$ (42,236)
IT Support Contracts	\$ -	\$ 125,413	\$ -	\$ -	\$ -	\$ 168,043	\$ -	\$ -	\$ (168,043)
IT Support Contracts - American Rescue Plan 8002	\$ -	\$ 20,000	\$ -	\$ -	\$ -	\$ 14,764	\$ -	\$ -	\$ (14,764)
Data Integration and Management	\$ 8,417	\$ 194,546	\$ -	\$ -	\$ -	\$ 161,009	\$ -	\$ -	\$ (161,009)
Data Integration and Management - American Rescue Plan 8002	\$ -	\$ 273,725	\$ -	\$ 33,201	\$ -	\$ 357,385	\$ -	\$ -	\$ (357,385)
Hardware Maintenance	\$ -	\$ 155,594	\$ -	\$ -	\$ -	\$ 159,119	\$ -	\$ -	\$ (159,119)
Hardware Maintenance - American Rescue Plan 8002	\$ -	\$ 10,272	\$ -	\$ 10,328	\$ -	\$ 4,477	\$ -	\$ -	\$ (4,477)
IT Service Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 94,690	\$ -	\$ -	\$ (94,690)
Enterprise Service Desk	\$ -	\$ 65,446	\$ -	\$ -	\$ -	\$ 63,195	\$ -	\$ -	\$ (63,195)
Privacy & Records Management	\$ -	\$ 33,344	\$ -	\$ -	\$ -	\$ 54,788	\$ -	\$ -	\$ (54,788)
Network Operations Center	\$ -	\$ 32,616	\$ -	\$ -	\$ -	\$ 33,673	\$ -	\$ -	\$ (33,673)
Enterprise Command Center	\$ -	\$ 8,983	\$ -	\$ -	\$ -	\$ 12,624	\$ -	\$ -	\$ (12,624)
Enterprise Command Center - American Rescue Plan 8002	\$ -	\$ 11,341	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repositories	\$ -	\$ 2,437	\$ -	\$ -	\$ -	\$ 2,974	\$ -	\$ -	\$ (2,974)
Total ITIN Portfolio	\$ 19,617	\$ 2,562,344	\$ 1	\$ 148,900	\$ -	\$ 2,889,355	\$ -	\$ 2,818,179	\$ (71,176)

1/ See Appendix N for Information Security details

2/ In 2022, the IRP Project was funded by the Recurring Expenses Transformational Fund

Notes:

1. The 2022 Actuals and 2023 Enacted columns reflects projects reported prior to the budget restructure and will be executed as is
2. The 2024 Request column reflects projects in the new IT budget structure. Please refer to the Appendix Q Budget Restructure Matrix for the alignment of the old budget structure to the new 2024 IT budget structure
3. The 2024 request is below the 2023 Enacted level in the amount of \$71.176M as a result of the IT budget restructure. Some projects were realigned to the Corporate portfolio
4. In 2024, (a) the sub-projects from the Data Integration and Management project such as VA Profile, VA/DoD Identity Repository (VADIR) and Veteran Identity/Eligibility Reporting System (VIERS) were realigned to the Customer Data Management Experience within the Veteran Experience portfolio; (b) the sub-projects from the Cyber Security project such as ID.ME, Login.gov and Identity and Access Management - Enterprise (IAM) were realigned to the new Cyber Security Operations within the Veteran Experience portfolio;
5. In 2024, the Privacy and Record Management project was realigned due to the budget restructure
6. In 2024, sub-projects from the Data Integration and Management project and IT Support Contracts projects were realigned to the Corporate portfolio

The Project detail tables below display 2022 Actuals and 2023 Enacted sub-projects aligned to the Projects in the new 2024 budget structure for comparison purposes.

Information Security - \$927.0 million

(Operations and Maintenance - \$739.7 million, Staffing and Administration – \$187.4 million)

The 2024 Information Security (IS) budget request consists of \$875.5 million in the base appropriation, and \$51.5 million in support of PACT Act requirements. A detailed justification of the request in support of PACT Act requirements can be found in the PACT Act section of this chapter.

Information Security is composed of Privacy & Records Management (see the Corporate Portfolio section for details) and the Cyber Security Program. The Cyber Security Program encompasses Cyber Security Operations as well as Awareness, Governance, Risk, Compliance. This section details the base appropriation portion of the Cyber Security Program of IS. Additionally, Appendix L contains a full breakdown of the IS request.

Cyber Security Program - \$676.3 million

Cyber Security Operations - \$576.0 million

The VA Cyber Security Operations Project integrates cybersecurity capabilities across the VA network infrastructure to protect VA, Veteran networks, and information from unauthorized exposure and exploitation. In line with the May 12, 2021, Executive Order on Improving the Nation's Cybersecurity, the Cyber Security Operations project leads the VA's effort to identify, deter, protect against, detect, and respond to malicious cyber activities. The project funds operations and maintenance requirements supporting cyber and network defenses to protect Veterans' information and VA's information systems. It directly enables the VA's Strategic Plan as the lead to ensure telehealth and connected care technologies are developed and implemented with cybersecurity requirements to reduce risks to Veterans. There are key deliverables justifying this project and its continuing mission:

- Deliver to the Veteran data and capabilities which are easy to access, protected and secured via encryption and multi-factor authentication
- Monitor, detect, respond, recover, and mitigate risks to VA's network and infrastructure
- Verify and validate VA's cybersecurity posture and lead emerging and imminent threat preparation and defense efforts
- Support implementation of FISMA and FISCAM
- Identify, assess, monitor, and mitigate risk to the confidentiality, integrity, and availability of VA's organizational assets
- Support continued advancements in technology to implement the Field Security Service requirements directed in Executive Order 14028
- Fully fund the minimum cyber security operations and maintenance requirements to securely sustain the VA cyber enterprise

Zero Trust Architecture

The vision for Zero Trust Architecture (ZTA) adoption at the VA is to enable modernized security capabilities to support VA's Digital Transformation and IT Modernization. VA's intent is to provide a seamless, unified, safe, and secure Veteran experience through providing secure state-of-the-art technology. OIT's Zero Trust initiative is aligned to the CIO's vision for Security Excellence in VA's Digital Transformation. The CIO's Vision lays out Zero Trust principles that define VA's Zero Trust First strategy currently under executive review. Furthermore, VA's current Zero Trust Pillars, which were formed in 2021 in response to EO 14028, are operationally aligned to OMB implementation requirements and VA's Zero Trust First strategy.

Implementation of VA's Zero Trust First strategy is a multi-year effort to modernize VA's cybersecurity posture. OIT will continuously assess implementation strategy and alignment to current and future EO 14028 and OMB requirements. These assessments will be framed around a Zero Trust Maturity Model that gauges the VA's transition from current pre-Zero Trust capabilities to an optimized Zero Trust state.

Within VA, the VHA operates the largest integrated health care systems in the country with over 9 million Veterans enrolled. VHA operates 171 medical centers and more than 1,112 outpatient care sites nationwide. In addition, VA operates over 70 VBA offices and 155 National Cemeteries. IT services are closely integrated into all VA Health, Benefits and Memorial services, including critical patient safety and benefits payment functions.

The implementation of ZTA within a large environment on the scale of the VA is a complex initiative that requires a multi-year transition plan. The implementation plan consists of five major stages and is designed to be concurrent and cyclical in nature to account for the staged release of information and guidance of Executive Order 14028. At a high level, the ZTA stages are:

- **Pre-ZTA:** VA plans to focus on quickly establishing governance and structure to address ZTA. VA will develop an implementation plan to address ZTA requirements established by OMB and conduct analysis to identify activities to evolve VA to a mature ZTA deployment that will significantly improve VA's security posture. In this Pre-ZTA stage, VA will identify the high-priority activities (people, processes and technologies) that make bold changes and require significant investment and re-alignment of existing initiatives to mature and secure the VA enterprise. These high priority activities include establishing a reference architecture, developing pilot/prototype requirements, and enterprise baseline.
- **Basic ZTA:** Basic foundational elements, including the high-impact security activities in the Pre-ZTA stage will be matured and the underpinning, foundational components of the ZTA strategy will be introduced. Activities in this stage include vendor engagement and preliminary prototype planning and testing.
- **Intermediate ZTA:** VA will develop the foundational ZTA eco-system. This includes leveraging visibility tools and analytics to support ongoing efficacy and identify additional, key ZTA advancement systems for deployment. Formal testing and deployment will build upon initial ZTA prototypes and pilot capabilities. As in all stages, VA will continually incorporate any additional direction emanating from the EO guidance and applicable agencies DHS, OMB, CISA, National Security Agency (NSA), etc.).

- Advanced ZTA: VA will advance all aspects of the ZTA eco-system by leveraging modernized security practices such as advanced analytics and automation. This will enable a sustainable ZTA that VA can depend on to protect confidentiality, integrity and availability for all present and future information and operational technology introduced to VA. The plan is established and constructed as a cyclical operational plan to support the continuous change, upgrade and feedback patterns associated with the entire ZTA eco-system.

Zero Trust consists of many workstreams across many operational pillars of VA: Governance and Architecture, Identity and Users, Devices, Network and Environment, Application and Workloads, Data, Automation and Orchestration and Analytics and Visibility.

Examples of VA initiatives that support Zero Trust:

- Multifactor Authentication
- Trusted Internet Connection TIC 3.0
- IPv6
- Network Segmentation
- Continuous Diagnostics (CDM)
- Endpoint Detection and Response (EDR) via Microsoft Defender for Endpoints (MDE)
- Data Loss Prevention (DLP)
- Data Encryption
- Data Categorization and Tagging
- Data Rights Management

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Information Security Operations (ISO) - Cyber Security Operations Center	\$ -	\$ 73,748	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 149,691	\$ 149,691
Continuous Readiness in Information Security (CRISP)	\$ -	\$ 45,972	\$ -	\$ -	\$ -	\$ 63,911	\$ -	\$ 100,000	\$ 36,089
Enterprise IT Support Contracts - Cyber Security Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 117,490	\$ -	\$ 52,110	\$ (65,380)
Identity and Access	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 45,040	\$ -	\$ 46,668	\$ 1,628
Information Security Operations (ISO) - Information Security Risk Management	\$ -	\$ 39,276	\$ -	\$ -	\$ -	\$ 43,205	\$ -	\$ 45,426	\$ 2,221
Digital Identity and Access	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 36,403	\$ 36,403
Information Security Operations (SVAC)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 19,000	\$ 19,000
Community Care (CC) Electronic Data Interchange (EDI)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18,440	\$ 18,440
Social Security Number Reduction (SSNR)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 16,000	\$ 16,000
Continuous Integration/Continuous Delivery (CI/CD) Tool Suite	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,878	\$ 13,878
DevSecOps Tools Enclave (DTE)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,408	\$ 10,408
Information Security Operations (ISO) - Privacy	\$ -	\$ 6,625	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,300	\$ 9,300
GitHub Business Cloud (GHBC)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,217	\$ 7,217
Joint Longitudinal Viewer	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,924	\$ 6,924
VistA - Computerized Patient Record System (CPRS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,000	\$ 6,000
Telehealth Hub Expansion	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,000	\$ 5,000
National Center for Patient Safety (NCPS) Patient Safety Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,496	\$ 4,496
Case and Correspondence Tracking	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,157	\$ 4,157
Veterans Data Integration and Federation Enterprise Platform (VDIF-EP)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,816	\$ 3,816
Portfolio Integration	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,524	\$ 3,524
Property Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,231	\$ 3,231
VistA Audit Solution (VAS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,600	\$ 2,600
Real Property Tools	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,599	\$ 2,599
VistA - Scheduling (VSE)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,000	\$ 2,000
Telemedicine (Store & Forward)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,464	\$ 1,464
Field Security Service	\$ -	\$ 1,062	\$ -	\$ -	\$ -	\$ 1,536	\$ -	\$ 1,367	\$ (169)
VA Innovation and Research Review System (VAIRRS) Data Access Request Tracker (DART)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200	\$ 1,200
Property and Facility Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,100	\$ 1,100
Bed Management Solution (BMS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000
Vendor Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 610	\$ 610
Business Architecture	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 175	\$ 175
Debt Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 161	\$ 161
Information Security Operations (ISO) - Data Breach Response Services	\$ -	\$ 1,046	\$ -	\$ -	\$ -	\$ 160	\$ -	\$ -	\$ (160)
Identity and Access Management - Enterprise (IAM)	\$ 11,200	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Cyber Security Operations	\$ 11,200	\$ 167,728	\$ 1	\$ -	\$ -	\$ 271,342	\$ -	\$ 575,965	\$ 304,623

The VA Information Security Operations (ISO) Cybersecurity Operations Center (CSOC) is required to protect VA information and information systems on a 24/7/365 basis. It prepares for and defends against emerging and imminent threats. CSOC accomplishes this by collecting cyber threat intelligence, hunting for adversarial behavior on the VA network, responding to cybersecurity incidents, reporting cyber threats and vulnerabilities, and providing value-added

cybersecurity consulting services to VA business lines. VA CSOC additionally accomplishes 24/7/365 cyber incident response coverage, malicious activity monitoring and advanced analytic capabilities. VA CSOC is the authoritative source for managing cyber security attacks to contain and limit damage to the VA enterprise and Veteran's information. Also, VA CSOC serves to increase the VA's awareness of cyber threats, reduce the risk from vulnerabilities, protect VA devices from future cyber-attacks, and improve readiness in preparing for and managing cyber incident response efforts across the VA Enterprise.

As the CSOC increases implementation and/or utilization of vital cybersecurity programs across the VA enterprise, it will increase the steady-state costs in 2024 with expected negligible follow-on growth. These include the primarily CSOC support requirement, Data Discovery, Analytics and Labeling, Data Analytics Development, and Data Loss Prevention. Additionally, CSOC will be increasing the frequency of scanning network and cloud resources across the VA enterprise in 2023 to mitigate risk. In 2024, this steady-state requirement will deliver a greatly reduced timeline for risk identification, response, and recovery.

Continuous Readiness in Information Security (CRISP) is required across all components of OIT to support the VA implementation of FISMA and FISCAM audit recommendations and provides operations and maintenance for OIS' mission critical systems managed by OCS. This investment includes capabilities that support: Platform Operations, Maintenance and Management Support, inclusive of Enterprise Vulnerability & Validation Management (EVVM) Platform Support, GRC Tool Infrastructure and Platform Support, GRC Tool Backup Solution Hardware and Support, Administration of Network Management Systems, Storage Management and Disaster Recovery, Business Process Support, Lifecycle Platform Planning Support, and OIS Professional Services Support. The 2024 request will ensure the steady-state operations and maintenance funding to continue the baseline capabilities developed, implemented, and currently used. The requirements reflect the increase in steady-state costs to maintain the same level of service.

Enterprise IT Support Contracts - Cyber Security Operations supports ongoing IT operations by providing critical funding for support of IT applications that are utilized in all VA Administrations. The 2024 request will maintain the steady-state operations and maintenance funding in support of IT applications utilized across all VA Administrations. The significant cost drivers include Enterprise Endpoint Protection Support Services (EES), ForeScout Maintenance and IT Operational Support, ZTA (comply with EO 14028), and Gigamon Elite Support.

In 2024, Identity and Access Management (IAM) sustainment-steady-state will deliver maintenance and operational support for 950+ integrated applications. It will also fund the operational support required to maintain enterprise identity management, login, privilege management, and digital signature services in the production and non-production environments. Operational support services include system administration support, break fix resolution, security patching, commercial off-the-shelf product upgrade and sustainment of the Enterprise Mission Assurance Support System (eMASS) in support of the system ATO. The 2024 budget request will ensure data center hosting services and system support services required to meet IAM service availability, security and reliability requirements in production and non-production environments. Multiple major initiatives have dependencies on this project including COVID-19, Community Care/Providers, Cerner/ EHRM, MISSION Act, Colmery Act, VA.gov, Mobile Applications,

MHV, eBenefits, eHealth exchange, and Continuous Diagnostics Mitigation (CDM). IAM also has connections to and enables the sharing of data with the DoD, CMS, and 262 Community Care Partners.

The Information Security Operations (ISO) - Information Security Risk Management team works to promote an agency-wide understanding of information security risk in alignment with OIS strategies and priorities. It maintains compliance with Federal requirements while anticipating new or emerging requirements and developing work plans to address them. Information Security Risk Management oversees the Department's cybersecurity risk management activities including Authorization processing, the Security Control Assessments function, the PIV Card Issuance Assessments, the Governance, Risk, and Compliance process, Case Manager function, and other information security program support activities vital to the VA's success. The 2024 request is driven primarily due to supporting increased capability and capacity within the steady-state requirements. The new 2023 requirement, Adaptive Risk Assessment Framework and Integration Support, will assist VA and OIS with reducing Material Weaknesses (MWs) and addressing OIG Notice of Findings and Recommendations (NFRs). This investment will improve cybersecurity systems integration and the advancement of developing targeted systems functionality to meet the new ZTA mandates and include enhanced training for both security control compliance and security control prioritization which will help to address MWs and NFRs and move VA maturity up to the level of significant findings with the goal of continuing the maturity of the organization over time. This requirement will help VA fulfill its mission to target and significantly improve its cybersecurity program as directed in NIST 800-37 Risk Management Framework (RMF) which provides guidelines for applying the RMF to information systems and organizations.

Digital Identity and Access encompasses Login.gov, which is a NIST-compliant government run Identity provider. The platform is in use by other government agencies and enables veterans to sign-in to the VA without needing to sign-in again to conduct business with other sites like USAJobs.gov. For the VA, this enables millions of Veterans to have monthly access to their healthcare records, apply for healthcare, establish benefits claims, update their personal information, manage GI Bill benefits, manage direct deposit, check appeals status, and avoid placing undue burden on them with providing identification at VA locations on-site to obtain benefits/services. VA uses Login.gov as an Identity provider to allow Single-Sign-On External (SSOe) for Veterans to access their services and data available to them from applications such as VA.gov, VA Online Scheduling, eBenefits and other legacy applications. VA's IAM Single Sign On solution enables applications that integrate Veteran services and is critical in VA's mission to replace burdensome, lengthy, and inconsistent processes which Veterans routinely experience while accessing crucial services. Such services include, but are not limited to medical support, benefits payments and claims, and financial aid.

VA requires Login.gov and Login.gov Credential Service Providers (CSPs) SaaS solutions and associated services to support Veteran and external user authentication to VA applications. It provides authentication and identity proofing to enable single sign on access to critical VA digital services on VA.gov used by Veterans, their advocates, and VA business partners. Login.gov software licenses are needed to allow VA to both authenticate and identity proof Veterans, community care providers, delegates, and other users in providing access to critical VA data and systems. Expected outcomes for Login.gov include:

- Scale to support the increased number of users as Login.gov is integrated with more systems and applications.
- Improve accessibility and integrate with new API capabilities and functionality.
- Make phishing-resistant and accessible FIDO Security Keys available to VA customers free-of-charge, enabling secure, accessible MFA across all agencies where customers access benefits/services (anywhere that accepts Login.gov).

ID.me support for these applications will greatly reduce phone calls and in-person burden on VA and VSO staff to schedule appointments, submit benefits claims, and view health history. Authentication and authorization subscriptions increased during the COVID-19 pandemic which resulted in cost increases.

Social Security Number Reduction (SSNR)

Reducing use of SSN at VA in its IT systems, forms, and records will enhance the protection of data stored for Veterans, their families, beneficiaries, and others. Reducing the use of SSN will safeguard Veterans' and employees' privacy including PII and PHI. The effective reduction of SSN use limits identity theft and other avenues of fraud. This in turn supports Veteran trust in VA. SSNs are key pieces of identifying information that can potentially be used to perpetrate identity theft. The primary reason for the SSNR initiative is to reduce the risk of identity theft and exploitation of the Veteran. This includes medical identity theft, financial fraud, and fraud related to other benefits VA provides to Veterans and their families.

VA is required to eliminate the use of SSN unless its use is required by law (e.g., purposes of law enforcement or national security investigations, health care or financial institution functions, computer matching agreements, and employment eligibility); authorized by law (e.g., a law allows the SSN to be collected and/or used but does not require it, in which case the continued use of SSN is acceptable for a specified period - provided plans are in place to reduce those uses); or a compelling business need (e.g., VA identifies SSN usage as a compelling business need meaning its use is necessary to fulfill the duties of an individual employee, contractor or function of VA). Even when the collection and use of SSN is permitted, VA is not allowed to use the SSN as an identifier except in limited situations.

Successful SSN reduction requires an enterprise-wide modernization effort encompassing regulations, policies, laws, technology systems and applications, business processes, governance, business transformation, cybersecurity, culture, and communication across all VA administrations and offices.

Plan, Manage and Execute Systems and Process Modernization:

- This effort requires extensive analyses of the systems and forms using SSNs. It needs to identify the use and data flow of the hundreds of forms using SSNs. It also needs to identify system dependencies and assess the impact of reducing or eliminating SSNs while not disrupting the efficient and effective delivery of benefits and services. The effort must identify which systems need/can be remediated concurrently, independently and/or in conjunction with other planned modifications and modernization. The project needs to assess the impact of modifications on the systems and the forms and business processes they support. VA will need

to ensure that the appropriate security and privacy controls are in place for systems continuing to use SSNs. VA will prioritize and schedule all remediation efforts.

- The effort needs to develop reference and solution architectures; it must identify technical solutions including modification and/or enhancements to existing systems and purchases of new COTS systems that align with VA's IT modernization plans. This plan will execute deploy with a tight, coordinated, and integrated schedule that ensures minimal (the goal is "none") interruption in providing benefits and services. OIT will ensure the availability, reliability, and dependability of appropriate stakeholders' business systems throughout the Enterprise. VA will develop and implement a robust change-management strategy as a means to identify the correct skill sets for planning and executing change. For example, required skills may include the specialized knowledge to understand or modify code from legacy systems that were developed decades ago; they may also include the need to understand how to communicate to and within a cloud environment while meeting cybersecurity requirements.
- The effort requires the identification, and if necessary, development of the appropriate environments including development, testing and pre-production as well as the appropriate links and processes for introduction of systems/updates to the production environment. The production environment may include legacy data centers and recently or newly introduced cloud environments. One critical aspect of the planning is to include the role of cloud hosting as well as other emerging technologies.
- The testing environment will support test beds and the capabilities to assess, compare and evaluate market solutions; assess proposed timelines for technology/process changes; assess ergonomics, user center design and impact of systems and processes on users; assess platforms for solving problems that develop during and after implementation and include "skunkworks" capabilities for developing and testing innovative and long-term solutions.
- The effort will interface with the VA Innovation Cell to ensure the introduction of the latest technologies, practices, and processes. VA will assess the impact of new technologies – and new processes – upon its stakeholders. For example, OIT will assess whether changing identification numbers of impact Veterans with certain disabilities such as PTSD. It also needs to understand the impact changes (in processes and/or systems) have on the ability of employees to effectively use the systems. It requires an analysis of the required skill sets, certifications, and any new training for using the new systems within the modernized business processes. The effort requires the development of new training modules and their effective delivery through appropriate media including in person, virtual, recording or hybrid training plans.
- The Policy and Legal Review team must develop the appropriate System of Records Notices (SORNs) required when introducing or modifying existing systems. There must be the appropriate legal justifications provided to obtain waivers.
- Acquisitions and Independent Verification and Validation (IV&V):
The effort entails system upgrades, potential new system and licensing acquisitions, communications campaigns, training programs, environmental and cybersecurity upgrades, and extensive human resources. As a result, the effort requires acquisitions specialists to ensure the necessary support and skill sets for this multi-year effort. As the program progresses, the effort needs appropriately timed IV&Vs that ensures the new systems and processes are properly deployed, meet all requirements, and are being appropriately used by sufficiently trained staff. The IV&Vs will implement the following Systems Engineering Best Practices:
 - Project Management

- System Engineering
- Hardware/Software and Licensing
- System Remediation
- Integration
- Documentation
- Communication and Training
- Authority to Operate (ATO)

Community Care (CC) Electronic Data Interchange (EDI) (CC EDI) is currently undergoing a modernization effort to move current capabilities off of decommissioned servers, however it requires COTS purchases in order to complete. This will be to ensure OIT is utilizing current technologies to properly maintain CC EDI.

Continuous Integration/Continuous Delivery (CI/CD) Tool Suite supports automation which is a key enabler of cybersecurity elements that improve release processes, promote, enable intuitive, rapid adoption of integrated DevSecOps tool chains, and provide greater visibility into product development and rollup to product line/portfolio-level goals, and enable a predictive delivery cadence. Increased tools automation is a key tenant of Executive Order 10428 Improving the Nation's Cybersecurity, and NIST Special Publication 800-218. CI/CD Tool Suite effort supports and promotes processes and security requirements outlined in these mandates.

DevSecOps Tools Enclave (DTE) enables maturity of security and vulnerability by enabling the ability to scan code early in the development lifecycle. DTE reduces the technical limitation of needing to rebuild code before scanning and enables the centralized OIS team to perform independent code reviews for the thousands of custom-developed applications at VA. Individual teams are able to integrate security tools into their software development and maintenance workflows.

VA Privacy Service has the agency-wide responsibility and accountability for the VA Privacy Program. VA Information Security Operations (ISO) – Privacy ensures that Veteran's privacy interests are protected and that PII and PHI is managed responsibly within all VA technologies, programs, information collections and policies. It is the vision of the VA Privacy Program to serve as a model for privacy excellence across the government providing a trusted environment that protects the privacy of Veterans, their beneficiaries and VA employees. VA Privacy Service plays a central role in overseeing, coordinating, and facilitating VA's privacy compliance efforts in accordance with applicable privacy requirements in law, regulation, and policy. VA Privacy Service ensures that VA considers and assesses the privacy implications of all VA regulations and policies and leads the VA's evaluation of the privacy implications of legislative proposals, congressional testimony, and other materials pursuant to OMB Circular A-19. VA Privacy Service takes proactive steps beyond those required in law, regulation, and policy to manage privacy risks associated with any VA activities that involve the creation, collection, use, processing, storage, maintenance, dissemination, disclosure, and disposal of PII and PHI by programs and information systems. Relevant authorities include but are not limited to the Privacy Act of 1974; the Paperwork Reduction Act of 1995; the E-Government Act of 2002; the HIPAA; OMB Circular A-130; Privacy Act Implementation: Guidelines and Responsibilities; OMB Circular A-108; OMB's Final Guidance Interpreting the Provisions of Public Law 100-503, the Computer Matching and Privacy

Protection Act of 1988; and OMB Guidance for Implementing the Privacy Provisions of the E-Government Act of 2002.

GitHub Business Cloud (GHBC) enables OIS to implement core security-focused code review activities to proactively perform secure development lifecycle analysis and eliminate point in time security driven by the ATO process using Static Code Analyzer (SCA) software, which performed Static Application Security Testing (SAST). SAST, SCA, and secret scanning will be primarily driven by GHBC configuration.

Joint Longitudinal Viewer (JLV) requires funding to further automate functions to improve its security posture and putting methods in place to further secure connections between DoD, VA and Cerner.

VistA - CPRS requires funding to implement top priority enhancements that directly impacts patient safety and security directives. CPRS is the crucial GUI for the EHR and its security compliance is paramount to patient safety.

Telehealth Hub Expansion requires funding to upgrade current infrastructure to a more modern, stable infrastructure that will allow for improved security for all Telehealth care.

National Center for Patient Safety (NCPS) Patient Safety Operations is upgrading a class III product to class I. The Class III product posed significant risk due to out of date servers and capabilities that lead to vulnerabilities.

Case and Correspondence Tracking - VIEWS Case and Correspondence Management (CCM) cybersecurity is characterized by a four-pronged approach involving governance, data protection, incident detection, and adverse situation responses. Cyber governance includes conducting annual assessments of the infrastructure through code scanning to detect known software risks, and then submitting the results for remediation to the product sustainment team; annual Privacy Impact Assessments are also conducted. Data protection consists of two-factor authentication for access to the app, along with formal policies and procedures addressing data retrieval and management rules, and user account monitoring. Incident detection is handled through manual review of reported incidents, and in the future, through planned implementation of a case scanning tool to identify PII in case records. Finally, any security incidents identified with this product are reported to the Information System Security Officer and to the Privacy Officer for immediate evaluation and appropriate mitigation procedures.

2024 funding ensures the Matter Tracking System (MTS) continues to receive essential sustainment support services including mitigation of security vulnerabilities, updates to security plans and standard operating procedures, maintaining the Authority to Operate (ATO) on the VA network by remediating vulnerabilities, software updates to maintain compliance with VA's Technology Reference Model (TRM), timely investigation and resolution of system outages, and corrective actions required to address system performance and reliability issues. These services are critical to ensuring the system remains operational, reliable, and available to support VA's mission.

GAO Module cybersecurity is characterized by a four-pronged approach involving governance, data protection, incident detection, and adverse situation responses. Cyber governance includes conducting annual assessments of the infrastructure through code scanning to detect known software risks, and then submitting the results for remediation to the product sustainment team; annual Privacy Impact Assessments are also conducted. Data protection consists of two-factor authentication for access to the app, along with formal policies and procedures addressing data retrieval and management rules, and user account monitoring. Incident detection is handled through manual review of reported incidents, and in the future, through planned implementation of a case scanning tool to identify PII in case records. Finally, any security incidents identified with this product are reported to the Information System Security Officer and to the Privacy Officer for immediate evaluation and appropriate mitigation procedures.

Veterans Data Integration and Federation Enterprise Platform (VDIF-EP) allows for the use of federated data across all VistAs in a secure way to access patient data, which will move off of non-compliant technology to a secure method to access.

Portfolio Integration provides support to cyber projects and initiatives that involve multiple products across many product lines and portfolios. End-of-Life (EOL) projects are intended to eliminate unsupported software from the systems to prevent potential security threats. IPv6 brings all of the software up from IPv4 helping to eliminate a security risk. Social Security Number Remediation (SSNR) helps bring the VA in-line with security and privacy regulations and legislation around primary identifiers used in the VA.

2024 funding for Property Management ensure the Construction and Facilities Management Support System (CFMSS) continues to receive essential sustainment support services including mitigation of security vulnerabilities, updates to security plans and standard operating procedures, maintaining the Authority to Operate (ATO) on the VA network, software updates to maintain compliance with VA's Technology Reference Model (TRM), timely investigation and resolution of system outages, and corrective actions required to address system performance and reliability issues. These services are critical to ensuring the system remains operational, reliable, and available to support VA 's mission.

2024 funding ensure the Space Management Support System (SMSS) continues to receive essential sustainment support services including mitigation of security vulnerabilities, updates to security plans and standard operating procedures, maintaining the Authority to Operate (ATO) on the VA network, software updates to maintain compliance with VA's Technology Reference Model (TRM), timely investigation and resolution of system outages, and corrective actions required to address system performance and reliability issues. These services are critical to ensuring the system remains operational, reliable, and available to support VA's mission.

VistA Audit Solution (VAS) provides ability to capture audit logs for anyone who accesses VistA, which allows for full capability to review who is assessing information in VistA.

Funds for Real Property Tools ensure the Capital Asset Management System Business Intelligence (CAMS-BI) and Strategic Capital Investment Planning (SCP) systems continue to receive essential sustainment support services including mitigation of security vulnerabilities, updates to security

plans and standard operating procedures, maintaining the Authority to Operate (ATO) on the VA network, software updates to maintain compliance with VA's Technology Reference Model (TRM), timely investigation and resolution of system outages, and corrective actions required to address system performance and reliability issues. These services are critical to ensuring the system remains operational, reliable, and available to support VA's mission.

2024 funding ensures the Matter Tracking System (MTS) continues to receive essential sustainment support services including mitigation of security vulnerabilities, updates to security plans and standard operating procedures, maintaining the Authority to Operate (ATO) on the VA network by remediating vulnerabilities, software updates to maintain compliance with VA's Technology Reference Model (TRM), timely investigation and resolution of system outages, and corrective actions required to address system performance and reliability issues. These services are critical to ensuring the system remains operational, reliable, and available to support VA's mission.

VistA - Scheduling (VSE) Scheduling requires funding to provide a secure method to connect to multiple VistAs and modalities to schedule appointments across the enterprise.

Case and Correspondence Tracking - GAO Module cybersecurity is characterized by a four-pronged approach involving governance, data protection, incident detection, and adverse situation responses. Cyber governance includes conducting annual assessments of the infrastructure through code scanning to detect known software risks, and then submitting the results for remediation to the product sustainment team; annual Privacy Impact Assessments are also conducted. Data protection consists of two-factor authentication for access to the app, along with formal policies and procedures addressing data retrieval and management rules, and user account monitoring. Incident detection is handled through manual review of reported incidents, and in future, through planned implementation of a case scanning tool to identify PII in case records. Finally, any security incidents identified with this product are reported to the Information System Security Officer and to the Privacy Officer for immediate evaluation and appropriate mitigation procedures.

Currently, Telemedicine is operating on unstable, unsecure infrastructure. Funding for Telemedicine (Store & Forward) will allow to move to a stable and secure infrastructure that will allow for a secure security posture.

Field Security Service is an essential element in any technological advancement and is critically important to providing secure accessible quality care to Veterans. The 2024 request will sustain existing capabilities to identify, protect and defend the VA network and infrastructure.

VA Innovation and Research Review System (VAIRRS) Data Access Request Tracker (DART) requires a move to migrate off its current unsecure infrastructure to a modern platform.

2024 funding for Property and Facility Services are needed by the Veterans Canteen Services Automated Information System (VCS AIS) to ensure that vulnerabilities are remediated and ATO supporting artifacts are stored in eMASS, that POAMS with mitigation plans are approved by the Authorizing Official, and Security Controls are reviewed on a monthly basis and yearly for security audits.

BMS requires a migration to properly scale and ensure proper security requirements are met in a modern infrastructure, due to the critical nature of the product.

2024 funding for Vendor Management will ensure the Veterans Enterprise Management System (VEMS) continues to receive essential sustainment support services including mitigation of security vulnerabilities, updates to security plans and standard operating procedures, maintaining the Authority to Operate (ATO) on the VA network, software updates to maintain compliance with VA's Technology Reference Model (TRM), timely investigation and resolution of system outages, and corrective actions required to address system performance and reliability issues. These services are critical to ensuring the system remains operational, reliable, and available to support VA's mission.

Business Architecture - VA Functional Organization Manual System (VA FOM) cybersecurity is characterized by a four-pronged approach involving governance, data protection, incident detection, and adverse situation responses. Cyber governance includes conducting annual assessments of the infrastructure through code scanning to detect known software risks, and then submitting the results for remediation to the product sustainment team; annual Privacy Impact Assessments are also conducted. Data protection consists of two-factor authentication for access to the app, along with formal policies and procedures addressing data retrieval and management rules, and user account monitoring. Incident detection is handled through manual review of reported incidents. Finally, any security incidents identified with this product are reported to the Information System Security Officer and to the Privacy Officer for immediate evaluation and appropriate mitigation procedures. Note that no PII or PHI is stored in this database.

2024 funding for Debt Management will ensure PayVA continues to receive essential sustainment support services including mitigation of security vulnerabilities, updates to security plans and standard operating procedures, maintaining the Authority to Operate (ATO) on the VA network, software updates to maintain compliance with VA's Technology Reference Model (TRM), timely investigation and resolution of system outages, and corrective actions required to address system performance and reliability issues. These services are critical to ensuring the system remains operational, reliable, and available to support VA's mission.

Awareness, Governance, Risk, Compliance - \$100.3 million

The VA Awareness, Governance, Risk, Compliance Project leads integration of cybersecurity capabilities across the VA enterprise. The project delivers oversight, management and leads implementation of cyber security priorities enabling VA adherence to the 2024 OMB Planning Guidance. The memo focuses on IT Modernization and Cybersecurity Priorities and supports the direction in Executive Order 14028. As the VA's lead for cybersecurity oversight, it derives the cyber security priorities as set forth in the VA 2022-28 Strategic Plan and ensures enterprise-wide cybersecurity awareness, drives cybersecurity governance, and delivers cybersecurity risk management and compliance. A cornerstone to the strategic plan, this project specifically is the driver to provide improved cybersecurity, privacy protections, and resiliency for the VA and the Veteran. The project further funds operations and maintenance requirements supporting VA efforts in cybersecurity strategies, policies, governance, oversight, and network defenses to protect

Veterans' information and VA's information systems. The 2024 budget request will enable VA to:

- Drive alignment with federal cybersecurity priorities and requirements
- Collaborate with DoD to increase reciprocity and improve customer and Veteran experience
- Provide enterprise-level cybersecurity architecture governance requirements and advisory services
- Adapt to the evolving cybersecurity threat landscape by continually centralizing and refreshing VA's cybersecurity policy and guidance
- Recruit, develop, and retain a talented cybersecurity and privacy workforce
- Invest in technologies to support implementation of initiatives ZTA, adoption of cloud services, enhanced data encryption and logging, and use of multi-factor authentication services

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Information Security Policy and Strategy (ISPS) - Enterprise CyberSecurity Plan	\$ -	\$ 24,345	\$ -	\$ -	\$ -	\$ 60,000	\$ -	\$ 56,369	\$ (3,631)
Information Security Policy and Strategy (ISPS) - Enterprise Security Architecture	\$ -	\$ 13,326	\$ -	\$ -	\$ -	\$ 21,521	\$ -	\$ 18,372	\$ (3,149)
Information Security Policy and Strategy (ISPS) - CyberSecurity Technology and Metrics	\$ -	\$ 10,597	\$ -	\$ -	\$ -	\$ 9,931	\$ -	\$ 15,788	\$ 5,857
Information Security Policy and Strategy (ISPS) - Information Security Policy and Compliance	\$ -	\$ 2,832	\$ -	\$ -	\$ -	\$ 15,639	\$ -	\$ 6,108	\$ (9,531)
Cybersecurity Program Integration	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,063	\$ -	\$ 3,670	\$ (393)
Awareness, Governance, Risk, Compliance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,451	\$ -	\$ -	\$ (9,451)
Enterprise Cybersecurity Strategy Program - American Rescue Plan 8002	\$ -	\$ 10,918	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
OIS Program Integration	\$ -	\$ 3,042	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Awareness, Governance, Risk, Compliance	\$ -	\$ 65,060	\$ -	\$ -	\$ -	\$ 120,605	\$ -	\$ 100,307	\$ (20,298)

Information Security Policy and Strategy (ISPS) - Enterprise Cyber Security Plan oversees VA's efforts to advance the overall cybersecurity posture of VA through enhanced visibility into VA IT systems and networks and by providing cutting edge guidance, support, and tools. It is responsible for the execution of OIT's cybersecurity strategy and for defining the set of actions, processes, and emerging security technologies required to further enhance the security state of VA's information and assets while improving the resilience of VA networks. The effort retains cybersecurity capability and capacity for enhanced visibility into VA IT systems and networks and by providing cutting edge guidance, support, and tools.

Information Security Policy and Strategy (ISPS) - Enterprise Security Architecture ensures stakeholder protection needs and the corresponding system requirements necessary to ensure organizational missions, business functions and privacy data are adequately addressed in the enterprise architecture including reference models, segment architectures, and solutions architectures. It establishes security standards, requirements, and processes for risk and business functional requirements. It integrates security and business process requirements with system and application engineering system requirements throughout VA's system development lifecycle. Enterprise Security Architecture is an iterative, automated, enterprise security process that

encompasses security attributes from architecture domains and helps VA's ECSP implement prioritized cybersecurity capabilities to help inform VA Enterprise Security Architecture. It also drives measurable technical solutions by developing ESA standards and requirements to address security deficiencies and years of material. The 2024 request will retain steady-state operations and maintenance funding to continue enterprise-wide cyber security architecture. The funding will ensure continued development of data cybersecurity as a strategic asset through development of an ever-improved security network architecture for the VA enterprise.

The Information Security Policy and Strategy (ISPS) – Cyber Security Technology and Metrics group oversees the execution of capabilities and strategies to describe, assess, and continuously monitor VA's cybersecurity landscape in support of VA's cybersecurity program. It leads the Security Architecture and Software Assurance (SASA) IAM Team to support compliance with FISMA and government-wide guidance and requirements associated with Federal Identity, Credential, and Access Management (FICAM) services. The SASA IAM Team also helps ensure that VA's FICAM services are used to fulfill cybersecurity control requirements. Further, CTM captures and displays key performance metrics in a single view, thus facilitating risk decision and budget allocation prioritization for senior executives. CTM subject matter experts provide technical security expertise in various technologies and methodologies executed by the offices responsible for 44 U.S. Code 3554 FISMA areas. The 2024 request will retain steady-state operations and maintenance funding to continue the baseline capabilities delivery and compliance efforts to SASA, IAM, FISMA and FICAM.

The 2024 outcomes include:

- Further development and improvement of cybersecurity measurements for use by cybersecurity leaders in evidence-based decisions to improve governance and deliver quality cybersecurity outcomes for the VA.
- Ensure compliance with Federal and government wide mandates.
- Aggressively pursue cutting edge guidance, support and tools to further the VA's cybersecurity posture.
- Identify and articulate requirements, standards, and opportunities for transformative cybersecurity improvements for the VA and Veterans.
- Promote collaboration, enable data protection, and provide resiliency in the face of a broad spectrum of threats through the realization of strategic cybersecurity goals.

Information Security Policy and Strategy (ISPS) - Information Security Policy and Compliance will

- Further improve VA's cyber security posture, ensuring VA information and data are adequately protected and providing Veterans and employees with a trusted and secure information management and data processing environment.
- Continue oversight of the review of IT products and services the Department purchased to help facilitate compliance with Federal and Departmental cybersecurity policy and regulations.

Cyber Security Program Integration is required for coordination and facilitation efforts to maintain and improve the VA cyber posture while improving service delivery, collaboration and risk awareness. In addition, this request assists VA in continuing to improve the security and resiliency of the underlying infrastructure facilitating enhanced visibility, access, and functionality across the

spectrum of services for the Veteran. Outcomes include continuing management of OIS performance reporting within OIT as well as the VA and external stakeholders such as OMB.

Network Services - \$463.2 million (Operations and Maintenance)

This project includes the costs for the network infrastructure, associated hardware, architecture upgrades, and support services that allow VA to have a robust network infrastructure to support today’s electronic environment.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Network Engineering	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 241,894	\$ -	\$ 255,000	\$ 13,106
Infrastructure Readiness Program (IRP) - Network Infrastructure	\$ -	\$ 136,560	\$ -	\$ -	\$ -	\$ 95,000	\$ -	\$ 134,000	\$ 39,000
Enterprise IT Support Contracts - Network Services	\$ -	\$ 116,550	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 38,196	\$ 38,196
Network Operations Center	\$ -	\$ 32,616	\$ -	\$ -	\$ -	\$ 33,673	\$ -	\$ 36,000	\$ 2,327
Enterprise Telecommunications	\$ -	\$ 251,543	\$ -	\$ 649	\$ -	\$ -	\$ -	\$ -	\$ -
Enterprise Telecommunications - American Rescue Plan 8002	\$ -	\$ 43,146	\$ -	\$ 4,455	\$ -	\$ -	\$ -	\$ -	\$ -
Network Services	\$ -	\$ 580,415	\$ -	\$ 5,104	\$ -	\$ 370,567	\$ -	\$ 463,196	\$ 92,629

Please refer to the IRP section for details regarding the IRP – Network Infrastructure sub-project

The Network Engineering (formerly Enterprise Telecommunications) Core Network Services, Network Engineering and Provisioning, provides Veterans with access to Veterans services, including Veterans in remote areas. These services provide the VA with internal communications and allows the VA connectivity to the outside world. Services include voice, data, mobile/cellular/satellite and video services in support of every VA physical location and business unit, the VA enterprise Wide Area Network (WAN), VA Internet gateways, VA private Cloud access points, remote access (telework, telehealth, etc.), modern voice Session Initiation Protocol (SIP), legacy voice services - Plain Old Telephony Services (POTS), Local Exchange Carrier (LEC) / voice charges, long distance, mobile/cellular smartphones, cellular LTE/5G data plans, VA National Teleconferencing Services (VANTS), FedRelay access for hearing impaired services, emergence satellite services for Very Small Aperture Terminals (VSATs), Skype/Teams/Webex/call conferencing, videoconferencing, and telehealth. These telecommunications services are considered must pay requirements to support services that all VA Administrations rely upon to deliver services to Veterans, as well as Disaster Recover/Continuity of Operation (DR-COOP) for service capabilities.

Enterprise IT Support Contracts - Network Services represents the estimated charges for IT Support contracts used by IO and Connectivity and Collaboration Services (CCS) Organizations to support operations across the VA.

The 2024 major cost drivers are:

- Active Directory Modernization
- Mobile Device Management and Identify Access Management
- ProServ Network Infrastructure Engineering Systems Support

- Enterprise Infrastructure Solutions (EIS) Enterprise Telecommunications Expense Management System (eTEMS) enables the VA to manage circuits, cellular and data enterprise-wide

Network Operations Center (NOC) directly support current and projected future DHS TIC requirements, as outlined in the DHS TIC Reference Architecture Document Version 2.0. NOC also implements and performs operations and maintenance on all devices are used in the TIC security Stack. VA's TIC architecture enables secure and reliable computer network connectivity between internal and external stakeholders. The protection of Veterans' data is of paramount importance. This ensures all data bound for the internet does not contain PII or PHI, while all inbound data is safe and secure as it traverses VA circuits as required by the VA 6500 Handbook. This requirement supports the TIC scaling to support up to 100 Gbps (gigabits per second) of mixed IP (Internet Protocol) traffic throughput to meet projected operational needs. This requirement also fulfills the FIPS 200, Minimum Security Requirements for Federal Information and Information Systems, section 3, which requires the following: 1) Organizations must implement plans for backup operations in case of an emergency 2) Organizations must monitor, control, and protect organizational communications at the external boundaries of the information system. 3) Organizations must employ architectural designs that promote effective information security within organizational information systems.

Infrastructure Readiness Program (IRP) - \$427.5 million (Operations and Maintenance)

The Infrastructure Readiness Program (IRP) guides the ongoing refresh and replacement of the IT Infrastructure that sustains all VA IT operations. IRP identifies the current state of the IT Infrastructure and provides analysis for the strategy to refresh and modernize IT Infrastructure assets. Business drivers of technical debt include equipment age, expiration of warranty, support limitations, lifecycle estimates, business requirements, technology roadmap, software life cycle elements, financial planning, vendor supply and policy changes. The term “Technical Debt” is normally associated with software development and is generally understood to relate to making short term decisions and trade-offs that can cause significant rework to address in the long term. With the adoption of DevSecOps framework, “technical debt” refers to the cost needed to bring legacy infrastructure components to a state of full efficacy. Inadequately resourced technical debt accumulates year over year and reduces the available technology resources for other VA business priorities.

Subsequent consequences of accumulated infrastructure “Technical Debt” are; an increased risk of catastrophic failure of critical systems; new software application performance inhibited by inherent limitations of existing operating systems; security requirements that cannot be enforced; technology that is no longer supported by the manufacturer; increasing operational maintenance costs (eclipsing the cost of acquiring new replacement technology); and legacy technology that is unable to respond to new and/or ever changing business requirements. Reducing technical debt enables VA to rapidly deliver IT solutions for VA business priorities that enable the exceptional customer experience, care, benefits, and services for Veterans.

Operational efficiency is based upon a robust, healthy IT infrastructure necessary to ensure delivery of reliable, available, and responsive IT services to all VA staff offices and administration

customers as well as Veterans. In addition to continuing to facilitate a successful transition to the new EHR, VA must ensure the existing infrastructure is modernized and optimized in support of all modernization efforts (i.e., Finance, Supply Chain, etc.), thus achieving a continuous readiness state for all common core technologies incorporated into the IRP plan.

In 2024, OIT will use the IRP resources to support the continued and necessary balancing of IT infrastructure that is In/Out of lifecycle effectiveness (aka Common Core Technology Refresh). OIT will continuously complete an enterprise-wide assessment of each of the critical infrastructure components identified to determine the scope of the IRP CCT program. Each component used criteria unique to that specific infrastructure element to derive the needs for improvement and basic capability evolution. For instance, desktop computing requirements were derived from review of literature for Industry standard life cycle refresh recommendations (example: Gartner), a review against installed base using automated tools such as Microsoft's System Center Configuration Manager (SCCM), and a replacement strategy informed by that research to create an optimized schedule of replacement. Bandwidth utilized a model based upon years of experience supporting business requirements across three administrations as well as utilization and consumption metrics from automated discovery tools to map out a logical, efficient, and cost-conscious provisioning schedule.

Current Readiness Initiatives: In terms of Infrastructure Readiness by location/site, it is determined by the business drivers and individual assessment of the infrastructure items. For example, Network Bandwidth would be applied based upon present status and targeting locations of high utilization currently being provisioned on older copper-based technology.

- **Modernizing Network Infrastructure:** OIT has reduced its technical debt in this category by 45% to date there are now 106,776 routers, switches, and appliances at end of life out of a total of 194,726 devices. The 2024 request will support refresh of several thousand devices across the Enterprise. OIT's modernization strategy is to utilize a best value approach to move to a homogenous network stack and then deploy an agile self-service network with expandable services to the business and Veterans and all consumers of network resources at the VA facilities. This will transform VA from using 20-year-old open standard protocols to modern vendor integrated expandable solutions.

As OIT modernizes the network, the demand for artificial intelligence to be incorporated to promote additional capabilities, automation and agility is significant. The focus is to utilize increased virtualization and a scalable architecture to better support modern and evolving technologies (e.g., Quantum Computing and Internet of Things (IoT) to improve integration with other solutions such as security storage and Unified Communications (UC) critical to support health and benefits delivery outcomes in the future.

- **Expand, Refresh, and Modernize Server/Storage Farm Infrastructure:** The strategy for reduction of technical debt in this category is to utilize the Infrastructure as a Managed Service (IaaS) contract and update/refresh on premise mission essential servers/storage infrastructure. Approximately 17,000 servers, storage arrays and related systems require modernization and technological reengineering. The 2024 request will support the business need to refresh over 5,994 systems with an allocation for growth and technological uplifts. The

overall focus of Server/Storage modernization is to standardize the platform to support the Data Center Optimization Initiative (DCOI) and attendant support structure. To be able to achieve this, there is a requirement for similar platforms and storage at all Corporate Data Centers (CDC), Mission Support Centers (MSC), Campus Support Centers (CSC) and modernization of the hosting.

With respect to storage infrastructure, OIT recently implemented a Storage Resource Management (SRM) tool that now provides OIT with in depth metrics regarding performance of the storage stack. OIT plans to utilize the data gathered from SRM and engage its business partners via the BIOS office to develop optimal SLAs balancing customer requirements with operational efficiency. OIT currently manages six unique infrastructure designs at a typical Campus Support Center. Through modernization and reengineering, OIT can streamline this into two tactical infrastructure solutions (with split life cycle so they refresh at different intervals) and realize cost avoidance from unnecessary maintenance on underutilized technology hardware. OIT will pursue “Storage on Demand” options as a subscription service and move forward to replace multiple VA Medical Center hosted storage arrays annually that can reach a lifecycle maturity of expired support (aka - Last Date of Support (LDoS) and migrate to a “hyper-converged” replacement strategy for on premise systems (next generation evolution).

- Modernize and Converge Unified Communications: OIT expanding business requirements specify the need for enhanced capabilities that handle integrated internal and external client communications. The ability to provide enhanced collaboration and offer self-service capabilities are dependent upon reengineered and refreshed communication infrastructure. OIT completed the foundational work for phase 1 and 2 with phase 3 work pending which encompasses all 168 major and associated remote sites requiring convergence and modernization. The focus of the Unified Communications (UC) and Video Conferencing (VTC) effort is to implement a standardized and modernized enterprise-wide Unified Communication and collaboration infrastructure that enables the capability to support full convergence of all electronic communications onto a single, Internet Protocol (IP)-based enterprise system that seamlessly unifies all voice, video, and collaboration traffic supporting all VA end-users and Veterans.

The expected outcomes are the elimination of standalone communication silos, infrastructure duplication, implementation of enterprise standards, and reducing VA’s Total Cost of Ownership (TCO). This will also position the VA enterprise with the necessary expandability to support future transitions to new services and features inclusive of managed service capabilities integration. Enterprise Contact Center and Clinical Contact Center are expected to be the initial capabilities provided to the enterprise. This will reduce the overall complexity and footprint of the VA’s existing UC environment and provide the foundational elements for the migration to enterprise-class UC applications and services.

As part of the IP-based modernization strategy, OIT has moved to a model where all phone systems in a VISN are from the same Original Equipment Manufacturer (OEM), which allows Unified Communications to enable VISN-centric business models and enhance interoperability. OIT will also modernize Video Conferencing (VTC) Codec system that has reached the Last Date of Support (LDoS) and no longer supports security baselines. The modernization strategy includes

implementing Enterprise Contact Center, Clinical Contact Center, Enterprise Private Cloud session control, and building a foundation to allow exploration of telephony-as-a-service options and capabilities (such as contact center applications, voice mail, cloud hosted enterprise-wide voice services).

- Modernize and Upgrade the National Wireless Program: OIT's modernization and upgrade strategy is to provide coverage for high throughput data devices, such as VA laptops, VA Apple devices, Voice applications (such as Nurse Call and Voice over Wireless Local Area Networks (WLAN) systems) and Video applications (such as Telehealth, multicast streams and point to point video conference). This modernization strategy allows VA to increase its ability to provide for the expanding mobile environment and ensure support for the Internet of Things (IoT). Further, the strategy increases visibility into application performance, Quality of Service (QoS) performance and wireless security monitoring (i.e., rogue wireless devices and wireless attack vectors). As OIT modernizes the VA WLAN systems, OIT will provide additional guest wireless services throughout the Enterprise platform.
- Revitalize End User Desktop Infrastructure: OIT has significantly increased the in-service operational population of desktops/laptops as a direct result of COVID-19 expansion requirements. IRP has not yet fully realized the impact of this increase on technical debt in this category. However, it is expected to positively impact the ability to retire and refresh out of lifecycle assets associated with the end user experience. The current category posture indicates that approximately 150,000 devices (Laptops and Desktops) are "out of lifecycle" (meaning - pass either normal operational efficiency operation or lifecycle capabilities performance degradation). 2024 funding will continue to support the downward trend of refreshing approximately 144K end user devices.
- OIT continues to modernize the end user experience by providing a dynamic and agile framework utilizing a Provisioning-as-a-Service (PVaaS) model that will enhance customer satisfaction and allow OIT to meet changing business requirements rapidly. Essential characteristics of the PVaaS environment include logistical management of the end user devices inclusive of initial setup/imaging, provisioning, asset and inventory management and lifecycle removal/refresh of managed equipment. PVaaS will also include a move to computing devices with solid state drives (SSD) and support for iterative attendant operating software.
- Transitioning the current capital expense approach to an operations expense model will also add value in providing consistency of performance and obviating the current risks associated with diversion of funds for other needs. In addition, OIT will explore alternate solutions including solutions that allow a "bring your own device" and a completely managed service desktop environment ("seat management").
- Modernize Wide Area Network (WAN) Bandwidth Capacity: OIT must continue to modernize its bandwidth infrastructure to adequately support VA's growing dependence on telemedicine and the increased number of teleworkers to minimize interactions at VA Medical Centers due to the pandemic. With over 2600 circuits currently active in VA, IRP will continue to reduce overall technical debt in this category significantly. Data transport and management are

essential elements in providing expanded and enhanced capabilities for the VA Enterprise. Uplifting this critical core competency enables OIT to meet these needs.

- Modernizing Very Small Aperture Transmission (VSAT) Infrastructure: OIT needs to modernize and uplift the legacy continuance of operation VSAT infrastructure over the next three years to increase capacity and ensure FIPS 140-2 encrypted transmissions.
- Reengineer and Upgrade Printer/Scanner Infrastructure: OIT manages an operational fleet of over 140,000 print/scan capable devices.
- OIT end user experience modernization objective is to migrate from single function to multifunction devices where possible under a Managed Print Services (MPS) framework. Technology life cycle refresh in this category is routinely accomplished when the device is either no longer fit-for-purpose, device performance is sufficiently degraded or when financially, it is no longer viable to retain.
 - AD Modernization: Active Directory Modernization’s primary objective is “Domain Collapse” – the reduction of 33 legacy Active Directory domains to a singular enterprise domain for greater operational efficiencies and management. Domain Collapse significantly impacts enterprise operations while also reducing costs required for Active Directory administration. It eliminates cross domain authentication issues, VA branding contention and reduces avenues ‘surface areas’ targeted by cyber security adversaries.
 - Identity Access Management (IAM) Modernization: IAM User Provisioning is an enterprise service that manages user access privileges for employees, contractors, health care trainees, volunteers, and affiliates. This modernization will streamline on and off-boarding processes by providing integrated workflows with personnel security, human resources, active directory administrators, USA Staffing, PIV, and identity management. Modernization of the enterprise provisioning service addresses multiple GAO findings, brings VA into compliance with Identity Credentialing and Access Management (ICAM) and Continuous Diagnostics and Mitigation requirements, and standardizes the basic roles and privileges throughout VA.

Emerging Readiness Initiatives

- Remote End User Experience Modernization/Remote Access Modernization: Remote End User Experience/Remote Access Modernization efforts aim to enhance end users’ experiences, services, and collaboration capabilities while streamlining processes through technology. OIT will establish a cohesive implementation strategy to collect, measure, and display end users’ experiences via automation and translate the data into actionable information utilizing dashboards to illustrate/illuminate improvement in remote end users’ experiences (i.e., job efficiency, remote service performance, financial costs, inventory, usage, technical capabilities). This effort is integral to the Cloud native virtualization and remote access solutions such as TIC 3.0 compliant solutions, VPN as a Service and Cloud-based Virtual Desktops.

- Architect and re-engineer “Zero Trust Security Architecture”: The primary directive targeting these efforts are codified by Executive Order 14028. Increased adoption of cloud and Internet services external to VA are driving the need for TIC 3.0 and ZTA to support these changing use cases with fidelity and performance resiliency. Zero Trust concepts are based on the premise of “Never Trust, Always Verify”, and are needed to enable secure remote access from “anywhere” and “any device”. Adaptation and implementation of this new security posture provides a robust and strategic approach for addressing systemic deficiencies for VA (e.g., enterprise security governance, foundational capability gaps, lack of data and identity governance). This posture initiates a paradigm shift across existing VA security resources from the current compliance-mindset to a mindset that assumes breach and embraces adoption of Zero Trust capabilities as a first step.

EHRM Infrastructure Readiness

- The IRP/CCT program is expected to provide approximately \$37M in infrastructure readiness refresh that will directly support the Electronic Health Records Initiative. This infrastructure readiness supports necessary requirements that are 12–18 months before EHRM implementation is completed in the subject locations.

The OIT IRP continues to evolve in its maturity and delivery. Business drivers shape and influence the IRP Program dynamics with the intent to prioritize the most egress needs first. From new legislative emerging requirements to existing IT infrastructure, the major success factor is a properly funded IRP program to follow the path to reduce the accumulated technical debt that occurred due to lack of funding and stay on top of annualized technical debt. Management of such a diversified program like IRP requires Executive oversight, program administration, strategy development, disciplined delivery modes and governance. As such, OIT has established the IRP Executive Working Group (EWG) which is responsible for providing a cadre of OIT Executive Leaders who will ensure timely resource allocation, program delivery, financial guidance, and strategic leadership towards the program’s primary directive. This IRP EWG has been formalized and incorporated into VA OIT’s established IT governance structure for compliance and direction.

The IRP Executive Working Group has established an operational IRP program office dedicated to the tactical management, reporting and assimilation of artifacts, tasks, performance metrics and communications related to the individual projects initiated by the program. Quality, performance, security, service level management and risk management have also been incorporated into this program and administered by the program office. Additional details and or questions can be directed to this office.

End User Software - \$315.1 million (Operations and Maintenance)

This project consists primarily of the VA’s Enterprise License Agreement for Microsoft Office 365 as well as other products including operating systems, analytics software, database software and other productivity software such as MS Project and Visio. These tools have become the baseline tools that nearly every employee uses to perform their required duties.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Microsoft Enterprise License Agreement (ELA) - Office 365	\$ -	\$ 313,665	\$ -	\$ -	\$ -	\$ 400,000	\$ -	\$ 315,098	\$ (84,902)
Microsoft ELA - American Rescue Plan 8002	\$ -	\$ 82,303	\$ -	\$ 4,473	\$ -	\$ -	\$ -	\$ -	\$ -
End User Software	\$ -	\$ 395,968	\$ -	\$ 4,473	\$ -	\$ 400,000	\$ -	\$ 315,098	\$ (84,902)

The Microsoft Enterprise License Agreement (MS ELA) - Office 365 sub-project provides the continuation of Microsoft licensing, software assurance, and services for a broad range of Microsoft products for various offices, projects, and initiatives throughout VA. The MS ELA allows VA to continue to use and upgrade Microsoft products to maximize VA's investment in Microsoft products (server and desktop) deployed within the VA infrastructure. Annual true-up of licensing is required.

- Analytics Software will support the Analytical Software portion of the Enterprise Software License Maintenance. End User Specialty SW affects almost every VA service to, or interaction with, Veteran clients as supported by VA's operational IT systems. This sub-project provides the ongoing operations and maintenance of End user Specialty Software License Maintenance. The beneficial impacts on the Veteran, or beneficiary/family members are derived from the individual applications themselves
- Microsoft ELA EU Analytics SW – Power BI will support continuation of Microsoft licensing, software assurance, and services for EU Analytics SW – Power BI
- Microsoft ELA Specialty EU Software – Visio will support continuation of Microsoft licensing, software assurance, and services for Specialty EU Software – Visio

Foundation Platforms - \$248.3 million (Operations and Maintenance)

Foundation Platform Project enables the enterprise-wide curation of key Veteran-centric data sets that ensure the most accurate picture of the Veteran is available to key IT systems powering the moments that matter in the Veteran’s experience journey with the VA.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
ITIN Salesforce Application Programming	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 40,125	\$ -	\$ 107,067	\$ 66,942
ITIN VA Enterprise Cloud Solutions (VAEC) Application/Application Programming Interface (API) Hosting	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 50,000	\$ 50,000
ITIN Digital Transformation Center (DTC) Application Programming Interface (API) Development and Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,671	\$ -	\$ 47,400	\$ 41,729
ITIN Mulesoft Application/API Development and Support & ITIN MuleSoft License Distribution	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 43,831	\$ 43,831
Digital Transformation Center (DTC)	\$ -	\$ 5,884	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Digital Transformation Center (DTC) - American Rescue Plan 8002	\$ -	\$ 85,431	\$ -	\$ 33,201	\$ -	\$ -	\$ -	\$ -	\$ -
API Management	\$ 7,949	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Salesforce Application	\$ -	\$ 37,994	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Salesforce Application - American Rescue Plan 8002	\$ -	\$ 110,505	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Enterprise Cloud Solutions - American Rescue Plan 8002	\$ -	\$ 3,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Foundation Platforms	\$ 7,949	\$ 242,815	\$ -	\$ 33,201	\$ -	\$ 45,796	\$ -	\$ 248,298	\$ 202,502

Salesforce platform allows automation of business workflows, connects users to business processes, and streamlines/optimizes business operations. It provides transformative capabilities in the hands of VA business customers and Veterans at a rapid pace compared to traditional software projects by enabling low-code/no-code applications that are extensible across the enterprise, including VBA, VHA, NCA, VACO and OIT. Efforts include core competencies of reusable customer relationship management and case functionality. It serves business customers via one shared security package and Authority to Operate on the entire Salesforce platform. Centralized platform management enables one platform team to manage all environment maintenance and license utilization, and there is dedicated end user support with one helpdesk to manage all Salesforce-specific user issues. Funding will be used for continued use of Salesforce licenses/subscriptions and cloud hosting for 127 in-production mission-critical Salesforce applications that are used by 70,000 users, routine patches/upgrades to the Salesforce platform, monitoring, and maintenance of the 99.9% uptime/availability SLA.

Salesforce aligns to the VA 2022-28 Strategic Plan by achieving Strategic Goal 2 in which the VA delivers timely, accessible, high-quality benefits, care, and services to meet the unique needs of veterans and all eligible beneficiaries. The VA Salesforce platform supports VA-wide applications including National Cemetery Scheduling Office, Occupational Health Record System, Clinical Contact Center Modernization, Office of Rural Health Grants Management, Caregiver Management (CARMA), White House Hotline, Disability Claim Quality Management, Education Compliance Feedback and Certification Management, Community Veteran Engagement Board, Veterans Relationship Management, Debt Management Center resolution of financial issues, automation of VAMC quality assurance inspections, Intake of burial requests for national & state VA cemeteries, support to Veteran's ability to appeal VA related debt, Quality Management System (QMS) to handle the increased volume of financial and educational support, Status Query and Response Exchange System (SQUARES) to support community homeless shelters' ability to

coordinate support services with VA including health benefits, Workload and Time Reporting (WATRS) for performance management and quality reporting for VA Claims Processors to improve performance and claims quality/accuracy, and Home Loan Guaranty Oversight Management. Each of these examples directly aligns with Strategic Objective 2.2: Tailored Delivery of Benefits, Care and Services, ensuring Equity and Access.

VA Enterprise Cloud Solutions (VAEC) Application/API Hosting develops and supports the VAEC which delivers secure and seamless cloud functionality to support the entire VA enterprise. The project enables the leveraging of cloud solutions by internal and external customers and ultimately Veterans by providing standardization and common services. VAEC Applications support the efficient migration to and utilization of cloud technology by project teams/business sponsors and their customers. 2024 funding is needed for the operational tools required to operate and maintain the VAEC. There is a large increase in systems/applications operating in the VAEC that includes new cloud native application development as well as migrations. By the end of 2024, VA is targeting to have 350 systems/applications migrated to the VAEC. Costs are expected to increase slightly due to the large number of systems/applications hosted in the VAEC.

Digital Transformation Center (DTC) is a service delivery program that enables the effective implementation and lifecycle management of low-code and no-code Software as a SaaS and PaaS solutions. 22% of recent SaaS requests are to replace legacy systems or manual processes. DTC accelerates health and benefits delivery outcomes for Veterans and military families, expedites delivery of low code/low code solutions, and improves customer service for VA providers and employees. The early adoption of the program has seen tremendous success through genuine working partnerships between the business and IT, driving significant growth. This approach represents a current best practice and future strategy for modernizing and delivering automation solutions. This initiative is critical for VA to move toward a Buy First strategy, and away from building custom apps. The funding will support establishment of new VA PaaS Platforms and enhancements to existing mission-critical applications, such as the Status Query and Response Exchange System (SQUARES) which is used to combat Veteran homelessness, VA Loan Electronic Reporting Interface-Replacement (VALERI), Enterprise Management of Payments Workflow and Reporting (eMPWR-VA), White House/VA Hotline, and many others. As VA continues to adopt low-code/no-code solutions to deliver enterprise-level functionality more rapidly in support of the Veteran, DTC is required to continuously optimize VA's primary PaaS offerings. These platform-level enhancements (e.g., safely implementing new, vendor-driven, platform-level functionality) are ongoing and critical to maximize the return on VA's PaaS investment. DTC supports ~70,000 VA Salesforce users in Production and expects this number will continue to grow. DTC receives an average of 74 SaaS/PaaS requests per month, leading to a growth in implementations and user base. Increase in demand per year for SaaS and PaaS products that require security support, implementation support or enhancements. User growth is being driven by the increased availability of SaaS and PaaS products approved for VA use, so sustained growth in demand is envisioned which necessitates scaling the DTC infrastructure to accommodate additional demand on the platform. 2024 funds will support cloud services and platforms that allow for efficient development and hosting of applications on a low/no-code platform. These platforms provide significant benefits over traditional code-developed applications by improving productivity and development speed, making maintenance easier, and saving money.

The 2024 funding will:

- Maintain and operate over 400 SaaS and PaaS products being used in Production, which includes maintenance of the VA ATO and FedRAMP documentation and continuous monitoring functions
- Implement 250 re-use implementations of existing SaaS and PaaS products. Re-use of existing technology enables VA to capitalize on previous solution deliveries to result in significant efficiencies and reduce time to value, costs, and complexity. This will accelerate health and benefits delivery outcomes for Veterans and military families, expedite delivery of low code/low code solutions, and improve customer service for VA providers and employees
- Continue maintaining over 150 Production Salesforce modules used across the VA enterprise, which will impact over 150,000 users. This includes helpdesk support, platform management, platform governance, release management, architecture, and security support
- Continue maintaining over 150 VA ATO and FedRAMP authorization packages to ensure Veteran data stays secured

DTC aligns to the VA 2022-28 Strategic Plan by achieving Strategic Goal 2 in which VA delivers timely, accessible, high-quality benefits, care, and services to meet the unique needs of veterans and all eligible beneficiaries. DTC supports Veterans by using rapid, incremental improvements in IT capabilities, driving a genuine working partnership between the business and IT, utilizing SaaS, Platform as a Service (PaaS), and other emerging technologies as transformation enablers. Modernized systems and technology are enabling VA to enhance the quality of the care and services Veterans deserve including Customer Service and taking care of Veterans, caregivers, family members and survivors in ways that increase their trust in VA. DTC enables seamless, effective, and efficient access to services for Veterans, which directly aligns with Strategic Objective 2.2: Tailored Delivery of Benefits, Care and Services, ensuring Equity and Access.

VA MuleSoft GovCloud Platform sustains and accredits an enterprise level Integration Platform as a Service (PaaS) for building APIs to connect VA low code/no code solutions to clinical and non-clinical data in support of VA digital modernization initiatives. Outcomes include better cross-platform compatibility and interoperability across VA no-code/low-code solutions, additional functionalities that will result in greater processing speed, improved performance, and operational efficiency. This will continue support of the enterprise MuleSoft Center of Excellence to promote more effective use of the MuleSoft technology, encourage the use of re-usable APIs and integrations in the platform, standardize the development and API release functions and encourage the sharing of resources and intellectual property amongst business lines. This centralized management and coordination of APIs will result in re-use of APIs themselves as well as re-usable services, thus providing for more rapid business functionality, greater application support to business workflows and IT controls for increased quality and speed. It will also allow for the automation of data exchanges for business capabilities that were not possible before.

The effort will fund the enterprise platform management and governance of the MuleSoft PaaS solution as part of DTC operations, including testing, engineering, help desk, and intake. It addresses an increase in users being supported versus 2023. 2024 funds will support cloud services and platforms that allow for efficient development and hosting of applications on a low/no-code platform. These platforms provide significant benefits over traditional code-developed applications by improving productivity and development speed, making maintenance easier and

saving money. MuleSoft will help with coordinating the use of modernized, automated, and standardized human capital to support the Nation's veteran population. MuleSoft will continue to streamline payroll processes by 75% and provide a better employee experience by providing a new set of reusable self-service APIs. MuleSoft Benefits Gateway Services (BGS) modernization efforts will help to ensure that VA can consistently deliver high quality services to the Nation's Veterans by enabling effective communication and access to information across VA's systems and Veteran-facing applications.

MuleSoft will continue impacting the daily lives of Veterans and the agency by:

- Automating the ordering, tracking, fulfillment, and invoicing of clinical orders for Veterans
- Enabling call center agents to better serve Veterans more efficiently with their debt obligations
- Helping to quickly process homeless Veteran's eligibility when entering shelters
- Streamlining payroll processing for VA employees
- Modernizing legacy financial administration services
- Replacing an antiquated service bus solution within the electronic commerce branch

MuleSoft aligns to the VA 2022-28 Strategic Plan by achieving Strategic Goal 2 in which VA delivers timely, accessible, high-quality benefits, care, and services to meet the unique needs of veterans and all eligible beneficiaries. The MuleSoft solution allows for COTS and other ready-made solutions to connect to existing applications to improve re-use – resulting in rapid business functionality and more efficient software development projects. The solution also enables an integrated business workflow that reduces manual/human workflow intervention – improving operational efficiency. Additionally, it facilitates the transfer of data across applications – thus automating and expediting the speed of delivery and even enabling new capabilities requiring rapid or near real-time data capabilities. MuleSoft enables VA to deliver Veteran supporting applications more rapidly, with less defects and at a lower cost. These applications will ensure that faster and more accurate services are provided to Veterans by VA and its external partners, ultimately enhancing quality of service and care provided by VA. Examples of supported VA solutions are Occupational Health Record System (OHRS) 2.0; VA Loan Electronic Reporting Interface Replacement (VALERI-R); VA Integrated Enterprise Workflow Solution (VIEWS); VHA Real Time Location Service (RTLIS); Consolidated Mail Outpatient Pharmacy (CMOP); VistA data; Human Resources (HR) Recruitment Activity Tracker; Debt Management Center (DMC); and Financial Accounting System (FAS). Each of these examples directly aligns with Strategic Objective 2.2: Tailored Delivery of Benefits, Care and Services, ensuring Equity and Access.

End User Operations – \$165.6 million (Operations and Maintenance)

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Infrastructure Readiness Program (IRP) - End User Infrastructure	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 111,500	\$ 111,500
End User Operations (EUO) IT Support Contracts	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23,194	\$ 23,194
End User Operations (EUO) Facility Allowance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 50,503	\$ -	\$ 17,670	\$ (32,833)
EUO Software License Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,309	\$ 10,309
End User Operations (EUO) Hardware Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,960	\$ 2,960
End User Operations	\$ -	\$ 49,038	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Enterprise Facility Allowance	\$ -	\$ 35	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
End User Operations	\$ -	\$ 49,073	\$ -	\$ -	\$ -	\$ 50,503	\$ -	\$ 165,633	\$ 115,130

The End User Operations (EUO) IT Support Contracts sub-project provides needed contractor support for the ongoing operations of the EUO mission.

The End User Operations (EUO) Facility Allowance sub-project provides funding for break fix and operational needs supporting over 2 million end user assets across the enterprise. The funds in this sub project provide assets to replace broken items as well as supplies and resources (I.e., cables, parts, devices, etc.) to provide hands on support at all VA locations.

The EUO Software License Maintenance sub-project provides sustainment and maintenance of existing software licenses for the ongoing operations across the VA. These are individual and non-enterprise procurements.

The End User Operations (EUO) Hardware Maintenance sub-project provides hardware and service required to support maintenance of hardware products supported by End User Operations at local facilities.

IT Service Management -- \$139.7 million (Operations and Maintenance)

The IT Service Management Project encompasses sub-projects that enable 24/7/365 operations and performance monitoring. It funds high level technical support providing quick resolutions along with increased availability and reliability to VA systems. The availability of VA systems has a direct impact on Veterans/beneficiary/family members. One example is end-to-end monitoring of the Veterans Crisis Line which has allowed OIT and service partners to quickly restore service when an incident is generated that affects the Veteran’s ability to reach critical services provided by VCL.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
IT Service Management	\$ -	\$ 63,898	\$ -	\$ -	\$ -	\$ 94,690	\$ -	\$ 80,431	\$ (14,259)
Enterprise Command Center	\$ -	\$ 8,983	\$ -	\$ -	\$ -	\$ 12,624	\$ -	\$ 59,295	\$ 46,671
Enterprise Command Center - American Rescue Plan 8002	\$ -	\$ 11,341	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
IT Service Management	\$ -	\$ 84,222	\$ -	\$ -	\$ -	\$ 107,314	\$ -	\$ 139,726	\$ 32,412

IT Service Management (ITSM) support services contract increases efficiency and productivity by utilizing a single web-based tool for multiple services. It also automates IT Service Management products and processes and services through Software as a Service to comply with Cloud First Initiatives. In addition, it consolidates disparate legacy tools into a single cloud-based platform and enhances Leadership decision making through consolidation of data in a single tool. The ITSM support services contract is a Time & Material/Firm Fixed Price hybrid allowing flexibility to the SMO while transformation requirements are burgeoning. The ITSM support services contract is operating with the future in mind, whereby product-based business needs drive the rapid, agile, and efficient evolution of continuously modernized cloud-first ITSM ServiceNow Platform applications.

Enterprise Command Center funds the operation of VA's Enterprise Command Center (ECC) which provides 24/7/365 operations and performance monitoring services across the VA enterprise. ECC operations are tightly coupled with the Enterprise Service Desk and Major Incident and Emergency Management teams for the enterprise and Services Quality Services SQS.

ECC provides end-to-end operational performance monitoring for the VA enterprise, including the monitoring of 580+ systems supporting all VA Administrations. ECC responds to more than 4.5 million events per year to resolve incidents proactively and expeditiously, preventing or minimizing service disruptions to Veterans and VA staff reliant upon IT systems to provide services to Veterans.

There is an increase from the previous budget submission because of the need for additional instrumentation and sustainment of VA's enterprise systems and applications. Application Performance Monitoring (APM) capabilities help maximize the availability of critical services to Veterans provided by the 95+ Bedrock and Critical Systems.

Almost every VA service to, or interaction with, Veteran clients is supported by VA's operational IT systems. This Sub-Project provides the ongoing operations and maintenance of the Enterprise Command Center mission. ECC provides 24/7 eyes-on-glass watch operations and end-to-end monitoring solutions and services to increase availability for business partners and improve the experience for Veterans.

As one example, providing end-to-end monitoring of Telehealth sessions between doctors and patients has allowed OIT engineers to proactively respond to technical issues before they cause interruptions to Telehealth appointments. This has resulted in a significant reduction in the number

of errors and degradations experienced in Telehealth sessions. As another example, end-to-end monitoring of the Veterans Crisis Line (VCL) has allowed OIT and service partners to quickly restore service when an incident is generated that affects the Veteran’s ability to reach critical services provided by VCL.

Infrastructure Operations (IO) Hardware Maintenance – 133.9 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Infrastructure Operations (IO) Hardware Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 158,637	\$ -	\$ 133,859	\$ (24,778)
Enterprise Hardware Maintenance - American Rescue Plan 8002	\$ -	\$ 10,273	\$ -	\$ 10,328	\$ -	\$ -	\$ -	\$ -	\$ -
Infrastructure Operations (IO) Hardware Maintenance	\$ -	\$ 10,273	\$ -	\$ 10,328	\$ -	\$ 158,637	\$ -	\$ 133,859	\$ (24,778)

The Infrastructure Operations (IO) Hardware Maintenance Sub-Project provides the ongoing operations and maintenance for the Enterprise Hardware Maintenance mission, specifically the contracts required for that support. Almost every VA service to, or interaction with, Veteran clients is supported by VA's operational IT systems. The beneficial impacts on the Veteran/beneficiary/family members are derived from the individual systems themselves.

Storage Services - \$114.0 million (Operations and Maintenance)

The strategy for reduction of technical debt in Storage Services project is to utilize the infrastructure as a Managed Service (IaaS) contract and update/refresh on premise mission essential servers/storage infrastructure. Approximately 25,000 servers, storage arrays and related systems require modernization and technological reengineering.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (Ss in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Infrastructure Readiness Program (IRP) - Server/Storage Farm Infrastructure	\$ -	\$ 63,329	\$ -	\$ -	\$ -	\$ 98,000	\$ -	\$ 114,000	\$ 16,000
Storage Services	\$ -	\$ 63,329	\$ -	\$ -	\$ -	\$ 98,000	\$ -	\$ 114,000	\$ 16,000

Please refer to the IRP narrative for subproject details

Infrastructure Operations (IO) Software Maintenance - \$97.3 million (Operations and Maintenance)

The Infrastructure Operations (IO) Software Maintenance Project is comprised of recurring payments for existing software and licenses in support of Infrastructure Operations for the Enterprise, VA Administrations and Staff Offices.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (S\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Enterprise Software Licensing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 42,767	\$ -	\$ 97,260	\$ 54,493
Infrastructure Operations (IO) Software Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 42,767	\$ -	\$ 97,260	\$ 54,493

Software Maintenance is considered a “must pay” requirement to support hundreds of applications in use within the VA. The budget request represents the estimated charges for Enterprise License Agreements (ELA) negotiated by OSS and hundreds of other software licenses in use across the VA needed to operate systems. Costs are driven by the number of users and number of new applications and systems supporting these users.

Solution Delivery (SD) Software Maintenance – \$77.0 million (Operations and Maintenance)

Sub-Projects (S\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Enterprise Software License	\$ -	\$ 118,191	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 77,000	\$ 77,000
Enterprise Software License Maintenance - American Rescue Plan 8002	\$ -	\$ 15	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Solution Delivery (SD) Software Maintenance	\$ -	\$ 118,206	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 77,000	\$ 77,000

Activations - \$75.3 million (Operations and Maintenance)

Sub-Projects (S\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Activations	\$ -	\$ 78,206	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 75,288	\$ 75,288
Activations - Personal Computers	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25,000	\$ -	\$ -	\$ (25,000)
Activations - American Rescue Plan 8002	\$ -	\$ 30,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Activations	\$ -	\$ 108,205	\$ -	\$ -	\$ -	\$ 25,000	\$ -	\$ 75,288	\$ 50,288

Activations funds serve four primary purposes for the VA.

- Procurement and installation of all IT equipment (endpoint, network, printer, scanner, phones, etc.) and initial connectivity to support activation projects across the VA. These projects include: activation of new space and facilities (for example: major, minor, non-recurring maintenance, local “halls and walls” projects and leasing activities).
- Equipment to support new employees
- Equipment to support changes in business practice

- Unplanned commodity IT hardware demand in current year (ex: legislative changes, rapid lease executions, secretary directives, etc.)

The size of an IT Activation can range from a single computing device for a new employee to the equipment needs associated with establishing a new VAMC.

Activations costs are directly driven by the growth of the VA, both in staff and facilities. Over the last 5 years, the VHA construction budget alone has grown by an average of 13% per fiscal year. VA staff growth continues to increase by 11K each fiscal year with 15K staff projected in 2023 by VHA alone.

- Station Level Projects
- Community Based Outpatient Clinics (CBOC)-New or Expansion
- Vet Centers-New or Expansion
- National Mandated Programs-New
- Leased Space-New or Expansion (not identified in categories listed above including “As-Built” clinics)

Activations costs are directly driven by the growth of the VA, both in staff and facilities. Over the last 5 years, the VHA construction budget alone has grown by an average of 13% per fiscal year. VA staff growth continues to increase by 11K each fiscal year with 15K staff projected in 2023 by VHA alone. OIT is working with VA agencies to prioritize the projects for funding and End User Operations/OSS have worked closely to combine acquisition strategies to ensure the best pricing.

Activations’ outcomes including the following:

- Planned construction, lease, modifications of existing space
- New employee equipment requirements
- Changes in business practice that necessitate hardware changes
- Unplanned commodity IT hardware demand in current fiscal year (ex: legislative changes, rapid lease executions, secretary directives, etc.)

Enterprise Service Level Agreement - \$52.2 million (Operations and Maintenance)

Planned expense for the Enterprise Service Level Agreement Project includes Franchise Fund Costs for SLA-Enterprise applications.

The 2024 Budget Request includes the following sub-project:

	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Service Level Agreement (SLA) - Enterprise	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 113,919	\$ -	\$ 52,160	\$ (61,759)
Enterprise Service Level Agreement (SLA)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 113,919	\$ -	\$ 52,160	\$ (61,759)

The Service Level Agreement (SLA) – Enterprise sub-project represents the estimated steady-state charges for the 62 applications for the 2 Major Customer Codes (MCC) aligned to the ITIN Portfolio within the OIT Consolidated Agreement between the IO Franchise Fund Enterprise Center and OIT. The IO Franchise Fund is one of eight self-supporting VA Franchise Fund Enterprise Centers and is the sole provider of VA Franchise Fund Information Technology business segment products and services. VA Franchise Fund organizations operate on a full cost recovery, fee-for-service basis and do not receive appropriations or other funding directly from Congress. Almost every VA service to, or interaction with, Veteran clients is supported by VA's operational IT systems. This project will continue to provide the ongoing operations and maintenance of critical applications. It allows VA to continue to use and upgrade the National Data Center Program, Cloud Solutions, Identity and Access Management as well as others.

Service Desk - \$51.9 million (Operations and Maintenance)

The Project for the Enterprise Service Desk (ESD) Managed Services funds the operation of VA’s ESD which provides centralized 24/7/365 help desk support to all VA employees and contractors as the single point of contact for requesting IT services and reporting IT incidents and outages.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Enterprise Service Desk	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 63,195	\$ -	\$ 51,880	\$ (11,315)
Enterprise Service Desk (ESD) Managed Services	\$ -	\$ 65,446	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Service Desk	\$ -	\$ 65,446	\$ -	\$ -	\$ -	\$ 63,195	\$ -	\$ 51,880	\$ (11,315)

ESD Managed Services Contract funds the operation of VA’s ESD which provides centralized 24/7/365 help desk support to all VA employees and contractors as the single point of contact for requesting IT services and reporting IT incidents and outages.

The 2024 Budget includes the following Sustainment Sub-Projects: ESD services are provided through a managed services contract that provides single point of contact services for IT support of all VA applications, hardware, software, data, and services. The ESD is also responsible for the end-to-end ticket management for all approved VA technologies and works across all IT organizational entities and third-party IT service providers to ensure VA employees, and VA designated third parties are not impeded or prevented from conducting daily business operations due to IT issues with VA applications, hardware, software, or networks. ESD receives more than 3.2 million phone calls annually and processes more than 5.6 million tickets to enable or restore IT capabilities for VA staff across all Administrations. ESD aligns to OIT Imperatives/Goals including Exceptional Customer Experience, IT Modernization, IT Workforces Transformation, and Seamless and Secure Interoperability. The increase in the 2024 requested budget is due to the optional CLIN in the Tier 1 contract to bring on an additional Tier 1 vendor, which will include a 6-month transition period. Additionally, 2024 includes Optional Tasks in the Contact Center

Infrastructure (CCI) contract for innovation (e.g., Agent Screen Capture, IVR Advanced Speech Capabilities and Analytics).

Almost every VA service to, or interaction with, Veteran clients is supported by VA's operational IT systems. The beneficial impacts on the Veteran/beneficiary/family members are derived from the individual applications and systems themselves.

Application Delivery Infrastructure - \$49.4 million (Operations and Maintenance)

Application Delivery Infrastructure product provides a centrally managed enterprise cloud content collaboration platform that solves simple and complex challenges, from sharing and accessing files on mobile devices to sophisticated business processes like data governance and retention. This project provides for development of self-service API gateways, building out VA's capacity for cloud computing and administration of numerous data, testing, and supercomputing research services that support the entire VA OIT enterprise. The nature and scope of these shared services covers a wide breadth including: 1) Building API gateways to enable self-service capability where Veteran facing IT applications can enable provisioning and integration to backend shared services themselves; 2) Expanding VA's enterprise cloud hosting capacity and infrastructure to establish a foundation for migrating VA IT systems out of localized private hosting solutions to an approved public federal cloud that can scale on demand while realizing cost savings for VA; 3) Providing standardized frameworks and constructs within which data is housed, ingested, exchanged inside and outside of VA, tested, manipulated, or used.

The API Management Platform also ensures that tailored, integrated test environments and appropriate risk-based test services for evaluating software product quality is available to OIT organizations, VA administrations, and other external agencies focused on improving patient safety and Veteran services. This project enables VA-wide use of 100+ low-code Salesforce applications to automate business workflows, connect users to business processes, and optimize operations. It also provides APIs and infrastructure power over 80 VA and 3rd-party production applications serving all administrations and enable effective data and service access from many underlying systems.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Platform Services Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,799	\$ 10,799
Microsoft Power Platform	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,119	\$ 10,119
Data Access Services (DAS)	\$ -	\$ 12,219	\$ -	\$ -	\$ -	\$ 2,596	\$ -	\$ 9,515	\$ 6,919
Data Access Services (DAS) - American Rescue Plan 8002	\$ -	\$ 5,108	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pega Cloud for Government (PCG)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,410	\$ 6,410
Software Factory New Work Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,161	\$ 4,161
NextGen Federated Data Architecture	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,432	\$ 2,432
Palantir Federal Cloud Service (Palantir)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,000	\$ 2,000
Slack	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,824	\$ 1,824
VA Enterprise Content Management System (TeamSite)	\$ -	\$ 1,736	\$ -	\$ -	\$ -	\$ 1,500	\$ -	\$ 1,366	\$ (134)
Box Cloud Content Management (Box)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 793	\$ 793
Collaborative Terminology Tooling Data Management	\$ -	\$ 2,301	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Application Delivery Infrastructure	\$ -	\$ 21,364	\$ -	\$ -	\$ -	\$ 4,096	\$ -	\$ 49,419	\$ 45,323

Platform Services Support sub-project will:

- Provide support services for benefits delivery in compensation, pension, and education programs, which are critical to VBA to facilitate processing claims and benefits
- Provide a variety of IT support services to VA, Veterans, and other stakeholders, such as Veterans' service organizations, colleges, and universities
- Implement, operate, and maintain information systems that assist VA regional offices (ROs), the VBA Insurance Center, and medical centers in providing benefits and medical care

The funding is needed to maintain the Microsoft Power Platform including maintaining ATO and FedRAMP security posture, and to keep the lights on for the 10,000+ apps being used in Production. The team will harvest and reuse valuable applications and automations, create best practice templates and accelerators, and cleanup/deprecate the apps/automations in the environment that are not useful or have been abandoned. The 2024 goal outcome is 175 enterprise apps and 100 enterprise automations for Power Platform App Catalog and to deprecate all inactive/abandoned apps.

Microsoft Power Platform aligns to the VA 2022-28 Strategic Plan by achieving Strategic Goal 2 in which the VA delivers timely, accessible, high-quality benefits, care, and services to meet the unique needs of veterans and all eligible beneficiaries. By centralizing Microsoft Power Platform at the enterprise level and up-skilling VA citizen developers, it will enable VA to deliver low code, Veteran-supporting applications more rapidly, with less defects and at a lower cost. These applications will ensure that secure, faster and more accurate services are provided to Veterans by VA and its external partners, ultimately enhancing quality of service and care provided by VA.

Data Access Services (DAS) will utilize sustainment-steady-state funds to provide information exchange between VA, DoD, other Federal and state agencies, non-governmental organizations, and within the VA. By managing and storing shared data between systems and agencies, DAS serves as the cornerstone of data transport between VA and external partners, providing Veteran

health, benefit, and administrative data in support of the delivery of timely, accessible, high-quality benefits, care, and services to Veterans and their dependents. The system also provides persistence, platform, auditing, preferences, and authorizations as services for data exchange between these partner organizations. By operating as a middleware between consuming and producing systems, DAS exists as a single point of entry and reduces redundant system connections, simplifies interdepartmental security agreements, and eases the process of maintaining connectivity to systems that are moving to the cloud or modernizing their infrastructure. This same interconnected data network also ensures continuity of medical records, thereby improving patient safety and quality of care whether Veterans are visiting Cerner converted sites, legacy sites, or accessing services in their local communities.

Enterprise level PaaS for low-code/no-code solutions supporting VA digital modernization initiatives. Outcomes include better cross-platform compatibility and interoperability across VA no-code/low-code solutions, additional functionalities that will result in greater processing speed, and improved performance. As part of the VA's DTC operations, in 2024 the Pega Cloud for Government (PCG) platform will migrate from an on-premises solution to a cloud-hosted solution. This move will allow an enterprise Center of Excellence to promote more effective use of the Pega technology, encouraging the development of re-usable assets in the platform, standardizing the development and application release functions; and encouraging the sharing of resources and intellectual property amongst business lines. Funding will also address associated platform ATO/security remediation efforts and enhanced customer development enclave/environment.

Pega Cloud for Government aligns to the VA 2022-28 Strategic Plan by achieving Strategic Goal 2 in which the VA delivers timely, accessible, high-quality benefits, care, and services to meet the unique needs of veterans and all eligible beneficiaries. By centralizing Pega at the enterprise level and migrating to the cloud, it will enable VA to deliver Veteran supporting applications more rapidly, with less defects and at a lower cost. These applications will ensure that secure, faster and more accurate services are provided to Veterans by VA and its external partners, ultimately enhancing quality of service and care provided by VA.

Software Factory New Work Support three core services provide vital support to the VA IT Modernization effort in OIT and directly impact IT funding decisions as well as the execution of the projects/programs that are serving the veterans. This includes all the digital experience initiatives, mobile apps, electronic health records, appeals, benefits and adjudications, and cybersecurity.

- The Cost Estimation supports PE and Product Line Management (PLM)s with new IT request funding decisions and enables multiyear forecasting support in new IT acquisitions, eight-year future year sustainment forecasting, system/product costing roadmaps and cost avoidance/ROI analysis for modernization initiatives. This area provides a centralized, industry standard estimating support approach for IT organizations, lessening estimating load on PLM resources.
- The Legacy System Modernization (LSM) directly supports the modernization efforts by conducting assessments, providing guidance on the planned migration, consolidation, retirement and decommissioning of all systems in the VA system Inventory database. The LSM enables timely updates of planned product line modernization activities, serving as a catalyst in determining modernization priorities and baselines.

- The Technical Analysis Support targets the reduction and elimination of stovepipe and functionally comparable systems and the associated waste within IT implementation and acquisitions. Technical Analysis Support provides support to PE/SPM Product Line transition efforts advocacy and tracking of Enterprise solution candidates, liaison between PE/SPM and OIT customers for new work activities, and develops metrics for leadership visibility of incoming work capacity and activities via customizable single pane of glass view at multiple levels.
- This activity focuses on cost avoidance and savings when associated return on investment analysis identifies distinct savings due to reduced support, procurement, licensing, and training costs. Subject matter experts in this area will provide product line mapping to improve the customer experience and for said solutions. This directly supports FITARA, potentially resulting in significant cost avoidance.

Sustainment-steady-state funding is needed to operate and maintain the deployed NextGen Federated Data Mesh core components and data products. NextGen Federated Data Mesh Architecture Program provides the technical foundation allowing the DoD and VA to begin the long process of evolving away from inefficient point to point interoperability, and toward a federated and decentralized ecosystem of well governed and interoperable data products to improve data sharing where the right data is delivered at the right time for the right authorized purpose. The IT functionality available through the Next Gen Federated Data Architecture includes the following:

- Essential NextGen Core Platform Service (connectivity, identity, access management, cybersecurity, monitoring)
- Source and Consumer Aligned Data Products supporting the Joint DoD and VA VHA Patronage Expansion, VBA Dual Compensation, and DoD Military Personnel Medals and Awards Use Cases
- Federated department specific enterprise data catalogs, creating a joint view of data assets.
- Enhanced access to authoritative Military Personnel demographics, combat service, health assessments, and exposures data for transactional (clinical encounters) and research/analytical (epidemiological research, mental health/suicide prevention).

2024 funds will be used to support the NextGen Federated Data Mesh Architecture Program that will allow VA and DoD to improve data sharing for NextGen Core Platform Service (connectivity, identity, access management, cybersecurity, monitoring); Joint DoD and VA VHA Patronage Expansion, VBA Dual Compensation, and DoD Military Personnel Medals and Awards Use Cases; Federated department specific enterprise data catalogs, creating a joint view of data assets; and Enhanced access to authoritative Military Personnel demographics, combat service, health assessments, and exposures data for transactional (clinical encounters) and research/analytical (epidemiological research, mental health/suicide prevention).

Data Interoperability (Palantir) directly supports the VA's ability to appropriately plan surge capacity, increase visibility in the Community Care Program, execute service recovery in near real-time and proactively respond to emergent events such as natural disasters, PACT Act, pandemics, and other disruptions to operations of facilities or supply chains in a localized or national area. These capabilities directly impact Veteran Affairs (VA)'s ability to deliver world-class care to Veterans and support them in times of National need. The platform provides a

consolidated dashboard that assists leadership making evidence-based decisions on facility decisions for hospital capacity, beds available, etc. that impact timeliness of access to service. Data Interoperability enables end users to collaborate within a low code/no code platform that enables rapid development of analytical insights without the lead time associated with the traditional approaches. The traditional custom approach was outdated and expensive to maintain. Program offices and platforms across the VA can leverage raw data already curated by Data Interoperability or build and publish their own data assets.

Data Interoperability closely aligns to all four VA Strategic goals by; providing a consolidated platform that users throughout the VA collaborate on. Users in VHA, VALOR, OIT, and OEI can use the platform to better serve the Veterans, providing a dashboard that allows data to be provided to VA staff to deliver the services needed for the Veterans and their family and make decisions related to it, maintaining stakeholder trust through transparent data and accountability with the data and analysis gained through the insights and ensuring governance and security within the platform with a consistent management of the data, high ATO, and follows Data governance board policies.

Data Interoperability removes the silos of programs, so they can share an analytical tool and build upon each other's data. The data objects are derived from each other, and the data is curated. Programs will not have to obtain their own SaaS license or ingest the same data over, resulting not only in cost saving but efficiencies in time.

2024 funds will provide the ongoing highly specialized technical support work handling critical ongoing base sustainment for Palantir Federal Cloud Service (Palantir) in support of the VHA Common Operational Picture (COP) requirements. Additionally, appropriately plan surge capacity, increase visibility in the Community Care Program, execute service recovery in near real-time with National Artificial Intelligence Institute and proactively respond to emergent events. The sustainment support directly impacts VA's ability to deliver world-class care to Veterans and support them in times of National need.

The Slack sub-project provides the OIT with licensing for Slack as an enterprise-level collaboration platform. This software suite is widely used by multiple projects/products across OIT in support of agency initiatives for VBA (VBMS and Post-911 GI Bill) and VHA (MISSION Act and Community Care), among other VA priorities. Slack enables collaboration with external business partners, other federal agencies and supports notifications from integrations with DevSecOps pipelines that provide system performance monitoring, continuous integration/continuous delivery, and incident management tool used by VA project/product teams.

VA employees must be able to create and publish data and informational content easily and quickly so Veterans, caregiver teams, and VA employees, have the latest and most accurate VA information. The capability the VA Enterprise Content Management System (TeamSite) system provides enables users and consumers of content to make informed decisions. This subproject speeds up delivery of valuable information by putting the capability to create and publish data and information into the hands of those with the most knowledge, VA employees.

Box Cloud Content Management (Box) is a centrally managed enterprise cloud content collaboration platform that solves simple and complex challenges, from sharing and accessing files on mobile devices to sophisticated business processes like data governance and retention. Box provides a cloud-based, mobile-optimized modern platform that allows users to securely manage content and collaborate internally and externally, thus providing unlimited storage data and any number of external collaborators, with the necessary security, scalability and required administrative controls. In 2024, renewed SaaS subscriptions will continue dedicated support to ensure a secure and intuitive way to share documents without the challenges of email size limitations, legacy SharePoint, etc. It is projected that new license purchases will reach 4,000 new users, totaling 10k+ total users in the VA Box instance.

Box Cloud Content Management aligns to the VA 2022-28 Strategic Plan by achieving Strategic Goal 4 “STEWARDSHIP” in which VA ensures governance, systems, data, and management best practices improve experiences, satisfaction, accountability, and security. The Box solution enables a virtualized business workflow that minimizes paper and physical case and claims management, thereby improving operational efficiency. Additionally, the solution facilitates the transfer and sharing of files so large they would otherwise be non-transferable – enabling new business operations in media and academic/healthcare research. The Box platform also provides a secure document repository with multi-factor authentication for external parties, and web portal-based user interaction that are essential for managing and improving seamless delivery to Veterans.

Decision Intelligence - \$39.5 million (Operations and Maintenance)

Decision Intelligence Project provides APIs in support of all VA administrations and systems, enabling VA teams to build high-quality, modern APIs in a cost-effective and timely manner for both VA and 3rd-party developed applications.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Digital Veterans Platform (DVP)	\$ -	\$ 25,345	\$ -	\$ -	\$ -	\$ 27,290	\$ -	\$ 33,030	\$ 5,740
Digital Veterans Platform (DVP) - American Rescue Plan 8002	\$ -	\$ 48,404	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Robotics Process Automation (RPA Platform)	\$ -	\$ 3,044	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,460	\$ 6,460
Decision Intelligence	\$ -	\$ 76,793	\$ -	\$ -	\$ -	\$ 27,290	\$ -	\$ 39,490	\$ 12,200

Digital Veterans Platform (DVP, aka Lighthouse) enables efficient, fast, and secure access to Application Programming Interfaces (APIs) in support of all VA administrations and systems, enabling VA teams to build high-quality, modern APIs in a cost-effective and timely manner for both VA and 3rd-party developed applications. DVP consists of 4 key components: The Lighthouse Delivery Infrastructure, The Lighthouse Internal Developer Platform, The Lighthouse 3rd-party API Platform, and key Application Programming Interfaces (APIs).

DVP provides value by providing 3rd-party applications benefitting VA Veterans and VA Staff at minimal additional cost to VA, accelerating VA application development times when integrating with APIs, and accelerating VA API development with higher quality and improved security.

As of October 2022, DVP APIs and infrastructure power over 135 applications, which has grown from 44 in October 2021. In addition to these existing applications, infrastructure enables VA teams building APIs to launch their API from start to production with full ATO with zero high and zero critical security issues in one-sixth the time required by previous solutions. Similarly, applications can move from start of production with DVP APIs in one-quarter of the time required for traditional integration methods. Current applications consume 110M monthly DVP API transactions. DVP processes nearly 90,000 monthly benefits claims submissions and 4,000 monthly appeals submissions. These submissions have previously been submitted via paper and fax. This results in saving the Veterans and VA weeks to months of processing time for each claim and appeal. DVP enabled VBA Claims automation for hypertension and sleep apnea with Health APIs, removing nearly 100 days in adjudication time for each data-assisted claim. In addition, DVP enabled over 85,000 monthly Veteran appointment requests from va.gov and the flagship mobile application with the Lighthouse Community Care Eligibility API in support of Mission Act. Over 3M daily API transactions enable Veterans to securely access and share their medical information using applications of their choice on devices of their choice. Applications in production include the Mission Act Decision Support Tool, VA Health Connect, CARMA, FAS, VA.gov, the flagship mobile application, CPRS, Apple Health, usajobs.gov, USPHS.gov, and CommonHealth.

2024 funds are needed to support the increase in resources and staff required to continue the customer service to meet the growth of end-users and applications supported by DVP. DVP will continue impacting the daily lives of Veterans and the agency by maintaining and supporting the following:

- 275 VA and 3rd-party applications in production.
- Full production support of 20 API teams in the use of the Lighthouse Delivery Infrastructure enabling streamlined development, production deployment, and ATO establishment with improved security (no code ships with any critical or high security findings), increased quality, and improved security compliance and transparency. Each application will achieve production launch and ATO in one-sixth the time required prior to this DVP capability and with a total cost savings of nearly \$33M.
- Approximately 250,000 monthly benefits claim submissions sent through DVP APIs that would have otherwise been sent to VA via paper or fax.
- Digital Transformation of the Federal Communications Commission (FCC) Universal Service Access Company application enabling over 400,000 Veterans annually to receive free Internet and Telecommunications services, transforming what was originally a paper process with VA APIs.
- Digital Transformation of the Small Business Administration Service-Disabled Veteran-Owned Small Business (SDVOSB) validation process, accelerating overall 2,200 SDVOSB qualifications annually.
- Enabling secure and seamless data exchange and access for Social Determinants of Health with APIs.

DVP aligns with the VA 2022-28 Strategic Plan by achieving Strategic Goal 2. Strategic Goal 2 is that the VA delivers timely, accessible, high-quality benefits, care, and services to meet the unique needs of veterans and all eligible beneficiaries. DVP supports all VA administrations and systems through 1) efficient, fast, and secure access to Application Programming Interfaces (APIs), 2) Provides common infrastructure to accelerate deployment while simultaneously increasing quality of APIs and applications consuming APIs and 3) Provides ongoing authorization technology and processes to accelerate ATO timelines by over 600%. This enables VA teams to build high-quality, modern APIs in a cost-effective and timely manner for both VA and 3rd-party developed applications (over 150 applications in production as of 2/1/2023 impacting 20M+ Veterans). DVP operates with 99.9% availability. DVP also aligns with the President's Management Agenda (PMA) by achieving Priority 2, which states delivering excellent, equitable, and secure federal services and customer experience.

The Robotic Process Automation (RPA) platform enables business transformation and is used to automate processes so that personnel can focus on high-value vs. low-value processes. This project provides a low-code/no-code platform that includes artificial intelligence to provide automation for business customer needs. The RPA platform provides business owners the ability to take their rote and repetitive processes and automate them using software robots (bots). These bots are created by contracted system integrators and/or business users (citizen developers) due to the platform's low-code/no-code capabilities.

VA will have to manage challenges that arise from the significant interruption Artificial Intelligence (AI) brings while taking advantage of the opportunities it presents. The Robotics Process Automation (RPA Platform) platform provides a place for new automations to carry forward the work done in AI, process modeling simulation and repair, and enterprise-wide solutions. The Robotics Process Automations will improve the time to complete VA processes which will shorten the time a Veteran waits on those services to be provisioned/approved, improve the quality of services by improving the accuracy of the data being transferred system to system and give Employees relief from data transfer and accuracy issues, allowing them to concentrate on higher level decisions or discussions with the Veteran.

Robotics Process Automation will closely align to two VA Strategic goals by, improving the timeliness to benefits by automating manual processes and decision making that hold up the Veterans benefits, and automations are programmed to follow all VA rules and best practices for the processes they are replacing. They improve data security, their decisions are traceable and reviewable, and the systems can produce at a high-performance level.

By utilizing RPA to automate manual processes the VA can use existing systems longer and with more accuracy and efficiency. Systems that could not be integrated before now can be. The automations will give employees back time that can be used on higher level decisions instead of the basic data movement. Using the VAEC to host RPA gives the ability to grow efficiently. 2024 funds will provide platform maintenance and will be utilized for the enhancement of the RPA platform augmentation with AI to provide additional capabilities, including data modeling, licenses, VAEC systems, evaluation strategies, learning applications (RPA COE), etc. This will result in better business decisions, in more efficient compliance practices, and greater Veteran and employee satisfaction. OIT plans to grow by 25 automations in 2024.

Shared Devices - \$37.5 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Infrastructure Readiness Program (IRP) - Miscellaneous: Shared Devices, Very Small Aperture Terminal (VSAT)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 117,543	\$ -	\$ 37,543	\$ (80,000)
Miscellaneous: Printers, VSAT, Video, Wireless	\$ -	\$ 8,859	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Shared Devices	\$ -	\$ 8,859	\$ -	\$ -	\$ -	\$ 117,543	\$ -	\$ 37,543	\$ (80,000)

Please refer to the IRP section for sub-project details

Solution Delivery (SD) Hardware Maintenance - \$25.5 million (Operations and Maintenance)

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Enterprise Hardware Maintenance	\$ -	\$ 155,559	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25,450	\$ 25,450
Enterprise Hardware Maintenance - American Rescue Plan 8002	\$ -	\$ 10,273	\$ -	\$ 10,328	\$ -	\$ -	\$ -	\$ -	\$ -
Solution Delivery (SD) Hardware Maintenance	\$ -	\$ 165,832	\$ -	\$ 10,328	\$ -	\$ -	\$ -	\$ 25,450	\$ 25,450

Hardware Maintenance is considered a “must pay” requirement to support extended warranties and equipment support for critical operational hardware components. It is essential to support customer service level agreements (SLAs) for network, server, storage, tapes/drives, legacy phone systems-private branch exchange (PBX) systems, PIV printers, PIV scanners, paging systems, IT management tools, and video conferencing (VTC) equipment.

Unified Communications - \$24.0 million (Operations and Maintenance)

The focus of Unified Communications Project is to implement a standardized and modernized enterprise-wide Unified Communication and collaboration infrastructure through a single, Internet Protocol (IP)-based enterprise system that seamlessly unifies all voice, video, and collaboration traffic supporting all VA end-users and Veterans.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Infrastructure Readiness Program (IRP) - Unified Communications Infrastructure	\$ -	\$ 30,400	\$ -	\$ 8,323	\$ -	\$ 42,000	\$ -	\$ 17,000	\$ (25,000)
Enterprise IT Support Contracts - Unified Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,000	\$ 7,000
Unified Communications	\$ -	\$ 30,400	\$ -	\$ 8,323	\$ -	\$ 42,000	\$ -	\$ 24,000	\$ (18,000)

Please refer to the IRP section for details regarding the IRP – Unified Communications Infrastructure subproject

End User Compute - \$13.5 million (Operations and Maintenance)

End User Compute Project, comprised of the subprojects Activations - Personal Computers and Infrastructure Readiness Program (IRP) - End User Infrastructure, establishes the lifecycle of computing infrastructure devices used by VA staff in their day-to-day activities. The lifecycle starts with Activations – Personal Computers, where the personal computing infrastructure is provided either through the outfitting of a new employee/contractor, or through the outfitting of a new spec/facility. The lifecycle then transitions to the Infrastructure Readiness Program (IRP) – End User Infrastructure, where the ongoing operations of Personal Compute infrastructure are supported through VA users receiving replacement, up to date personal computer infrastructure IT systems.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Infrastructure Readiness Program (IRP) - End User Infrastructure	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 125,000	\$ -	\$ 13,500	\$ (111,500)
Desktop Infrastructure	\$ -	\$ 98,611	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
End User Compute	\$ -	\$ 98,611	\$ -	\$ -	\$ -	\$ 125,000	\$ -	\$ 13,500	\$ (111,500)

Please refer to the IRP section for details regarding the IRP – End User Infrastructure subproject

Infrastructure Operations Support - \$9.8 million (Operations and Maintenance)

The Infrastructure Operations Support Project is comprised of recurring payments for existing contracts for services and support for implemented IT systems in support of the Enterprise, VA Administrations, and Staff Offices. IT Support Contracts are considered a “must pay” requirement to support infrastructure operations.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (S\$ in thousands)	2022/2023				2023		2024		2023-2024
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Enterprise IT Support Contracts - Infrastructure Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,819	\$ 9,819
Infrastructure Operations Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,819	\$ 9,819

The Enterprise IT Support - Infrastructure Operations Contracts represents the estimated charges for IT Support contracts used by Infrastructure Operations to support operations across the VA. Almost every VA service to, or interaction with, Veteran clients is supported by VA’s operational IT systems. This Sub-Project provides the ongoing operations and maintenance of Infrastructure Operations IT Support Contracts. Costs maintained within this sub-project include Talent Management System (TMS) Support, IT Technical Support -Content Distribution Network (CDN), SharePoint Online COMS Support, and Microsoft System Center Configuration Server support

Operations Triage Group (OTG) - \$9.3 million (Operations and Maintenance)

The Operations Triage Group's (OTG) Project core objective is ensuring VA system availability and reliability for end users. Through DevOps and System Reliability Engineering (SRE) practices the team partners with Enterprise Project Management Division (EPMD), Enterprise Command Operations (ECO) and others in VA OIT.

The 2024 Budget Request includes the following sub-project:

Sub-Projects (S\$ in thousands)	2022/2023				2023		2024		2023-2024
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Operations Triage Group (OTG)	\$ -	\$ 13,056	\$ -	\$ -	\$ -	\$ 7,110	\$ -	\$ 9,288	\$ 2,178
Operations Triage Group	\$ -	\$ 13,056	\$ -	\$ -	\$ -	\$ 7,110	\$ -	\$ 9,288	\$ 2,178

The Operations Triage Group's (OTG) engineers and technical analysts work with development teams during the build and delivery processes and with operations once an application has moved to production. OTG provides technical improvement and system performance recommendations and facilitates executive communications for all major system issues. The team partners with DevSecOps divisions and others in VA OIT through DevOps and System Reliability Engineering (SRE) practices. When systems and applications within VA are down or degraded, end users cannot give the services to veterans that are needed in providing health care, benefits, or memorial services. OTG applies system and industrial experts to resolve system problems, thereby making systems and applications more reliable and available to end users. This in turn enables them to provide services more efficiently to Veterans. OTG provides direct impact to Time-to-repair. Over the past 12 months, OTG has assisted in a reduction of 12% in Time to Restore where OTG Site Reliability Engineers have provided feedback leading to incident closure and users returning to stable operations.

2024 Veteran Experience Portfolio

OIT's strategic goal to improve Customer Experience includes providing digital services through a single, integrated, and equitable digital platform on VA.gov and the VA mobile application. Reducing the burden necessary for Veterans to obtain the services they earned directly support the President's Executive Order #14058, Transforming Federal Customer Experience and Service Delivery to Rebuild Trust in Government, and the 21st Century Integrated Digital Experience Act (P.L. 115-36) (IDEA).

Several requested investments in 2024 either go to improving or replacing existing capabilities, as well as creating new features for Veterans to provide alternatives to non-digital, paper-based VA services. These include:

- **VA Forms Digitization:** This initiative supports the goals of the 21st Century IDEA Act. The 250+ forms that Veterans downloaded over 4 million times in 2022 are identified for modernization. One goal is to decrease the need for Veterans to print & mail forms to the VA. Additionally, OIT seeks to reduce the time Veterans spend filling out VA forms, currently estimated at 64 million hours annually, by converting certain forms to guided digital services on VA.gov.
- **VA Notify:** This initiative provides greater transparency to Veterans and improves VA efficiencies by pro-actively notifying Veterans status updates and actionable next steps. Through VA Notify, Veterans can track VA processes via text, email, and other communication preferences. The FY24 investment request continues to build Veteran trust with additional notification capabilities.
- **VA.gov – MyVA homepage:** The investment request focuses on providing Veterans the right digital service at the right time in one location. With the MyVA dashboard on VA.gov, Veterans are provided a one-stop shop for digital VA services that can be personalized to their preferences. Funding in FY24 supports digital service improvements and continued migration of Health, Benefits, and other VA services to VA.gov.
- **Omnichannel & Chatbot capabilities.** Launched in 2022, the VA's chatbot is designed to provide answers to Veteran's questions faster, thereby improving overall customer experience while reducing administrative burden on VA contact centers. Veterans who need more information about a VA service or benefit may now leverage chat bot vs. calling the VA or searching VA's entire website for this information. The VA has recently added an authenticated experience to the chatbot, meaning that logged in Veterans can use the bot to receive a personalized experience that can provide them specific answers about the status of their disability claims, a key driver of contact center calls. VA is now exploring further personalized capabilities that may be appropriate to add to this bot.

This section does not include the PACT Act funding request. See the 2024 PACT Act Request section for additional details supporting this request.

The 2024 Veteran Experience Portfolio Budget Request consists of the following Projects details:

Projects (\$\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Digital Experience	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,511	\$ 85,658	\$ 95,169
Customer Data Management Experience	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,673	\$ 18,382	\$ 23,055
Contact Center Experience	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33,306	\$ 33,306
Customer Feedback and Experience	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,640	\$ 10,640
Eligibility and Enrollment Experience	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,159	\$ 9,159
Total Veteran Experience Portfolio	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14,184	\$ 157,145	\$ 171,329

Please note that the Cyber Security Operations narratives are located in the Information Security section in the ITIN portfolio

Note:

1. The 2022 Actuals and 2023 Enacted columns reflects projects reported prior to the budget restructure and will be executed as is
2. The 2024 Request column reflects projects in the new IT budget structure. Please refer to the Appendix Q Budget Restructure Matrix for the alignment of the old budget structure to the new 2024 IT budget structure
3. In 2024, (a) the sub-projects such as VA Profile, VA/DoD Identity Repository (VADIR) and Veteran Identity/Eligibility Reporting System (VIERS) within the Data Integration and Management project in the ITIN (formerly Enterprise) portfolio were realigned to the Customer Data Management Experience within the Veteran Experience portfolio; (b) the sub-projects such as ID.ME, Login.gov and Identity and Access Management - Enterprise (IAM) within the Cyber Security project under the ITIN (formerly Enterprise) portfolio were realigned to the Cyber Security Operations in the Veteran Experience portfolio; (c) My HealtheVet was realigned from the Health portfolio to the new Digital Experience project in the Veteran Experience portfolio as a result of the budget restructure

The Project detail tables below display 2022 Actuals and 2023 Enacted sub-projects aligned to the Projects in the new 2024 budget structure for comparison purposes.

Digital Experience – \$95.2 million (\$9.5 million - Development, \$85.7 million - Operations and Maintenance)

The Digital Experience project funds the ‘digital front door’ of the VA. Whether it’s one of the 125M monthly page views on VA.gov or one of the 700,000 Veterans using the VA’s flagship mobile application, Veterans deserve accessible, secure, and easy-to-use digital tools. The Digital Experience project funds several Veteran-facing investments including: (1) Mobile Applications, (2) Web Applications and platforms, (3) Self-service tools, and (4) Veteran Identity and Access tools.

For each of these investments, a multiyear modernization effort is underway to ensure Veterans can access all VA services and benefits from a single web platform (VA.gov) or a single mobile application (VA’s Health and Benefits mobile app). Since transitioning to the modern VA.gov platform, average customer satisfaction scores have increased from 53.1 to 64.7.

Digital Experience investments directly support multiple VA strategic goals including 1.1 (Consistent and Easy to Understand Information) and 4.3 (Easy Access and Secure Systems). Further, continued improvements to Digital Experience’s identity and access investments will ensure Veterans can access VA.gov portals via a Zero-Trust Architecture compliant with E.O. 14028 guidelines.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (Ss in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Web Application and Platforms	\$ -	\$ -	\$ -	\$ -	\$ 7,222	\$ 45,307	\$ 9,511	\$ 58,429	\$ 15,411
Mobile Applications and Platforms	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14,950	\$ -	\$ 27,229	\$ 12,279
Login.gov - Technology Modernization Fund	\$ -	\$ -	\$ -	\$ 5,895	\$ -	\$ 4,655	\$ -	\$ -	\$ (4,655)
Digital Identity and Access	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 150	\$ -	\$ -	\$ (150)
VA.GOV	\$ 7,092	\$ 23,885	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VA.GOV - Section 8002	\$ -	\$ 59,809	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
MHV Veteran-Facing	\$ 4,007	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
My HealtheVet (MHV)	\$ -	\$ 12,962	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
My HealtheVet (MHV) - Section 8002	\$ -	\$ 5,321	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
E-Benefits Portal	\$ -	\$ 4,093	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Digital Experience	\$ 11,098	\$ 106,070	\$ -	\$ 5,895	\$ 7,222	\$ 65,062	\$ 9,511	\$ 85,658	\$ 22,885

Web Applications and Platforms comprises The Enterprise Veterans Self Service (EVSS), VA.gov and MyHealtheVet (MHV).

EVSS application suite includes the EVSS Portal Platform, the eBenefits Portal, Stakeholder Enterprise Portal (SEP) and Veterans Online Application II Direct Connect (VDC). Additionally, the backend services support Veteran product on VA.gov. Collectively, EVSS allows for self-service claims submission and tracking for Disability compensation, GI Bill status, dependent applications, pension benefits, intent to file for current military, original claims for first time applicants, VA Letters, special adapted housing grant, ordering prosthetics, vocational rehab and employment and many other Veteran-facing services. EVSS funding provides responses to approximately 2,000 Help desk tickets per month for application users.

2024 funding will purchase services, credits, and the software necessary to support VA.gov. In 2017, a survey of 3,400 Veterans and Service Members indicated that most users want to access all of their military and Veteran benefits and services online and that they expect to find this experience on VA.gov (VEO "VA Brand Survey", Online Survey, Sept. 17-25, 2017). VA.gov continually strives to meet that expectation continually assessing and solving business problems with an eye toward:

- Increasing the use of VA's self-service tools.
- Enabling faster access to care and more timely delivery of services.
- Improving the experience Veterans and their caregiver teams have when interacting with VA.

VA.gov enhances the Veteran experience by facilitating and providing interactions that are modern, digital, timely, informative, and clear. The VA.gov platform and its various capabilities, tools, and features meets Veterans and their caregiver teams "where they are" providing a digital experience users expect today. VA.gov provides Veterans, Servicemembers, Caregivers, VSO's, and family members the information they need to find and get VA benefits, the tools they need to track their applications and status data, and the help and support they need while using VA services, all in an accessible self-service format.

New Functionality and improvements expected for VA.gov:

Health Products:

- Support additional Cerner locations
- Complete VAMC website redesigns
- Start Vet Center website redesigns
- Iteration of consolidated health tools (e.g., prescriptions, records)
- Consolidate health billing statements

Benefits and Memorials:

- Complete Regional Office website redesigns
- Begin NCA website redesigns
- Enhance claim automation efforts
- Initial financial status report
- Initiate integration with DoDs electronic records
- Complete NCA website redesigns
- Enhance claim automation efforts
- Robust financial status report functionality
- Complete digital experience for appeals modernization

Account and Website Experience:

- Contact information verification before claim submission
- Implement Tier 3 content navigation
- Further expand Integration and APIs with various platforms
- Provide historical and current address accounting
- Respond to 5G+ technology
- Implement AI to improve customer experience

MyHealtheVet's (MHV) main objectives include improving patient access to patient portals, enabling the recording of self-reported information in patients' EHR system records, increasing prevalence of patient data capture through mobile and at-home devices, and increasing patient access to care through advancing telehealth initiatives. In 2024, the increase in MHV sustainment cost is due to the increased usage resulting from COVID-19 and the move to virtual health care for Veterans. MHV's core capability will remain while new requirements for DoD/VA/Commercial longitudinal Veteran Health Record and Get Care (Telehealth) will be incorporated into the MHV platform such as new Fast Healthcare Interoperability Resources (FHIR) API development to support VA.gov digital front door; Mobile Apps; Patient Generated Data Base (PGD), etc.

2024 expected outcomes for MHV include:

- VA.gov Integration
- Support Cerner Migration at VAMC
- Enterprise API modernization and enhancements (Healthcare Services, Digital Experience)
- Apartment model complex integration (Rx Refills)
- Flagship Mobile Application Integration
- Enterprise Secure Messaging Proof of Concept (POC)
- Cerner API Integration
- VA DoD Integration Patient Generated Health Data (PGHD)

The outcomes are to extend patient access to their health care information; support patients' ability to contribute information directly to their health records; increase patients' access to virtual care delivery processes through telehealth capabilities; increase patients' direct contribution of their health information through at home, integrated and mobile devices; extend patients' access to virtual wellness and patient education materials; consistently assess a wide range of clinical use cases to broaden patients' engagement as a partner in the health care experience; provide health informatics support to the Departments' EHR programs' functional domains (e.g., functional requirements, data management, business process reengineering and management); and provide a seamless and transparent user experience that is personalized and tailored through algorithms that will sustain or improve patient health and health outcomes.

Mobile Applications and Platforms - VA Flagship Mobile Application. Over the past five years, Veterans have increasingly turned to their smartphones to interact with VA's services. While VA's websites are designed to work well on small screens, Veterans increasingly expect routine transactions like messaging their doctor, checking a payment status, or refilling a prescription to be available in a high-quality, easy to use mobile app. Addressing Veterans' needs through a mobile app seizes an opportunity to continue to deliver the highest quality customer service to Veterans and caregiver teams, and to increase trust in the VA. Keeping the application up-to-date with current technology, the supporting infrastructure, applications, and API connections are frequently revisited and improved upon, focusing on a buy-over-build approach and leveraging open-source solutions where possible. Operationally, investing in a cross-administration native mobile app at the VA will help the VA develop a plan for managing the agency's larger mobile strategy to include deprecating existing, disconnected, mobile apps.

In 2024, expected services include but are not limited to: leveraging native phone notifications to send status updates to users in real time when status changes to claims occur; leveraging the mobile functionality, which allows users to call/text/chat VA services directly from the app; and using mobile app map functionality, allowing users to easily view claim status, facility locations, appointments, and adjust their personal profile as needed. The outcome of combining these native features into one app is that it will make it simpler and faster for users to interact with VA and complete day-to-day transactions. This funding will enable the mobile application team to sustain the application including establishing branding strategy, decommissioning existing mobile apps, maintaining a shared design library, maintaining efficiency across the mobile development ecosystem, remote patient monitoring use cases, and mobile transition app (VEO life kit).

New functionalities are expected to be added to the VA Flagship Mobile Application:

- View and edit profile information
- View and upload documents from VA.gov profile Integration with existing VA Mobile applications
- View past and future appointments
- Integration with existing VA Mobile applications
- Provide video conferencing capabilities

Customer Data Management Experience - \$23.1 million (\$4.7 million Development, \$18.4 million Operations and Maintenance)

Customer Data Management Experience investments are key to VA’s goal to improve Customer Experience (CX) as Veterans, family members, and caregivers to navigate the journey from military service through the spectrum of VA benefits. Products within this project support systems across the VA, shared with DoD and used to support user-friendly channels through which data can be submitted and consumed by customers and their advocates. The customer data management experience encompasses two overarching goals: 1) providing an infrastructure for capturing, synchronizing, and maintaining the integrity of customer data and 2) ensuring this data is available enterprise wide and to customers to provide and adjudicate VA benefits. This functionality is critical to VA’s strategic goal to ensure governance, systems, data, and management best practices to improve experiences, satisfaction, accountability, and security. 2024 funding within Customer data management experience will sustain and modernize VA customer data systems, ensuring that both the Veteran and lines of business always have the right data available in a way that best serves the community.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (S\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Veterans Customer Experience & Data and Analytics	\$ -	\$ 5,407	\$ -	\$ -	\$ -	\$ 14,982	\$ 4,673	\$ 10,440	\$ 131
Data Integration	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,658	\$ 4,658
Military History Data	\$ 468	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,284	\$ 3,284
Customer Relationship Management (CRM) Platform Enhancements	\$ 218	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Identity and Access Management (IAM) Experience & Data and Analytics	\$ -	\$ 22,845	\$ 1	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Experience & Data and Analytics - Section 8002	\$ -	\$ 7,246	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Experience & Data and Analytics - Section 8002	\$ -	\$ 8,277	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Veteran Identity/Eligibility Reporting System (VIERS)	\$ -	\$ 4,478	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Veterans Information Solution (VIS) VA DoD Identity Repository (VADIR) Support	\$ -	\$ 2,032	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VA/DoD Identity Repository (VADIR)	\$ -	\$ 600	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Veterans Information Solution (VIS)	\$ -	\$ 186	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Customer Data Management Experience	\$ 685	\$ 51,071	\$ 1	\$ -	\$ -	\$ 14,982	\$ 4,673	\$ 18,382	\$ 8,073

Veterans Customer Experience and Data and Analytics consists of VA Profile and Summit Data Platform (SDP) platforms that both support VA customer common data synchronization and sharing across the VA, regardless of the channel used to update the information and provide a centralized location to house multiple data sources to efficiently detail and journey the Veteran Experience. VA Profile provides enterprise-wide access and synchronizes over 23 million Veteran records. VA Profile consists of over 20 APIs which provide access to authoritative Veteran data including Veteran contact information, communication preferences, medical benefits, rated disability, and discrete administrative data. VA Profile provides secure access to Veteran authoritative data to over 21 consuming applications. As VA Profile integrates with additional systems across the VA, Veterans will be able to provide information like address changes, preferred language, sexual orientation, and pronouns once and VA Profile will make this information available across the enterprise.

In 2024, VA Profile will continue data quality efforts, onboarding of partners and maintaining connections with existing partner systems, expanding the person types of interest, expanding the usage of communications preferences, and enabling data-driven decision making across the VA enterprise. The program will collaborate with Veteran Experience Office (VEO) to align with VA Goals and Data Strategy objectives to define, identify and implement authoritative data sources and services to support actionable insight and decision making to serve Servicemembers and Veterans, their families, caregivers, and survivors. OIT will improve data access and availability to Veterans and providers to help them make meaningful choices about their care, benefits, and service. In 2024, CxDW (Summit Data Platform) will continue to sustain the platform while also implementing process automation and data governance enhancements through the introduction of modern tools and scripted development. OIT will be developing and beginning to implement a strategy to integrate new data partner feeds and data consumers outside VA, such as the Social Security Administration, United States Treasury, etc.

Data Integration, which consists of Veteran Identity/Eligibility Reporting System (VIERS), is a suite of systems and services that maintains web service integration required by VA business lines with a need for an authoritative source for determining eligibility and entitlement of VA Benefits. VIERS service provides Veteran military history information, Veteran contact information, Veteran demographic data, benefits, and eligibility data. In 2024, VIERS will continue to serve as a middleware solution (liaison) between the business application and the VA data that resides on the backend. VIERS supports various services like; ACA, Customer Management Service (CMS), Digital 2 Digital D2D, Eligibility and Enrollment (E&E), allowing these business line applications and systems to automate eligibility decisions that otherwise would require manual processing of paper. It is expected that VIERS will embark on a modernization plan to transition from the current middleware-based solution to a microservices-based solution.

Military History Data, which consists of VADIR and Veterans Information Solution (VIS) supports the sharing and storing of military service data used by multiple lines of business within VHA and VBA to make benefits determinations. VADIR receives a copy of data daily from Department of Defense (DoD) which is the authoritative source of this data. VADIR supports business workflows in registration, enrollment, and eligibility processing for Veterans and their families VA-wide for health care, disability compensation, VA loans, education including Post-9/11 Montgomery GI Bill (MGIB), life insurance, and programs for homeless and incarcerated veterans.

In 2024, VADIR projected funding will support operations and maintenance of a critical platform of specialized technical support to run the day-to-day operations of platform and annual software license maintenance costs.

In 2024, VIS will remain operational to support critical business functionality that relies on a visual representation of Veteran data to make eligibility determinations. Security patches will be applied, and break/fix defect corrections will be made. VIS will support benefit delivery determination across multiple business lines including Compensation and Pension, NCA, Education and VHA.

Contact Center Experience - \$33.3 million (*Operations and Maintenance*)

The desired strategic outcome of the Contact Center Experience project is to create a consistent, efficient, and effective enterprise-wide contact center interaction for Veterans. Contact Center products and services funded through this project are critical to meeting VA's goal of building long-term relationships and trust with customers and partners. Effective contact centers also ensure the Department meets the President's second priority to deliver an excellent, equitable, and secure customer experience. VA Contact Centers receive over 60 million calls annually from Veterans, Caregivers, and family members to obtain information on health care, benefits, claims, and more. The Department is committed to creating an interactive experience with the Veteran that is consistent, easy, intuitive, and personalized.

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (Ss in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
VBA Contact Centers	\$ -	\$ 3,720	\$ -	\$ -	\$ -	\$ 5,704	\$ -	\$ 11,058	\$ 5,354
Contact Center Knowledge Management Systems	\$ -	\$ 1,398	\$ -	\$ -	\$ -	\$ 6,166	\$ -	\$ 6,365	\$ 199
VHA Patient Advocate and Veteran Inquiry Capability	\$ -	\$ 2,614	\$ -	\$ -	\$ -	\$ 5,808	\$ -	\$ 5,808	\$ -
Contact Center Support Systems	\$ 795	\$ 2,659	\$ -	\$ -	\$ -	\$ 4,705	\$ -	\$ 5,410	\$ 705
VHA Contact Centers	\$ 997	\$ 3,629	\$ -	\$ -	\$ -	\$ 15,600	\$ -	\$ 4,374	\$ (11,226)
Quality Management Workforce Management and Analytics	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 291	\$ 291
VEO Contact Centers	\$ -	\$ 1,842	\$ -	\$ -	\$ -	\$ 1,842	\$ -	\$ -	\$ (1,842)
Community Care - Customer Relationship Management (CommCare-CRM)	\$ 995	\$ 10,698	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VA Knowledge Management System - eGain (KMS) - Section 8002	\$ -	\$ 5,540	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Veterans Crisis Line (VCL)	\$ -	\$ 4,812	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Inquiry Routing and Information System (IRIS)	\$ -	\$ 1,246	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
White House VA Hotline (WHHL) - Section 8002	\$ -	\$ 766	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Voice Access Modernization (VAM) Infrastructure	\$ -	\$ 755	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Center Experience	\$ 2,788	\$ 39,678	\$ -	\$ -	\$ -	\$ 39,825	\$ -	\$ 33,306	\$ (6,519)

VBA Contact Centers supports Unified Desktop Optimization (UDO), which collects, preserves, and tracks the context of all interactions with Veterans and beneficiaries and will unify business processes by integrating desktop applications to provide VA staff with a single consolidated view of the Veteran's data and access to authoritative business systems to resolve the Veterans' issues. VBA requires call center support applications that pull data from multiple legacy systems and make it available for call center agents to quickly respond to Veteran callers. UDO provides call center agents with quick access to Veteran records data related to the Veteran from 25 systems across VA. Displayed in a simple dashboard, UDO consolidates Veterans' data, synchronizes it across systems, and automatically updates information. The application also tracks the transition of active-duty service members to VA for the Mental Health Outreach group. This provides continuous access to facilitate ongoing eligibility and access to services through their transition. Contact center agents engage with Veterans within 90 days of separation. To best meet the changing needs of its customers, UDO is continuously adding communications channels.

Education Call Center (ECC) Customer Relationship Management (CRM) provides a single user interface for the call center agents at the ECC to log, track, and retrieve Veteran Education Services' information. ECC supports approximately 300 call center agents in Muskogee, OK and receives approximately 2.7 million calls per year from Veterans, Beneficiaries and Education Officials. ECC Customer Relationship Management provides a single pane of glass view of Veteran information and education benefits to answer inquiries at the call center.

ECC Customer Relationship Management sustainment request will support upcoming major Digital GI Bill modernization systems changes which will maintain the ability for first call resolution and consistent information throughout the Veteran's education experience. To improve user experience, customer, and staff satisfaction as well as meet the Secretary's second goal to foster innovation, contact center investments will deliver the following in 2024:

- Omnichannel chat implementation - This will allow the Veteran to select the option to chat with a virtual agent. Implementing this feature will decrease bottlenecking in the call logs and will allow the Veteran to get quicker contact resolution
- Improve routing processes to make them more intuitive for Veterans and VA employees reducing service recovery time, Veteran frustration and increasing accuracy and consistency of data.

The Contact Center Knowledge Management tool provides a platform where internal VA subject matter experts can maintain this information, update it as needed, and offer a single source for VA's customers to get the answers they need. In addition, multiple VBA businesses house their internal claims processing manuals and regulations in the Contact Center Knowledge Management tool. This allows for employees to have a single updated source for information needed in delivering quality and accurate claims processing to Veteran customers.

VHA Patient Advocate and Veteran Inquiry Capability, formerly known as Patient Advocate Tracking System Replacement (PATS-R), supports VHA, VBA, and Office of Patient Advocacy (OPA). VHA Patient Advocate and Veteran Inquiry Capability has approximately 27,000 end users and manages approximately 1.2 million interactions per year. This application provides complete tracking of Veteran inquiries, suggestions, comments, and complaints. The previous system did not provide adequate tracking and automation, resulting in a loss of feedback and service improvement. The funding request will support the increased number of complaints received from Veterans and an increasing number of contact origination points.

Contact Center Support Systems is comprised of two systems: Veterans Experience Integration Solutions (VEIS) and Contact Center Solutions. The VA Knowledge Management (KM) Veterans Experience Integration Solutions system supports more than 114,000 users and is a critical application at VA for all three Administrations and VACO. This system provides a platform where internal VA subject matter experts can maintain this information, update it as needed, and offer a single source for VA's customers to get the answers they need. In addition, multiple VBA businesses house their internal claims processing manuals and regulations in the tool.

VHA required call center support applications for the Member Services team that would pull data from multiple legacy systems and make it available for call center agents for the expeditious handling of Veteran callers. The use of this application improves Veteran service, accuracy of data, and allows assistance to more Veterans per day by reducing call times. The call centers, across all

5 lines of business, handle more than 6 million calls per year, with two of them handling more than a million calls each. The project supports providing a copy of the data to Member Services for them to build combined reporting from CRM and telephony data. Data will eventually be migrated to the CDW to provide enhanced analytics to make even better decisions regarding call center functionality.

Workforce Management and Analytics is supported by an application called Calabrio. This is part of the upgrade to contact centers unified communication. Calabrio is the Enterprise Workforce Management System that VA uses for call recording, quality management, workforce management, analytics, and data management.

Customer Feedback and Experience - \$10.6 million (Operations and Maintenance)

Without methods to hear the “voice of the customer”, OIT cannot meet key parts of the Secretary’s first strategic goal. Evaluating the needs of customers not only builds long-term relationship and trust with the VA, but also helps define which features and services should be provided next.

Currently, the Customer Feedback & Experience project only funds one investment -Veteran Signals (VSignals) - but the application serves 19 Lines of business in VHA, VBA, NCA, and BVA. Annually, VSignals provides approximately 11 million surveys to Veterans with a 17% response rate. Additionally, since its inception, VSignals received approximately 2.7 million free-text responses providing feedback from Veterans about their experiences with VA. Based on this Veteran feedback, OIT can act on “Alerts” received from Veterans: nearly 7,000 inquiries for Veterans at potential risk of suicide and almost 2,000 inquiries for Veterans potentially at risk for homelessness have been routed for support. The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Customer Feedback	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,592	\$ -	\$ 10,640	\$ (952)
Veterans Signals (VSignals)	\$ -	\$ 11,589	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Customer Feedback and Experience	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,592	\$ -	\$ 10,640	\$ (952)

Customer Feedback funds VSignals, which allows VA to listen directly to Veterans, their families, and caregivers and to respond quickly to their concerns and recommendations. VA performance improvement is based on Veteran encounter feedback and experience drivers to provide short-term service recovery and long-term improvements designed to deliver outstanding customer service. VSignals gathers, manages, analyzes, and presents Veteran feedback regarding benefits and services in an easy-to-use interface. The goal of VSignals is to be the sole tool of choice for the VA survey generation and feedback collection to deliver actionable intelligence on what is influencing Veteran's trust in the services VA provides. This feedback is then used to upgrade/modify/change/create systems or applications to enhance the veteran experience and ease of use. VSurvey feedback was the driver to create easier to remember phone numbers to reach call centers such as MYVA411, and 988 for the Veterans Crisis Line.

In 2024, VSignals is expected to:

- Create additional surveys for the existing call centers to gather feedback from Veterans about their experience. This information will be critical to properly correct and adjust service as needed.
- Expand to 6 additional call centers, thus providing more opportunities for the voice of the Veteran to be heard.

Eligibility and Enrollment Experience - \$9.2 million (Operations and Maintenance)

The Eligibility and Enrollment Experience project invests in software and services that determine Veteran Health eligibility. This serves as the system of record for VA health benefits decision for over 8 million Veterans currently using VHA health care. Some investments in this project are over 30 years old, which limits the resources necessary to support the outdated technology as well as increase operating expenses year over year. In 2024, sustainment funding is needed to continue ongoing migration effort to a more modern, sustainable, and secure technology stack.

The 2024 Budget Request includes the following sub-project:

Sub-Projects ((\$ in thousands)	2022/2023				2023		2024		2023-2024 Increase/ Decrease
	Year 1 Actual		Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	DEV	OM	
Health Eligibility and Enrollment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14,320	\$ -	\$ 9,159	\$ (5,161)
Enrollment System	\$ -	\$ 9,164	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Enrollment System - Section 8002	\$ -	\$ 7,066	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Administrative Data Repository (ADR)	\$ -	\$ 1,032	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
VistA Enrollment Application System	\$ -	\$ 235	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Eligibility and Enrollment Experience	\$ -	\$ 17,497	\$ -	\$ -	\$ -	\$ 14,320	\$ -	\$ 9,159	\$ (5,161)

Health Eligibility and Enrollment supports the Administrative Data Repository (ADR) and Enrollment Database (EDB).

ADR provides backbone database systems to VHA’s Enrollment System (VES). VES Application Systems directly serve 19 million Veterans and their beneficiaries and families. These services include Community Care Program, ACA, VA Maintaining Internal Systems and Strengthening Outside Networks Act, VA Mission Act, Family Caregiver Program, and others. These systems and business functions are dependent on the ADR database system which provides the data to VA staff so they can quickly and efficiently provide a simplified description of eligible VHA health benefits available to the Veteran and beneficiaries. In 2024, sustainment-steady-state funding will maintain the ADR system operations, keeping the VHA’s Enrollment System and other major business systems functional. The funding will also provide maintenance to ADR reporting database along with various reports to VA business management and senior leadership to support their strategies and policy decisions.

EDB determines the Entitlement and Rating to ascertain the appropriate level of benefit services that a Veteran, family member, or caregiver is entitled to, based on established eligibility and conditions. The Income Verification Division uses the IVM solution to support its mission of collecting and verifying Veterans’ income information to determine eligibility for medical care from the VA. The sustainment funding will allow migration of the EDB into Enrollment System

(ES), and migration of Windows Server 12 to the latest version of Windows Server to remain compliant with the Technical Reference Model. Additionally, funding would significantly reduce the duplication of functionality between EDB and ES, add more seamless income verification processes, streamline data interoperability with VHA enrollment, and preserve Federal Tax Information management practices while moving toward enterprise income verification and full-time equivalent practices. The migration of the ED functionality to the ES will reduce duplication of data processing done by both systems.

2024 PACT Act Request

The PACT Act allows VA to use funds from the Cost of War Toxic Exposure Fund (established in section 324 of title 38 United States Code and by section 805 of this Act) to pay for the modernization, development and expansion of capabilities and capacity of IT systems and infrastructure to support the expected increase in claims processing demand, appeals, and health care without degrading the service.

The 2024 request to support PACT Act requirements in the amount of \$1.243 billion includes \$16.4 million in Development, \$1,155.8 million in Operations and Maintenance and \$70.8 million in Pay and Administrative Support Services which funds 341FTE. The funding will grant the ability to improve and modernize the claims process, to support automating aspects of the claims review process to fast-track presumptive claims by reducing the time for claim decisions, and to improve VA.gov for accomplishing key PACT Act tasks such as applying, tracking, and managing burn pit and toxic exposure related claims. Also, the funding will support the new functionality and increase call center support to improve Veteran Customer Experience and increase capacity for scalable cybersecurity systems support to accommodate PACT Act driven claims growth. OIT requires 341 FTE to ensure that VA has the capacity to handle the anticipated increases in volumes of inquiries, claims submitted, appeals, and health care without degrading service (claims wait time, appointment availability, time spent waiting to speak to someone, etc.) for any Veteran who approaches the VA. OIT will also support activations for PACT Act new hires across the VA and improve employee productivity and collaboration tools to support employee efficiency to include ongoing OneDrive migration, telecom and network bandwidth for additional network users and expected increased call volume.

Information and Technology				
PACT Act				
(\$s in Thousands)				
Development				
Projects	2023 Year 2 of 3-year Availability	2023 Enacted	2024 Request	2023-2024 Increase / Decrease
Clinical Care Services	\$ -	\$ -	\$ 5,585	\$ 5,585
Common Health Care Specific Services	\$ -	\$ -	\$ 5,500	\$ 5,500
Digital Experience	\$ -	\$ -	\$ 5,319	\$ 5,319
Veterans Customer Experience - VCE	\$ 3,750	\$ 2,000	\$ -	\$ (2,000)
Veterans Benefits Management	\$ 2,500	\$ -	\$ -	\$ -
Development Subtotal	\$ 6,250	\$ 2,000	\$ 16,404	\$ 14,404
Sustainment /O&M				
Benefits Enterprise Support	\$ -	\$ -	\$ 145,311	\$ 145,311
Digital Experience	\$ -	\$ -	\$ 128,723	\$ 128,723
Compensation and Pension	\$ -	\$ 40,000	\$ 87,203	\$ 47,203
Contact Center Experience	\$ -	\$ 5,000	\$ 75,866	\$ 70,866
Benefits Integration and Administration	\$ -	\$ -	\$ 66,523	\$ 66,523
Infrastructure Operations (IO) Software Maintenance	\$ -	\$ -	\$ 57,165	\$ 57,165
Network Services ITIN	\$ -	\$ -	\$ 50,600	\$ 50,600
Customer Data Management Experience	\$ -	\$ 7,010	\$ 44,747	\$ 37,737
Health Delivery Support	\$ -	\$ -	\$ 41,878	\$ 41,878
End User Software	\$ -	\$ -	\$ 41,551	\$ 41,551
Foundation Platforms	\$ -	\$ -	\$ 39,894	\$ 39,894
Activations	\$ -	\$ 121,237	\$ 37,000	\$ (84,237)
Eligibility and Enrollment Experience	\$ -	\$ 5,000	\$ 32,487	\$ 27,487
Cyber Security Operations	\$ 5,685	\$ 6,287	\$ 32,111	\$ 25,824
Benefits Experience	\$ -	\$ -	\$ 30,740	\$ 30,740
Solution Delivery (SD) Hardware Maintenance	\$ -	\$ -	\$ 27,299	\$ 27,299
Infrastructure Operations (IO) Hardware Maintenance	\$ -	\$ -	\$ 24,220	\$ 24,220
Common Health Care Specific Services	\$ -	\$ -	\$ 23,130	\$ 23,130
Appeals	\$ 2,282	\$ 2,326	\$ 22,628	\$ 20,302
Enterprise IT Infrastructure	\$ -	\$ -	\$ 21,160	\$ 21,160
Decision Intelligence	\$ -	\$ -	\$ 19,646	\$ 19,646
VBA Finance	\$ -	\$ -	\$ 17,508	\$ 17,508
Application Delivery Infrastructure	\$ -	\$ 9,600	\$ 17,291	\$ 7,691
IT Service Management	\$ -	\$ -	\$ 15,845	\$ 15,845
Education Veterans Readiness and Employment	\$ -	\$ -	\$ 11,488	\$ 11,488
Loan Guaranty	\$ -	\$ 4,000	\$ 7,161	\$ 3,161

Information and Technology				
PACT Act				
(\$s in Thousands)				
Sustainment /O&M (continued)				
Projects	2022/2023 Year 2 of 3-year Availability	2023 Enacted	2024 Request	2023-2024 Increase / Decrease
Service Desk	\$ -	\$ -	\$ 6,969	\$ 6,969
Operational Support	\$ -	\$ -	\$ 6,800	\$ 6,800
Solution Delivery (SD) Software Maintenance	\$ -	\$ -	\$ 5,717	\$ 5,717
Awareness, Governance, Risk, Compliance	\$ -	\$ -	\$ 3,631	\$ 3,631
End User Operations	\$ -	\$ -	\$ 3,292	\$ 3,292
Memorial Support	\$ -	\$ -	\$ 2,326	\$ 2,326
Product Engineering and Development Support	\$ -	\$ -	\$ 1,859	\$ 1,859
Health Administration	\$ -	\$ -	\$ 1,500	\$ 1,500
Infrastructure Operations Support	\$ -	\$ -	\$ 1,091	\$ 1,091
Operations Triage Group	\$ -	\$ -	\$ 1,032	\$ 1,032
Customer Feedback and Experience	\$ -	\$ -	\$ 952	\$ 952
Data Analytics Infrastructure	\$ -	\$ -	\$ 500	\$ 500
Network Services Health	\$ -	\$ -	\$ 550	\$ 550
Implementation Support	\$ -	\$ -	\$ 383	\$ 383
Veterans Customer Experience - VCE	\$ 23,399	\$ 111,493	\$ -	\$ (111,493)
Veterans Benefits Management	\$ 22,674	\$ 63,488	\$ -	\$ (63,488)
Data Integration and Management	\$ 2,807	\$ 45,391	\$ -	\$ (45,391)
Other Benefits IT Systems	\$ 24,958	\$ 38,449	\$ -	\$ (38,449)
Hardware Maintenance	\$ -	\$ 35,847	\$ -	\$ (35,847)
Software Maintenance	\$ 7,743	\$ 34,054	\$ -	\$ (34,054)
Telecommunications	\$ 5,780	\$ 23,456	\$ -	\$ (23,456)
Digital Health Platform	\$ -	\$ 23,426	\$ -	\$ (23,426)
TAC Fees	\$ -	\$ 19,000	\$ -	\$ (19,000)
Health Data Interoperability	\$ 1,456	\$ 18,425	\$ -	\$ (18,425)
IT Support Contracts	\$ 542	\$ 9,567	\$ -	\$ (9,567)
Veteran Customer Experience Data and Analytics	\$ -	\$ 7,000	\$ -	\$ (7,000)
Registries	\$ 5,995	\$ 4,500	\$ -	\$ (4,500)
Beneficiary Travel	\$ -	\$ 3,700	\$ -	\$ (3,700)
Benefit Systems	\$ 2,281	\$ 3,489	\$ -	\$ (3,489)
Repositories	\$ -	\$ 3,377	\$ -	\$ (3,377)
Enterprise Service Desk	\$ 6,313	\$ -	\$ -	\$ -
Memorials Automation	\$ 1,140	\$ -	\$ -	\$ -
Sustainment Subtotal	\$ 113,056	\$ 645,123	\$ 1,155,777	\$ 510,654
Development	\$ 6,250	\$ 2,000	\$ 16,404	\$ 14,404
Sustainment/O&M	\$ 113,056	\$ 645,123	\$ 1,155,777	\$ 510,654
Staffing and Administration	\$ 3,747	\$ 8,877	\$ 70,819	\$ 61,942
Grand Total	\$ 123,053	\$ 656,000	\$ 1,243,000	\$ 587,000

Note: 2024 Request column does not include 2023 Carryforward totaling \$70.610 million

The Project detail tables below display 2022 Actuals and 2023 Enacted sub-projects aligned to the Projects in the new 2024 budget structure for comparison purposes.

Health Portfolio

Clinical Care Services - \$5.6 million (Development)

The 2024 Budget Request includes the following sub-project:

Sub-Projects ((\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Women's Health Interactive Management System	\$ -	\$ -	\$ -	\$ -	\$ 5,585	\$ -	\$ 5,585
Clinical Care Services	\$ -	\$ -	\$ -	\$ -	\$ 5,585	\$ -	\$ 5,585

Women's Health Interactive Management System. Current tools available to VHA providers caring for women Veterans, PACT Act teams, Whole Health Clinical Care Symposium (WHCCs), and the Program Office fall short when it comes to assisting providers in knowing when a next action is due on a patient; tracking patient preventive care screenings and follow-ups; and being able to produce needed reports required of facilities, VISNs, and the Program Office. Gaps exist in tracking breast and cervical cancer screening, breast and gynecologic cancers, maternity care, osteoporosis screening, gonorrhea and chlamydia screening, maternal and fetal pregnancy outcomes, and infertility and family planning services. Given that much of breast cancer screening, breast and gynecologic cancer care, and complex infertility services -- as well as all maternity care -- is provided outside of the VHA, this care is difficult to track with existing tools. The Breast Care Registry (BCR) provided an important first step in tracking mammography and breast cancers, but it lacks an interactive component and care coordinators cannot enter their own notes. The inability to track other areas of women's health has created ongoing issues in accurately, determining who is due for preventive screening and important next steps in management following abnormal screens, as well as needed ongoing surveillance after treatment. For instance, currently, no tool exists that allows tracking and management around surveillance following abnormal cervical cancer screening; and information on maternity care and pregnancy outcomes is not currently being collected accurately to inform population level reports. As a result, women health care coordinators have a heavy reliance on spreadsheets to ensure that no Veteran experiences delays in screening, diagnosis, follow on care, and care coordination. Significant patient safety concerns may result from the inability to track efficiently. Providers spend significant time piecing together information throughout the record to inform decisions around needed care for patients. WHCCs are forced to work with spreadsheets that they manually populate, time that would be better spent in direct patient care coordination activities. This has led to a great deal of frustration, job dissatisfaction, and significant time away from direct patient care.

Common Health Care Specific Services (Development - \$5.5 million, Operations and Maintenance - \$23.1 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects ((\$s in thousands))	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
National Oncology Program	\$ -	\$ -	\$ -	\$ -	\$ 3,700	\$ -	\$ 3,700
Cancer Registry Software	\$ -	\$ -	\$ -	\$ -	\$ 1,800	\$ -	\$ 1,800
Veterans Integrated Registries Platform (VIRP)	\$ -	\$ 5,995	\$ -	\$ -	\$ -	\$ 17,030	\$ 17,030
Clinical Decision Support Platform (CDSP)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,100	\$ 6,100
Common Health Care Specific Services	\$ -	\$ 5,995	\$ -	\$ -	\$ 5,500	\$ 23,130	\$ 28,630

National Oncology Program. Molecular Oncology Data Management - Precision Oncology does not end with the single patient and is not limited to clinical knowledge at the time it was generated. In order to apply learnings beyond the single patient and to continue to refresh findings in light of new clinical evidence and knowledge, it is essential to have a data management system that allows rapid updates of the data and the ability to query it to find unique populations for clinical decision support, treatment via new approved drugs or clinical trials and other studies. This system needs to be usable by physicians and program office staff or researchers. It also needs to integrate with the patient's clinical information to ensure data is evaluated in light of the patient's full clinical history. Not having such a system will decrease Veteran access to precision oncology treatments and life-saving trials as the genetic/genomic data is large and complex. Current molecular testing outputs match veterans to therapies based on clinical evidence in the field. In order to do Veteran specific discovery, research and to understand the unique makeup of this population, OIT needs to be able to take a step back and look at the raw data and reanalyze it to find veteran specific mutational patterns which may be driven by military exposure and other factors. Given the scale of the data and its unique format, the data requires specialized bioinformatics tools within an environment built to effectively analyze this data and produce useful outputs. Without this capability the data will be essentially unusable. Patient Care Data Integration - The ability for clinicians to easily access the correct data at the correct time is vital to evidence-based care. Using tools such as an artificial intelligence (AI) based application to read through pages of text documents will benefit the physicians by saving time and ensuring accurate data extraction. It will benefit patients by making sure their physician has all the information needed to select appropriate treatments. The use of tumor boards is also a key component of cancer care as cancer care is complex and often requires a multidisciplinary team of experts. This group comes together in the form of a tumor board to discuss patients and make recommendations around their treatment plan. Precision oncology has expanded the range of the types of experts needed for cancer care treatment decisions and often, these experts do not practice within a single VA facility. To bring together this large group of experts and efficiently discuss and capture their feedback for as many Veterans as possible, there is a need for a software solution to effectively manage the process as well as capture the recommendations that result from the tumor board. Without a software solution, the widespread use of these tumor board forums will remain extremely limited to only a handful of Veterans.

Cancer Registry Software. The new national VA Cancer Registry System will assist Cancer Registrars, Providers, and Cancer Registry Administrators to ensure Veterans have safe and easy access to high-quality cancer prevention, detection, and treatment services by collecting important data on cancer patients. It will be a replacement for the current VA Cancer Registry solution set:

VistA - OncoTraX and Veterans Administration Central Cancer Registry (VACCR) for a modernized solution. This potential new solution is to integrate with the current VistA EHR system and integrate with the new Cerner EHR, as it's rolled out. The current solution (VistA- OncoTraX) is not considered a sustainable solution going forward as it is an antiquated product developed by the VA in the mid-90's and is part of the Vista applications that will be replaced by Cerner. OncoTraX has not kept up with the increasing requirements for complex oncology data and steady pace of demands to meet the Commission on Cancer standards for accredited cancer programs. Also, it is not compliant with current technological requirements such as the ability to access API resources provided by the national cancer registry standards organizations. A newer cancer registry solution would be easier to use, increase efficiency and stay up to date on registry abstracting requirements.

Veterans Integrated Registries Platform (VIRP). There are three exposure registries within EAS; Gulf War (GW), Ionizing Radiation (IRR) and Agent Orange (AO). This MYP is designed to transfer the AO, GW and IRR into VIRP. This is to be followed by the transfer of the GW into ILER. The AO and IRR registries are slow growing and approaching a sunset date. However, they should be still actively maintained for at least a decade more. Transferring this data will allow for all the VA environmental exposure registries to be maintained in one platform and to potentially close down the Environmental Agents Service (EAS) registry. The Gulf War Registry is currently in a data base called EAS which requires manual data entry by EH clinicians and coordinators. The ILER steering group has determined that this data base should be put into the ILER program. This was approved by the DoD Health Executive Committee (HEC) and Joint Executive Council (JEC). The first step is to move the data into VIRP and the second step is to move the data from VIRP into ILER. In addition, the registration requirements for the Airborne Hazards and Open Burn Pit Registry (AHOBPR) and GW are nearly identical. Transfer into the VIRP portal will allow for synergies between the AHOBPR and the GW. A MYP form has been submitted in case this works rolls over into the next fiscal year and for future sustainment and upgrade costs within VIRP.

Clinical Decision Support Platform (CDSP). VA clinicians need comprehensive tools to visualize disparate clinical data and easily order appropriate patient-specific interventions to improve the patient's health. Clinicians also need tools that are quickly responsive to ever changing organizational and clinical guidance. The CDSP solution provides a platform that supports the timelier development and implementation of CDS tools that deliver a higher quality of care for Veterans in more effective and efficient ways and help increase operational efficiency and arguably decrease associated operating costs. CDSP based applications are designed to integrate in provider workflows in VHA's EHRs, including CPRS/VistA. Additionally, these applications read from and will write back to (future) the EHRs including CPRS/VistA. Current CPRS/VistA - CDSP integration efforts includes work on CDS hooks (utilizing CPRS's COM object extension) and Lung Cancer Screening Program (LCSP) v2.

Health Delivery Support – \$41.9 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
VA Health Connect Customer Relationship Management (VAHC CRM)	\$ -	\$ -	\$ -	\$ 17,915	\$ -	\$ 36,878	\$ 18,963
Toxic Exposure Screening Tool (TEST)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,000	\$ 5,000
Health Delivery Support	\$ -	\$ -	\$ -	\$ 17,915	\$ -	\$ 41,878	\$ 23,963

VA Health Connect Customer Relationship Management (VAHC CRM) provides increased virtual care access to Veterans to schedule appointments, request prescriptions, obtain clinical advice, and participate in virtual visits with their providers. As VA implements PACT Act and continues with its Mission Act implementation, VA’s Health Connect plays a pivotal role in access to care. Additionally, VA HealthConnect aligns with VHAs Long Range Planning Framework to make VHA the provider and care coordinator of Choice for Veterans through supporting a flexible care structure across the VA System at facilities and through community care, telehealth, and collaborative opportunities.

Toxic Exposure Screening Tool (TEST) is a screening that can be deployed to all Veterans (registered and unregistered) would improve the efficiency of receiving critical health data and target Veterans in need of medical intervention by automating the process and eliminating the manual workload used today. This screening tool would facilitate outreach to current Veterans and enable their caregivers to submit health information remotely. This screening tool requires the support of IT engineers to devise a new system of record to collect health data and integrate the data with the existing EHR (CPRS and Oracle Cerner). Without IT funding, staff will continue to create disparate tools (excel spreadsheets to individual databases) attempting to meet the PACT Act requirements. Non-registered Veterans and current Veterans without an immediate pending appointment will not be screened for potential toxic exposures, potentially contributing to delays in care. Beginning not later than 90 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall incorporate a screening to help determine potential toxic exposures during active military, naval, air, or space service as part of a health care screening furnished by the Department of VA to Veterans enrolled in the system of annual patient enrollment of the Department established and operated under Section 2 1705 of Title 38, United States Code, to improve understanding by the Department of toxic exposures while serving in the Armed Forces.

Enterprise IT Infrastructure – \$21.2 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Corporate Data Warehouse (CDW)	\$ -	\$ 1,456	\$ -	\$ 12,679	\$ -	\$ 15,350	\$ 2,671
Health Data and Analytics Platform	\$ -	\$ -	\$ -	\$ 5,511	\$ -	\$ 5,810	\$ 299
Enterprise IT Infrastructure	\$ -	\$ 1,456	\$ -	\$ 18,190	\$ -	\$ 21,160	\$ 2,970

Corporate Data Warehouse (CDW) PACT ACT funding in 2024 will be used to improve the use of data and analytical tools required by VA Program Offices to identify specific Veteran populations and corresponding locations. CDW will consolidate available data within a standard architecture to facilitate analytics across healthcare and benefits. CDW will develop research and predictive analytics capabilities for diverse data sets to maximize the VA potential to provide health care and benefits for Veterans eligible under the PACT Act.

Health Data and Analytics Platform (HDAP) PACT Act funding in 2024 will be used to modernize the HDAP system with the capability to accept the increase in PACT Act data ingested from CDW. HDAP anticipates that there will be an increase analytical data requests associated with the PACT Act data and will ensure data pipelines, data curation (Trifacta), data catalog (Collibra), and other analytical tools are available to perform these complex data transformations for the VA community. HDAP will also effectively deliver a secure and highly available (99%+) data analytics platform for the Department of VA consumers - Data Scientists, Analysts, Clinicians, and Program Offices, etc.

Operational Support - \$6.8 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Disability Medical Assessment (DMA)-Modernizing Clinical Workflow	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,300	\$ 5,300
Community Care (CC) Integrated Billing (IB) Accounts Receivable (AR)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,500	\$ 1,500
Operational Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,800	\$ 48,678

Disability Medical Assessment (DMA) - Modernizing Clinical Workflow. The VBA has provided projections to the VHA Office of Disability and Medical Assessment that PACT Act will require significantly increased Compensation and Pension (C&P) capacity from VHA Medical Centers to supplement VBA contractors in order to meet the surging demand for Veterans requiring C&P examinations. The PACT Act is expected to more than double the demand for VHA C&P exams by 2024. This could put a significant strain on VISNs and VHA Facilities to allocate more dedicated resources (people and space) to conduct C&P exams and could potentially complete with the need to provide critical healthcare services. Expansion of the virtual footprint to complete these disability exams is needed to deliver these mission critical services efficiently and conveniently to Veterans. The solution being considered will allow virtual C&P exams to be routed, scheduled, and completed in one system across the VHA enterprise, thereby eliminating geographical boundaries or constraints for virtual C&P services that will better serve Veterans seeking disability exams. The solution also provides multiple performance and reporting monitors at medical center, VISN, and VACO levels to provide operational and reporting data. The platform allows Veterans to continue to receive timely virtual C&P exams.

The VHA Finance Community Care (CC) Integrated Billing (IB) Accounts Receivable (AR) product team enhances the billing infrastructure to increase copay billing timeliness and accurate collections of billable Non-Veterans Affairs care services. Enhancements of IB and AR ensures that copay debt is accurately calculated and enhancements will also ensure compliance with the PACT Act billing requirements.

Network Services - \$0.6 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Screen Share with Veterans	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 550	\$ 550
Network Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 550	\$ 550

Screen Share with Veterans. The Member Services' Help Desk receives 3,000 calls daily from Veterans asking for assistance which are handled by 200 VA employees. Most of these are inquiries pertaining to navigating the VA.gov website; how to find information, what links to click on, how to submit forms, as well as general use of VA.gov. Currently, the Veterans have to describe what they are viewing on the screen. This can cause frustration on the part of the Veteran if they are not able to describe their screen accurately or understand what the Help Desk Contact Representative is describing. Additionally, this can cause long delays in the ability to provide the Veteran the information quickly and efficiently. Long delays can cause other Veterans' calls to be held in queue until a Help Desk Contact Representative is available. Furthermore, OIT is increasing the capacity to handle more calls by hiring more staff members, especially considering PACT Act where OIT is already seeing an increase. The ability to lower the call time with each Veteran via the Screen Share will also increase capacity.

Benefits Portfolio

Benefits Enterprise Support - \$145.3 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2022-2023 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Service Line Agreement (SLA) - Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 96,311	\$ 96,311
Benefits - Software Application Modernization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 49,000	\$ 49,000
Benefits Enterprise Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 145,311	\$ 145,311

The Service Line Agreement (SLA) – Benefits sub-project represents the steady-state charges for the 41 applications aligned to the Major Customer Code (MCC) VBA and Benefits Portfolio within the OIT Consolidated Agreement between the IO Franchise Fund Enterprise Center and

OIT. This project will continue to provide the ongoing operations and maintenance of critical applications.

Benefits – Software Application Modernization PACT Act funding will support new software applications on modern platforms in support of VA strategic business drivers and is focused on transformative initiatives that position VA to improve OIT's speed to market. Among the requirements is funding for re-platforming VA's oldest legacy systems onto modern PaaS and SaaS, completing the VAEC Cloud Migration application migrations, building common application delivery infrastructure and working down defect backlogs. Funding will address defects early when they are faster and more efficient to fix; and outsource commodity work to vendors freeing up resources to focus on delivering business value.

Compensation and Pension – \$87.2 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (S\$ in thousands)	2022/2023		2023		2024		2022-2023 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Veterans Benefits Management	\$ 2,500	\$ 22,674	\$ -	\$ 85,015	\$ -	\$ 68,512	\$ (16,503)
Disability Examination	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,466	\$ 10,466
Legacy Claims Processing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,899	\$ 5,899
VA Discharge	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,326	\$ 2,326
Veterans Service Network (VETSNET)	\$ -	\$ -	\$ -	\$ 2,326	\$ -	\$ -	\$ (2,326)
Compensation and Pension	\$ 2,500	\$ 22,674	\$ -	\$ 87,341	\$ -	\$ 87,203	\$ (138)

Veterans Benefits Management-VBMS. The PACT Act will fund Software Quality Assurance (SQA) Independent Verification and Validation (IV&V) support, Compensation and Pension Information Assurance support, and Data Access Services (DAS) Service Treatment Records (STR). VBMS sustainment-modernization is necessary to maintain VBMS at a healthy and technologically relevant state, as old VBMS legacy code must be brought up to current IT industry standards for code development. Modernization reduces system down time, reduces risks that larger code deployments create, and provides faster functionality to the end user. This enables faster claims automation and provides greater impacts to the Veteran.

VBMS sustainment-modernization is planning to deliver the following capabilities in 2024 with funding from PACT Act:

- VBMS Core, Ratings, Awards - Document Generation Modernization
- VBMS Core - Claim Establishment Modernization
- VBMS Core - VLER Modernization

VBMS sustainment-enhancement addresses the continued and future operational position of the system by correcting new defects, resolving root cause issues, and assisting in the resolution of user tickets requiring additional development work. Additionally, it makes required adjustments, enhancements, and optimizations to the system to improve application operations and performance. VBMS sustainment-enhancement is planning to deliver the following capabilities in 2024 with funding from PACT Act:

- VASRD body system updates
- Duplicate Veteran Record updates
- Transition AMA claim establishment from Caseflow to VBMS. Enhancing VBMS to allow for AMA claims to be established in VBMS by utilizing existing BGS Services to pull rating and non-rating decision data to include ancillary benefits and entitlements and existing Disposition data in VBMS. This project would also include the ability to report out on rating and non-rating decision data in VBMS.

Disability Examination includes CAPRI, CLAIMS and VistA-CAPRI. CAPRI sustainment-enhancement will be required to provide VHA and VBA Compensation and Pension users with the capability to process Veteran and service member claims for disabilities to all locations. The CAPRI application will be able to develop new requirements and code for the business and legislative changes to provide Veterans the benefits and services earned. Also, as CAPRI is migrated to the EHRM platform, certain application updates will be needed to ensure that legacy users are able to provide the quality service needed to serve Veterans.

CLAIMS sustainment-modernization is necessary to ensure reliability, stability, and modernization of legacy systems to the cloud or other technologies. CLAIMS enables and ensures the necessary security, authorization, and authentication of users to other VA Medical Centers and medical records.

VistA - CAPRI: Automated Medical Information Exchange (AMIE) covers the modification changes and enhancements of the AMIE application for the new requirements to include approved business needs/requests and legislative changes. AMIE is a critical application for the VHA clinicians to provide VBA the medical evidence used to adjudicate Veteran disability claims.

Legacy Claims Processing. VETSNET sustainment-modernization is required to modernize the interface components to reduce the number of duplicative capabilities and move the functionality into more appropriate systems. Limiting the number of systems for users to log input, share and retrieve data on a claim further decreases processing time for additional Veteran claims, and reduces costs of maintaining multiple systems.

VA Discharge. PACT Act funding will support Veterans Assistance Discharge System (VADS) sustainment-enhancement in delivering the following capabilities in 2024:

- VADS initiatives include the addition of support for the U.S. Space Force as well as the initiative to reduce the use of Social Security numbers in the processing of information
- VADS Modernization is planning to deliver the following capabilities in 2024 with funding from PACT Act:
- Solutioning for the modernization of the VADS system

VADS is an old mainframe system that supplies Veteran's information on what benefits they may be eligible for as well as discharge information to agencies outside of VA. The legacy system must be maintained until such a time as the capabilities can be transitioned to another system or VADS is modernized.

Benefits Integration and Administration - \$66.5 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2022-2023
	Year 2 of 3 year Availability		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	
Benefits Infrastructure Services	\$ -	\$ 12,303	\$ -	\$ 10,150	\$ -	\$ 51,520	\$ 41,370
Benefits Cloud Platform	\$ -	\$ -	\$ -	\$ 18,473	\$ -	\$ 15,003	\$ (3,470)
Corporate Database (CRP)	\$ -	\$ 12,083	\$ -	\$ 9,274	\$ -	\$ -	\$ (9,274)
Common Security Services (CSS)	\$ -	\$ 571	\$ -	\$ 9,025	\$ -	\$ -	\$ (9,025)
Benefits Integration and Management	\$ -	\$ 24,957	\$ -	\$ 46,922	\$ -	\$ 66,523	\$ 19,601

Benefits Enterprise Platform. PACT Act surges in claims volume as an additional 1,186,729 claims are anticipated in 2023 which will result in an increased number of VBA employees, anticipated at approximately 10,000, responsible for claims processing. This increase in load requires that the Benefit Enterprise Platform (BEP) be modernized to ensure reliability, and operational resiliency. Spend plan includes the technical resources required to build operational resiliency into BEP while increasing system capacity, providing round-the-clock assistance, and scalable cybersecurity systems support to accommodate PACT Act driven growth. In addition, re-architecting and migrating BEP to the cloud will improve the core benefits system infrastructure and performance providing greater agility, flexibility, stability, performance, and scalability while accommodating greater capacity and resulting in faster claims processing and benefit management. Work would include movement of the Rules Based Processing System (RBPS), Apache, WebLogic, and Tuxedo applications into the cloud, re-architecting and refactoring BGS services to implement Zero Trust policies that would increase security of Veteran data. Additionally, funding would support a Blue/Green deployment/application release strategy for safely updating apps in production while eliminating system downtime and enabling disaster recovery through this creation of a parallel production environment.

PACT Act increases in claims volume will result in increased sustainment costs. Continue support of the Benefits Integration initiative providing project management support. PACT Act increases in claims volume will result in increased cloud costs and require additional safeguards during deployments to reduce the potential downtime so that more overtime can be utilized to process additional claims. Funding would support BIA CorpDB Architecture resources to provide maintenance and implementation of data services for VBA Corporate Database as well as provide data services for VBA applications (30+) in support of VA business requirements. This service functionality is essential as VBA business offices must navigate the increase in claims and must build automation efforts whenever possible. Benefits Integration Platform (BIP) Application Programming Interface (API) Framework Engineering and Operational Support maintain the APIs that give Platform tenants this functionality. Lastly, funding would support a Blue/Green deployment/application release strategy for safely updating apps in production with no downtime. (This entails running two identical instances of an application run in the production environment behind a load balancer.) BIP must be able to support this Blue/Green capability to delivery on the agility and anticipated legislative requirements of the Honoring our PACT Act 2021.

PACT Act funding for Benefits Integration Platform will support Domain Events, Platform Engineering, Accelerators, and Solutioning:

- Domain Events - accelerate Veteran correspondence, claims, and benefits response times, and provide architecture to be able to handle the increased volume from the PACT Act.
- Platform Engineering - ensure critical engineering, development, production, and non-production upgrades are delivered to the platform such as Horizontal Scaling, Service Mesh, Camunda, and ZTA to provide high reliability, secure Veteran data, and increase system performance to handle increased resource demand from PACT Act.
- Accelerators - frameworks to enable tenant teams to efficiently integrate with new platform tools and features, Benefits Integration Hub project to allow self-provisioning of resources, and an API catalog for faster delivery of capabilities to Veterans with guardrails to enforce Zero Trust and coding best practices.
- Cloud Hosting - accommodate significant increase in cloud resource costs to support PACT Act volumes.
- Operational Support - ensure the platform, tools, and tenants' deployments are supported and operational throughout PACT Act scaling and development activities. Blue/Green Capability - zero downtime deployments, and increased resiliency to continue to decrease risk and minimize downtime as impacts grow with the increased number of supported Veterans and claims.

Benefits Experience - \$30.7 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (Ss in thousands)	2022/2023		2023		2024		2022-2023 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Digital Experience - Benefits	\$ -	\$ -	\$ -	\$ 5,000	\$ -	\$ 30,740	\$ 25,740
Benefits Experience	\$ -	\$ -	\$ -	\$ 5,000	\$ -	\$ 30,740	\$ 25,740

Digital Experience - Benefits. When a Veteran submits a disability compensation claim, they should submit medical data relevant to that claim. Skipping manual record retrieval and unnecessary medical exams by surfacing that medical information directly to a decision-maker will directly reduce the backlog, re-purpose FTEs toward further reducing the backlog, and get the Veteran a decision quickly. This product is called the Claim Fast-Tracker, and it's the first application of the Virtual Regional Office Platform. With these products, its intent is to get Veterans benefits in days, not months. The Virtual Regional Office Platform enables the Claim Fast-Tracker product and other similar products by connecting to disparate data sources - across VHA and VBA - and applying business logic to recommend rating decisions to decision-makers. In addition to saving Veteran's months waiting for claims decisions, the product has saved VA money by skipping unnecessary medical exams and reducing the amount of manual time an employee needs to spend working each claim. Two key outcomes: Veterans will get disability compensation claims in days rather than months. And they will no longer need to get an additional medical exam to generate medical information already present in VHA systems. VBA's claim backlog will shrink, and VBA will require fewer FTEs to process each disability compensation claim.

Appeals - \$22.6 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (S\$ in thousands)	2022/2023		2023		2024		2022-2023 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Appeals Processing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22,628	\$ 22,628
Appeals Modernization - Board of Veterans' Appeals (BVA)	\$ -	\$ 2,282	\$ -	\$ 2,326	\$ -	\$ -	\$ (2,326)
Appeals	\$ -	\$ 2,282	\$ -	\$ 2,326	\$ -	\$ 22,628	\$ 20,302

Appeals Processing PACT Act funding will positively impact the ability for VA to improve operational effectiveness. The AMA capabilities will provide the ability to track appeal cases through improved technology and increase efficiency in the appeals system to comply with the legal mandates of AMA. These capabilities will also improve appeals processing efficiency, including the ability to effectively move cases or tasks to the necessary places at the Board. This will ensure the efficient adjudication of appeals and enhancement of reporting capabilities.

VBA Finance – \$17.5 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (S\$ in thousands)	2022/2023		2023		2024		2022-2023 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Benefits Payment Modernization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 17,508	\$ 17,508
Enterprise Management of Payments, Workload, and Reporting (eMPWR-VA)	\$ -	\$ 2,281	\$ -	\$ 1,163	\$ -	\$ -	\$ (1,163)
VBA Finance	\$ -	\$ 2,281	\$ -	\$ 1,163	\$ -	\$ 17,508	\$ 16,345

PACT Act funding will be used to enhance work processes, like workflow and caseflow management, to allow Veterans to work more efficiently. It will also fund enhancement and IV&V for claim payment work tools. Additionally, focus on system performance to support an expected spike and higher volume of claims, awards, and Benefits payments.

Education Veterans Readiness and Employment – \$11.5 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2022-2023 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Digital GI Bill	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,922	\$ 8,922
Veteran Readiness and Employment (VR&E)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,566	\$ 2,566
Education Veterans Readiness and Employment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,488	\$ 11,488

Digital GI Bill. PACT Act funding will be used to set up a Test Environment for DGIB and eMPWR-VA integration testing, Improve Education Claim Processing Automation, and Migrate Education Legacy Systems data to Managed Service Platform. Funding will enhance eligibility verification, and communication from VA in a timely manner and will support increase in claim processing.

Veteran Readiness and Employment (VR&E). PACT Act funding will be used for building enhanced case management tools into a secure cloud-based system to better serve and track Veterans as they receive all their Chapter 31 benefits. Building a new Dashboard to display a new case type will improve business processes and metrics for leadership decisions as well as reporting capabilities. If not funded, the Readiness and Employment System (RES) system will be delayed and error-prone, since manual entry will result in data integrity issues, user errors and ultimately provide poor service to Veterans.

Loan Guaranty - \$7.2 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2022-2023 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Housing Grants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,161	\$ 7,161
Loan Guaranty - Special Adapted Housing / Special Housing Adaptation (SAH/SHA)	\$ -	\$ -	\$ -	\$ 14,000	\$ -	\$ -	\$ (14,000)
Loan Guaranty	\$ -	\$ -	\$ -	\$ 14,000	\$ -	\$ 7,161	\$ (6,839)

Housing Grants/Special Adapted Housing/Special Housing Adaptation (SAH/SHA). There is an anticipated increase in grant cases stemming from PACT Act, the current outdated legacy SAH application will need to be refactored to meet the targeted reduction of overall grant processing timeline from the manual process of 300 days to an automated process of 120 days. The newly transformed application will be developed into a single system with workflow capabilities, automated integrations with VBA enterprise applications, and customer relationship management capabilities.

Special Adapted Housing / Special Housing Adaptation (SAH/SHA) will be transforming a legacy application, within a platform that can integrate SAH/SHA workflow processes with Veteran facing parties. This fully modernized system is in accordance with the President and OIT's 5-Year Modernization Plan by delivering effective claims processing, tracking, and automating grant delivery to eligible Veterans, and more effectively meet its mission by becoming more Veteran-

centric. This modernized application will use technology to proactively identify potentially qualified Veterans, streamline PACT Act eligible Veterans, and employ a workflow that supports the SAH Agents, Regional Loan Center (RLC) staff and other stakeholders that execute the process, and automate previously outdated manual processes and fall into alignment with Public Law 117-168, Title VII -RESOURCING, SEC701: ‘Authority to use appropriations to enhance claims processing capacity and automation’. Furthermore, the new SAH/SHA application will allow for the management of cases regardless of location and enable SAH/SHA to confirm eligibility within partner systems such as VBA, VBMS, VR&E and VHA. Finally, the future SAH/SHA application will also allow for communication with other Veteran facing systems that are necessary to provide a comprehensive view of the entire SAH/SHA program and modernize the approach in which OIT serves the Veteran.

Memorials Portfolio

Memorial Support - \$2.3 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Field Programs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,326	\$ 2,326
Memorial Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,326	\$ 2,326

PACT Act funding will enable resources dedicated to supporting the general increase in demand of NCA benefit delivery services. These efforts are required to support the PACT Act and allow the automation of eligibility determination and additional automation of planned self-service capabilities for pre-need as well as time of need benefit delivery to offset the anticipated increase in utilization of these benefits.

Corporate Portfolio

Product Engineering and Development Support - \$1.9 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Product Engineering Operational Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,859	\$ 1,859
Product Engineering and Development Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,859	\$ 1,859

PACT Act funding will provide enhanced core services support and help desk services. Funding ensures the management of the anticipated increase in the volume of data collected from impacted VA Contact Centers as well as increases the rate that new PACT Act relevant data sources are

onboarded. Funding will enhance and improve the authoritative data source for Veteran Contact Information so that outreach for PACT Act can occur throughout the VA. Vet-Home and additional integration services for environmental exposure APIs are driven by PACT Act requirements. It will also ensure access to enhanced functionality to meet PACT Act-driven Health Care and Benefits needs for an increased eligible Veteran Population for new and existing Salesforce solutions. Funding will accelerate planned new health API functionality to expand the number of conditions enabled for claims automation, accelerate modernization/migration of eBenefits/ EVSS APIs in support of VA.gov and the Flagship Mobile application, and provide modern, high-quality APIs and infrastructure enabling data exchange with BGS, Caseflow, Centralized Mail Portal and VBMS. If not funded, Product Engineering would be unable to deliver the necessary enhancements and new functionality to existing systems to meet PACT Act-driven Health Care and Benefits needs for an increased eligible Veteran Population. There would be a greater burden on VA Contact Centers. Data exchanges and integration points between key VA systems wouldn't occur. The PACT Act request focuses on supporting the enhancement of applications to address the expansion of benefits to existing Veterans and to accept a larger veteran population. Enhancement Services and Licenses to meet the PACT ACT requirements are considered outcomes and prior efforts to maintain the systems.

Data Analytics Infrastructure – \$0.5 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024
	Year 2 of 3 year Availability		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	
Data Science Architecture	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 500	\$ 500
Data Analytics Infrastructure	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 500	\$ 500

Data Science Architecture. PACT Act funding will be used to build, sustain, and improve a contemporary structure to support and align with OIT broader Analytical Infrastructure. This funding will also support CRR in alignment with PACT Act priorities and ecosystem as well as addressing analytical implications of the Evidence Phase Policy Making Act.

1. Specific activities that these data analysts will perform include:
 - Support modernization efforts and improve use of Veteran data through the development of business metrics to support PACT Act (OIT) implementation; optimize technology, dashboarding, reporting and modeling in support of PACT Act Data Modeling and Forecasting (particularly tied to metrics and models); highlight and clarify connections between CRR, OIT responsibilities with respect to data, standards, reporting, metrics, dashboarding, and analytic methods
 - Provide ongoing tracking and monitoring of performance of technology, analytic models; troubleshoots and implements enhancements to systems/models as needed
 - Partner with data stewards, leaders, project managers, system owners and other stakeholders in OIT, VHA, and VBA to help synchronize and optimize a range of data and analytics-related activities (spanning integration, standards, governance and related areas)

- Collaborate with data stewards, architects and other key stakeholders to ensure that information (metrics, data) used in support of OIT PACT Act implementation follow relevant data standards
2. Improve operational integrity and Improved use of Veteran data

Implementation Support - \$0.4 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024
	Year 2 of 3 year Availability		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	
Implementation Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 383	\$ 383
Implementation Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 383	\$ 383

The funding will be used to support administrative functions for PACT Act Coordination and Implementation. This funding will be specific to the coordination activities in support of PACT Act. Coordination will occur with the service lines with PACT Act requirements as well as the related IT Support.

1. The project manager for the OIT overall contribution to PACT Act, which will support data platforms, enable claims modernization, and ensure that operations continue seamlessly as PACT Act is deployed.
2. Alignment with 3-5:
 - Effective Claims Processing and Tracking: Modernization efforts include the re-architecture effort required to create a framework within VBMS to ingest rating recommendations produced by VBA directly within VBMS to permit rating VSRs an easy and convenient means to review and approve exposure claims based on presumptive conditions
 - Improve Operational Integrity: Modernization funding will improve core benefits systems infrastructure and performance through re-architecture and cloud migration efforts enabling increased system resiliency and use of automation in claims workflow routing and fast-tracked processing
 - Improved Use of Veteran Data: Initial funding request to modernization and integrate veteran data registries to enable proactive identification of specific Veteran populations and corresponding military service locations

ITIN Portfolio

Infrastructure Operations (IO) Software Maintenance - \$57.2 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Enterprise Software Licensing	\$ -	\$ 7,743	\$ -	\$ 34,054	\$ -	\$ 57,165	\$ 23,111
Infrastructure Operations (IO) Software Maintenance	\$ -	\$ 7,743	\$ -	\$ 34,054	\$ -	\$ 57,165	\$ 23,111

PACT Act funding will support Imperva software licensing and maintenance at five Information Technology Centers (ITCs). The maintenance consists of software upgrades and updates which include major releases, point releases, service releases and security releases such as Software and hardware maintenance to support an integrated monitoring system within VA built upon Gigamon devices. Gigamon is part of the IO core data center cybersecurity infrastructure standard commonly known as Security Threat Module (STM) cybersecurity data center standard and part of the Enterprise Cybersecurity infrastructure Protections providing enterprise controls for all integrated automated cybersecurity protection measures. Also, funding supports enhancing the existing Single Sign on Internal (SSOi) & Single Sign On External (SSOe) infrastructure to provide high availability multi region resiliency in VAEC Azure. Funding will support migration of SSOi supported applications to modernized platform as a service offering to reduce technical debt, cost and improve reliability. It can also expand VDIF-EP infrastructure growth to support 50+ application integrations. Additionally, acquire Enterprise Public Key Infrastructure (PKI) Certificates to allow for continuation of certificate-based authentication to all VA employees. The capability associated with these investments is the ability to address expected growth from increased delivery of benefits. Currently, ITAM is responsible for various tangible duties and these functions will be impacted if not funded which will cause a major delay in functional tasks.

Network Services - \$50.6 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Network Engineering	\$ -	\$ 5,780	\$ -	\$ 23,456	\$ -	\$ 45,000	\$ 21,544
Enterprise IT Support Contracts - Network Services	\$ -	\$ -	\$ -	\$ 3,513	\$ -	\$ 5,600	\$ 2,087
Network Services	\$ -	\$ 5,780	\$ -	\$ 26,969	\$ -	\$ 50,600	\$ 23,631

Network Engineering. PACT Act funding will support external sharing and enhanced/easier work collaboration internally and externally to VA. Also, it will add automated response capabilities for known issue spaces. Completing this will support external sharing and enhanced/easier work collaboration internally and externally to VA. Additionally, funding allows for more staffing opportunities and faster adoption. These new staff will support the development and integration efforts to ensure contracting, authorization to operate, and daily support are carried out toward the mission. This will create a security liability where not all apps will be available in the M365 space.

Enterprise IT Support Contracts - Network Services. PACT Act funding will expand the ongoing OneDrive migration and push to completion at a faster rate. It will also support development and deployment of PowerApps, VA OneDrive Platform; ITSM system integration and management to include intake, customer relationship management, project management/SCRUM, organization change management, and acquisitions and contracts management (project integration, quality management, communications management, risk management, procurement management). Funding will support external sharing and enhanced/easier work collaboration internally and externally to VA. Support the development and integration efforts to ensure contracting, authorization to operate, and daily support are carried out toward the mission. It provides the ability to automate workflows and connect to various cloud and on-premises datasets; quickly create, connect, and share business applications; adding capacity to existing systems hosted in VA’s gateways. These systems host critical identity infrastructure for M365 authentication/logon and management systems for enterprise email. This will support additional load if VA experiences a hiring surge. ITSM expects the volume of ITSM/ServiceNow tickets to increase (incidents and service requests) to support the IT needs of additional VA employees, who are hired to support the increase of veteran's care associated with the PACT Act. With the increase in volume for the VA's ITSM system, ServiceNow, GMP (ITSM) expects modifications to the networking supporting ServiceNow and the need to work with Network Engineering on matters related to capacity and performance.

End User Software - \$41.6 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Microsoft Enterprise License Agreement (ELA) - Office 365	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 41,551	\$ 41,551
End User Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 41,551	\$ 41,551

The Microsoft Enterprise Agreement (EA) provides the continuation of Microsoft licensing, software assurance, and services for a broad range of Microsoft products for various offices, projects, and initiatives throughout VA. The EA allows VA to continue to use and upgrade Microsoft products to maximize VA's investment in Microsoft products (server and desktop) deployed within the VA infrastructure. EUS/ITAM: The capability associated with providing PACT Act funding for these investments is the ability to address expected growth from increased delivery of benefits. Without funding, the VA will lose the ability to operate systems and desktop applications that require any Microsoft applications, including the operating systems themselves. The PACT Act request focuses on supporting the enhancement of applications to address the expansion of benefits to existing Veterans and to accept a larger veteran population.

Foundation Platforms – \$39.9 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (Ss in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
ITIN Salesforce Application Programming Interface (API) Development, Support, and Licensing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18,894	\$ 18,894
ITIN Digital Transformation Center (DTC) Application Programming Interface (API) Development and Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,900	\$ 10,900
ITIN VA Enterprise Cloud Solutions (VAEC) Application/Application Programming Interface (API) Hosting	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,500	\$ 6,500
ITIN Mulesoft Application/API Development and Support & ITIN MuleSoft License Distribution	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,600	\$ 3,600
Digital Transformation Center (DTC)	\$ -	\$ -	\$ -	\$ 16,955	\$ -	\$ -	\$ -
Foundation Platforms	\$ -	\$ -	\$ -	\$ 16,955	\$ -	\$ 39,894	\$ 39,894

ITIN Salesforce Application Programming Interface (API) Development, Support, and Licensing. PACT Act funding will support the Maintenance of these Salesforce licenses to ensure continued access to enhanced functionality for Health Care and Benefits needs for an increased eligible Veteran Population for new and existing Salesforce solutions including: CARMA (supports Caregivers of Veterans injured in the line of duty), Quality Management System (QMS) (modernizes VBA claims quality reviews), Workload and Time Reporting System (WATRS) (VBA’s claims performance and quality review process), Academic Detailing (manages campaigns to educate clinicians/facilities), Clinical Trials Management System (CTMS) (streamlines management of clinical trials), eForce Application for C&L (used by Education Regional Processing Offices), ORD Research Volunteer Registry (manages clinical research volunteer efforts), VA Loan Electronic Reporting Interface Redesign (VALERI-R) (manages VA-Guaranteed loans), White House VA Hotline (expands user base to address exposure issues), and Work Study Management System (WSMS) (enables issuance of accurate payments to beneficiaries). The PACT Act request focuses on supporting the enhancement of applications to address the expansion of benefits to existing Veterans and to accept a larger veteran population.

ITIN Digital Transformation Center (DTC) Application Programming Interface (API) Development and Support. PACT Act funding will address PACT Act-driven increases in demand while continuing to provide services such as enhancements, development, core services support and help desk services for PACT Act impacted Salesforce modules.

ITIN VA Enterprise Cloud Solutions (VAEC) Application/Application Programming Interface (API) Hosting. PACT Act funding will support the VAEC which delivers secure and seamless cloud functionality to support the entire VA enterprise. ECSO enables the leveraging of cloud solutions by internal and external customers and ultimately Veterans by providing standardization and common services. Funding will support the efficient migration to new development in and utilization of cloud technology by project teams/business sponsors and their customers. Funding will also support foundational Cloud Environments which will enable projects to rapidly deliver modern IT capabilities that are needed due to increased Veterans eligible.

ITIN Mulesoft Application/API Development and Support & ITIN MuleSoft License Distribution. PACT Act funding will enable the renewal of MuleSoft Cores to maintain new APIs established to support new requirements. Maintaining these MuleSoft Cores will ensure continued

access to PACT Act-driven APIs (for Veteran data related to environmental exposure). MuleSoft Cores is necessary for access to the PACT Act-driven APIs (for Veteran data related to environmental exposure). If not funded, this could result in increased user traffic due to the need for VA call center staffing increases. Veterans will not experience the associated benefits of leveraging advancing technology enhancements that would improve responsiveness, consistency, and security.

Activations - \$37.0 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Activations	\$ -	\$ -	\$ -		\$ -	\$ 37,000	\$ 37,000
Activations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 37,000	\$ 37,000

PACT Act funding for activations will support the purchase, issuance, and installation of IT equipment for new employee hiring growth across all Administrations, all physical VA facility expansion/modification (ex: major, minor, non-reoccurring maintenance, local “halls and walls” projects and leasing activities), and IT expenses occurring from changes to business practices or patterns of business activity. Activation funding will be used for costs associated with new space, new program expansion, space reductions, or space reconfigurations.

Solution Delivery (SD) Hardware Maintenance - \$27.3 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Enterprise Hardware Licensing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27,299	\$ 27,299
Solution Delivery (SD) Hardware Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27,299	\$ 27,299

Hardware Maintenance is considered a “must pay” requirement to support extended warranties and equipment support for critical operational hardware components. It is essential to support customer service level agreements (SLAs) for network, server, storage, tapes/drives, legacy phone systems-private branch exchange (PBX) systems, PIV printers, PIV scanners, paging systems, IT management tools, and video conferencing (VTC) equipment.

The majority of the costs are:

- Avaya-Nortel National Consolidated Private Branch Exchange (PBX)
- Community Care Service (CCS) NEC National Consolidated Private Branch Exchange (PBX)
- Atos-Unify-Siemens National Consolidated Private Branch Exchange (PBX)

- Tadiran Private Branch Exchange (PBX) Maintenance

Infrastructure Operations (IO) Hardware Maintenance - \$24.2 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Infrastructure Operations (IO) Hardware Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24,220	\$ 24,220
Enterprise Hardware Maintenance	\$ -	\$ -	\$ -	\$ 35,847	\$ -	\$ -	\$ (35,847)
Infrastructure Operations (IO) Hardware Maintenance	\$ -	\$ -	\$ -	\$ 35,847	\$ -	\$ 24,220	\$ (11,627)

PACT Act funding will support Fore scout appliance maintenance which provides identification of individual device suspicious activity to correlate with IO’s SIEM; preemptive vulnerability scanning and virtual remediation of individual devices. It also: (1) tracks operating and system changes; device type; configuration and user location; (2) provides user role and activities; security state of devices and informs whether a device is managed or not to understand their security status and be able to take IT Security Threat action; (3) expands reliable Active Directory domain controllers and Active Directory Account Management to support the additional 3.5M Veterans projected to seek VA Medical Care; (4) secure storage space to retain archived and new documentation generated from increased volume due to implementation of the PACT Act. The capability associated with funding these investments is the ability to address expected growth from increased delivery of benefits IOS/CRM: expanded support of ITSM to improve Risk and Impact Mgmt. of Change and Incidents to the environment. Currently, ITAM is responsible for various tangible duties and these functions will be impacted if not funded, which will cause a major delay in functional tasks. If not funded, OIT will be hindered in the support of Change Control, Release mgmt. and Service Configuration Management, resulting in increased risk of deployed Changes/Releases and lacking an understanding of the impact of changes/releases.

Decision Intelligence - \$19.6 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Digital Veterans Platform (DVP)	\$ -	\$ 1,369	\$ -	\$ 3,739	\$ -	\$ 10,686	\$ 6,947
Robotics Process Automation (RPA Platform)	\$ -	\$ -	\$ -	\$ 7,238	\$ -	\$ 8,960	\$ 7,710
Decision Intelligence	\$ -	\$ 1,369	\$ -	\$ 10,977	\$ -	\$ 19,646	\$ 14,657

Digital Veterans Platform (DVP). PACT Act funding will support maintaining API and SaaS licenses to ensure continued access to enhanced platforms to meet the increased usage of

applications using APIs and infrastructure providing benefits and appeals functionality. The PACT Act request focuses on enhancing related APIs and platforms to accept a larger veteran population, including existing veterans and all VA administrations. This enables effective data exchanges and service connectivity from several underlying systems to be consumed by applications, including external SaaS, VA applications, and other web and mobile 3rd-party applications.

PACT Act funding will allow the following:

1. Acceleration of planned new health API functionality to expand the number of conditions enabled for claims automation. This results in a reduction of weeks from each claim enabled with automation and reduces VA staff required to adjudicate claims.
2. New health API functionality to further expand claims automation.
3. Acceleration of modernization and migration of eBenefits/EVSS APIs in support of va.gov and the flagship mobile application, allowing EVSS to be retired earlier.
4. Increase Dev/Ops support for troubleshooting issues expected with growth in users and applications that are consuming API functionality to continue 99.9% SLAs resulting in a good application end-user experience and customer satisfaction.
5. Modern, high-quality APIs and infrastructure enabling data exchange with BGS, Caseflow, Centralized Mail Portal and VBMS.

Funding will increase effectiveness with troubleshooting issues expected with the growth in users and applications consuming API functionality, which in turn would positively impact the end-user experience and customer satisfaction.

Robotic Process Automation (RPA) - PACT Act funding will provide RPA with the required UI Path license for development, maintenance, and for day-to-day operational activities. Without these licenses and maintenance, the automations will be shut down and the time savings will be lost. Additional cloud credits are required due to PACT Act required additional modernizations and upgrades which are forecasted to increase annual cloud burn. Additional highly skilled technical experts will be required to perform PACT Act driven upgrades for compliance with newly established law. This PACT Act specific support ensures that RPA processes are scalable to the enterprise level upgrades and modernizations that are now required per law and will be coordinated with the VA RPA COE and VA RPA Platform to bring platform and automations fully in line with PACT Act mandates. This funding can help reduce the time needed to enter information into claims system, gather data for the claim, and provide a shorter overall process for the Veteran to access the benefits of the PACT Act. Automations can be developed to assist the call center and the appeals staff with data transfer and gathering to shorten the time needed to adjudicate claims that are now allowed as part of the enhancement and modernization needed to comply with the PACT Act requirements.

Application Delivery Infrastructure – \$17.3 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Palantir Federal Cloud Services (Palantir)	\$ -	\$ -	\$ -	\$ 9,600	\$ -	\$ 7,540	\$ (2,060)
Health Data Repository (HD II)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,793	\$ 6,793
Platform Services Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200	\$ 1,200
Data Access Services (DAS)	\$ -	\$ 688	\$ -	\$ 4,250	\$ -	\$ 918	\$ (3,332)
GitHub Business Cloud (GHBC)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 802	\$ 802
Enterprise IT Support Contracts - Product Engineering	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 38	\$ 38
Application Delivery Infrastructure	\$ -	\$ 688	\$ -	\$ 13,850	\$ -	\$ 17,291	\$ 3,441

Palantir Federal Cloud Service (Palantir)/(Name change: Data Interoperability) - PACT Act funding will drive the new requirement for highly specialized technical support which is critical to the management of Data interoperability. The PACT Act request will ensure the onboarding of new users quickly for PACT Act elaboration, effective planning of new connections, quickly change the data architecture for the PACT Act needs, ingestion of data sets for facility decisions, data testing support. Funding will improve data reporting and data management, operational integrity, the use of VA data and empower users to make data-driven operational decisions to ensure the PACT Act data ingested meets quality standards.

Health Data Repository (HDR II) - PACT Act funding will allow the HDR platform to meet the mandates and new requirements by adding additional clinical health data that will enhance capabilities of call center staff in addressing Veterans concerns and questions. One large Development Scrum team is required to meet new requirements and will add new business logic to support the HDR customers' PACT Act requirements (VA Profile, CRM, etc.) and platform capability for the HDR to support the PACT Act anticipated increase in Veteran data including: addition of data fields of Veterans Data to CRM, Lighthouse, and other interfacing systems. Resources will provide analysis, development, partner interface integration and associated support, regression testing, quality assurance testing, and deployment of these enhancements and platform upgrades to efficiently support the PACT Act. This effort is inclusive of the labor, operations and maintenance and hosting of the Health Data Repository (HDR) system in support of the PACT Act to ensure that services are continuously available. The funding will cover cloud hosting support consisting of credits, developers and configuration manager, technical management support, testers, system administrators and database administrators for vital sustainment support.

Platform Services Support. With the increase in volume and requirements for the VA's ITSM system, ServiceNow, PACT Act funding will support new projects (Project Management); increased intake by approximately 10% (Customer Relationship Management); and approximately 10% increase in the dissemination of additional bulletins and provision of ServiceNow training (Organizational Change Management).

GitHub Business Cloud (GHBC). PACT Act funding provides GitHub and GitHub Advanced Security (GHAS) subscriptions and associated operations & maintenance support for PACT Act related IT development efforts across the VA. GitHub is a Git repository hosting service used by developers and PMs that provides a Web-based graphical interface, access control and several collaboration features such as wikis and basic task management tools for every project. It is used by product and project managers for better team communication, managing issues and sharing

content. GitHub is a SaaS hosted in its own cloud as well as in the VAEC. GitHub and GitHub Advanced Security (GHAS) subscription quantities and associated operations provide maintenance support for PACT Act related IT development efforts across the VA. With this funding, OIT will be able to increase the number of VA users necessary to meet PACT Act needs, thereby enhancing collaborative coding for software development teams storing code fragments and managing version control. VA would not be at risk of exposure to software bugs and security vulnerabilities in applications that are promoted to the production environment. This funding will provide license quantities needed to provide the ability for collaborative coding for software development teams working on PACT Act initiatives enabling storing code fragments and managing version control. Additionally, the VA will have the ability to identify and address bugs and vulnerabilities in PACT Act systems code before applications make it into production.

Enterprise IT Support Contracts - Product Engineering. PACT Act funding will support the expected volume of ITSM/ServiceNow tickets (incidents and service requests). With the increase in volume and requirements for the VA's ITSM system, ServiceNow, GMP (ITSM) expects modifications to be needed related to the current ServiceNow contracts (ITSM Support Contract AFS and ServiceNow License ELS). The modifications are expected to support increased resources to be added to the VA's ServiceNow instances related to capacity and performance.

IT Service Management - \$15.8 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
IT Service Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,990	\$ 8,990
Enterprise Command Center	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,855	\$ 6,855
IT Service Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 15,845	\$ 15,845

IT Service Management. PACT Act funding will support identification of individual device suspicious activity to correlate with IO's SIEM; preemptive vulnerability scanning and virtual remediation of individual devices. It also tracks operating and system changes; device type; configuration and user location, ensure user role and activities; security state of devices; and whether a device is managed or not to understand their security status and be able to take IT Security Threat action.

- Expand reliable Active Directory domain controllers and Active Directory Account Management to support the additional 3.5M Veterans projected to seek VA Medical Care
- Secure storage space to retain archived and new documentation generated from increased volume due to implementation of the PACT Act
- ITAM to expand services to support expected increases
- ITAM HAM, ITAM SAM and ITAM Contract Management to support the integration of existing and new Application and Technical services into the CMDB

Funding will also automate IT Service Management products and processes and services through SaaS to comply with Cloud First Initiatives. In addition, it consolidates disparate legacy tools into a single cloud-based platform and enhances leadership decision making through consolidation of data in a single tool.

Enterprise Command Center. PACT Act funding will increase application performance monitoring for applications determined essential or in support of processing PACT Act claims. This will allow for faster detection and restoration of issues within the applications and supporting infrastructure and minimize downtime associated with application issues. Increases in IT Service Management workload volumes are expected with the advent of the PACT Act. This will create the need for proportionately increased resources to provide optimal support. An estimated 10-20% increase in work volumes will be expected during the initial stages as OIT ensures that end-to-end work activities are performed and completed successfully. Funding will assist OIT with the capability to rapidly detect and repair issues, thus increasing the amount of downtime experience. With the increased claims due to the PACT Act, the claims backlog would increase and negatively affect fulfillment of claims in a timely manner. IOS/ESMP: The priorities aligned with the PACT Act mission objectives will fall short and thus impact the delivery of services and support aligned with the PACT ACT initiatives. The PACT Act funding request focuses on supporting the enhancement and/or implementation of application performance monitoring to address the expansion of benefits to existing Veterans and to accept a larger veteran population.

Service Desk - \$7.0 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024
	Year 2 of 3 year Availability		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	
Enterprise Service Desk (ESD) Managed Services	\$ -	\$ 6,313	\$ -	\$ -	\$ -	\$ 6,969	\$ 6,969
Service Desk	\$ -	\$ 6,313	\$ -	\$ -	\$ -	\$ 6,969	\$ 6,969

PACT Act funding will support Best-Practice guidance, governance, training contents and delivery support for Incident Management, Major Incident Management, Knowledge Management and Service Request Management. It will prevent a cost overrun on the ESD contract due to the increase of contact volume of new users above the annual projection at the time of award. If not funded, the priorities aligned with the PACT Act mission objectives will fall short and thus impact the delivery of services and support aligned with the PACT Act initiatives.

Cyber Security Operations - \$5.9 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024
	Year 2 of 3 year Availability		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	
Information Security Operations (ISO) - Cyber Security Operations Center	\$ -	\$ -	\$ -	\$ 3,262	\$ -	\$ 5,888	\$ 2,626
Information Security Operations (ISO) - Information Security Risk Management	\$ -	\$ 2,893	\$ -	\$ -	\$ -	\$ -	\$ -
Cyber Security Operations	\$ -	\$ 2,893	\$ -	\$ 3,262	\$ -	\$ 5,888	\$ 2,626

PACT Act funding will address Cybersecurity Risk Management Reviews and the processing of any required major system changes that will drive updates to Authority to Operate/Authority to Connect (ATO/ATC's) for the above systems. Account for data migrations, changes to current applications, and potential new applications need to meet the PACT plan. Increase in consulting time for new and existing system stakeholders with regards to Risk Management Framework (RMF) processing. It will also support existing systems with authorizations that require changes/enhancements triggered by PACT Act. If not funded, it will not be able to accommodate the projected PACT Act increased network requirements and growth.

Solution Delivery (SD) Software Maintenance - \$5.7 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024
	Year 2 of 3 year		Enacted		Request		Increase/ Decrease
	DEV	OM	DEV	OM	DEV	OM	
Enterprise Software Licensing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,717	\$ 5,717
olution Delivery (SD) Software Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,717	\$ 5,717

Software Maintenance is considered a “must pay” requirement to support hundreds of applications in use within the VA. The budget request represents the estimated charges for Enterprise License Agreements (ELA) negotiated by OSS and hundreds of other software licenses in use across the VA needed to operate systems. Costs are driven by the number of users and number of new applications and systems supporting these users.

The majority of the costs are:

- Oracle ELA
- VMWare ELA
- Red Hat SW Maintenance
- Citrix SW Maintenance
- Attachmate (Reflection) SW maintenance

Awareness, Governance, Risk, Compliance - \$3.6 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (Ss in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Information Security Policy and Strategy (ISPS) - Enterprise CyberSecurity Plan	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,631	\$ 3,631
Awareness, Governance, Risk, Compliance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,631	\$ 3,631

PACT Act funding will support the achievement of scalability criteria to enable operational capacity and throughput of new and modified PACT Act systems and applications for Authority to Operate and Authority to Connect, as well as the enhanced monitoring capacity for those systems at the CSOC. This funding will ensure (1) Change Control to tighten the integration of Security to the review process of Changes, address Cybersecurity Risk Management Reviews and the processing of any required major system changes that will drive updates to ATO/ATCs for the above systems; (2) support existing systems with authorizations that require changes/enhancements triggered by the PACT Act. Additionally, funding will improve understanding of Impact and Risk to the VA of Changes, Release, and Incidents and support the management of any corrective actions that will be implemented to overcome weaknesses that arise from PACT Act implementation.

Information Security Policy and Strategy (ISPS) - Enterprise Cybersecurity Plan. PACT Act funding will support enhanced and increased capacity on key cybersecurity capabilities: Splunk, BigFix, NESSUS, Red Seal, Continuous Diagnostics and FISMA reporting, Enterprise Mission Assurance Support Service, and FISMA Containerization to Asset Boundary, as well as achieve scalability criteria to enable operational capacity and throughput of new and modified PACT Act systems and applications for ATO and ATC. ITAM Management, Operation, Governance and Development Functions are required to tighten the integration of Security to the review process while working with CMDB and build the relationships between application and Technical Services to increase the understanding of risk and impact of the environment through Change, release or by way of incidents.

End User Operations - \$3.3 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (Ss in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
End User Operations (EUO) Facility Allowance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,963	\$ 1,963
EUO Software License Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000
End User Operations (EUO) Hardware Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 329	\$ 329
End User Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,292	\$ 3,292

End User Operations (EUO) Facility Allowance. The PACT Act request supports the enhancement of applications to address the expansion of benefits to existing Veterans and to accept

a larger veteran population. It also allows for unforeseen requirements for VA End users associated with increased workload from PACT Act. The capability associated with these investments is the ability to address expected growth from increased delivery of benefits. If not funded, then any unforeseen end user needs will not be met. Currently, ITAM is responsible for various tangible duties and these functions will be impacted if not funded which will cause major delays in functional tasks getting in a timely manner.

EUO Software License Maintenance. PACT Act funding will support the recurring payments for existing software and existing numbers of licenses in support of the Enterprise, VA Administrations and Staff Offices. Software License Maintenance is considered a “must pay” requirement to support customer service level agreements. Enterprise License Agreements that are in place will need to be expanded due to new PACT Act requirements. If not funded, then software updates that are needed due to PACT Act requirements will not be met.

End User Operations (EUO) Hardware Maintenance. The PACT Act request focuses on supporting the enhancement of applications to address the expansion of benefits to existing Veterans and to accept a larger veteran population. The PACT Act funding will provide recurring payments for extended warranty and support for critical operational hardware components in support of the Enterprise, VA Administrations and Staff Offices. Hardware Maintenance provides for emergent requirements to replace broken equipment to facilitate the timely restoration of IT operational systems. If not funded, then hardware maintenance that is needed due to PACT Act requirements will not be met.

Infrastructure Operations Support - \$1.1 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Enterprise IT Support Contracts - Infrastructure Operations	\$ -	\$ -	\$ -	\$ 5,500	\$ -	\$ 1,091	\$ (4,409)
Infrastructure Operations Support	\$ -	\$ -	\$ -	\$ 5,500	\$ -	\$ 1,091	\$ (4,409)

PACT Act funding will support the automation of account provisioning, reducing the time to onboard staff and contractors and has been fully integrated into the VA enterprise Active Directory and Information Central Analytics and Metrics (ICAM). The capability associated with these investments is the ability to address expected growth from increased delivery of benefits. GMP (ITSM) also anticipates additional tracking/requirements to be requested for ITSM items related to support the PACT Act. If not funded, the priorities aligned with the PACT Act mission objectives will fall short and thus impact the delivery of services and support aligned with the PACT Act initiatives.

PACT Act funding will also be used to support the transition from Microsoft Identity Manager (MIM). MIM is End of Life and End of Support in 2026, and Microsoft has not announced any

replacement. The product is old and code-based with long lead times to make changes in access/account management. This means that any changes must be coded with the MIM framework. OIT has conducted market research in getting a modern application that can be hosted in Azure (Cloud) and that is configuration based that would allow event (close to real time) based synchronization to occur as well as backend synchronization between Active Directory and the connectors to IAM’s identity store. This replacement of MIM does not duplicate any effort by IAM current architecture, it would enhance the access/account management processes through its entire lifecycle with regards to Active Directory and M365 services. The replacement of MIM needs to occur before Microsoft ends support to allow the VA to implement and support the additional onboarding and offboarding that will be ongoing resulting from the PACT ACT.

Operations Triage Group - \$1.0 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Operations Triage Group (OTG)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,032	\$ 1,032
Operations Triage Group	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,032	\$ 1,032

OTG provides technical improvement and system performance recommendations and facilitates executive communications for all major system issues. Through DevOps and System Reliability Engineering (SRE) practices, the team partners with EPMD, ECO and others in VA OIT. PACT Act funding provides improved system monitoring/alerting and degradation recovery to eliminate/minimize system downtime, thus impacting PACT Act benefits processing. With the increased level of monitoring for all systems, additional problem tasks will be identified, and outcomes verified. This will lead to improved monitoring which leads to earlier outage and performance degradation detection and reducing overall downtime to end users. If not funded, avoidable system failures will not be avoided, root-causes for system failures will continue to occur, and Time to Repair failed systems will increase. This will cause lower productivity and delay VAs' ability to award benefits to Veterans under the PACT Act.

Veteran Experience Portfolio

Digital Experience – \$134.0 million (Development - \$5.3 million, Operations and Maintenance - \$128.7 million)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Mobile Applications and Platforms	\$ -	\$ -	\$ -	\$ -	\$ 5,319	\$ 20,103	\$ 25,422
VA.GOV	\$ -	\$ 7,400	\$ -	\$ 23,008	\$ -	\$ 97,896	\$ 74,888
Digital Self-Service Tools	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,405	\$ 5,405
Notifications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,319	\$ 5,319
OMNICHANNEL	\$ -	\$ -	\$ -	\$ 15,000	\$ -	\$ -	\$ (15,000)
Digital Experience	\$ -	\$ 7,400	\$ -	\$ 38,008	\$ 5,319	\$ 128,723	\$ 96,034

Mobile Applications and Platforms. PACT Act funding will allow Veterans and Caregivers greater choice in their options to interact with VA services by creating a mobile-first platform for accomplishing key PACT Act tasks such as applying, tracking, and managing burn pit and toxic exposure related claims. This platform serves the customer service goal by meeting a changing demographic of users in the medium most comfortable to them (mobile app) and by giving the continuous access to the resources of the Veteran Crisis Line, Help and Support, and FAQs information on their preferred device. Launching and cultivating a VA Flagship Mobile App gives Veterans fast and easy access to the most important things they need when interacting with VA. Veterans and caregiver teams can complete quick transactions and interact with services including viewing PACT Act claim status, finding facility locations, checking appointments, adjusting personal profile, and facility remote check-ins. The outcome of combining these features into one app is a simple and satisfying user experience as they interact with VA and complete day-to-day transactions.

Web Application and Platforms. PACT Act funding will support health enrollment, benefit applications, claim status, content, and communication improvements for the following:

- Simplified health enrollment via 1010EZ
- New and supplemental disability claims for eligible conditions
- Digital survivor claims
- Military history/exposure data
- Claim status improvements
- Centralized PACT Act content and FAQ information

Funding will also provide a secure Web presence that allows Veterans and Service Members and their dependents, VSOs, and VA business partners to obtain definitive PACT Act benefit information and interact with VA regarding burn pit and toxic exposure benefit activity through Web self-service functions. It will provide significant services to Veterans and families by providing online tools to simplify the management of the Veterans health care.

Digital Self-Service Tools. PACT Act funding for Digital Self-Service Tools will be used to continue building and maintaining a unified notification engine and platform that enables VA business lines to send effective digital communications to Veterans. Notifications include 2-way messaging via SMS, email, and in-app secure messaging from a common platform used across the enterprise. Veterans can manage their preferences within VA.gov and decide how to receive updates and requests for additional information. Funding will be used to improve communication lines for all businesses that need to communicate with a Veteran regarding burn pit and toxic

exposure interactions (benefits, services, claims, appointments, etc.). COVID-19 forced Veterans and their families to move more of their regular interaction with VA to online and self-service modalities which are expected to be leveraged and continued for PACT Act interactions. These include Telehealth appointments, virtual hearings for appeals, online prescription refills, and more. When made virtual, each of these PACT Act interactions requires two-way messaging between VA and the Veteran for communications such as confirming receipt of a form, sending reminders of an appointment, allowing for updates to a request, and more. This messaging is done in a coordinated manner, whereby: VA business lines have a streamlined mechanism through which they can easily set up notifications; Veterans have a way to manage their preferences about which notifications they choose to receive and where, and VA has an efficient, cost-effective, repeatable solution for honoring those preferences and delivering the proper messages.

Notifications. The Enterprise Notification Platform (ENP) enables internal VA business lines (and systems) to effortlessly integrate with myriad applications and send digital notifications to Veterans and their caregiver teams. VA business lines are currently procuring various third-party solutions to send digital notifications to Veterans and their caregiver teams. Also, the branding, templates, and voice are inconsistent. The notifications platform addresses these issues. The platform has already proven success on efforts including more than 1.5 million digital notifications have been sent, with an open rate of about 70%. Integrations in progress include Form 21-526 EZ, Master Patient Index (MPI), VA Profile, Debt Letters, VBA Compensation & Pension, Payment Confirmation, and VA.gov confirmation emails. Planned future integrations include: COVID-19 Keep Me Informed, Email Updates, Pharmacy Notifications, and Shipment Alerts.

Contact Center Experience - \$75.9 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Member Services - Customer Relationship Management	\$ -	\$ -	\$ -	\$ 5,000	\$ -	\$ 37,030	\$ 32,030
Contact Center Support Systems	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 19,257	\$ 19,257
Customer Relationship Management Unified Desktop Optimization (CRM UDO)	\$ -	\$ 8,082	\$ -	\$ 14,305	\$ -	\$ 9,514	\$ (4,791)
White House VA Hotline (WHHL)	\$ -	\$ 2,879	\$ -	\$ 2,905	\$ -	\$ 7,207	\$ 4,302
Contact Center Knowledge Management Systems	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,429	\$ 1,429
VHA Patient Advocate and Veteran Inquiry Capability	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,429	\$ 1,429
Veterans Experience Integration Solution (VEIS)	\$ -	\$ -	\$ -	\$ 7,000	\$ -	\$ -	\$ (7,000)
Veterans Crisis Line (VCL)	\$ -	\$ -	\$ -	\$ 4,500	\$ -	\$ -	\$ (4,500)
Contact Center Experience	\$ -	\$ 10,961	\$ -	\$ 33,710	\$ -	\$ 75,866	\$ 42,156

VHA Contact Centers. PACT Act funding will support applications that provide the call centers with highly reliable and integrated VA claims and medical information needed to provide excellent customer service. The call center services Veterans and will employ capabilities such as chat, video, email, and text along with capabilities such as Virtual Assistant, Video Conferencing, Co-Browsing and Mobile Applications. VHA Contact Centers will increase call center capacity for expected increased call volume from projected 2x increase in claim submissions for toxic exposure; enhance call center functionality and update process flows to incorporate new toxic exposure business rules and increase efficiency for Intake Center Staff to manage large volumes

of burn pit and toxic exposure related activities and requests. The systems allow for the work origination staff to create work items for tracking the effort needed to resolve PACT Act inquiries and provide a single desktop view of caller information related to Community Care Health Claims, health benefits, billing, credit card payments, pharmaceutical, MyHealthVet & eBenefits inquiries, and homeless Veterans. Callers are providers, Veterans, and beneficiaries.

In addition to enterprise-wide contact center improvements, the VA is standing up a new national call center for information and VA services on military environmental exposures (MEE). Called Veterans Exposure Team-Health Outcomes Military Exposures (VET-HOME), its primary objective is the completion mandated registry exams, which are voluntary, focused medical evaluations provided at no cost to Veterans who may have been exposed to a wide range of chemical, physical, and environmental hazards during their military service. VET-HOME will also support clinicians with questions about MEE. Funding in 2024 is needed to ensure Veterans receive timely processing of their MEE claims through VET-HOME scheduling, telehealth examinations, and consultation.

Contact Center Support Systems. PACT Act funding will integrate API functionality that replicates querying of VA systems for authoritative VA information on toxic exposure claims. Enhancements to VEIS are required to support changes at VHA, VBA and VEO Contact Center applications critical to support PACT Act legislation and maintain the modernization effort.

VBA Contact Centers. PACT Act funding will increase call center capacity for expected increased call volume from projected 2x increase in claim submissions for toxic exposure. It will enhance call center functionality and update process flows to incorporate new toxic exposure business rules. This system will provide value to the Veteran by allowing the timely tracking of contact history and facilitating improved first call resolution of burn pit and toxic exposure benefit inquiries. In addition, it will provide streamlined access to data elements into one unified desktop. This will create an environment that reduces call handle times.

VEO Contact Centers. PACT Act funding will increase call center capacity for expected increased call volume from projected 2x increase in claim submissions for toxic exposure. It will enhance call center functionality and update process flows to incorporate new toxic exposure business rules. Veterans and their family members will be receiving highly reliable and excellent customer service as they get quick and efficient responses to their requests for assistance with VA's PACT Act programs and benefits. This will contribute to their overall experience with the VA and their well-being.

Contact Center Knowledge Management Systems. PACT Act funding will increase tool capacity for expected increased adoption as users seek PACT Act information to address call inquiries, the need for additional licensing support, and associated Operations and Maintenance support. Veterans, Healthcare Providers, Care Givers, etc. need access to uniform, accurate and timely information about VA's burn pit and toxic exposure services, PACT Act claims eligibility and processing, and information affecting them.

VHA Patient Advocate and Veteran Inquiry Capability. PACT Act funding will increase call center capacity for expected increased call volume from projected 2x increase in claim submissions

for toxic exposure. It will enhance call center functionality and update process flows to incorporate new toxic exposure business rules. The funding will provide a routing and tracking mechanism for Veteran feedback on PACT Act services provided in the VA. As a result of this, information service lines in the VA will be able to improve their burn pit and toxic exposure services, providing better customer service to Veterans, family members, and beneficiaries. Without funding, the VA would not have PACT Act data within an authoritative service to record and track Veteran feedback. VA services would not be improved, leading Veterans to believe the VA does not consider their input valuable. There will also be no central place to respond to Congressional or Veteran inquiries as follow-up to comments/complaints.

Customer Data Management Experience \$44.7 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-projects:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Veterans Customer Experience & Data and Analytics	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33,578	\$ 33,578
Military History Data	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,879	\$ 7,879
Data Integration	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,290	\$ 3,290
Customer Experience Data Warehouse (CxDW)	\$ -	\$ 2,250	\$ -	\$ 14,359	\$ -	\$ -	\$ (14,359)
VA/DoD Identity Repository (VADIR)	\$ -	\$ 750	\$ -	\$ 8,164	\$ -	\$ -	\$ (8,164)
Summit Data Platform (SDP)	\$ -	\$ -	\$ -	\$ 7,000	\$ -	\$ -	\$ (7,000)
VA Profile	\$ -	\$ -	\$ -	\$ 6,042	\$ -	\$ -	\$ (6,042)
Identity and Access Management - Enterprise (IAM)	\$ -	\$ 2,792	\$ -	\$ 3,025	\$ -	\$ -	\$ (3,025)
Interagency Longitudinal Exposure Record (ILER)	\$ -	\$ -	\$ -	\$ 750	\$ -	\$ -	\$ (750)
Customer Data Management Experience	\$ -	\$ 5,792	\$ -	\$ 39,340	\$ -	\$ 44,747	\$ 5,407

Veterans Customer Experience and Data and Analytics, which consists of VA Profile and Summit Data Platform (SDP) platforms that both support VA customer common data synchronization and sharing across the VA, regardless of the channel used to update the information and provide a centralized location to house multiple data sources, to efficiently detail and journey the Veteran Experience. VA Profile provides enterprise-wide access and synchronizes over 23 million Veteran records. VA Profile consists of 20 Application Programming Interfaces (APIs) which provides access to authoritative Veteran data including Veteran contact information, communication preferences, medical benefits, rated disability, and discrete administrative data. VA Profile provides secure access to Veteran authoritative data to over 21 consuming applications. As VA Profile integrates with additional systems across the VA, Veterans will enable to provide information like address changes, preferred language, sexual orientation, and pronouns once and VA Profile will make this information available across the enterprise. Customer Experience Data Warehouse (CxDW) is an ecosystem of tools that enables the Veteran Experience Office (VEO) to gain insights into the omnichannel experience of VA's customers, from first contact to last interaction with the VA. These insights support service improvement, customer satisfaction and enable actionable, targeted, rapid outreach to positively impact the lives of Veterans, caregivers, and beneficiaries. Advancements of CxDW will continue to strengthen a single view of the Veterans journey experience by cross-mapping experience data with transactional data leading VA to accurately identify the highest value areas for customer experience improvement. VA Profile and Summit Data Platform (SDP) directly support Executive Order 14058 (Transforming Federal Customer Experience and Service Delivery to Rebuild Trust in Government) and other legislation

and directives such as Hannon Act (Mental Health Care Improvement), Executive Order 13988 (Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation), Executive Order 13985 (Advancing Racial Equity and Support), Compact Act and GI Bill modernization.

In 2024, the major cost drivers of the VA Profile program will include sustaining and continuing to operate the VA's master data management platform, (20+) APIs and the over (40) partner system integrations. Additional drivers include data harmonization, expanding the data available via the platform and improving the quality of the data. The program will make use of continuous analysis, profiling, and inclusion of enterprise data to fill the gaps between VA Profile and key systems to ensure Veteran common data is consistent, accurate, and timely to support VA Lines of Business. The increased data elements made available through VA Profile across the enterprise will continue to improve customer experience as data like address changes, preferred language, sexual orientation, and pronouns is synchronized across VA systems reducing Veterans' need to provide personal information multiple times when working with different VA lines of business. As VA self-service portals increase, customers (Veterans, Beneficiaries) will be empowered to update their information, thus reducing effort and frustration and allowing employees to provide quality CX with the most up-to-date information possible. VA Profiles costs in 2024 are expected to be spread over the following business activities: Sustainment Steady State (57%), Sustainment Enhancement (34%) and Sustainment Modernization (9%). An investment in the implementation of Artificial Intelligence for IT Operations (AIOps) is anticipated to automate triage activities, as Veterans Affairs and external Veteran Affairs partners begin to depend on higher availability from the platform. In 2024, Customer Experience Data Warehouse (CxDW) (Summit Data Platform) major cost drivers will be a Scrum team to support and maintain the platform, and a Scrum team to sustain the continued enhancement of the platform. Integration of new tooling and the development of capabilities will require the continued procurement of these support and enhancement Scrum teams. In addition, new advanced analytics tool acquisition is anticipated as well as development support via Scrum teams to support enhanced data security and access requirements inherent with the integration of new data partner feeds and users outside of Veteran Affairs boundaries. An investment in the implementation of AIOps is anticipated to automate triage activities, as Veterans Affairs and external Veteran Affairs partners begin to depend on higher availability from the platform. Advancements of CxDW will continue to strengthen a single view of the Veterans journey experience by cross-mapping experience data with transactional data leading VA to accurately identify the highest value areas for customer experience improvement.

In 2024, VA Profile will continue data quality efforts, onboarding of partners and maintaining connection with existing partner systems, expanding the person types of interest, expanding the usage of communications preferences, and enabling data-driven decision making across the VA enterprise. The program will collaborate with Veteran Experience Office (VEO) to align with VA Goals and Data Strategy objectives for defining, identifying and implementation of authoritative data sources and services to support actionable insight and decision making to serve Servicemembers and Veterans, their families, caregivers, and survivors. OIT will improve data access and availability to Veterans and providers to help them make meaningful choices about their care, benefits, and service. In 2024, Customer Experience Data Warehouse (CxDW) (Summit Data Platform) plan to continue to sustain the platform while also implementing process automation and data governance enhancements through the introduction of modern tools and

scripted development. Also, OIT will be developing and beginning to implement a strategy to integrate new data partner feeds and data consumers outside the VA, such as the Social Security Administration, United States Treasury, etc.

Military History Data. PACT Act funding will assist in the modernization of platforms to curate the data and process PACT Act requirements. Data analysis is conducted based on specific rules under PACT Act on potentially eligible veterans who can seek care for the exposures to toxins during the wars and provides those data files to VHA for processing for outreach to eligible veterans. VADIR is the authoritative database source for military history for all veterans and it utilizes data such as military pay and deployment records to filter out which of the 50M veterans are eligible for PACT Act care. This request is specific to new business requirements driven by PACT Act mandates for platform enhancements and modernizations required to be compliant with the new law. This request is derived from analysis of new business requirements that is separate from the base budget request with no overlaps. Additionally, this request supports the Interagency Longitudinal Exposure Record (ILER), a joint DoD/VA initiative needed to conduct analysis on military exposures and to bring that military service exposure data to point clinical care, claims and research efforts within the VA.

Data Integration. PACT Act funding will support platform enhancements and modernizations required to be compliant with the new law. This request is derived from analysis of new business requirements that is separate from the base budget request with no overlaps.

Eligibility and Enrollment Experience - \$32.5 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$s in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Enrollment System	\$ 3,750	\$ -	\$ -	\$ 27,179	\$ -	\$ 32,487	\$ 5,308
Eligibility and Enrollment Experience	\$ 3,750	\$ -	\$ -	\$ 27,179	\$ -	\$ 32,487	\$ 5,308

PACT Act funding will enhance enrollment capability in the Enrollment System and create reports regarding toxic exposure eligibility and enrollment. The funding will provide seamless, effective, and efficient access to Veterans’ eligibility and benefits by adding PACT Act eligibility functionality for 130 VA Medical Centers, outpatient clinics and Veteran Centers. The funding will allow integration with other enterprise systems to fundamentally transform the way VA supports the Veteran's burn pit and toxic exposure incident journey through leveraging Department of Defense information, consolidating data silos and supporting a standard approach to data governance. The funding will allow the data to be combined from different authoritative sources to provide accurate and complete information about the Veteran to assist in PACT Act eligibility decisions, ensure quality outcomes, and strengthen customer experience by providing a timely response.

Cyber Security Operations - \$26.2 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 2 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Digital Identity and Access	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26,223	\$ 26,223
Cyber Security Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26,223	\$ 26,223

PACT Act funding will ensure SaaS solutions and associated services to support Veteran and external user authentication to VA applications as well as provide identity proofing and enable authentication and single sign on access authorization for critical VA digital services used by Veterans, their advocates, VA business partners, and VA employees and contractors. Digital Identity and Access will replace legacy non-compliant VA credentialing services and allow existing credentialing integrations to interoperate with existing legacy CSP's and their credentials. This includes the Department of Defense DS Logon CSP and VA's MHV CSP whose current non-compliance with NIST and security level puts Veterans, their families, and the VA at risk of fraud and loss of access to benefits and services. Availability issues of DS Logon will preclude Veterans from accessing PACT Act services. Neither MHV or DS Logon have the resources or roadmap needed to modernize to current NIST standards, upgrade as NIST guidance evolves like it has, or implement emerging technologies for identity proofing and fraud detection.

Customer Feedback and Experience - \$1.0 million (Operations and Maintenance)

The 2024 Budget Request includes the following sub-project:

Sub-Projects (\$\$ in thousands)	2022/2023		2023		2024		2023-2024 Increase/ Decrease
	Year 2 of 3 year Availability		Enacted		Request		
	DEV	OM	DEV	OM	DEV	OM	
Customer Feedback	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 952	\$ 952
Customer Feedback and Experience	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 952	\$ 952

PACT Act funding will be used to establish the PACT Act customer survey which will enable Veteran voices to be heard to receive the essential burn pit and toxic exposure services and programs across VA. Customer feedback is vital to safeguard vulnerable populations, such as those who have known or suspected toxic exposures, including Veterans who worked near burn pits in Iraq and Afghanistan. The funding will provide Leadership with the ability, driven by near real-time data using digital surveys and comment cards, text analytics and social media scraping to listen to Veterans, their families, caregivers, survivors, and Service Members to implement and manage long-term burn pit/toxic exposure program and PACT Act system improvements.

2022 Accomplishments

Health Portfolio

- Veteran Family Member Program (VFMP) claims processing system (Claims XM) Launch
- The VFMP Claims XM launch was enabled by the release of Payer Electronic Data Claims Messaging (PED CXM) v.1.2.9 Payer Electronic Data Interchange (Payer EDI) processes to the AWS Cloud
- A series of Robotic Process Automation Bots (RPAs) were implemented that automate routine data entry activities in VistA. Since then, many more RPAs have been created to continue to reduce required manual efforts. 8,652 hours have been saved in March of 2022 alone
- Due to their exceptional work, Community Care received four FedHealthIT Innovation Awards for driving technical advancements and results-driven productivity to improve the claims processing. The selected programs include Claims Modernization (CXM), EDI Transactions Application Suite (TAS), CCRS, and Revenue Operations Workflow Tool Enhancements (ROWTE) that successfully innovated system processes, increased automation offerings, and promoted timeliness to improve the claims processing experience for Veterans
- In the first round of Health Ovations, Community Care members won two of the four awards - Diamond and Team Champion
- In August, the Office of CC released the Enterprise Processing Scanning and Indexing (EPSI) solution. This new web application reduces processing time of electronic and paper-based health records from six minutes down to two minutes and will play a significant role in improving communications, expediency, and continuity of care for Veterans
- Utilizing Development funding, the Issue Management module was prototyped, built and fully deployed
- VAHC CRM went live in VISN 1, 2, 5, 6, 9, 15, 17, 21 and 23. The Go Live of this system enables VA to better serve Veterans by providing clinical triage services over the phone, which improves and increases Veterans' access to healthcare
- Implemented the Triage Expert Contact Center (TXCC) clinical decision support tool within the VAHC CRM solution, enabling nurses to triage Veterans' symptoms effectively and efficiently over the phone
- Implemented the Bucher+Suter Connects for Salesforce Adapter within the VAHC CRM solution, enabling computer telephony integration (CTI) capabilities so that a Clinical Contact Center Agent receives a screen pop with the incoming Veteran caller's information
- Implemented multiple integrations with VistA and the MPI within the VAHC CRM solution, enabling a Clinical Contact Center Agent to view and update a Veteran's medical history record and demographic data
- Implemented an integration with the DoD, establishing connectivity to DoD Veteran records to enable a 360-view of the Veteran
- Acquired subscriptions and services for collaboration tools that allow VA investigators, educators, and innovators and non-VA colleagues in academic affiliates and other agencies including NIH and NCI to collaborate on grant writing, publication writing and other shared document tasks

- Migrated the Home Telehealth Reporting applications to the VA Enterprise Cloud with no impact to field users
- Moved the Care Pexip environments from on premise to VAEC AWS
- The MCCF EDI TAS team completed a 5-year rollout of a new ICBWeb system while decommissioning its legacy version. The system is used at VA medical facilities to enhance the insurance data collection and verification process while interfacing with VistA.
- The VA REDCap application migrated to the VA Enterprise Cloud allowing for the decommissioning of the REDCap On-Premises Windows 2012 server from the VA Information Resource Center (VIReC). The BMS product released a new version of the application that completed the removal of the third-party proprietary software Medisoft InFlow. BMS now performs better, is more reliable, and can be horizontally scaled and aligned with modern architectures.
- The NUMI released an update to InterQual Review Manager Enterprise (RM) 21.0.1 and InterQual View 2022 on all NUMI environments. NUMI provides specific clinical criteria that can be applied to patient symptoms to determine the appropriate level of patient care and/or the appropriate treatment procedure(s).
- The HMDM VDIF-EP EHRM Integration Line successfully supported Cerner go-lives at 4 VA sites in 2022 (Columbus, OH; Walla Walla, WA; White City, OR; Roseburg, OR). VDIF-EP EHRM Team was critical in supporting triaging and mitigating VistA site-specific data errors unique to those locations across the 10 applications that contributed to the overall go-live success. Deputy CIO EHRM-IO and her team lauded VDIF overall support as they were critical to achieving go-live success.
- The Veterans Integrated Registries Platform (VIRP) Product Team successfully migrated the Identity Repository from Enterprise Military Information Service (eMIS) to VA Profile.
- The CI&DM team decommissioned the CV application and transferred to a more modern tool, HSRM. HSRM will provide a unified platform for community providers to process referrals, view Veterans records, submit claims, and receive payments removing the need for separate systems (one being CV) for these disparate tasks. The decommissioning of CV saves on cost, time, and resources as it negates the need to modernize its aging infrastructure
- The Population Health team successfully implemented patches that added support for new HIV drugs and removed Social Security Numbers as an identifier to reduce and eliminate identity theft risk for the Veterans.
- The CARMA team delivered new email communications mechanism for applicants; enhanced integrations with MPI, VA Profile and VA.gov; and a new queuing mechanism to support a large influx of applications ensuring a highly successful expansion of the Caregiver Support Program to Veterans from all eras on October 1, 2022. Over 2700 applications were received and processed on the first day of the expansion.
- MHA transitioned to its web-based platform in February of 2022, allowing mental health clinicians to electronically administer mental health assessments. The October 6th MHA Patch YS*5.01*202 national release added 7 new suicide prevention and well-being screening instruments to the catalog of over 155 mental health assessments and introduced modernized features to the MHA Dashboard for clinician customization for their specific use-care needs.

- VistA Imaging eXchange (VIX) Query Retrieve / MAG*3.0*269 was released 05/20/2022. This functionality improves timeliness and quality of patient care by delivering remote imaging exams for diagnostic use.
- Transitioned from a Defense Medical Logistics Support (DMLSS) focused implementation to the development of a new Supply Chain Modernization acquisition strategy. As part of the transition, the VA conducted numerous industries invents, generated several RFIs to industry, and created the initial technical Supply Chain toolkit to support the new VA's Supply Chain Enterprise Solution.
- Developed new technical integration platform that will provide integration of existing VA Supply Chain systems and will support a "to be" new Supply Chain Enterprise Solution.
- Substantially expanded the Remote Order Entry System (ROES), the VA's web-based veteran direct supply system, to include additional CPAP, TENS, Blood Pressure Monitor, Audio Implant, and Nebulizer ordering capabilities.
- The CDW product team coordinated and built a recurring data exchange of DHA STORM predictors, Rx history, encounter/diagnosis history, VA Registry, and ReachVet pre-curated Cohorts in support of VHA Program Evaluation and Resource Center (PERC) and Defense Health Agency (DHA).
- The CDW product Team released Basecamp 6.0 to expedite and manage access to data analytics tools needed to support data driven Veteran care. It is the first iteration to support provisioning in the CDWNG strategic vision to leverage cloud technologies.
- Health Data Repository (HDR) team implemented process improvements for hosting that resulted in savings of \$1,690,342.72 for 2022.
- HDR reduced its' release cadence from ninety days to thirty days which included nine maintenance and four enhancement releases that provided HDR's customers with more added features to treat Veterans at lower IT costs.
- HDR successfully migrated service from HDR Production VLAN to the new Palo Alto Firewall, which provides enhanced security for all HDR data that is being access by HDR's customers.
- HDR also onboarded Veteran Relationship Management System (VRMCRM), VAHC, VA Profile and Lighthouse and provided them additional patient clinical data from HDR which improved the treatment health care of Veterans.
- VHA GIS team worked with VAEC to architect and deploy the AWS hosting platform for the Enterprise GIS. GIS Portal data and web applications were copied to the cloud environment, apps were tested, and bugs/defects resolved.

Benefits Portfolio

- Deployment of the Education Payment Module
- National Rollout to the Continental District
- Implementation of the MuleSoft integration platform for reduced development and delivery of products and ease of integration
- LIPAS completed additional major releases in 2022 in preparation of demand for new insurance products and services
- VALife and VMLI Functionality was delivered in the pre-production environment
- Completion of Service-Disabled Veteran Insurance (S-DVI) Conversion Readiness

- Delivery of all final VALife requirements
- The Appeals Product Line implemented the ability for a Veteran Service Organization (VSO) user to convert hearing request types to virtue that gives greater convenience and flexibility to the Veteran to attend his/her hearings.
- The Appeals Product Line implemented the BV as business requirements to streamline the automatic case distribution algorithm. When a Veteran Law Judge requests cases that are ready for a decision, those cases are drawn from the Board's various dockets according to a set of rules.
- The Appeals Product Line integrated its main appeals system, Caseflow, with VA Notify, providing improved communication of status updates for the Veteran and their representatives with emails based on triggers and events.
- Developed and deployed functionality replacing Virtual VA (VVA) Legacy Content Manager (LCM) batch upload process with a new Rules Based Processing System (RBPS) letter eFolder direct upload process.
- Completed the migration of CRP and BEP Tuxedo 12c from the Oracle M5 and M7 hardware to the Oracle SuperCluster M8 (SCM8) hardware.
- Academy Demo was released to assist with training of new Veterans Business Administration Personnel.
- Developed a deployment plan for a shortened CAPRI release reducing overall National Rollout duration by 51%.
- DGIB Release 3 - 1010 IHL and Supplemental Claims Automation Improvements – Students now have the option to verify their enrollment status via text message or email.
- DGI Release 4 – Veteran Technology (VET TEC) and Supplemental Claims Automation Improvements – Allows for the submission, automation, adjudication, and letter generation of CH33 Original Claims.
- DGI Release 5 - Automated CH33 Self Original Claims – Allows Veterans and active-duty service members who apply for Post-9/11 GI Bill benefits using VA.gov to now have their claim automatically reviewed to improve claim processing speed and accuracy.
- Instant Loan functionality deployed concurrently by both Life Insurance Policy Administration Solution (LIPAS) project and (EIN). Setting up the functionality and interfaces needed for Veterans to apply for loans and be instantly approved on the Insurance website.
- Online Policy Access (OPA) functionality deployed concurrently by both the LIPAS project and EIN project. LIPAS deployment provided back-end functionality, and the EIN deployment allows Veterans to view and access their policies online through the Insurance website.
- 300,000 S-DVI policies were successfully converted from the legacy system Veterans Insurance Claims Tracking and Response System (VICTARS) into VISION. The newly converted S-DVI policies are now being processed in VISION, positively impacting 300,000 Veterans and their families.
- EIN integrated external website with VAProfile and LIPAS allowing Veterans and Beneficiaries direct access to their information.
- Completed and deployed VMLI into Production.

Memorial Affairs Portfolio

- BOSS-E updated the Jefferson's Barrack National Cemetery map and provided an improved data report which includes the relationship with the Veteran
- April 2022, BOSS-E provided additional display which includes Veteran ID, Monument ID, and Decedent ID in the Nationwide Gravesite Locator (NGL) for more accurate results.
- May 2022, BOSS-E provided four new additional maps in the cemetery kiosks; Costal Bend State Veterans Cemetery (395), Rio Grande Valley State Veterans Cemetery (133), Texas State Veterans Cemetery Abilene (273), and Central Texas Veterans Cemetery (127)
- November 2021, MBMS released enhancements to provide faster Memorial Benefits; more accuracy in functionality; and increased maintainability of the application that manages the rules, regulations; reports agents use to process Memorials Benefits requests
- January 2022, MBMS reduced reliance on BOSS-E by providing the ability for agents to accurately and efficiently input data which will result in increased efficiency during case establishment, and lead to improved data quality and a better user experience for scheduling agents and Veterans
- November 2021, BINCA updated Interment Activity dashboard that provided NCA leadership with detailed information that will support more timely and accurate workload projections
- February 2022, BINCA added nine new Tribal and two new National Cemeteries to the Cemetery Map dashboard
- March 2022, BINCA updated Interment Activity dashboard with enhanced decedent statistics data and legend keys. Updated visual trends, end user navigation, and distinguished workload associated with a first or subsequent interment
- April 2022 – VLM awarded an International Association of Business Communicators (IABC) Gold Quill Award for Communications on the web
- May 2022 – VLM awarded FedHealth IT Innovation Award
- June 2022 – VLM awarded Granicus Digital Government Award

Corporate Portfolio

- A modernized eDiscovery tool (Casepoint) that will replace the current inadequate eDiscovery Clearwell (SCW) application was launched. It is a tool required by the Federal Rules of civil procedure to manage legal cases
- GCLaws Sustainment-Enhancement: Completion of new User Interface, MVP, aligning with 2022 business priorities and consolidating appeals management with standard OGC case management practices was achieved
- Installation of system monitoring components to provide end-to-end visibility into the performance of the system and will help detect, understand, and resolve system issues was started and should be completed by EOY 2023
- Successfully converted the previous database to System for Award Management (SAM) Unique Entity Identifier (UEI) per GSA's guidelines to replace the commercial unique identifier provided by Dun and Bradstreet, called a Data Universal Numbering System (DUNS) Number
- FMBT NCA's Enterprise Acquisition go-live was successfully implemented of the newly configured iFAMS budgetary and financial functions to the NCA. Additionally, iFAMS has implemented first production instance for corporate portfolio iFAMS capabilities

replaced NCA and Corporates use of the FMS, Integrated Funds Control Point Activity, Accounting and Procurement (IFCAP) System, and Centralized Administrative Accounting Transaction System (CAATS), for day-to-day financial transaction processing

- VLM added a new Emblem of Belief (DRUZE), enhanced the usage of hyperlinks, and improved social media sharing capabilities. These updates provided new capabilities and personalized experiences to the Veteran community.
- BINCA implemented its most significant release of the fiscal year 2022 by updating 12 of its 14 dashboards. These updates enhanced NCA Leadership's ability to measure progress and performance metrics toward their fiscal year 2022 targets.
- BINCA implemented new performance measures on the Automated Monument Application System (AMAS) Timeliness dashboard, allowing NCA to track National Personnel Records Center (NPRC) and non-NPRC claims optimizing monument ordering at non-national cemeteries. As a result, Veterans and their families experienced improved service and efficiency during the cemetery monument application process.
- The Eligibility Phase 1 development brings Eligibility functions into MBMS Case Management, Eligibility, and Outreach (CaMEO). This release allows CaMEO users to determine and establish eligibility for Veterans and their families more efficiently and accurately.

ITIN Portfolio

- The RPA platform has been augmented in 2022 with artificial intelligence to provide additional capabilities such as data modeling, evaluation strategies, and learning applications. These deliverables have resulted in more efficient compliance practices and greater customer and employee satisfaction
- Instrumentation and onboarding of an additional 180 VA Enterprise applications to 24/7 eyes on glass watch operations
- Modernized multiple sites on aging Siemens infrastructure by moving them to standard Cisco infrastructure, thereby eliminating hardware maintenance contracts for the Siemens technology
- Collaborated with VHA to modernize the telephone systems and clinical contact centers at 200 facilities nationwide. As of January 2020, VA reduced telephony service contracts by 50%
- Support of VCL 988 Initiative—established a support model for the onboarding of 1000 new Veteran Crisis Line staff members in support of the national 988 Suicide and Crisis Lifeline initiative.

Information Security

- Developed and published VA Privacy Risk Management Strategic Plan to establish the VA's strategy and approach for effectively managing privacy risks to achieve a comprehensive, consistent, and effective privacy risk management across the VA and with VA partners
- Completed Mobile Security Architecture Gap Analysis for the identification and understanding of security deficiencies across the enterprise mobile environment. The information provided from this effort is a prerequisite to completion of the mobile risk

assessment. Output of this effort is shared amongst mobility and zero trust stakeholders to be utilized towards improvements in mobility risk reduction, security posture improvements, and decision making

- Implemented an effective Continuous Monitoring program with all 78 of the VA FedRAMP vendors. This program has enabled all VA Stakeholders assigned to the VA FedRAMP systems as well as the FedRAMP vendors to work together to monitor and continue to improve the security of these systems
- Developed and delivered ZTA Governance, Strategy and Architecture Pillar Plan - 2022-24 (including funding estimates) in support of Executive Order 14028 and the OMB Memo M-22-09, Federal ZTA Strategy as an input into the VA ZTA Implementation Plan - 2022-24 assisted with the development of the VA ZTA Implementation Plan (2022-24) submitted to OMB in response to OMB Memo M-22-09, providing ZT expertise and documented input
- Accomplished 500+ HITECH reportable events processed with the 60-day timeframe and reported to HHS. All HIPAA Notification Letters, Next of Kin Notification Letters and Press Release were completed prior to the 60-day timeframe. VA remains compliant with Federal Laws and Regulations regarding HITECH reportable events to HHS
- The Automating Insider Threat Response program was nominated and selected by a panel of current and former Federal and Industry leaders from across the Federal information technology (IT) sector, as the 2022 FedHealthIT Innovation Award Winner

Veteran Experience Portfolio

- Education Contact Center, VBA National Contact Center, and MyVA411 call center telephony were refreshed. Not only does this improve network stability and lower OIT operating costs, migrating call centers onto new systems also improves call quality and the service experience for Veterans
- Medallia, the platform that runs VSignals recently replaced VA.gov's survey tool, Forsee. This change will allow VA.gov to capture better qualitative measure from its visitors while centralizing feedback from various channels into a single reporting system
- Of the 130 million page views to VA.gov, approximately 40% of these were from a mobile device. To better serve this population of users, VA developed and deployed a flagship mobile application. As of August 1, 2022, this application has been downloaded over 700,000 times with a 4.6 or more rating in Apple & Android app stores. Features added to the mobile app in 2022 include:
 - VHA appointment review (with push notifications)
 - Payment information
 - Secure messaging with VHA
 - Vaccine Records
- The data repository used by the enrollment system was migrated to a cloud environment in 2022, providing significant cost savings to the VA while providing a more secure, fault-tolerant operating environment
- VES has implemented 64 core health benefit plans (i.e., VHA Profiles or VHAPs) in support of Electronic Health Record Modernization efforts and has implemented technical changes to meet new legislative mandates, including the Save Lives Act, Blue Water Navy Veterans, COMPACT Act, and Megabus Act.

2024 Prioritized List of Unfunded Projects

In accordance with Public Law 117-328, Division U, Title IV, Section 403, Subchapter VI, § 8175(b)c, this section provides a 1:N prioritized list and summary descriptions of every proposed IT project of the Department as of the time of the budget submission.

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Unfunded Projects Amount
1	Corporate	OGC	General Counsel	General Counsel IT Systems	Sustainment-Enhancement	\$ 789
2	Memorials	NCA	Memorial Support	Field Programs	Sustainment-Enhancement	\$ 14,442
3	Memorials	NCA	Memorial Support	Field Programs	Sustainment-Modernization	\$ 2,500
4	Health	VHA	Care Coverage Services	Claims Processing Business Transformation (CPBT)	Sustainment-Steady-State	\$ 8,421
5	Health	VHA	Patient Management Services	Veteran Benefits Handbook Portlet	Sustainment-Steady-State	\$ 40
6	Health	VHA	Patient Management Services	Beneficiary Travel Self-Service System (BTSSS)	Sustainment-Enhancement	\$ 860
7	Health	VHA	Health Delivery Support	Home Telehealth Reporting (HTR)	Sustainment-Enhancement	\$ 1,812
8	Health	VHA	Health Administration	Telehealth Management Platform (TMP/CVT-TSS)	Sustainment-Enhancement	\$ 5,259
9	Health	VHA	Enterprise IT Infrastructure	Health Data and Analytics Platform	Sustainment-Enhancement	\$ 7,820
10	Health	VHA	Virtual Veteran Record	Direct Secure Messaging (DSM)	Sustainment-Enhancement	\$ 3,000
11	Health	VHA	Health Administration	Enterprise Precision Scanning and Indexing (EPSI)	Sustainment-Enhancement	\$ 766
12	Health	VHA	Care Coverage Services	Program Integrity Tool (PIT)	Sustainment-Enhancement	\$ 4,030
13	Health	VHA	Operational Support	Community Care (CC) Integrated Billing (IB) Accounts Receivable (AR)	Sustainment-Enhancement	\$ 3,890
14	Health	VHA	Enterprise IT Infrastructure	CPAC Revenue Workflow Tools (ROWT)	Sustainment-Enhancement	\$ 4,199
15	Health	VHA	Operational Support	Medical Care Collections Fund (MCCF) EDI Transaction Applications Suite	Sustainment-Enhancement	\$ 15,944
16	Health	VHA	Health Delivery Support	VA Health Connect Customer Relationship Management (VAHC CRM)	Sustainment-Enhancement	\$ 2,698
17	Health	VHA	Care Coverage Services	Community Care - Provider Profile Management System (PPMS)	Sustainment-Enhancement	\$ 2,873
18	Health	VHA	Patient Management Services	LGBT Program (10P4Y)	Sustainment-Enhancement	\$ 2,027
19	Health	VHA	Patient Management Services	Vet Ride (VTSHS)	Sustainment-Enhancement	\$ 1,300
20	Health	VHA	Enterprise IT Infrastructure	Corporate Data Warehouse (CDW) - Access to Care	Sustainment-Modernization	\$ 3,017
21	Health	VHA	Enterprise IT Infrastructure	Corporate Data Warehouse (CDW)	Sustainment-Enhancement	\$ 10,300
22	Health	VHA	Enterprise IT Infrastructure	Corporate Data Warehouse (CDW)	Sustainment-Modernization	\$ 10,300
23	Health	VHA	Enterprise IT Infrastructure	VA Informatics and Computing Infrastructure (VINCI)	Sustainment-Enhancement	\$ 7,547
24	Health	VHA	Common Health Care Specific Services	VHA Support Service Center (VSSC) - Replace Old Servers	Sustainment-Modernization	\$ 4,000
25	Health	VHA	Health Delivery Support	Medication Order Check Healthcare Application (MOCHA)	Sustainment-Modernization	\$ 5,250
26	Health	VHA	Health Delivery Support	Pharmacy Automated Dispensing Equipment	Sustainment-Enhancement	\$ 3,750
27	Health	VHA	Health Delivery Support	Pharmacy Operational Updates	Sustainment-Enhancement	\$ 8,650
28	Health	VHA	Operational Support	Clinical Trainee Registration and Tracking System (CTRSTS)	Sustainment-Enhancement	\$ 1,000
29	Health	VHA	Clinical Care Services	Diagnostics Pathology and Laboratory Medicine (PLM)	Sustainment-Modernization	\$ 2,025
30	Health	VHA	Health Delivery Support	Research Electronic Data Capture (VA REDCap)	Sustainment-Enhancement	\$ 240

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Unfunded Projects Amount
31	Health	VHA	Care Coverage Services	VHA Claims and Appeals	Sustainment-Enhancement	\$ 1,721
32	Health	VHA	Clinical Care Services	Dental Care Workflow Modernization and Platform Evolution	Sustainment-Enhancement	\$ 3,115
33	Health	VHA	Common Health Care Specific Services	Clinical Decision Support Platform (CDSP)	Sustainment-Modernization	\$ 12,871
34	Health	VHA	Common Health Care Specific Services	Clinical Decision Support Platform (CDSP)	Sustainment-Enhancement	\$ 14,700
35	Health	VHA	Health Delivery Support	Office of Healthcare Innovation and Learning	Sustainment-Modernization	\$ 17,003
36	Health	VHA	Health Delivery Support	Telemedicine (Store & Forward)	Sustainment-Enhancement	\$ 2,423
37	Health	VHA	Health Delivery Support	eScreening	Sustainment-Modernization	\$ 1,142
38	Health	VHA	Health Administration	Status Query and Response Exchange (SQUARES)	Sustainment-Enhancement	\$ 1,594
39	Health	VHA	Common Health Care Specific Services	COVID-19 Patient Manager - Clinical Decision Support	Sustainment-Enhancement	\$ 3,472
40	Health	VHA	Enterprise IT Infrastructure	GovDelivery Cloud-Based API Solution	Sustainment-Modernization	\$ 90
41	Health	VHA	Quality Systems	Check-in Experience (CIE)	Sustainment-Enhancement	\$ 1,000
42	Health	VHA	Quality Systems	Community Care Clinical and Business Intelligence Solution (EPRS)	Sustainment-Enhancement	\$ 3,157
43	Health	VHA	Health Administration	VA Online Scheduling (VAOS)	Sustainment-Enhancement	\$ 1,259
44	Health	VHA	Health Delivery Support	Web VistA Remote Access Management (WebVRam)	Sustainment-Enhancement	\$ 1,501
45	Corporate	OIT	OIT Front Office Support	OCTO GSA Digital Corps Fellows	Sustainment-Steady-State	\$ 204
46	Corporate	OIT	CRR Support	ACOE Metrics and Analytics Support	Sustainment-Steady-State	\$ 4,520
47	Corporate	OIT	OSS Support	VA Enterprise Research and Advisory Services Contract	Sustainment-Steady-State	\$ 7,606
48	Corporate	OIT	OSS Support	OSS Support Contract	Sustainment-Steady-State	\$ 3,489
49	Corporate	OIT	OSS Support	Administrative Support - Strategic Sourcing	Sustainment-Steady-State	\$ 120
50	Corporate	OIT	Privacy & Records Management	Quality Continuous Improvement Organization (QCIO)	Sustainment-Steady-State	\$ 2,232
51	Corporate	OIT	Privacy & Records Management	Federally Funded Research and Development Centers (FFRDC) Support	Sustainment-Steady-State	\$ 6,127
52	Corporate	OIT	Privacy & Records Management	CRR Federally Funded Research and Development Corporation (FFRDC) Support	Sustainment-Steady-State	\$ 5,525
53	Corporate	OIT	Privacy & Records Management	Gartner Support for Front office and Compliance, Risk and Remediation (CRR)	Sustainment-Steady-State	\$ 306
54	Corporate	OIT	Privacy & Records Management	Office of Technical Integration (OTI) Federally Funded Research and Development Corporation (FFRDC)	Sustainment-Steady-State	\$ 6,074
55	Corporate	OIT	Privacy & Records Management	OTI Support Contract Mantech	Sustainment-Steady-State	\$ 4,684
56	Corporate	OIT	OIT Administration Support	Enterprise IT Support Contracts - OIT Administration Support	Sustainment-Steady-State	\$ 19,250
57	Corporate	OIT	BIOS Support	IT BIOS - Client Management Services	Sustainment-Steady-State	\$ 5,710
58	Corporate	OIT	BIOS Support	IT BIOS - Replacement Contract Funding	Sustainment-Steady-State	\$ 10,700
59	ITIN	OIT	Decision Intelligence	Digital Veterans Platform (DVP)	Sustainment-Enhancement	\$ 1,784
						\$ 282,128

1. General Counsel IT Systems

General Counsel Legal Automation Workload System (GCLAWS) is the tool that over 1000 Office of General Counsel (OGC) employees use to provide timely, accurate, and consistent legal advice and representation to the Department for more than 55,000 active/pending legal matters. This investment is needed to maintain GCLAWS operations. It provides technical support for the system such as break/fix capabilities, implementation of critical security enhancements and keeps up with the ever-expanding storage needs of the VA legal community. If not funded, VA will not be able to recover from system crashes, severely impacting OGC's ability to fulfill its mission.

2. Field Programs

NCA Memorial Benefits Management System (MBMS) Salesforce enhancements will continue to support the multi-year transformation to improve critical capabilities, business process, and system resiliency to support the NCA workforce by:

- improving claim processing speed, increased data quality, and integrity by eliminating manual processes.
- decreasing errors between the scheduling office and Cemeteries (VA National, State, Tribal and Army)
- improving internment/inurnments processes between National Cemetery Scheduling Office and loved ones or Funeral homes who act on behalf of Veterans during their time of need
- providing timely Eligibility determinations for more than 1500 memorial benefit claims monthly
- providing improved functionality; end-to-end decedent chain of custody tracking, real-time Veteran claim status display, state-of-the-art remains tracking
- expanding automated self-service functionality to the Veteran community with 24x7 availability improving customer satisfaction and reducing resource impacts on NCA staff

Lack of funding will completely stall efforts to continue the transformation of the aging BOSS-E system to MBMS beyond simple sustainment of existing system. Enhancements are aimed at improving user experience to avoid negatively impacting the experience of Veterans and their families during their time of need.

3. Field Programs

This project replaces currently deployed Kiosk technologies that are at end of life, deployed on aging technologies and are at risk for failing to meet TRM security requirements including critical 508 issues. The updated Kiosk technology will provide:

- updated functionality and improved grave marker mapping to assist Veteran Family members in identifying and finding gravesites within each National Cemetery
- opportunities for family members to extend information to mobile devices and extend the usefulness of the Kiosk technology beyond the cemetery and
- Veteran Legacy Memorialization (VLM) QR codes for directions, mapping, and printing

4. Claims Processing Business Transformation (CPBT)

Centralized Data Repository (CDR) consolidates information from multiple platforms into a cohesive view to support Integrated Veterans Care (IVC) business processes from initial consult through final payment. This repository serves as a single source of truth for IVC and other VHA

entities that generate reports from Community Care data. CDR improves Veteran's, their family, and their beneficiaries' outcomes by supplying staff with accurate, normalized data and tools. Planned enhancements include the consolidation of duplicative Application Programming Interfaces (API) connections. If not funded, the VA will struggle to provide timely/accurate analytics in support of Community Care providers claims and payments. In addition, lack of funding could negatively impact other systems' performance and storage costs.

5. Veteran Benefits Handbook Portlet

Development and implementation of the Veterans Health Benefits Handbook Portlet will provide Veterans the ability to electronically request and view their personalized 'Veterans Health Benefits Handbook.' This initiative will give easier access to and greatly enhance the ability for all Veterans to understand their VA health care benefits and responsibilities. Without access to an online electronic version of their personal Health Benefits Handbook, veterans must request a hardcopy version be printed and sent to them. The processing and printing of these requests creates an associated labor and materials cost as well as a delay in access to information for veterans. Hardcopy versions also create a risk of obsolescence if the veteran's eligibility changes, thus not containing the most up to date information. Access to an electronic version through the desired portlet eliminates the processing and printing costs and creates real time access for veterans to their most current benefit information.

6. Beneficiary Travel Self-Service System (BTSSS)

Beneficiary Travel Self-Service System (BTSSS) automates travel claims processing including waiver exceptions; electronically passing vouchers for direct deposit; enhancing the audit process; and streamlining current work processes. Enhancements to the BTSSS product positions Veterans Transportation Program (VTP) to leverage BTSSS functionality for future workflow integration with VA's Office of Rural Health, Homeless Program, Veteran Transportation Network (VTN) and Spinal Cord Injuries (SCI) Centers to improve the network of transportation services and increase access to VA services. If not funded, 2024 enhancements will not executable.

7. Home Telehealth Reporting (HTR)

Home Telehealth Reporting (HTR) is an integration project that validates data from multiple Home Telehealth/Remote Patient Monitoring COTS vendors, integrates it with VA systems and provides outcomes reporting to clinical staff. This 2024 enhancement line-item will be used to build new reports and tools as required by evolving program needs and will be used to validate new vendors' data integration solutions increasing opportunities to improve care for more than 71,000 Veterans, 45% of whom live in rural areas where traveling to traditional medical appointments is difficult. This will improve Veterans' access to care by reducing travel and will help provide Veterans with the knowledge and skills needed to self-manage their own health care needs more effectively. If not funded, planned 2024 enhancements will not be executable.

8. Telehealth Management Platform (TMP/CVT-TSS)

The Telehealth Management Platform (TMP) is a customer relations management software system that sustains, improves, and expands telehealth programs by managing technical and clinical processes in one system. During 2019 TMP scheduled 136,186 visits, managed 22,094 service agreements, 82,739 resources (rooms, space and technologies) and supported 27,470 users. TMP enhancements in 2024 will include the ability to document all Clinical Video Teleconferencing

(CVT) activities and automate the organization and efficient use of equipment and rooms for CVT services at 970 VHA sites. These enhancements are essential to meeting the expected significant increase in use of an increasingly broad spectrum of non-face-to-face care services that VA must provide to meet Veteran patients' expectations and stay current with private healthcare industry standards.

9. Health Data and Analytics Platform

Health Data and Analytics Platform (HDAP) is an open-architected, multi-cloud, data management and analytics platform used for consolidating, curating, and analyzing data from multiple sources throughout the VA. HDAP is designed to use predictive analytics, artificial intelligence/machine learning (AI/ML), and natural language processing (NLP) to make inferences on individuals or groups of Veterans for use by program offices across the VA. The platform enables evidence-based decision making to improve outcomes for Veterans and their families. Without this funding in 2024, VA will not be able to implement new features, increase Cloud Credits, support additional data ingestions or make performance improvements necessary to the existing Health Data and Analytics Platform and the multi-cloud environment to boost availability of services.

10. Direct Secure Messaging (DSM)

Direct Secure Messaging (DSM) is a secure health-industry-standard transport mechanism for the exchange of patient health information between the VA and external care providers with approximately 2 million addresses and 300K+ organizations in the Direct Trust network. Currently, DSM has more than 1,600 VA users and is an alternate technology to printing, faxing, and mailing health information for transactions like payments, referrals, and other external episodes of care. Through the timely and accurate exchange of electronic patient data with external care providers patients receive better coordinated care, leading to better outcomes, and overall increased patient and provider satisfaction. Without this funding, 2024 expansion in the number of VA systems using the Direct-as-a-Service interface along with other enhancements to improve performance and match industry advancements in the types and formats of documents exchanged will not be executable. The system is anticipated to be decommissioned in 2029 at the end of the EHRM national rollout.

11. Enterprise Precision Scanning and Indexing (EPSI)

Enterprise Precision Scanning and Indexing (EPSI) is a critical link supporting the incorporation of medical records from community-based providers into the VA electronic health records - Veterans Health Information Systems and Technology Architecture (VistA), and Oracle Cerner. EPSI streamlines VA acceptance documentation received from community-based providers and matches it to the VA consult request in the originating VA EHR system. 2024 enhancement funding will allow for continued, iterative evolution of the product to meet customer requirements and improved interoperability and integration between VistA, Oracle Cerner, Veterans Data Integration and Federation (VDIF), HealthShare Referral Manager (HSRM) and Joint Longitudinal Viewer (JLV).

12. Program Integrity Tool (PIT)

The Program Integrity Tool (PIT) supports automated checks for Fraud, Waste, and Abuse (FWA) in Community Care healthcare claims payments. This 2024 enhancement funding will allow PIT to upgrade to cloud hosting environments, integrate with new and existing VA systems (including

ClaimsXM), and develop new bi-directional feeds and enhance FWA analytical reports. Without these updates, continued improvements/integrations designed to address findings identified by the Veterans Affairs Office Inspector General (VAOIG) report entitled “Review of Fraud Management for the Non-VA Fee Care Program, 10-00004-166” will not be possible.

13. Community Care (CC) Integrated Billing (IB) Accounts Receivable (AR)

Community Care (CC) Integrated Billing (IB) Accounts Receivable (AR) provides VA facilities the HIPAA compliant features necessary to create first party (patient) and third party (insurance carriers/Medicare) bills. Approximately 4.5 million billings are sent per month which equates to around \$200 million in collections per month. Without this funding, software enhancements to improve Veteran First Party copayments, third-party copayment determinations, repayment plans, and patient statements will not be executable. These enhancements will ensure the VA complies with existing and new legislative mandates such as the American Rescue Plan Act of 2021 (cancellations of all medical copays between April 6, 2020-September 31, 2021), the Veterans Comprehensive Prevention, Access to Care, and Treatment (Compact) Act (Acute Suicide Diagnosis), and the Megabus Act (Native American Copay Determination).

14. CPAC Revenue Workflow Tools (ROWT)

The Consolidated Patient Account Centers (CPAC) Revenue Workflow Tools (ROWT) supports for accurate billing at the seven regionally aligned CPAC. 2024 enhancements of the ROWT will enable third-party and first-party billing workflow to allow for the transmission of claim level payment information for the purpose of streamlining work resulting in increased collections and reduced cost to collect and provide additional reporting capabilities. Major cost drivers include administrative and support costs, defect resolution and yearly maintenance of robots in production. Maintenance of the various Consolidated Patient Account Center (CPAC) Commercial Off The Shelf (COTS) information technology tools is essential to operate the Product. If the Consolidated Patient Account Center (CPAC) Revenue Workflow Tool (ROWT) is not funded, the claim level payment information for third-party and first-party billing at the seven regionally aligned CPACs would be unavailable and there is a risk for the Veteran that they will not be able to access community-based care due to prompt payment issues.

15. Medical Care Collections Fund (MCCF) EDI Transaction Applications Suite

MCCF supports the VHA’s collection of health insurance copayments for services Veterans receive from the VA but are not covered by the Veteran’s benefit. MCCF also supports the VHA implementation of the Health Insurance Portability & Accountability Act (HIPAA) which requires industry-wide standardization of Electronic Data Interchange (EDI) Transactions to achieve improved efficiency and cost effectiveness in U.S. healthcare. Enhancements include compliance through implementation of standards and new data fields and data field values, implementing new EDI Standards and Operating rules to continue exchanging data with insurance payers and maintaining the flow of revenue to VHA and Administrative simplification requires standardizations across eBilling, ePayments, eInsurance, and ePharmacy. Major cost drivers are due to pursuing compliance with Federal and National Medical and Pharmacy standards. Funding is projected to decrease to normal levels once completing the national standards. Without enhancement funding, Medical Care Collection Fund (MCCF) will not be updated to the new Federal and National mandates, which could result in fines. Out of date systems introduces the risk of an inability to obtain or delayed benefits to the Veteran/beneficiary/family members. This

could affect Veteran's personal health issues. Additionally, poorly maintained systems may cause incorrect charges for non-service-connected care provided the VA. The impact to the Veteran/beneficiary/family members may be erroneous bills and missed benefits causing undue stress and risks to personal health. This will additionally impact VHA budgets with the loss of revenue from not being able to fully collect insurance revenue to which VA may be entitled.

16. VA Health Connect Customer Relationship Management (VAHC CRM)

The VA Clinical Contact Centers (CCCs) serve as a virtual front door to VA health care. They will provide Veterans and their caregivers immediate, 24/7, on-demand access to clinical and administrative services to address urgent and episodic health care needs over the phone, chat, video, and email. VHA CRM provides a single user interface for viewing real-time appointment availability and scheduling desired appointments directly into the receiving provider's Electronic Medical Record (EMR) with the critical referral details. Intended enhancements to VAHC CRM allow CCCs Agents to refill, track and manage Veterans' prescriptions online and over the phone, and enable Veteran appointment scheduling at VA points of care in Veterans Information Systems and Technology Architecture (VistA) Scheduling, Cerner Scheduling.

17. Community Care - Provider Profile Management System (PPMS)

Community Care is essential for Veterans seeking care but are not equipped to visit a VA facility in their area because of geographical restraints. Community Care - Provider Profile Management System (PPMS) is a comprehensive storehouse of providers' administrative information and the authoritative source of Non-VA Providers for VHA. There are 1.6 million providers and 21,000 provider services currently in the PPMS system. PPMS offers the ability for workflow management to collect, validate, and track Non-VA provider information. Downstream systems such as Community Care Referral and Authorization (CCRA), HealthShare Referral Manager (HSRM), VA.gov, and the Community Provider Locator rely on PPMS to complete their business process to directly support the Veteran seeking care in the community. The budget request will allow to enhance the existing comprehensive repository of Non-VA Providers, continue to integrate additional resources containing Non-VA provider data external to the VA network and include the upcoming Community Care Network (CCN) Next Generation Initiative. Major costs drivers are labor cost of support team members, cloud consumption, annual Microsoft CRM (Dynamics 365) license renewals, and system monitoring tools. If not funded, Provider Profile Management System (PPMS) will not be able to incorporate additional data sources required by the VA for Veteran Community Care referrals and appointments. Without PPMS, the process for standardized data collection as well as the provider data accuracy will be become compromised. In turn, it will also limit the number of available providers for the Veteran to choose from within the community for Veteran care.

18. LGBT Program (10P4Y)

The Lesbian, Gay, Bisexual and Transgender (LGBT) Health Program requests tailoring the electronic medical record (EMR) to best meet the needs of Veterans who are part of this community. Transgender and Gender Diverse (TGD) Veterans have been shown to experience a number of health disparities. The LGBT Health Program has a healthcare directive on TGD Veterans to address health inequities and provide clinically and culturally responsive care. It is VHA policy that Veterans must be addressed based upon their self-identified gender identity; the use of Veteran's preferred name and pronoun is required. Currently, there is no field to enter this

information, so it will become lost in Progress Notes, requiring other providers to potentially ask patients the same questions again and again. The standards issued by the Office of National Coordinator for Health Information Technology (ONC) and the Centers for Medicare and Medicaid Services (CMS) in October 2015 require EMR software certified for meaningful use to have three response options for Birth Sex: Male, Female and Unknown, and to specify a distinction between the administrative sex and the birth sex of the patient. The sustainment-enhancement funding will: 1) provide tools for clinicians to provide culturally sensitive care to transgender and gender diverse Veterans; 2) allow Veterans to let VHA staff know their preferences (e.g., preferred pronoun, administrative sex, preferred name); 3) reduce variation by standardizing the collection of preferred name and preferred pronouns in a consistent location; 4) increase interoperability with Cerner and external EMRS by adopting the ONC/CMS standards. If not funded, those Veterans preferring to be addressed by a different name or pronoun will not be able to select these options in the electronic medical record resulting in dissatisfied customer satisfaction and a decrease in quality of care.

19. Vet Ride (VTSHS)

Veterans Transportation Program (VTP) vision explores the establishment of a network of community transportation service providers, community, and commercial transportation providers, and federal, state, and local government transportation services. The failure of this service network to address accessibility of VA facilities where they are authorized treatment and compensation to Veterans and family members will negatively affect VTP, thereby hindering reliable transportation options for Veterans to their appointments using Vet Ride. Enhancements to VTSHS system address the problem of increased improper payments for beneficiary travel.

20. Corporate Data Warehouse (CDW) - Access to Care

Corporate Data Warehouse (CDW) - Access to Care is the primary source for public facing Veterans Health quality and performance data. This includes the COVID-19 National Summary which tracks cases and deaths with patient dimensions and filters by state and facility.

21,22. Corporate Data Warehouse (CDW)

The services provided by CDW are critical to the day-to-day operations. CDW's customers span all organizations within the VA: OIT, Office of Electronic Health Record Modernization (OEHRM), VHA, VHA Office of Research and Development (ORD), and some offices within VBA and key organizations outside of the VA: Centers for Disease Control and Prevention (CDC), Department of Energy (DoE), White House and DOD. Data is key to ensuring the success of major initiatives including but not limited to Access to Care, National Surveillance and bio-surveillance monitoring, Community Care, Electronic Quality Measures, Flu Measures, Suicide Prevention, EHRM Data Syndication and clinical research projects. Business Intelligence Services Line (BISL) continuously expands the data available to key initiatives and customers through data architecture and domain development. BISL also continuously improves the infrastructure needed to support trillions of rows of data, thousands of databases and hundreds of systems.

Sustainment-Enhancement funding will enable CDW to continue expanding data sets and improving infrastructure to ensure access to data is accurate, fast and reliable. CDW enhancement will manage data as a strategic asset to improve VA's understanding of customers and partners, drive evidence-based decision-making and deliver more effective and efficient solutions.

The modernization will enable CDW to provide time-sensitive data services to Cerner for VA's Electronic Health Record Modernization, DoD and other Federal agencies for bio-surveillance and research (e.g., CDC, Oak Ridge National Labs), as well as the support of major transformational initiatives such as the FMBT. CDW modernization support of Big Data cloud platforms will produce increased volume and diversity of data.

23. VA Informatics and Computing Infrastructure (VINCI)

VINCI provides critical services to day-to-day operations for health research across the VA Services that include access to secured environment, designed to carefully balance the needs of the researchers by providing the resources and tools necessary to conduct studies and analyze data with the VA's requirement to maintain security and privacy of that data. The VINCI environment consists of extensive storage area networks, drives, file shares, databases, a SharePoint farm for collaboration and correspondence sites, Statistical Analysis System (SAS)/Grid for advanced analytics and contains both physical and virtual machines with an extensive collection of software, including Government of the shelf (GOTS), COTS, and homegrown applications. Current demand in VA comprises on average 200+ active health research studies per month.

Enhancement of system infrastructure, software and application support ensures that VINCI can continue to improve researchers' access to VA's data and to facilitate the analysis of that data on the latest version of available tools. This also ensures Veterans' privacy and data security allowing data scientists to have analytical tools and a platform to create additional health data insights.

24. VHA Support Service Center (VSSC) - Replace Old Servers

The funding request for VHA Support Service Center (VSSC) - Replace Old Servers will support the critical refresh of outdated VSSC Premise Servers, and migration of a large number of servers into the cloud environment to enable utilization of the Azure advanced analytics capabilities since the current capabilities are near the end of their life cycle.

25. Medication Order Check Healthcare Application (MOCHA)

Medication Order Check Healthcare Application (MOCHA) will finish preparations for and conduct the move of the MOCHA to a cloud-hosted environment. The end user is the VA clinician ordering medications for Veterans and the VA pharmacist processing those orders. The modernization will result in a lower cost for hosting and further maintenance and repair of the product. The product is currently hosted at the Austin Information Technology Center (AITC) and is not compliant with the cloud first concept of the VA. The current infrastructure supporting the MOCHA exposes a risk of extended downtime. Migration to an enterprise cloud solution will provide a more robust and stable environment with better disaster recovery capabilities for the software. Major cost drivers are migrating to the cloud to provide a more robust and stable environment with better disaster recovery capabilities for the software. If the MOCHA is not funded, the product may not be available for an extended period and the Veteran will be exposed to medication ordering which is not informed by clinical decision support logic built into the software. This could result in patient safety risks.

26. Pharmacy Automated Dispensing Equipment

The Pharmacy Automated Dispensing Equipment (PADE) software connects medication storage equipment to the VA Electronic Health Record. The software allows for real-time inventory control. This project will enhance the Pharmacy Automated Dispensing Equipment software so

that new vendor products can be used at VA. The VA Nurse uses the equipment to retrieve medications as needed in the inpatient healthcare setting. Proper inventory control assures that the medications are available as needed. The PADE project, released at the end of 2016, left several apportioned requirements that have not been developed. These requirements are necessary to fully transition the workflow of inpatient pharmacy automation interfaces to a wholly internal Class I interface. Key areas that are not supported by the release of PADE Phase I include the central pharmacy-based dispensing equipment as the previous project was scoped to focus on ward-based dispensing equipment. By continuing to enhance a VA standard interface for inpatient automation, this effort can reduce or eliminate the cost of and dependency on Class III external interfaces that will be running in parallel to VA software. The major cost driver is software updates to connect this equipment to the VA EHR. These updates will maintain the connection between the vendors' equipment and the VA EHR. If the VA Pharmacy Automated Dispensing Equipment software is not funded, Veterans receiving inpatient care may be delayed in receiving their medications. In addition, the review process will continue to be a manual process resulting in inefficiencies and increase human error.

27. Pharmacy Operational Updates

Pharmacy Operational Updates will provide enhancements to the VA Pharmacy software that will allow interoperability between the pharmacy software at different VA facilities. The enhancement will allow the Veteran to obtain VA-prescribed medications from any VA facility. The end-user of the product will be VA Pharmacists and other pharmacy staff who utilize VA's pharmacy software. The Pharmacist will electronically retrieve the prescription from the originating VA facility and use the existing clinical decision support logic to dispense the medication. This will reduce the wait time for Veterans to receive medications when they are not near their normal VA facility. At present, VA pharmacists filling a prescription written at another VA facility must manually transfer that prescription to their facility. Sustainment-Enhancement funds will provide a more efficient tool to accommodate the Veteran who needs to obtain medication when away from their home facility. It will transform the process used to handle and fill prescriptions by eliminating delays associated with the manual transfer of prescriptions from other VA facilities, allowing the Pharmacist to dedicate more time to caring for the Veteran, and providing better and seamless customer service. Major costs driver is the enhancements to existing functionality to address changes to Federal and State regulations for electronic prescriptions as they occur. The enhancement will provide the capability to accept medications requiring additional controls such as opioids. If this enhancement is not funded, the Veteran will experience delays in obtaining medications from a VA facility other than their home facility. The delay may cause Veterans not to seek needed medications when away from their home facility, which could cause harm to the Veteran.

28. Clinical Trainee Registration and Tracking System (CTRTS)

CTRTS supports the registration, management and tracking of affiliations with 1,800 universities, medical, and other professional schools, and in over 40 different health disciplines. Annually, the Office of Academic Affiliations (OAA) manages appointments for approximately 130 thousand Health Professions Trainees (HPTs) and research professionals. The investment in Clinical Trainee Registration and Tracking System (CTRTS) supports the enhancement of an automated, enterprise-wide electronic system of records to provide additional reporting, tracking and functionality needed to support needs of the Office of Academic Affiliations.

29. Diagnostics Pathology and Laboratory Medicine (PLM)

The Pathology and Lab Medicine Service Lab Information System (LIS) provides Path and Lab related services that will support Clinical and Anatomic Pathology services (e.g., process laboratory orders and providing results) and deliver quality patient care and patient safety to Veterans. VA requires Laboratory Information Systems to streamline the delivery of care and benefits, meet Meaningful Use Standards and interoperability requirements to share data with outside covered entities. The modernization of the VistA Laboratory module is essential to support all VA Physicians, Nurses, PAs, LPNs, Medical Technologists, Medical Technicians, and the entirety of VHA both clinical and operational. It also provides patient privacy, information security and regulatory requirements. The effort will improve and modernize the Laboratory Information Management Systems to effectively providing lab results for accuracy diagnosis which directly impacts Veterans choosing the VA for needed health care. This innovation improves efficiency and effectiveness in providing VHA staff in the areas of both Veteran Experience and Employee Satisfaction. The major costs driver for this product consists of scrum teams and licenses for enhancing the VistA Lab Module, Laboratory System Re-engineering Project (LSRP) Alpha site at the Huntington, WV VA medical center, VA National Lab Quality Management Database, Laboratory Index Management Program and VistA Blood Establishment Computer Software. Without funding, laboratory management cannot see the effects their procedure or policy changes have on their productivity or cost-effectiveness; cannot monitor testing trends or assess outside referral laboratory use; cannot calculate appropriate staffing levels; cannot determine cost per test easily; cannot formulate sound decisions and cannot compare their performance to that of other similar facilities.

30. Research Electronic Data Capture (VA REDCap)

VA Research Electronic Data Capture (VA REDCap) is a secure web application for building and managing online surveys and databases within the VA firewall, hosted on the VA Enterprise cloud. Enhancements will provide the capability to collect data outside of the VA Firewall, to connect to the VINCI Workspace inside the VA Firewall, and to host the system in the secure VAEC to support collection of protected health information (PHI) and potentially identifiable information (PII) via electronic surveys. The system will be configured to allow survey responses without authentication to maintain anonymity and accessibility to Veterans completing electronic surveys, allow use of Computer Adaptive Tests (CATs) and auto-scoring instruments, and allow use of the e-Consent Framework and capture of the Internet Protocol (IP) address of survey participants that certify using the e-Consent process. However, Single Sign On (SSO) with two-factor authentication (2FA) will be required for VA staff logging into the VA REDCap system to create projects, administer surveys, and access data. The major cost driver is migrating to the VA Enterprise Cloud Amazon Web Services (AWS), purchase of contract support team, increased cloud costs to support user demands, and the VA Zero Trust Architecture (ZTA) requirements. If not funded, 90% of VA researchers will continue to struggle to locate tools to support their primary data collection needs.

31. VHA Claims and Appeals

The VHA Claims and Appeals project supports the requirements of The Veterans Appeals Improvement and Modernization Act of 2017 (AMA). As a result of AMA, VHA is required to make significant changes to its claim and appeal processes. Requirements are enterprise level, applying to the entire organization, but existing systems and processes are managed locally, thus

resulting in widespread non-compliance. To ensure that Veterans and other claimants are provided the benefits and processes they're due under the law, VHA must initiate nationwide recordkeeping and analytics via new tools allowing for 1. Enterprise-level workload, quality, and timeliness accuracy, 2. Enterprise-level claim and appeal file retention and access, and 3. An enterprise-level Claims, Appeals, and misdirected benefits mail solution (presently VBA's Centralized Mail Portal). Failure to implement recordkeeping and analytics exposes the Secretary to considerable legal and political risk, as demonstrated by VHA's significant losses before the Court of Appeals for Veterans Claims in recent class-action cases *Wolfe v. Wilkie* (18-6091) and *Beaudette v. McDonough* (20-4961). Class-action litigation losses can disrupt operations for years, and financial impact can run in the billions of dollars and better organizing operations can help avoid such losses or mitigate the losses when realized. Major costs drivers are labor cost of support team members, licenses, and system monitoring tools. If the VHA Claims and Appeals project is not funded, this would result in limited functionality or delays to implementation that would render the project unusable for its intended purposes or potentially make current processes more confusing and dysfunctional, increasing litigation risks to VA.

32. Dental Care Workflow Modernization and Platform Evolution

VA and the VHA Office of Dentistry (OoD) have been highly successful with one of the first-ever fully integrated medical/dental records. Dental Record Manager Plus (DRM+), a product of Document Storage Systems, Inc. (DSS), was first implemented in 2001 as an adjunct application to CPRS and is currently utilized in over 8,200 patient encounters daily in the care of over 600,000 Veterans annually at over 234 sites of care. The purpose of the application is to meet state dental board dental record keeping requirements and enhance dental patient care by focusing on individual care management and overall Veteran population health. Its last significant update was in 2005 with an updated GUI to extend the capture of dental diagnostic, planned care and completed procedures. The current platform is aged and should be enhanced to address standardized workflows, efficient operational practices, population oral health needs, and Veteran's care preferences. The major costs driver is contract labor support which will enhance and improve the operation of the system. Failure to enhance the existing electronic dental record will hamper dental clinics' ability to implement the MISSION Act and the EHRM project efficiently. Failure to provide these improvements puts the provider's dental licenses and potential OIG audit findings at risk. The lack of electronic data interchange is a known risk with community care providers as the VA continues to use an outdated scanning method that is not state of the industry.

33, 34. Clinical Decision Support Platform (CDSP)

CDSP enables the development of workflow-based clinical tools (software apps) that are standards-based, web app-first, a way to future proof CPRS, and a way to bridge clinicians' experiences between CPRS and Cerner. Operationally CDSP also provides VA with the following benefits: (1) The agility to respond to dynamic requirements including those related to emerging pandemics and other rapidly evolving healthcare emergencies, the ability to rapidly spin up new capacity, and rapid API/integration reuse and improved time to value (re-built components to accelerate enhancements). (2) Allow stakeholders to run robust analytics for internal and external facing clinical data. (3) Collaborating patient data from a single point of engagement. (4) Platform encryption, event monitoring and field audit, and protection of sensitive data including PII and PHI. (5) Sandbox test environments for functional, integration, pre-production, and user

acceptance testing. (6) Sustain platform management test and production environments. (7) Manage a Production Release report to track issues. (8) Conduct any necessary design review of configuration and code prior to release, and support implementation best practices, features and functions. (9) Create, maintenance, enforce, and update Standards and Governance for the platform and provide technical and operational support for enhancements. (10) Ensuring streamlined and repeatable methodologies for rapid and successful application test and deployment. (11) Facilitate Governance meetings, outreach and systems integration. (12) Provide license management and end user support. (13) Enforce Quality Assurance in Pre-deployment and Post-production, and for test plans and scripts. (14) Perform risk management activities to maintain Authority to Operate (ATO).

35. Office of Healthcare Innovation and Learning

The Simulation Learning, Evaluation, Assessment and Research Network (SimLEARN) national program office is a premiere clinical education asset for the advancement and innovation of VHA healthcare. SimLEARN supports a high reliability and learning organization through the coordination of all national VHA simulation-based clinical education products and activities supporting enterprise level innovative healthcare solutions. Programs include assessing the technology landscape and identifying solutions that advance the standard of clinical learning and simulation, a robust resuscitation training portfolio and enabling VA facilities to identify and mitigate potential hazards related to the medical emergency care response through focused quality reviews to drive performance improvement at the local level. Modernization funds will provide the ability for the VHA to have a safe, simulated EHRM environment to train personnel, evaluate workflows including a variety of end-to-end processes, and assess test emerging technologies for possible integration. Major costs driver is contract labor support which will modernize and improve the operation of the system. Partial funding would significantly hinder the program's ability to successfully implement highly complex, visible, and impactful initiatives that directly advance multiple VA priorities, as well as satisfy legislative requirements.

36. Telemedicine (Store & Forward)

VA's national Store-and-Forward Telehealth programs acquire and store clinical information (e.g., data, image, sound, and video) that is then forwarded to or retrieved by a provider at another location for clinical evaluation. This service uses a clinical consult pathway and a defined information technology platform to communicate the event/encounter between providers and enables documentation of the event/encounter with the associated clinical evaluation in the patient record. Store and Forward program expansion includes Tele-Eye Care, Tele-Dermatology, Tele-Sleep Study, Tele-Audiology, Tele-Spirometry, and Tele-Wound Care and Tele-Pathology. This enhancement work will improve access; timely and convenient care; care based on the Veterans preferences; and the ability to receive care from their preferred provider, wherever they may be in the VA healthcare system. In addition, it will provide Veterans with personalized, proactive, patient-driven health care and achieve measurable improvements in health outcome. It is critical for the VA to keep pace with growth in Telehealth service capabilities and the resulting increase in clinical encounters. Currently, patient satisfaction levels are high (Home Telehealth 89%; Video Telehealth 90% and Store & Forward Telehealth 88%). Lack of funding for Telehealth would stifle innovation, decrease the experience of telehealth for both Veterans and health care professionals, and adversely impact the accessibility, quality, capacity, and safety of VA health care services.

37. eScreening

eScreening supports access to care by providing the ability for Veterans to provide health data to VA medical staff prior to medical care and treatment. The ability for Veterans to complete screenings in advance of their medical exam will allow the results to be provided to clinicians to inform the areas of focus during the exam. This capability will increase the amount of time that is focused on the exam versus spending time on administrative tasks. Remote monitoring of Veterans includes the use of third part medical devices and services that expands Veterans' access to care by enabling care to be provided at home. The medical data from the devices and services is provided to the VA health care providers for use with monitoring progress and determining treatment plans that could provide better outcomes. eScreening is also used in conjunction with virtual medical appointments increasing the ability to provide medical care to Veterans in rural areas.

38. Status Query and Response Exchange (SQUARES)

Status Query and Response Exchange (SQUARES) is a web-based application that provides VA employees and external homeless service organizations with reliable, detailed information about Veteran eligibility. SQUARES is built on the Salesforce platform and allows users to retrieve reliable Master Patient Index (MPI) data for Veteran eligibility homeless status. VA employees, homelessness program grantees and other external organizations can apply for SQUARES access, streamlining eligibility determinations and delivering care and services to approximately 200,000 homeless Veterans. There were about 1,000 external homelessness agencies across the entire United States; SQUARES enhancements will include migration of the eligibility matrix to VA Profile Service Summary Codes, combination of single search with the new legacy search, change of SQUARES Legacy Veteran Search Service search to send VADIR a set of identifiers to use to go to the backend systems to collect data instead of a set of traits, and add the VADIR data source to the search return payload. SQUARES enhancements will include migration of the eligibility matrix to VA Profile Service Summary Codes, combination of single search with the new legacy search, change of SQUARES Legacy Veteran Search Service search to send VADIR a set of identifiers to use to go to the backend systems to collect data instead of a set of traits, and add the VADIR data source to the search return payload.

39. COVID-19 Patient Manager - Clinical Decision Support

COVID-19 Patient Manager - Clinical Decision Support originated in 2021 as a response to COVID-19. It is a web-based, clinician-facing, decision support tool to assist with evidence-based clinical care that integrates with the VA's electronic health record CPRS. The solution will provide computerized decision support (CDS) to providers to aid in the diagnosis, treatment, and risk mitigation of patients with various clinical conditions. Initial use cases include admission to the hospital and treatment inside the hospital for respiratory infectious disease. The capabilities this tool provides will help VA be proactive in responding to a future pandemic or other rapidly evolving healthcare emergency, rather than reactive. Patient Manager will improve patient outcomes, maintain patient safety, improve efficiency of care delivery, and increase Veteran trust in VA. The funding is requested for the services, cloud credits and software necessary to enhance Patient Manager.

40. GovDelivery Cloud-Based API Solution

GovDelivery Cloud-Based Application Program Interface (API) Solution will improve the Office of the Under Secretary for Health's weekly email communications sent to all VHA employees. The current process limits email size, which hinders the design and flexibility of the messaging. The solution enables VHA to leverage the preexisting and fully funded GovDelivery communications cloud for internal communication and messaging needs. Most importantly, the integration with Microsoft Outlook's Active Directory (AD) client will allow VHA to measure the impact of each message by collecting real-time engagement analytics. Implementation and/or integration of API will automate this process and streamline the data capture process using Active Directory.

41. Check-in Experience (CIE)

The Check-in Experience (CIE) systems provide VHA patients the ability to check in for scheduled health appointments and conduct check-in related activities from personal mobile devices. CIE utilizes a combination of existing systems, including VEText, VA.gov, VistA, and VA Profile and new subsystems to deliver this functionality.

These new subsystems are:

- Check-in Integration Point (CHIP), which is a new back-end subsystem that interfaces with VistA, VA.gov, VA Profile, and other VA-controlled systems to gather appointment and patient-related information and process patient check in activities
- Low Risk One Time Authentication/Authorization (LoROTA), which is a new back-end subsystem that enables patients to access a limited set of low-risk information about their appointment and patient profile upon establishing their identity through use of device- and secrets-based factors

CIE IT will be focused on continuing to enhance and evolve functionality of the Check-in ecosystem that supports over 50 million health care appointments per year to further streamline health care operations, improve patient experience, and reduce costs.

42. Community Care Clinical and Business Intelligence Solution (EPRS)

Community Care Clinical and Business Intelligence Solution Enterprise Program Reporting System (EPRS) that provides automated, accurate, and complete view of data from multiple data sources presented in a single, consolidated data visualization to track on average over 30,000 Veteran claims a month, that allows VA leadership and management to obtain high level performance and success metrics related to the Community Care Network (CCN) contract and Community Care Program (CCP). The solution displays adoption and success metrics from individual VHA Office of Community Care (OCC) projects. EPRS is critical to the Office of Community Care and its ability to oversee the CCN contracts ensuring high-quality provider networks. EPRS is the primary source for receiving and reporting information from CCN contractors regarding their performance of contractual requirements. These funds will be used to provide support for the Attachment U enhancements which are high priority and the Consolidated Data Repository. This effort includes moving the EPRS application from on-prem to cloud with zero trust security framework (VA Platform One). Major costs drivers are labor cost of support team members and cloud costs. If not funded, then these enhancements would not be executable.

43. VA Online Scheduling (VAOS)

VA Online Scheduling (VAOS) allows for self-scheduling and tracking the status of appointment requests, messages, management of telehealth services, and notifications about appointments for

VA facility and Community based Care. VAOS is integral in supporting scheduling for COVID vaccinations nationwide. Enhancements and modernization include integration service redesign, direct booking of Telehealth appointments and integration into VistA Scheduling Enhancement (VSE). If not funded, Veterans will be unable to request and schedule community and facility care which will result in high call volume to staff and schedulers.

44. Web VistA Remote Access Management (WebVRam)

Web VistA Remote Access Management (WebVRAM) provides Telehealth staff remote access to multiple Veterans Health Information Systems and Technology Architecture (VistA) instances in one day or less. With WebVRAM, Telehealth can quickly and strategically deploy staff to provide clinical services and increased capacity to specific geographic locations such as rural and underserved areas; and areas experiencing staff shortages due to national emergencies like the COVID-19 pandemic. WebVRam enhancements will implement enterprise software enhancements for integrations of locally adopted software improvements. Further enhancements will include integration with Integrated Funds Control Accounting and Procurement (IFCAP), Two Factor Authentication, CPRS Photo, Telehealth Records Manager, Essentris, and other business product backlog requirements. Major cost drivers are new feature requests and increases in the user base. Cost drivers for WebVRAM are the increasing rate of user base averaging 4% per month. Without enhancement funding, non-standardized, manual VHA access request processes will continue to delay clinicians' access to software applications at the enterprise level. This will impact the quality, timeliness, and accessibility of Veteran healthcare.

45. OCTO GSA Digital Corps Fellows

OCTO's utilization of the Digital Corps program provides VA with direct day-to-day access to talented early-career technologists, designers, and strategists passionate about solving Veteran problems and addressing their needs. The VA benefits from hearing and incorporating the perspectives and opinions of early-career technologists.

46. ACOE Metrics and Analytics Support

Agile Center of Excellence (ACOE) Metrics and Analytics Support sub-project provides essential services for monitoring and analyzing the status of VA IT products and projects providing product scorecards that furnish operational and Development/Operations (DevOps) metrics, projects, products and business dashboards to senior leaders. This sub-project provides support for Quality Assurance (QA) and reporting functions and without funding there will be no ability to track and monitor IT performance and would put limitations on management oversight for product line management governance. These areas ultimately support all VA projects and products.

This sub-project is needed to provide the necessary services for monitoring and analyzing the status of VA IT products and projects providing product scorecards that furnish operational and Development/Operation (DevOps) metrics, project/product and business dashboards to senior leaders. This sub-project provides support for Quality Assurance (QA) and Reporting functions and without the proper funding, the VA Office of Information Technology would lack the ability to track and monitor IT performance and would put limitations on management oversight for product line management governance of all VA projects and products. The dashboards will provide authoritative, automated reporting with on-demand relevance, value, and efficiency that enables data-driven decision-making across OIT. Each dashboard increases transparency by merging data from authoritative sources (e.g., VA PARS, BTT, VASI, and SNOW, etc.). These metrics will

continue to be used to drive improved performance in support of vision-driven execution and operational excellence.

If this acquisition is not funded, metrics, reporting and analytics on all projects including those at risk could be impacted and thus impact and risk software development, infrastructure, and sustainment efforts that support project/programs which directly support Veterans.

47. VA Enterprise Research and Advisory Services Contract

The VA Enterprise Research and Advisory Subscriptions contract will provide a total of 205 enterprise research and advisory teams subscription licenses to various VA administrations, organizations, and staff offices. This will include online research content libraries/repositories, end-user training and training material, briefings/webinars, and professional events and conferences. It will also include professional advice or information gathered through research in the domains of Healthcare, IT, Government, and Business Management.

48. OSS Support Contract

Office of Strategic Sourcing (OSS) Contract and Operations Management (COM) Office of Enterprise Program Services (OEPS) establishes and manages the Enterprise Software Asset Management process that governs the Microsoft Enterprise Agreement (EA), as well as other critical enterprise agreements that are foundational to VA operations. This provides support in developing a governance framework and set of processes for strategically tracking and managing IT software assets throughout their life cycle, designing process workflows and other process artifacts for performing associated activities, and providing the enterprise agreement monitoring and reporting necessary to meet the three priorities listed in the President's Management agenda: IT Modernization, Data Accountability and Transparency and Workforce of the Future.

Impact: If OSS Support Contracts is not funded, Office of Enterprise Program Services (OEPS) will not have the critical resources necessary to develop a governance framework and set of processes for strategically tracking and managing IT software assets throughout their life cycle, designing process workflows and other process artifacts for performing associated activities, and providing the enterprise agreement monitoring and reporting necessary to monitor, manage, upgrade, and replace legacy systems and software, move and re-architect systems for the cloud, utilize modern tools and methods such as Infrastructure as Code, APIs, and Containerization and free up resources to eliminate technical debt in the infrastructure while providing greater transparency and accountability.

49. Administrative Support - Strategic Sourcing

Administrative Support allows OSS to participate in and engage in business networking events between procurement-ready suppliers and buyers, also known as Procurement Decision Makers (PDMs). It focuses on procurement opportunities pertaining to Information Technology. It provides OSS access to nationwide acquisition opportunities through tailored, scheduled activities. It offers market research opportunities through engagement with vendors offering the latest innovations in products and services and networking. If not funded, OSS would potentially lose the ability to participate in engagements such as NVSBE and the HIMSS Global Health Conference, that offer opportunities to engage with vendors offering the latest innovations in products and services.

50. Quality Continuous Improvement Organization (QCIO)

Quality Continuous Improvement Organization (QCIO) promotes and assists with organizational change and business process reengineering efforts. It will also provide solutions for record management and transition to electronic records, improve overall customer support from CRR in alignment with VA Strategic Plan, and provide technical and product solution support for VA IT mandated audits (FISMA, IRS, FMFIA). OIT's Office of Compliance, Risk, and Remediation (CRR) Service, QCIO is responsible for the five functional areas listed above and requires contract support to supplement government resources in order to meet the business need of OIT for BPR and Facilitation support, the needs for VA for Records Management and associated solution (RM-MKR), the needs for CRR Web, SharePoint, and Lightweight solution development.

QCIO provides products and services related to Process & Knowledge Management, process standardization across OIT, facilitation services (breakouts, working groups and Lean Kaizen events), Web, SharePoint (automated and custom solutions) and Database services (VA/OIT/CRR), support products such as OIT's Process Asset Library (PAL), OIT's Meta Knowledge Repository (MKR), support Solution Development for OIT FISMA Audit Portal (AP) and CRR products, and support OIT Records Management (RM) program. MYP Playground QCIO provides products and services related to Process & Knowledge Management, process standardization across OIT, facilitation services, Web, SharePoint and Database services (VA/OIT/CRR), support products such as OIT's Process Asset Library (PAL), OIT's Meta Knowledge Repository (MKR), support Solution Development for OIT FISMA Audit Portal (AP), and support OIT Records Management (RM) program.

Family members and Veterans are directly impacted if not fully funded. OIT CRR QCIO is unable or challenged to maintain RM-MKR as used by FOIA, legal requests, congressional inquiry, or to meet suspense or requirements in the specific areas listed above.

51. Federally Funded Research and Development Centers (FFRDC) Support

FFRDC effort requires the FFRDC's ability to apply technical subject matter expertise with independence that will provide conflict-free analysis from working across the VHA business line, commercial contractors, and DoD when providing recommendations to CRR leadership.

Outcomes for FFRDC includes:

- Integrating the major priority initiatives for design and development of new capabilities and to seamlessly integrate the Information Management and Technology (IM/IT) functions of VA systems.
- Recommendations to the Office of Technical Integration (OTI) teams for executing and updating the newly developed OTI strategic plan, providing metrics for achieving high-level goals, and strategic and operational development recommendations and decision briefs.

The FFRDC contract is critical to speed the organizational change and maturity required for CRR to achieve a high level of performance in its new and expanded mission role which is extending across the VA IT enterprise. This business problem requires FFRDC's cross-VA strategic relationships with multiple OIT organizations, OEI and VA Administrations, necessitate broad strategic and technical skills, independent conflict-free advice, and access to VA proprietary planning and budgets. FFRDC recommendations may influence the strategic direction (e.g., vision, goals, outcomes, planned IT investments) and accelerate strategic implementation in support of

the VA IT enterprise. It is therefore imperative that the FFRDC be used as an “honest broker” for strategic advice to ensure freedom from potential commercial interests. The FFRDC brings extensive VA/OIT-wide domain knowledge in critical areas (e.g., VA Administrations, OEI (Mission Act), Product Line Management, VA Enterprise Risk Profile, Quadrennial Review, Presidents Management Agenda, PPBE, Strategic Planning Guidance). The FFRDC domain knowledge, forward-looking expertise, access to proven Government solutions and associated personnel; and access to custom research connecting government, academia and industry provide critical assurance for achieving sought after mission improvements.

If not funded, the risk of not operating in an optimal work environment in terms of leveraging technological advances, change management, industry networking and thought leadership.

52. CRR Federally Funded Research and Development Corporation (FFRDC) Support

This sub-project supports CIO efforts to achieve interoperability and enable seamless delivery of IT services in support of Veterans, leadership and VA staff. Additionally, it supports VA's understanding of interoperability (i.e., foundational, structural, semantic, organizational) and facilitating alignment of resources and information sharing towards evolving the agency's interoperability capabilities. This sub-project is vital for 1) Supporting the VA Interoperability Leadership Team and the VA Interoperability Strategic Plan (updated on a yearly basis); 2) Accelerating interoperability progress across the VA through the application of knowledge management best practices, stakeholder engagement and interdepartmental processes; 3) Assessing and measuring VA's interoperability across key systems and Priority Initiatives; 4) Performing interoperability analysis and recommendations that support improved outcomes; 5) Ensuring that elements of the Veteran journey are seamlessly enabled through interoperability architecture; and 6) Serving as the champion for the efficient and effective use of VA middleware solutions and ensuring that funding for middleware is adequately considered in the IT budgeting process.

CRR FFRDC supports the following:

- CIO efforts to achieve interoperability and enable seamless delivery of IT services in support of Veterans, leadership, and VA staff. Supporting VA's understanding of interoperability (i.e., foundational, structural, semantic, organizational) and facilitating alignment of resources and information sharing towards evolving the agency's interoperability capabilities.
- VA Interoperability Leadership Team and the VA Interoperability Strategic Plan
- Accelerating interoperability progress across the VA through the application of knowledge management best practices, stakeholder engagement and interdepartmental processes.
- Assessing and measuring VA's interoperability across key systems and Priority Initiatives.
- Performing interoperability analysis and recommendations that support improved outcomes.

CRR FFRDC support serves as the intermediary between OIT and VA product/business owners for priority initiatives to ensure compliance with OIT policies and processes with the goal of meeting VA stakeholder needs. It is also important for 1) Providing an unbiased, objective view to resolve competing objectives/viewpoints and helping to ensure decisions are made with appropriate informed leadership input; 2) Monitoring innovations that could accelerate OIT's capabilities to support its goals and strategies relating to integration; 3) Coordinating, tracking, and assessing agency and interagency activities to identify issues, new requirements or opportunities for coordination and alignment. Supporting long-term IT integration planning efforts

that align with VA Priority Initiative efforts will allow the following: 4) Enabling an integrated modernization strategy that achieves agency objectives by promoting interoperability and helping to improve seamless services for Veterans; 5) Providing expertise and guidance to help stakeholders execute VA's enterprise integration vision; 6) Supporting the execution of technical integration within VA with a goal of establishing and maintaining a VA enterprise system integration (SoS) strategy through application of best practices, expertise and guidance; 7) Providing technical integration guidance across modernization initiatives within VHA, VBA, NCA and VACO to meet the need of the Veteran and VA's mission and; 8) Providing technical integration architecture, analysis and recommendations that support improved technical outcomes. If not funded, risk of not operating in an optimal work environment in terms of leveraging technological advances, change management, industry networking and thought leadership.

53. Gartner Support for Compliance, Risk and Remediation (CRR)

VA OIT CRR requires the purchase of Gartner Software Licenses. This sub-project stabilizes core processes, institutionalizes new capabilities, and eliminates material weakness. The sub project is critical to the speed and organizational change and maturity required for the CRR to achieve a high level of performance in its new and expanded mission roles. If unfunded, senior leadership will be unable to conduct long range planning, leverage industry best practices and facilitate organizational evolution. Senior leadership will be unable to conduct long range planning, leverage industry best practices and facilitate organizational evolution.

54. Office of Technical Integration (OTI) Federally Funded Research and Development Corporation (FFRDC)

This contract provides OTI with expertise and guidance to help stakeholders execute VA's enterprise integration vision. It is vital for: 1) Supporting the execution of technical integration within VA with a goal of establishing and maintaining a VA enterprise system integration strategy through application of best practices, expertise, and guidance; 2) Providing technical integration expertise and guidance across modernization initiatives within VHA, VBA, NCA and to meet the need of the Veteran and VA's mission; 3) Providing technical integration analysis and recommendations that support improved technical outcomes; and 4) Identifying enterprise-level and priority initiative inter-program system requirements as it relates to integration.

55. OTI Support Contract Mantech

This effort provides expertise and guidance to help stakeholders execute VA's enterprise integration vision and supports the execution of technical integration within VA with a goal of establishing and maintaining a VA enterprise system integration strategy. It reinforces a commitment to a culture of interoperability that promotes a consistently positive and seamless Veteran experience with VA. By aligning business, data, and information, systems and technology VA ensures the right information and services securely and reliably reach the right person, at the right time and in the best manner to make timely, informed decisions and to enable actions. Funding will support the Interoperability framework and mission.

56. Enterprise IT Support Contracts - OIT Administration Support

Enterprise IT Support Contracts provides the Very Small Aperture Terminal (VSAT) hubs, VSAT terminals, First- Responder Units (FRU) operating on the same space segment (Ku-Band transponder bandwidth), and a terrestrial segment (teleport collocation services) to support VA

continuity of operations for data, voice, and video communications. VHA uses an estimated 105 of the 229 active VSAT terminals daily for direct patient care and benefits counselling to support Veteran care in rural and highly rural areas via Mobile Vet Centers, Mobile Pharmacy services, Mobile Mammography services, and Mobile clinics all connected to the VA network through their onboard VSAT equipment.

If Enterprise IT Support Contracts is not funded, the vehicle mounted VSAT units used to support Veteran care in rural and highly rural areas via Mobile Vet Centers, Mobile Pharmacy services, Mobile Mammography services, and Mobile clinics all connected to the VA network through their onboard VSAT equipment will degrade and cease to operate – eliminating VA’s ability to provide invaluable clinical care services to Veterans. Additionally, if not funded, VA will no longer be in compliance with the Federal Emergency Management Agency (FEMA) Federal Continuity Directives (FCD-1 and FCD-2) requiring all Federal executive branch departments to be able to perform all National Essential Functions (NEFs) during all hazards, emergencies or situations that may disrupt normal operations.

57. IT BIOS - Client Management Services (Portfolio Planning and Tracking for Cleland Dole/FITARA Compliance)

Client Management Services buys resources to respond to Cleland Dole mandates for Investment Management and reporting, and compliance with FITARA. It also covers continuing support to Pact Act and Investment Development Teams to develop business cases, acquisition strategies, solutions and business outcomes and measurements for major IT initiatives such as Contact Center Modernization, Legal Services, Appeals, and HR Lifecycle. Client Management Services ensures alignment of investments to agency strategy and direct linkage to Veteran benefits. Includes defining desired business outcomes, developing strategic roadmaps that depict how IT investments will achieve those outcomes, and instituting regular reviews by OIT leadership examining acquisition strategies, alignment to strategy, and future technical architecture, risk, total cost of ownership, and return on investment in terms of benefit to Veterans.

Without this funding there will be no additional support to PACT ACT/Benefits Modernization team. Proposed investments will not have consistent process for understanding business requirements, development of acquisition strategies, solution trade-offs, and alignment to architecture. Decision-making for future investments will continue to suffer for lack of rigor in creating investment proposals and program plans, and outcomes may not be clearly defined or measured with business partner concurrence.

58. IT BIOS - Replacement Contract Funding (Portfolio Outcome Planning and Management)

Buys support to ITAMs in building outcome and capability roadmaps, vision and strategy, metrics to determine ROI, and support demand shaping. Implementing a single authoritative source for investment portfolio data conforming to Cleland Dole, FITARA, OMB A-130, A-11 and 15-14 guidance. Pilot in ServiceNow Application Portfolio Management module will allow consistent and tailored views of decision data for all stakeholders, allows prioritization of projects within a portfolio, catalogs dependencies and relationships between investments, triggers management review for FITARA and other requirements and provides visibility into IT spending in every

category of TBM. Will integrate planning data with execution data for visibility into full life cycle of investments and achievement of business outcomes.

Investment Portfolio data will be uneven and not integrated across the enterprise. Decision data will continue to be cobbled together for each briefing, taking time and effort that could be spent with business partners building relationships and understanding requirements. OIT will not gain the abilities to look for duplicate requirements across portfolios, to track business outcomes and veteran impacts, to anticipate FITARA decisions, or to run scenarios for 1:N prioritization.

59. Digital Veterans Platform (DVP)

Digital Veterans Platform (DVP, aka Lighthouse) enables efficient, fast, and secure access to Application Programming Interfaces (APIs) in support of all VA administrations and systems, enabling VA teams to build high-quality, modern APIs in a cost-effective and timely manner for both VA and 3rd-party developed applications. Enhancement funding will be used to obtain additional support, which will support additional growth in usage of applications as requirements evolve with the business needs of those applications as well as support new applications coming into production. If not funded, 15 API teams will not be onboarded to use the Delivery Infrastructure to build and modernize APIs, resulting in longer, less secure development and ATO timelines.

Appendix A: Development Subaccount

Information Technology						
Development Activities Highlights						
(\$s in Thousands)						
	2022	2022/2023	2023		2024	2023-2024
	Actual	Year 2 of 2- year Availability	Request	Enacted	Request	Increase/ Decrease
Obligations by Program Activities						
Clinical Enabling Capabilities	-	-	-	-	53,656	53,656
Health Business Services	-	-	-	-	14,694	14,694
Health Business Services - PACT Act	-	-	-	-	5,500	5,500
Care Coverage Capabilities	-	-	-	-	13,608	13,608
Clinical Care Capabilities	-	-	-	-	7,949	7,949
Clinical Care Capabilities - PACT Act	-	-	-	-	5,585	5,585
Health IT Services	-	-	-	-	2,000	2,000
Patient Management Capabilities	-	-	-	-	559	559
Benefits Services	-	-	-	-	16,000	16,000
Veteran Experience Services	-	-	-	-	14,184	14,184
Veteran Experience Services - PACT Act	-	-	-	-	5,319	5,319
Corporate Services	-	-	-	-	3,000	3,000
Health Management Platform	70,526	4,429	70,736	70,736	-	(70,736)
Clinical Applications	71,820	35,963	43,277	43,277	-	(43,277)
Health Research and Development	8,592	104	5,209	5,209	-	(5,209)
Benefits Systems	87,670	1,339	20,727	20,727	-	(20,727)
Benefits Systems - PACT Act	-	6,250	-	2,000	-	(2,000)
Other IT Systems	3,438	-	2,143	2,143	-	(2,143)
Cyber Security	11,200	1	-	-	-	-
Information/Infrastructure Management	8,417	-	-	-	-	-
Memorial Affairs	9,435	-	-	-	-	-
Total Direct Obligations by Program Activities	\$271,099	\$48,086	\$142,092	\$144,092	\$142,054	(2,038)
Obligations by Funding Sources						
Appropriation	271,099	41,836	142,092	142,092	125,650	(16,442)
PACT Act	-	6,250	-	2,000	16,404	14,404
Total Direct Obligations by Funding Sources	271,099	48,086	142,092	144,092	142,054	(2,038)
Total Development Obligations	\$271,099	48,086	\$142,092	\$144,092	142,054	(2,038)

Appendix B: Congressional Report Summary

Information and Technology Total Budget Authority (\$s in Thousands)						
	2022/2023	2022/2023	2023		2024	2023-2024
	Actual	Year 2 of 2-year Availability	Request	Enacted	Request	Increase / Decrease
Development						
Clinical Enabling Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 53,656	\$ 53,656
Health Business Services	\$ -	\$ -	\$ -	\$ -	\$ 14,694	\$ 14,694
Health Business Services - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 5,500	\$ 5,500
Care Coverage Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 13,608	\$ 13,608
Clinical Care Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 7,949	\$ 7,949
Clinical Care Capabilities - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 5,585	\$ 5,585
Health IT Services	\$ -	\$ -	\$ -	\$ -	\$ 2,000	\$ 2,000
Patient Management Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 559	\$ 559
Benefits Services	\$ -	\$ -	\$ -	\$ -	\$ 16,000	\$ 16,000
Veteran Experience Services	\$ -	\$ -	\$ -	\$ -	\$ 14,184	\$ 14,184
Veteran Experience Services - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 5,319	\$ 5,319
Corporate Services	\$ -	\$ -	\$ -	\$ -	\$ 3,000	\$ 3,000
Health Management Platform	\$ 70,526	\$ 4,429	\$ 70,736	\$ 70,736	\$ -	\$ (70,736)
Clinical Applications	\$ 71,820	\$ 35,963	\$ 43,277	\$ 43,277	\$ -	\$ (43,277)
Health Research and Development	\$ 8,592	\$ 104	\$ 5,209	\$ 5,209	\$ -	\$ (5,209)
Benefits Systems	\$ 87,670	\$ 1,339	\$ 20,727	\$ 20,727	\$ -	\$ (20,727)
Benefits Systems - PACT Act	\$ -	\$ 6,250	\$ -	\$ 2,000	\$ -	\$ (2,000)
Other IT Systems	\$ 3,438	\$ -	\$ 2,143	\$ 2,143	\$ -	\$ (2,143)
Cyber Security	\$ 11,200	\$ 1	\$ -	\$ -	\$ -	\$ -
Information/Infrastructure Management	\$ 8,417	\$ -	\$ -	\$ -	\$ -	\$ -
Memorial Affairs	\$ 9,435	\$ -	\$ -	\$ -	\$ -	\$ -
Development Subtotal	\$ 271,099	\$ 48,086	\$ 142,092	\$ 144,092	\$ 142,054	\$ (2,038)

Information and Technology Total Budget Authority - continued (\$\$ in Thousands)						
	2022/2023	2022/2023	2023		2024	2023-2024
	Actual	Year 2 of 2-year Availability	Request	Enacted	Request	Increase / Decrease
Sustainment /O&M						
End User Experience	\$ -	\$ -	\$ -	\$ -	\$ 658,942	\$ 658,942
End User Experience - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 88,812	\$ 88,812
Solutions Delivery	\$ -	\$ -	\$ -	\$ -	\$ 589,646	\$ 589,646
Solutions Delivery - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 84,166	\$ 84,166
Cyber Security	\$ -	\$ -	\$ -	\$ -	\$ 560,272	\$ 560,272
Cyber Security - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 35,742	\$ 35,742
Infrastructure Operations	\$ -	\$ -	\$ -	\$ -	\$ 556,112	\$ 556,112
Infrastructure Operations - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 99,353	\$ 99,353
Health IT Services	\$ -	\$ -	\$ -	\$ -	\$ 545,892	\$ 545,892
Health IT Services - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 21,160	\$ 21,160
Product Development and Engineering	\$ -	\$ -	\$ -	\$ -	\$ 354,832	\$ 354,832
Product Development and Engineering - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 76,831	\$ 76,831
Clinical Enabling Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 338,117	\$ 338,117
Clinical Enabling Capabilities - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 50,178	\$ 50,178
Corporate Services	\$ -	\$ -	\$ -	\$ -	\$ 289,051	\$ 289,051
OIT Operation Support Services	\$ -	\$ -	\$ -	\$ -	\$ 247,749	\$ 247,749
OIT Operation Support Services - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 2,742	\$ 2,742
Veteran Experience Services	\$ -	\$ -	\$ -	\$ -	\$ 157,145	\$ 157,145
Veteran Experience Services - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 309,385	\$ 309,385
Benefits Services	\$ -	\$ -	\$ -	\$ -	\$ 138,485	\$ 138,485
Benefits Services - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 432,562	\$ 432,562
Care Coverage Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 92,327	\$ 92,327
Health Business Services	\$ -	\$ -	\$ -	\$ -	\$ 53,934	\$ 53,934
Health Business Services - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 23,130	\$ 23,130
Clinical Care Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 42,211	\$ 42,211
Memorial Services	\$ -	\$ -	\$ -	\$ -	\$ 27,938	\$ 27,938
Memorial Services - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 2,326	\$ 2,326
Patient Management Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 15,720	\$ 15,720

Information and Technology						
Total Budget Authority - continued						
(\$s in Thousands)						
	2022/2023	2022/2023	2023		2024	2023-2024
	Actual	Year 2 of 2-year Availability	Request	Enacted	Request	Increase / Decrease
Sustainment /O&M						
Enterprise Operations and Maintenance	\$ 1,605,732	\$ 649	\$ 2,389,681	\$ 2,389,681	\$ -	\$ (2,389,681)
Enterprise Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section 8002)	\$ 486,935	\$ 134,033	\$ 495,020	\$ 495,020	\$ -	\$ (495,020)
Enterprise Operations and Maintenance - Technology Modernization Fund (P.L. 117-2 Section 4011)	\$ -	\$ 5,895	\$ -	\$ 4,655	\$ -	\$ (4,655)
Enterprise Operations and Maintenance - PACT Act	\$ -	\$ 28,871	\$ -	\$ 275,839	\$ -	\$ (275,839)
Health Operations and Maintenance	\$ 747,730	\$ -	\$ 929,419	\$ 929,419	\$ -	\$ (929,419)
Health Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section 8002)	\$ 74,027	\$ 5,153	\$ 47,319	\$ 47,319	\$ -	\$ (47,319)
Health Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section 8003)	\$ 23,895	\$ -	\$ -	\$ -	\$ -	\$ -
Health Operations and Maintenance -PACT Act	\$ -	\$ 7,451	\$ -	\$ 53,428	\$ -	\$ (53,428)
Corporate Operations and Maintenance	\$ 528,748	\$ -	\$ 439,642	\$ 439,642	\$ -	\$ (439,642)
Corporate Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section 8002)	\$ 32,579	\$ -	\$ -	\$ -	\$ -	\$ -
Corproate Operations and Maintenance - PACT Act	\$ -	\$ -	\$ -	\$ 19,000	\$ -	\$ (19,000)
Benefits Operations and Maintenance	\$ 238,004	\$ -	\$ 342,937	\$ 342,937	\$ -	\$ (342,937)
Benefits Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section 8002)	\$ 74,796	\$ -	\$ 87,719	\$ 87,719	\$ -	\$ (87,719)
Benefits Operations and Maintenance - VHA Transfer (P.L. 117-43 Section 151)	\$ 9,493	\$ -	\$ -	\$ -	\$ -	\$ -
Benefits Operations and Maintenance - PACT Act	\$ -	\$ 75,594	\$ -	\$ 226,245	\$ -	\$ (226,245)
Memorial Operations and Maintenance	\$ 22,061	\$ -	\$ 44,000	\$ 44,000	\$ -	\$ (44,000)
Memorial Operations and Maintenance - PACT Act	\$ -	\$ 1,140	\$ -	\$ -	\$ -	\$ -
Sustainment SubTotal	\$ 3,844,000	\$ 258,785	\$ 4,775,735	\$ 5,354,903	\$ 5,894,760	\$ 539,856

Information and Technology Total Budget Authority - continued (Ss in Thousands)						
	2022/2023	2022/2023	2023		2024	2023-2024
	Actual	Year 2 of 2-year Availability	Request	Enacted	Request	Increase / Decrease
Development	\$ 271,099	\$ 41,836	\$ 142,092	\$ 142,092	\$ 125,650	\$ (16,442)
Development - PACT Act	\$ -	\$ 6,250	\$ -	\$ 2,000	\$ 16,404	\$ 14,404
Sustainment/O&M	\$ 3,142,275	\$ 649	\$ 4,145,678	\$ 4,145,678	\$ 4,668,373	\$ 522,695
Sustainment/O&M - American Rescue Plan Act (P.L. 117-2 Section 8002)	\$ 668,336	\$ 139,185	\$ 630,057	\$ 630,057	\$ -	\$ (630,057)
Sustainment/O&M - American Rescue Plan Act (P.L. 117-2 Section 8003)	\$ 23,895	\$ -	\$ -	\$ -	\$ -	\$ -
Sustainment/O&M - Technology Modernization Fund (P.L. 117-2 Section 4011)	\$ -	\$ 5,895	\$ -	\$ 4,655	\$ -	\$ (4,655)
Sustainment/O&M - VHA Transfer (P.L. 117-43 Section 151)	\$ 9,493	\$ -	\$ -	\$ -	\$ -	\$ -
Sustainment/O&M - PACT Act	\$ -	\$ 113,056	\$ -	\$ 574,513	\$ 1,226,387	\$ 651,874
Staffing and Administration	\$ 1,414,295	\$ 5,312	\$ 1,494,230	\$ 1,494,230	\$ 1,606,977	\$ 112,747
Staffing and Administration - PACT Act	\$ -	\$ 3,747	\$ -	\$ 8,877	\$ 70,819	\$ 61,942
OEF/OIF Supplemental (P.L. 110-28)	\$ 510	\$ 2,061	\$ -	\$ -	\$ -	\$ -
Subtotal	\$ 5,529,903	\$ 317,992	\$ 6,412,057	\$ 7,002,101	\$ 7,714,610	\$ 712,509
VACAA Section 801	\$ 60	\$ 1,026	\$ -	\$ -	\$ -	\$ -
Recurring Expenses Transformational Fund	\$ 625,309	\$ 44,691	\$ -	\$ -	\$ -	\$ -
Total	\$ 6,155,271	\$ 363,709	\$ 6,412,057	\$ 7,002,101	\$ 7,714,610	\$ 712,509
Reconciliation (SF-133) report						
Reimbursable Obligations	\$ 118,385	\$ -	\$ -	\$ -	\$ -	\$ -
Prior Year Recoveries	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Prior Year Recoveries - OEF/OIF Supplemental (P.L. 110-28)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Recoveries - VACAA 801	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total	\$ 118,385	\$ -	\$ -	\$ -	\$ -	\$ -
Grand Total	\$ 6,273,656	\$ 363,709	\$ 6,412,057	\$ 7,002,101	\$ 7,714,610	\$ 712,509

Note: In 2022, \$70.5M was obligated from the Staffing and Administration sub-account to fund Cyber Security CRISP Operations Sustainment

Appendix C: Congressional Report Details

Development

Information and Technology Development Detail						
(\$s in Thousands)						
	2022/2023	2022/2023	2023		2024	2023-2024
	Actual	Year 2 of 2-year Availability	Request	Enacted	Request	Increase / Decrease
Clinical Enabling Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 53,656	\$ 53,656
Health Delivery Support	\$ -	\$ -	\$ -	\$ -	\$ 23,599	\$ 23,599
Operational Support	\$ -	\$ -	\$ -	\$ -	\$ 23,137	\$ 23,137
Health Administration	\$ -	\$ -	\$ -	\$ -	\$ 6,920	\$ 6,920
Health Business Services	\$ -	\$ -	\$ -	\$ -	\$ 14,694	\$ 14,694
Common Health Care Workflows	\$ -	\$ -	\$ -	\$ -	\$ 7,594	\$ 7,594
Common Health Care Specific Services	\$ -	\$ -	\$ -	\$ -	\$ 7,100	\$ 7,100
Health Business Services - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 5,500	\$ 5,500
Common Health Care Specific Services	\$ -	\$ -	\$ -	\$ -	\$ 5,500	\$ 5,500
Care Coverage Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 13,608	\$ 13,608
Care Coverage Services	\$ -	\$ -	\$ -	\$ -	\$ 13,608	\$ 13,608
Clinical Care Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 7,949	\$ 7,949
Clinical Care Services	\$ -	\$ -	\$ -	\$ -	\$ 7,949	\$ 7,949
Clinical Care Capabilities - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 5,585	\$ 5,585
Clinical Care Services	\$ -	\$ -	\$ -	\$ -	\$ 5,585	\$ 5,585
Health IT Services	\$ -	\$ -	\$ -	\$ -	\$ 2,000	\$ 2,000
Enterprise IT Infrastructure	\$ -	\$ -	\$ -	\$ -	\$ 2,000	\$ 2,000
Patient Management Capabilities	\$ -	\$ -	\$ -	\$ -	\$ 559	\$ 559
Patient Management Services	\$ -	\$ -	\$ -	\$ -	\$ 559	\$ 559
Benefits Services	\$ -	\$ -	\$ -	\$ -	\$ 16,000	\$ 16,000
Loan Guaranty	\$ -	\$ -	\$ -	\$ -	\$ 16,000	\$ 16,000
Veteran Experience Services	\$ -	\$ -	\$ -	\$ -	\$ 14,184	\$ 14,184
Digital Experience	\$ -	\$ -	\$ -	\$ -	\$ 9,511	\$ 9,511
Customer Data Management Experience	\$ -	\$ -	\$ -	\$ -	\$ 4,673	\$ 4,673
Veteran Experience Services - PACT Act	\$ -	\$ -	\$ 2,023	\$ -	\$ 5,319	\$ 5,319
Digital Experience	\$ -	\$ -	\$ -	\$ -	\$ 5,319	\$ 5,319

Information and Technology Development Detail (cont.)						
(\$s in Thousands)						
	2022/2023	2022/2023	2023		2024	2023-2024
	Actual	Year 2 of 2-year Availability	Request	Enacted	Request	Increase / Decrease
Corporate Services	\$ -	\$ -	\$ -	\$ -	\$ 3,000	\$ 3,000
Financial Management Services	\$ -	\$ -	\$ -	\$ -	\$ 3,000	\$ 3,000
Health Management Platform	\$ 70,526	\$ 4,429	\$ 70,736	\$ 70,736	\$ -	\$ (70,736)
Community Care	\$ 35,614	\$ 14	\$ 37,879	\$ 37,879	\$ -	\$ (37,879)
Pharmacy	\$ 2,000	\$ -	\$ -	\$ -	\$ -	\$ -
Digital Health Platform	\$ 12,175	\$ -	\$ -	\$ -	\$ -	\$ -
Patient Records [System (CPRS)]	\$ 7,070	\$ 4,415	\$ 9,200	\$ 9,200	\$ -	\$ (9,200)
Telehealth Services	\$ 6,781	\$ -	\$ 13,657	\$ 13,657	\$ -	\$ (13,657)
Purchased Care	\$ 6,886	\$ -	\$ 10,000	\$ 10,000	\$ -	\$ (10,000)
Clinical Applications	\$ 71,820	\$ 35,963	\$ 43,277	\$ 43,277	\$ -	\$ (43,277)
Supply Chain Management	\$ 42,294	\$ 35,934	\$ 33,223	\$ 33,223	\$ -	\$ (33,223)
Health Data Interoperability	\$ 4,142	\$ -	\$ -	\$ -	\$ -	\$ -
Healthcare Administration Systems	\$ 20,697	\$ 21	\$ 10,054	\$ 10,054	\$ -	\$ (10,054)
My HealtheVet	\$ 4,687	\$ 8	\$ -	\$ -	\$ -	\$ -
Health Research and Development	\$ 8,592	\$ 104	\$ 5,209	\$ 5,209	\$ -	\$ (5,209)
Research	\$ 8,592	\$ 104	\$ 5,209	\$ 5,209	\$ -	\$ (5,209)
Benefits Systems	\$ 87,670	\$ 1,339	\$ 20,727	\$ 20,727	\$ -	\$ (20,727)
Other Benefits IT Systems	\$ -	\$ -	\$ 8,000	\$ 8,000	\$ -	\$ (8,000)
Veterans Customer Experience (VCE)	\$ 10,097	\$ -	\$ 7,222	\$ 7,222	\$ -	\$ (7,222)
Benefits Systems	\$ 9,896	\$ -	\$ 5,505	\$ 5,505	\$ -	\$ (5,505)
Education Benefits	\$ 48,661	\$ 1,339	\$ -	\$ -	\$ -	\$ -
Veterans Benefits Management	\$ 14,575	\$ -	\$ -	\$ -	\$ -	\$ -
Colmery Act	\$ 965	\$ -	\$ -	\$ -	\$ -	\$ -
Benefits Appeals	\$ 3,476	\$ -	\$ -	\$ -	\$ -	\$ -
Benefits Systems - PACT Act	\$ -	\$ 6,250	\$ -	\$ 2,000	\$ -	\$ (2,000)
Veterans Customer Experience (VCE)	\$ -	\$ 3,750	\$ -	\$ 2,000	\$ -	\$ (2,000)
Veterans Benefits Management	\$ -	\$ 2,500	\$ -	\$ -	\$ -	\$ -
Other IT Systems	\$ 3,438	\$ -	\$ 2,143	\$ 2,143	\$ -	\$ (2,143)
Financial and Acquisition Management Modernization	\$ 802	\$ -	\$ -	\$ -	\$ -	\$ -
Human Resources	\$ 489	\$ -	\$ 2,143	\$ 2,143	\$ -	\$ (2,143)
General Counsel	\$ 2,147	\$ -	\$ -	\$ -	\$ -	\$ -
Cyber Security	\$ 11,200	\$ 1	\$ -	\$ -	\$ -	\$ -
Cyber Security	\$ 11,200	\$ 1	\$ -	\$ -	\$ -	\$ -
Information/Infrastructure Management	\$ 8,417	\$ -	\$ -	\$ -	\$ -	\$ -
Data Integration and Management	\$ 8,417	\$ -	\$ -	\$ -	\$ -	\$ -
Memorial Affairs	\$ 9,435	\$ -	\$ -	\$ -	\$ -	\$ -
Memorials Automation	\$ 9,435	\$ -	\$ -	\$ -	\$ -	\$ -
Grand Total	\$ 271,099	\$ 48,086	\$ 142,092	\$ 144,092	\$ 142,054	\$ (2,038)

Appendix D: Operations and Maintenance Categories

Sustainment - Enhancement	Upgrades to new versions of software (SW) including operating systems, deployment of new hardware (HW) platforms, which are significantly different from current operational HW where new skills, equipment and software may be needed
Sustainment - Modernization	Migrations to new computing platforms, e.g., virtualization, cloud computing migrations where new skills, equipment and software may be needed to operate the application, system or infrastructure
Sustainment - Steady - State	Operations & Maintenance Costs refers to the expenses required to operate and maintain an IT asset that is operating in a production environment. O&M costs include costs associated with operations, maintenance activity, and maintenance projects needed to sustain the IT asset at the current capability and performance levels. It includes Federal and contracted labor costs, corrective hardware and software maintenance, voice and data communications maintenance and service, replacement of broken or obsolete IT equipment, overhead costs, business operations and commercial services costs, and costs for the disposal of an asset

Appendix E: Operations and Maintenance Subaccount

Information Technology					
Operations and Maintenance Highlights					
(\$s in Thousands)					
2022	2022/2023	2023		2024	2023-2024
Actual	Year 2 of 2- year Availability	Request	Enacted	Request	Increase/ Decrease
Obligations by Program Activities					
End User Experience	-	-	-	658,942	658,942
End User Experience - PACT Act	-	-	-	88,812	88,812
Infrastructure Operations	-	-	-	552,449	552,449
Infrastructure Operations - PACT Act	-	-	-	99,353	99,353
Cyber Security	-	-	-	560,272	560,272
Cyber Security - PACT Act	-	-	-	35,742	35,742
Solutions Delivery	-	-	-	589,646	589,646
Solutions Delivery - PACT Act	-	-	-	84,166	84,166
Product Development and Engineering	-	-	-	354,832	354,832
Product Development and Engineering - PACT Act	-	-	-	76,831	76,831
Health IT Services	-	-	-	545,892	545,892
Health IT Services - PACT Act	-	-	-	21,160	21,160
Clinical Enabling Capabilities	-	-	-	338,117	338,117
Clinical Enabling Capabilities - PACT Act	-	-	-	50,178	50,178
Care Coverage Capabilities	-	-	-	92,327	92,327
Health Business Services	-	-	-	53,934	53,934
Health Business Services - PACT Act	-	-	-	23,130	23,130
Clinical Care Capabilities	-	-	-	42,211	42,211
Patient Management Capabilities	-	-	-	15,720	15,720
OIT Operation Support Services	-	-	-	247,749	247,749
OIT Operation Support Services - PACT Act	-	-	-	2,742	2,742
Corporate Services	-	-	-	289,051	289,051
Benefits Services	-	-	-	138,485	138,485
Benefits Services - PACT Act	-	-	-	432,562	432,562
Veteran Experience Services	-	-	-	157,145	157,145
Veteran Experience Services - PACT Act	-	-	-	309,385	309,385
Memorial Services	-	-	-	27,938	27,938
Memorial Services - PACT Act	-	-	-	2,326	2,326

Information Technology						
Operations and Maintenance Highlights - continued						
(\$s in Thousands)						
	2022	2022/2023	2023		2024	2023-2024
	Actual	Year 2 of 2-year Availability	Request	Enacted	Request	Increase/Decrease
Enterprise Operations and Maintenance	2,075,410	8,972	2,386,018	2,386,018	-	(2,386,018)
Enterprise Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section	486,935	134,033	495,020	495,020	-	(495,020)
Enterprise Operations and Maintenance - Technology Modernization Fund (P.L. 117-2	-	5,895	-	4,655	-	(4,655)
Enterprise Operations and Maintenance - PACT Act	-	28,871	-	275,839	-	(275,839)
Health Operations and Maintenance	747,730	-	929,419	929,419	-	(929,419)
Health Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section	74,027	5,153	47,319	47,319	-	(47,319)
Health Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section	23,895	-	-	-	-	-
Health Operations and Maintenance - PACT Act	-	7,451	-	53,428	-	(53,428)
Corporate Operations and Maintenance	684,379	36,368	439,642	439,642	-	(439,642)
Corporate Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section	32,579	-	-	-	-	-
Corporate Operations and Maintenance - PACT Act	-	-	-	19,000	-	-
Benefits Operations and Maintenance	238,004	-	342,937	342,937	-	(342,937)
Benefits Operations and Maintenance - American Rescue Plan Act (P.L. 117-2 Section	74,796	-	87,719	87,719	-	(87,719)
Benefits Operations and Maintenance - VHA Transfer (P.L. 117-43 Section 151)	9,493	-	-	-	-	-
Benefits Operations and Maintenance - PACT Act	-	75,594	-	226,245	-	(226,245)
Memorial Operations and Maintenance	22,061	-	44,000	44,000	-	(44,000)
Memorial Operations and Maintenance - PACT Act	-	1,140	-	-	-	-
Total Direct Obligations by Program	\$4,469,309	303,476	\$4,772,072	\$5,351,240	5,891,097	\$539,857
Obligations by Funding Sources						
Appropriation	3,142,275	649	4,145,678	4,145,678	4,668,373	522,695
Technology Modernization Fund (P.L. 117-2 Section 4011)	-	5,895	-	4,655	-	(4,655)
PACT Act	-	113,056	-	574,513	1,226,387	651,874
VHA Transfer (P.L. 117-43 Section 151)	9,493	-	-	-	-	-
American Rescue Plan Act (P.L. 117-2 Section 8002)	668,336	139,185	630,057	630,057	-	(630,057)
American Rescue Plan Act (P.L. 117-2 Section 8003)	23,895	-	-	-	-	-
Recurring Expenses Transformational Fund	625,309	44,691	-	-	-	-
North Chicago Transfer	-	-	(3,663)	(3,663)	(3,663)	-
Total Direct Obligations by Funding Sources	\$4,469,309	303,476	\$4,772,072	\$5,351,240	5,891,097	\$539,857
Reimbursable Obligations incurred	108,076	-	114,219	155,970	171,492	15,522
Total Operations and Maintenance Obligations	\$4,577,385	303,476	\$4,886,291	\$5,507,210	6,062,589	\$555,379

Appendix F: Operations and Maintenance Details

Sustainment-Steady-State

Operations and Maintenance Steady-State					
(\$s in thousands)					
Portfolio/Project	2022	2023		2024	2023-2024 Increase / Decrease
	Actual	Request	Enacted	Request	
ITIN Portfolio (formerly Enterprise Portfolio)	\$ 2,071,733	\$ 2,040,922	\$ 2,320,124	\$ 2,197,356	\$ (122,768)
Network Services	\$ -	\$ -	\$ -	\$ 329,196	\$ 329,196
Network Services - PACT Act	\$ -	\$ -	\$ -	\$ 50,600	\$ 50,600
End User Software	\$ -	\$ -	\$ -	\$ 315,098	\$ 315,098
End User Software - PACT Act	\$ -	\$ -	\$ -	\$ 41,551	\$ 41,551
Cyber Security Operations	\$ 289,337	\$ 262,469	\$ 262,469	\$ 278,376	\$ 15,907
Cyber Security Operations - PACT Act	\$ -	\$ -	\$ 11,972	\$ -	\$ (11,972)
Cyber Security - Technology Modernization Fund (TMF)	\$ -	\$ -	\$ 10,550	\$ -	\$ (10,550)
Cyber Security - ARP 8002	\$ -	\$ 9,663	\$ 9,663	\$ -	\$ (9,663)
Foundation Platforms	\$ -	\$ -	\$ -	\$ 248,298	\$ 248,298
Foundation Platforms - PACT Act	\$ -	\$ -	\$ -	\$ 39,894	\$ 39,894
Infrastructure Operations (IO) Hardware Maintenance	\$ -	\$ -	\$ -	\$ 133,859	\$ 133,859
Infrastructure Operations (IO) Hardware Maintenance - PACT Act	\$ -	\$ -	\$ -	\$ 24,220	\$ 24,220
Infrastructure Operations (IO) Software Maintenance	\$ -	\$ -	\$ -	\$ 97,260	\$ 97,260
Infrastructure Operations (IO) Software Maintenance - PACT Act	\$ -	\$ -	\$ -	\$ 57,165	\$ 57,165
Solution Delivery (SD) Software Maintenance	\$ -	\$ -	\$ -	\$ 77,000	\$ 77,000
Solution Delivery (SD) Software Maintenance - PACT Act	\$ -	\$ -	\$ -	\$ 5,717	\$ 5,717
Application Delivery Infrastructure	\$ -	\$ -	\$ -	\$ 67,044	\$ 67,044
Application Delivery Infrastructure - PACT Act	\$ -	\$ -	\$ -	\$ 14,605	\$ 14,605
Awareness, Governance, Risk, Compliance	\$ -	\$ -	\$ -	\$ 59,910	\$ 59,910
IT Service Management	\$ 63,898	\$ -	\$ -	\$ 59,295	\$ 59,295
IT Service Management - PACT Act	\$ -	\$ -	\$ -	\$ 6,855	\$ 6,855
End User Operations	\$ -	\$ -	\$ -	\$ 54,133	\$ 54,133
End User Operations - PACT Act	\$ -	\$ -	\$ -	\$ 3,292	\$ 3,292
Enterprise Service Level Agreement (SLA)	\$ -	\$ -	\$ -	\$ 52,160	\$ 52,160
Service Desk	\$ -	\$ -	\$ -	\$ 51,880	\$ 51,880
Service Desk - PACT Act	\$ -	\$ -	\$ -	\$ 6,969	\$ 6,969
Decision Intelligence	\$ -	\$ -	\$ -	\$ 38,330	\$ 38,330
Decision Intelligence - PACT Act	\$ -	\$ -	\$ -	\$ 3,670	\$ 3,670
Solution Delivery (SD) Hardware Maintenance	\$ -	\$ -	\$ -	\$ 25,450	\$ 25,450
Solution Delivery (SD) Hardware Maintenance - PACT Act	\$ -	\$ -	\$ -	\$ 27,299	\$ 27,299
Infrastructure Operations Support	\$ -	\$ -	\$ -	\$ 9,819	\$ 9,819
Infrastructure Operations Support - PACT Act	\$ -	\$ -	\$ -	\$ 1,091	\$ 1,091
Operations Triage Group	\$ -	\$ -	\$ -	\$ 9,288	\$ 9,288
Operations Triage Group - PACT Act	\$ -	\$ -	\$ -	\$ 1,032	\$ 1,032
Unified Communications	\$ -	\$ -	\$ -	\$ 7,000	\$ 7,000
Software Maintenance	\$ 306,844	\$ -	\$ -	\$ -	\$ -
Software Maintenance ^{1/}	\$ 125,000	\$ 442,767	\$ 442,767	\$ -	\$ (442,767)
Software Maintenance - ARP 8002	\$ 87,532	\$ -	\$ 86,049	\$ -	\$ (86,049)
Software Maintenance - PACT Act	\$ -	\$ -	\$ 34,054	\$ -	\$ (34,054)
Telecommunications ^{1/}	\$ 251,543	\$ 238,408	\$ 239,057	\$ -	\$ (239,057)
Telecommunications - ARP 8002	\$ 43,146	\$ 42,236	\$ 46,691	\$ -	\$ (46,691)
Telecommunications - PACT Act	\$ -	\$ -	\$ 29,236	\$ -	\$ (29,236)
IT Support Contracts	\$ 125,360	\$ 168,043	\$ 168,043	\$ -	\$ (168,043)
IT Support Contracts - ARP 8002	\$ 20,000	\$ 14,764	\$ 14,764	\$ -	\$ (14,764)
IT Support Contracts - PACT Act	\$ -	\$ -	\$ 10,109	\$ -	\$ (10,109)
Data Integration and Management	\$ 192,372	\$ 161,009	\$ 161,009	\$ -	\$ (161,009)
Data Integration and Management - ARP 8002	\$ 174,617	\$ 254,197	\$ 287,399	\$ -	\$ (287,399)
Data Integration and Management - PACT Act	\$ -	\$ -	\$ 6,438	\$ -	\$ (6,438)
Hardware Maintenance	\$ 153,767	\$ 159,119	\$ 159,119	\$ -	\$ (159,119)
Hardware Maintenance - ARP 8002	\$ 4,319	\$ 4,477	\$ 14,805	\$ -	\$ (14,805)
Hardware Maintenance - PACT Act	\$ -	\$ -	\$ 35,847	\$ -	\$ (35,847)
Activations	\$ 777	\$ -	\$ -	\$ -	\$ -
Activations - ARP 8002	\$ 30,000	\$ 66,494	\$ 66,494	\$ -	\$ (66,494)
Enterprise Service Desk	\$ 65,446	\$ 63,195	\$ 63,195	\$ -	\$ (63,195)
Enterprise Service Desk - PACT Act	\$ -	\$ -	\$ 6,313	\$ -	\$ (6,313)
Privacy & Records Management	\$ 33,344	\$ 54,788	\$ 54,788	\$ -	\$ (54,788)
End User Operations	\$ 49,055	\$ 50,021	\$ 50,021	\$ -	\$ (50,021)
Network Operations Center	\$ 32,616	\$ 33,673	\$ 33,673	\$ -	\$ (33,673)
Enterprise Command Center	\$ 8,983	\$ 12,624	\$ 12,624	\$ -	\$ (12,624)
Enterprise Command Center - ARP 8002	\$ 11,341	\$ -	\$ -	\$ -	\$ -
Repositories	\$ 2,437	\$ 2,974	\$ 2,974	\$ -	\$ (2,974)

Operations and Maintenance					
Steady-State - continued					
(\$s in thousands)					
Portfolio/Project	2022	2023		2024	2023-2024 Increase / Decrease
	Actual	Request	Enacted	Request	
Health Portfolio	\$ 681,622	\$ 890,475	\$ 906,000	\$ 999,158	\$ 93,158
Health Care Infrastructure	\$ -	\$ -	\$ -	\$ 397,785	\$ 397,785
Operational Support	\$ -	\$ -	\$ -	\$ 159,692	\$ 159,692
Enterprise IT Infrastructure	\$ -	\$ -	\$ -	\$ 104,964	\$ 104,964
Health Delivery Support	\$ -	\$ -	\$ -	\$ 91,785	\$ 91,785
Care Coverage Services	\$ -	\$ -	\$ -	\$ 73,887	\$ 73,887
Health Administration	\$ -	\$ -	\$ -	\$ 42,905	\$ 42,905
Virtual Veteran Record	\$ -	\$ -	\$ -	\$ 34,312	\$ 34,312
Clinical Care Services	\$ -	\$ -	\$ -	\$ 31,493	\$ 31,493
Common Health Care Workflows	\$ -	\$ -	\$ -	\$ 17,293	\$ 17,293
Patient Management Services	\$ -	\$ -	\$ -	\$ 15,720	\$ 15,720
Quality Systems	\$ -	\$ -	\$ -	\$ 14,968	\$ 14,968
Common Health Care Specific Services	\$ -	\$ -	\$ -	\$ 13,354	\$ 13,354
Common Health Care Specific Services - PACT Act	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000
IT Support Contracts	\$ 77,785	\$ 179,012	\$ 179,012	\$ -	\$ (179,012)
Software Maintenance	\$ 185,128	\$ 149,753	\$ 149,753	\$ -	\$ (149,753)
Software Maintenance - ARP 8002	\$ -	\$ 5,064	\$ 5,064	\$ -	\$ (5,064)
Health Data Interoperability	\$ 57,560	\$ 93,971	\$ 93,971	\$ -	\$ (93,971)
Health Data Interoperability - ARP 8002	\$ 19,119	\$ -	\$ -	\$ -	\$ -
Health Data Interoperability - PACT Act	\$ -	\$ -	\$ 10,372	\$ -	\$ (10,372)
Community Care	\$ 60,604	\$ 84,690	\$ 84,690	\$ -	\$ (84,690)
Community Care - ARP 8002	\$ 834	\$ 870	\$ 870	\$ -	\$ (870)
Healthcare Administration Systems	\$ 53,752	\$ 78,310	\$ 78,310	\$ -	\$ (78,310)
Healthcare Administration Systems - ARP 8002	\$ 3,908	\$ 4,373	\$ 9,526	\$ -	\$ (9,526)
Supply Chain Management	\$ 24,391	\$ 63,282	\$ 63,282	\$ -	\$ (63,282)
Hardware Maintenance	\$ 19,717	\$ 43,000	\$ 43,000	\$ -	\$ (43,000)
Hardware Maintenance - ARP 8002	\$ -	\$ 2,415	\$ 2,415	\$ -	\$ (2,415)
Digital Health Platform	\$ 46,469	\$ 31,294	\$ 31,294	\$ -	\$ (31,294)
Digital Health Platform - ARP 8002	\$ 11,445	\$ -	\$ -	\$ -	\$ -
Research	\$ 16,496	\$ 23,855	\$ 23,855	\$ -	\$ (23,855)
Purchased Care	\$ 10,763	\$ 19,475	\$ 19,475	\$ -	\$ (19,475)
Connected Health/Mobile Apps	\$ 10,052	\$ 14,950	\$ 14,950	\$ -	\$ (14,950)
Connected Health/Mobile Apps - ARP 8002	\$ 8,000	\$ 9,000	\$ 9,000	\$ -	\$ (9,000)
My HealtheVet	\$ 12,962	\$ 14,480	\$ 14,480	\$ -	\$ (14,480)
Scheduling	\$ 13,685	\$ 13,110	\$ 13,110	\$ -	\$ (13,110)
Pharmacy	\$ 6,973	\$ 11,750	\$ 11,750	\$ -	\$ (11,750)
Telehealth Services	\$ 7,752	\$ 9,104	\$ 9,104	\$ -	\$ (9,104)
Telehealth Services - ARP 8002	\$ 7,900	\$ 8,657	\$ 8,657	\$ -	\$ (8,657)
Registries	\$ 4,101	\$ 6,430	\$ 6,430	\$ -	\$ (6,430)
Genomic Information System for Integrative Service (GenISIS)	\$ 2,371	\$ 5,500	\$ 5,500	\$ -	\$ (5,500)
Genomic Information System for Integrative Service (GenISIS) - ARP 8002	\$ 9,713	\$ 290	\$ 290	\$ -	\$ (290)
Access & Billing	\$ 3,693	\$ 4,514	\$ 4,514	\$ -	\$ (4,514)
Patient Records [System (CPRS)]	\$ 1,863	\$ 4,370	\$ 4,370	\$ -	\$ (4,370)
Lab	\$ 3,897	\$ 4,200	\$ 4,200	\$ -	\$ (4,200)
Beneficiary Travel	\$ 665	\$ 3,756	\$ 3,756	\$ -	\$ (3,756)
Registration, Eligibility, Enrollment	\$ 23	\$ 1,000	\$ 1,000	\$ -	\$ (1,000)

Operations and Maintenance Steady-State - continued					
(\$s in thousands)					
Portfolio/Project	2022 Actual	2023 Request	2023 Enacted	2024 Request	2023-2024 Increase / Decrease
Corporate Portfolio	\$ 588,768	\$ 285,401	\$ 304,401	\$ 401,979	\$ 97,578
Corporate Enterprise Support	\$ -	\$ -	\$ -	\$ 75,564	\$ 75,564
TAC Fees	\$ -	\$ 65,468	\$ 65,468	\$ 60,419	\$ (5,049)
TAC Fees - PACT Act	\$ -	\$ -	\$ 19,000	\$ -	\$ (19,000)
Software Product Management Support	\$ -	\$ -	\$ -	\$ 45,146	\$ 45,146
Property and Facility Management	\$ -	\$ -	\$ -	\$ 38,078	\$ 38,078
Financial Management Services	\$ -	\$ -	\$ -	\$ 30,059	\$ 30,059
Privacy & Records Management	\$ -	\$ -	\$ -	\$ 27,641	\$ 27,641
Human Resources ^{1/}	\$ 16,290	\$ 20,994	\$ 20,994	\$ 22,511	\$ 1,517
CRR Support	\$ -	\$ -	\$ -	\$ 19,228	\$ 19,228
Budget Formulation	\$ -	\$ -	\$ -	\$ 18,033	\$ 18,033
General Counsel	\$ 4,527	\$ 14,744	\$ 14,744	\$ 14,111	\$ (633)
Human Capital Management	\$ -	\$ -	\$ -	\$ 12,485	\$ 12,485
Product Engineering and Development Support	\$ -	\$ -	\$ -	\$ 7,304	\$ 7,304
Product Engineering and Development Support - PACT Act	\$ -	\$ -	\$ -	\$ 1,859	\$ 1,859
OIS Support	\$ -	\$ -	\$ -	\$ 5,985	\$ 5,985
Acquisition and Property Management	\$ -	\$ -	\$ -	\$ 5,672	\$ 5,672
Management Information Systems	\$ -	\$ -	\$ -	\$ 5,578	\$ 5,578
OIT Front Office Support	\$ -	\$ -	\$ -	\$ 5,493	\$ 5,493
Budget Execution	\$ -	\$ -	\$ -	\$ 2,930	\$ 2,930
BIOS Support	\$ -	\$ -	\$ -	\$ 2,000	\$ 2,000
ITBF Support	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000
CRR Data Analytics Infrastructure - PACT Act	\$ -	\$ -	\$ -	\$ 500	\$ 500
Implementation Support - PACT Act	\$ -	\$ -	\$ -	\$ 383	\$ 383
IT Support Contracts	\$ 494,552	\$ 145,846	\$ 145,846	\$ -	\$ (145,846)
IT Support Contracts - ARP 8002	\$ 32,579	\$ -	\$ -	\$ -	\$ -
Financial and Acquisition Management Modernization ^{1/}	\$ 19,637	\$ 19,780	\$ 19,780	\$ -	\$ (19,780)
Other Corporate IT Systems	\$ 20,676	\$ 18,104	\$ 18,104	\$ -	\$ (18,104)
Construction and Facilities Mgmt	\$ 507	\$ 465	\$ 465	\$ -	\$ (465)

Operations and Maintenance Steady-State - continued						
(\$s in thousands)						
Portfolio/Project	2022	2023		2023	2024	2023-2024
	Actual	Request	Enacted	Request	Increase / Decrease	
Benefits Portfolio	\$ 216,275	\$ 351,217	\$ 386,052	\$ 305,277	\$ (80,775)	
Compensation and Pension	\$ -	\$ -	\$ -	\$ 53,380	\$ 53,380	
Compensation and Pension - PACT Act	\$ -	\$ -	\$ -	\$ 13,762	\$ 13,762	
Benefits Integration and Administration	\$ -	\$ -	\$ -	\$ 37,530	\$ 37,530	
Benefits Integration and Administration - PACT Act	\$ -	\$ -	\$ -	\$ 22,308	\$ 22,308	
Education Veterans Readiness and Employment	\$ -	\$ -	\$ -	\$ 14,435	\$ 14,435	
VBA Finance	\$ -	\$ -	\$ -	\$ 11,460	\$ 11,460	
Benefits Enterprise Support	\$ -	\$ -	\$ -	\$ 7,984	\$ 7,984	
Benefits Enterprise Support - PACT Act	\$ -	\$ -	\$ -	\$ 96,311	\$ 96,311	
Appeals	\$ -	\$ -	\$ -	\$ 7,322	\$ 7,322	
Loan Guaranty - PACT Act	\$ -	\$ -	\$ -	\$ 7,161	\$ 7,161	
Benefits Experience	\$ -	\$ -	\$ -	\$ 2,369	\$ 2,369	
Benefits Experience - PACT Act	\$ -	\$ -	\$ -	\$ 30,740	\$ 30,740	
Insurance	\$ -	\$ -	\$ -	\$ 515	\$ 515	
Veterans Customer Experience (VCE)	\$ 61,090	\$ 81,138	\$ 81,138	\$ -	\$ (81,138)	
Veterans Customer Experience (VCE) - ARP 8002	\$ 40,871	\$ 67,647	\$ 67,647	\$ -	\$ (67,647)	
Veterans Customer Experience (VCE) - PACT Act	\$ -	\$ -	\$ 20,387	\$ -	\$ (20,387)	
IT Support Contracts	\$ 18,513	\$ 79,000	\$ 79,000	\$ -	\$ (79,000)	
Veterans Benefits Management	\$ 61,988	\$ 69,130	\$ 69,130	\$ -	\$ (69,130)	
Veterans Benefits Management - PACT Act	\$ -	\$ -	\$ 251	\$ -	\$ (251)	
Other Benefits IT Systems	\$ 20,379	\$ 30,069	\$ 30,069	\$ -	\$ (30,069)	
Other Benefits IT Systems - PACT Act	\$ -	\$ -	\$ 14,198	\$ -	\$ (14,198)	
Benefit Systems	\$ 8,264	\$ 17,679	\$ 17,679	\$ -	\$ (17,679)	
Benefits Appeals	\$ 5,169	\$ 6,554	\$ 6,554	\$ -	\$ (6,554)	
Veteran Experience Portfolio	\$ -	\$ -	\$ -	\$ 300,196	\$ 300,196	
Digital Experience	\$ -	\$ -	\$ -	\$ 85,658	\$ 85,658	
Digital Experience - PACT Act	\$ -	\$ -	\$ -	\$ 20,014	\$ 20,014	
Cyber Security Operations	\$ -	\$ -	\$ -	\$ 83,071	\$ 83,071	
Contact Center Experience	\$ -	\$ -	\$ -	\$ 33,306	\$ 33,306	
Contact Center Experience - PACT Act ^{2/}	\$ -	\$ -	\$ -	\$ 25,017	\$ 25,017	
Customer Data Management Experience	\$ -	\$ -	\$ -	\$ 18,382	\$ 18,382	
Customer Data Management Experience - PACT Act	\$ -	\$ -	\$ -	\$ 2,000	\$ 2,000	
Customer Feedback and Experience	\$ -	\$ -	\$ -	\$ 10,640	\$ 10,640	
Eligibility and Enrollment Experience	\$ -	\$ -	\$ -	\$ 9,159	\$ 9,159	
Eligibility and Enrollment Experience - PACT Act	\$ -	\$ -	\$ -	\$ 12,949	\$ 12,949	
Memorial Portfolio	\$ 11,002	\$ 21,652	\$ 21,652	\$ 21,957	\$ 305	
Memorial Support	\$ -	\$ -	\$ -	\$ 15,175	\$ 15,175	
Memorial Enterprise Support	\$ -	\$ -	\$ -	\$ 6,207	\$ 6,207	
Memorial Operation	\$ -	\$ -	\$ -	\$ 575	\$ 575	
IT Support Contracts	\$ -	\$ 9,133	\$ 9,133	\$ -	\$ (9,133)	
Memorials Automation	\$ 7,002	\$ 8,870	\$ 8,870	\$ -	\$ (8,870)	
Memorials Legacy	\$ 4,000	\$ 3,649	\$ 3,649	\$ -	\$ (3,649)	
GRAND TOTAL	\$ 3,569,400	\$ 3,589,667	\$ 3,938,230	\$ 4,225,923	\$ 287,693	

Note: Numbers may not add due to rounding

1/ In 2022, Projects were partially or fully funded by the Recurring Expenses Transformational Fund

2/ 2024 PACT Act request includes funds from 2023 that will be carried forward to 2024

Note: In 2022, \$70.5M was obligated from the Staffing and Administration sub-account to fund Cyber Security CRISP Operations Sustainment

Sustainment-Enhancement

Operations and Maintenance Enhancement					
(\$s in thousands)					
Portfolio/Project	2022	2023		2024	2023-2024 Increase / Decrease
	Actual	Request	Enacted	Request	
ITIN Portfolio (formerly Enterprise Portfolio)	\$ 218,434	\$ 320,862	\$ 491,602	\$ 327,400	\$ (164,202)
IT Service Management	\$ -	\$ 94,690	\$ 94,690	\$ 80,431	\$ (14,259)
IT Service Management - PACT Act	\$ -	\$ -	\$ -	\$ 8,990	\$ 8,990
Cyber Security Operations	\$ 22,395	\$ 97,984	\$ 97,984	\$ 77,004	\$ (20,980)
Cyber Security Operations - PACT Act	\$ -	\$ -	\$ -	\$ 5,888	\$ 5,888
Cyber Security - ARP 8002	\$ 10,918	\$ -	\$ -	\$ -	\$ -
Activations	\$ 77,429	\$ 25,000	\$ 25,000	\$ 75,288	\$ 50,288
Activations - PACT Act	\$ -	\$ -	\$ 121,237	\$ 37,000	\$ (84,237)
Awareness, Governance, Risk, Compliance	\$ -	\$ -	\$ -	\$ 22,032	\$ 22,032
Awareness, Governance, Risk, Compliance - PACT Act	\$ -	\$ -	\$ -	\$ 3,631	\$ 3,631
Decision Intelligence	\$ -	\$ -	\$ -	\$ 1,160	\$ 1,160
Decision Intelligence - PACT Act	\$ -	\$ -	\$ -	\$ 15,976	\$ 15,976
Data Integration and Management	\$ 2,032	\$ -	\$ -	\$ -	\$ -
Data Integration and Management - ARP 8002	\$ 99,108	\$ 103,188	\$ 103,188	\$ -	\$ (103,188)
Data Integration and Management - PACT Act	\$ -	\$ -	\$ 41,760	\$ -	\$ (41,760)
Hardware Maintenance	\$ 598	\$ -	\$ -	\$ -	\$ -
Hardware Maintenance - ARP 8002	\$ 5,953	\$ -	\$ -	\$ -	\$ -
Software Maintenance - PACT Act	\$ -	\$ -	\$ 7,743	\$ -	\$ (7,743)
Health Portfolio	\$ 107,341	\$ 81,062	\$ 127,069	\$ 104,285	\$ (22,784)
Health Administration	\$ -	\$ -	\$ -	\$ 13,924	\$ 13,924
Health Administration - PACT Act	\$ -	\$ -	\$ -	\$ 1,500	\$ 1,500
Common Health Care Specific Services	\$ -	\$ -	\$ -	\$ 5,287	\$ 5,287
Common Health Care Specific Services - PACT Act	\$ -	\$ -	\$ -	\$ 13,030	\$ 13,030
Clinical Care Services	\$ -	\$ -	\$ -	\$ 3,308	\$ 3,308
Health Delivery Support	\$ -	\$ -	\$ -	\$ 2,683	\$ 2,683
Health Delivery Support - PACT Act	\$ -	\$ -	\$ -	\$ 36,878	\$ 36,878
Health Care Infrastructure	\$ -	\$ -	\$ -	\$ 2,600	\$ 2,600
Enterprise IT Infrastructure	\$ -	\$ -	\$ -	\$ 2,415	\$ 2,415
Enterprise IT Infrastructure - PACT Act	\$ -	\$ -	\$ -	\$ 21,160	\$ 21,160
Operational Support - PACT Act	\$ -	\$ -	\$ -	\$ 1,500	\$ 1,500
Digital Health Platform	\$ 13,592	\$ 19,210	\$ 19,210	\$ -	\$ (19,210)
Digital Health Platform - PACT Act	\$ -	\$ -	\$ 23,426	\$ -	\$ (23,426)
Community Care	\$ 29,997	\$ 15,901	\$ 15,901	\$ -	\$ (15,901)
Health Data Interoperability	\$ 13,092	\$ 6,808	\$ 6,808	\$ -	\$ (6,808)
Health Data Interoperability - PACT Act	\$ -	\$ -	\$ 9,509	\$ -	\$ (9,509)
Pharmacy	\$ 6,203	\$ 6,513	\$ 6,513	\$ -	\$ (6,513)
My HealtheVet	\$ -	\$ 5,886	\$ 5,886	\$ -	\$ (5,886)
My HealtheVet - ARP 8002	\$ 5,321	\$ 8,650	\$ 8,650	\$ -	\$ (8,650)
Repositories - PACT Act	\$ -	\$ -	\$ 3,377	\$ -	\$ (3,377)
Patient Records [System (CPRS)]	\$ -	\$ 3,238	\$ 3,238	\$ -	\$ (3,238)
Healthcare Administration Systems	\$ 4,846	\$ 2,681	\$ 2,681	\$ -	\$ (2,681)
Healthcare Administration Systems - ARP 8002	\$ 2,977	\$ 8,000	\$ 8,000	\$ -	\$ (8,000)
Registries	\$ 2,479	\$ 1,900	\$ 1,900	\$ -	\$ (1,900)
Registries - PACT Act	\$ -	\$ -	\$ 5,995	\$ -	\$ (5,995)
Beneficiary Travel	\$ 2,083	\$ 1,275	\$ 1,275	\$ -	\$ (1,275)
Beneficiary Travel - ARP 8002	\$ 3,698	\$ -	\$ -	\$ -	\$ -
Beneficiary Travel - PACT Act	\$ -	\$ -	\$ 3,700	\$ -	\$ (3,700)
Registration, Eligibility, Enrollment	\$ 840	\$ 1,000	\$ 1,000	\$ -	\$ (1,000)
Registration, Eligibility, Enrollment -ARP 8002	\$ 1,112	\$ -	\$ -	\$ -	\$ -
Purchased Care	\$ 10,723	\$ -	\$ -	\$ -	\$ -
Scheduling	\$ 5,816	\$ -	\$ -	\$ -	\$ -
Supply Chain Management	\$ 3,701	\$ -	\$ -	\$ -	\$ -
Telehealth Services	\$ 862	\$ -	\$ -	\$ -	\$ -

Operations and Maintenance Enhancement - continued						
(\$s in thousands)						
Portfolio/Project	2022	2023	2023	2024	2023-2024	
	Actual	Request	Enacted	Request	Increase / Decrease	
Corporate Portfolio	\$ 5,341	\$ 112,818	\$ 112,818	\$ 18,007	\$ (94,811)	
Human Resources ^{1/}	\$ 1,804	\$ 2,639	\$ 2,639	\$ 16,000	\$ 13,361	
QPR Support	\$ -	\$ -	\$ -	\$ 2,007	\$ 2,007	
General Counsel	\$ 2,407	\$ 3,773	\$ 3,773	\$ -	\$ (3,773)	
Financial and Acquisition Management Modernization	\$ -	\$ 103,106	\$ 103,106	\$ -	\$ (103,106)	
Other Corporate IT Systems	\$ 1,129	\$ 3,300	\$ 3,300	\$ -	\$ (3,300)	
Benefits Portfolio	\$ 94,258	\$ 71,983	\$ 270,004	\$ 162,694	\$ (107,310)	
Education Veterans Readiness and Employment	\$ -	\$ -	\$ -	\$ 3,490	\$ 3,490	
Education Veterans Readiness and Employment - PACT Act	\$ -	\$ -	\$ -	\$ 11,488	\$ 11,488	
Compensation and Pension - PACT Act ^{2/}	\$ -	\$ -	\$ -	\$ 88,620	\$ 88,620	
Appeals - PACT Act	\$ -	\$ -	\$ -	\$ 22,628	\$ 22,628	
Benefits Integration and Administration - PACT Act	\$ -	\$ -	\$ -	\$ 18,960	\$ 18,960	
VBA Finance - PACT Act	\$ -	\$ -	\$ -	\$ 17,508	\$ 17,508	
Benefit Systems	\$ -	\$ 15,975	\$ 15,975	\$ -	\$ (15,975)	
Benefit Systems - PACT Act	\$ -	\$ -	\$ 5,770	\$ -	\$ (5,770)	
Other Benefits IT Systems	\$ -	\$ 11,420	\$ 11,420	\$ -	\$ (11,420)	
Veterans Customer Experience (VCE)	\$ 30,217	\$ 9,761	\$ 9,761	\$ -	\$ (9,761)	
Veterans Customer Experience (VCE) - ARP 8002	\$ 25,244	\$ 17,252	\$ 17,252	\$ -	\$ (17,252)	
Veterans Customer Experience (VCE) - PACT Act	\$ -	\$ -	\$ 114,506	\$ -	\$ (114,506)	
Veterans Benefits Management	\$ 17,842	\$ 7,912	\$ 7,912	\$ -	\$ (7,912)	
Veterans Benefits Management - PACT Act	\$ -	\$ -	\$ 66,137	\$ -	\$ (66,137)	
Veterans Benefits Management - VHA Transfer (P.L. 117-43 Section 151)	\$ 9,493	\$ -	\$ -	\$ -	\$ -	
Veteran Customer Experience Data and Analytics - PACT Act	\$ -	\$ -	\$ 7,000	\$ -	\$ (7,000)	
Benefits Appeals	\$ 9,846	\$ 6,843	\$ 6,843	\$ -	\$ (6,843)	
Benefits Appeals - ARP 8002	\$ 1,616	\$ 2,820	\$ 2,820	\$ -	\$ (2,820)	
Benefits Appeals - PACT Act	\$ -	\$ -	\$ 4,608	\$ -	\$ (4,608)	
Veteran Experience Portfolio	\$ -	\$ -	\$ -	\$ 250,843	\$ 250,843	
Digital Experience - PACT Act	\$ -	\$ -	\$ -	\$ 90,086	\$ 90,086	
Contact Center Experience - PACT Act	\$ -	\$ -	\$ -	\$ 55,849	\$ 55,849	
Customer Data Management Experience - PACT Act ^{2/}	\$ -	\$ -	\$ -	\$ 53,195	\$ 53,195	
Cyber Security Operations - PACT Act	\$ -	\$ -	\$ -	\$ 26,223	\$ 26,223	
Eligibility and Enrollment Experience - PACT Act ^{2/}	\$ -	\$ -	\$ -	\$ 24,538	\$ 24,538	
Customer Feedback and Experience - PACT Act	\$ -	\$ -	\$ -	\$ 952	\$ 952	
Memorial Portfolio	\$ 11,059	\$ 22,348	\$ 23,488	\$ 8,307	\$ (15,181)	
Memorial Support	\$ -	\$ -	\$ -	\$ 5,981	\$ 5,981	
Memorial Support - PACT Act	\$ -	\$ -	\$ -	\$ 2,326	\$ 2,326	
Memorials Automation	\$ 11,059	\$ 22,348	\$ 22,348	\$ -	\$ (22,348)	
Memorials Automation - PACT Act	\$ -	\$ -	\$ 1,140	\$ -	\$ (1,140)	
GRAND TOTAL	\$ 436,432	\$ 609,073	\$ 1,024,981	\$ 871,536	\$ (153,445)	

Note: Numbers may not add due to rounding

1/ In 2022, Projects were funded by Recurring Expenses Transformational Fund

2/ 2024 PACT Act request includes funds from 2023 that will be carried forward to 2024

Sustainment-Modernization

Operations and Maintenance Modernization					
(\$s in thousands)					
Portfolio/Project	2022	2023		2024	2023-2024 Increase / Decrease
	Actual	Request	Enacted	Request	
ITIN Portfolio (formerly Enterprise Portfolio)	\$ 342,636	\$ 522,917	\$ 531,240	\$ 470,108	\$ (61,132)
Network Services	\$ -	\$ -	\$ -	\$ 134,000	\$ 134,000
End User Compute	\$ -	\$ -	\$ -	\$ 125,000	\$ 125,000
Storage Services	\$ -	\$ -	\$ -	\$ 114,000	\$ 114,000
Shared Devices	\$ -	\$ -	\$ -	\$ 37,543	\$ 37,543
Cyber Security Operations	\$ 3,441	\$ 41,888	\$ 41,888	\$ 21,514	\$ (20,374)
Awareness, Governance, Risk, Compliance	\$ -	\$ -	\$ -	\$ 18,365	\$ 18,365
Unified Communications	\$ -	\$ -	\$ -	\$ 17,000	\$ 17,000
Application Delivery Infrastructure - PACT Act	\$ -	\$ -	\$ -	\$ 2,686	\$ 2,686
Infrastructure Readiness Program (IRP) ^{1/}	\$ 337,759	\$ 477,543	\$ 485,866	\$ -	\$ (485,866)
Hardware Maintenance	\$ 1,229	\$ -	\$ -	\$ -	\$ -
Software Maintenance	\$ 12	\$ -	\$ -	\$ -	\$ -
IT Support Contracts	\$ 53	\$ -	\$ -	\$ -	\$ -
Telecommunications	\$ -	\$ 3,486	\$ 3,486	\$ -	\$ (3,486)
Data Integration and Management	\$ 141	\$ -	\$ -	\$ -	\$ -
Health Portfolio	\$ 56,689	\$ 5,200	\$ 9,700	\$ 79,776	\$ 70,076
Care Coverage Services	\$ -	\$ -	\$ -	\$ 18,440	\$ 18,440
Common Health Care Workflows	\$ -	\$ -	\$ -	\$ 18,000	\$ 18,000
Health Delivery Support	\$ -	\$ -	\$ -	\$ 7,664	\$ 7,664
Health Delivery Support - PACT Act	\$ -	\$ -	\$ -	\$ 5,000	\$ 5,000
Clinical Care Services	\$ -	\$ -	\$ -	\$ 7,410	\$ 7,410
Quality Systems	\$ -	\$ -	\$ -	\$ 4,496	\$ 4,496
Health Care Infrastructure	\$ -	\$ -	\$ -	\$ 3,816	\$ 3,816
Common Health Care Specific Services - PACT	\$ -	\$ -	\$ -	\$ 9,100	\$ 9,100
Operational Support - PACT Act	\$ -	\$ -	\$ -	\$ 5,300	\$ 5,300
Network Services - PACT Act	\$ -	\$ -	\$ -	\$ 550	\$ 550
Health Data Interoperability	\$ 21,588	\$ 3,200	\$ 3,200	\$ -	\$ (3,200)
Community Care	\$ 1,368	\$ 2,000	\$ 2,000	\$ -	\$ (2,000)
Registries - PACT Act	\$ -	\$ -	\$ 4,500	\$ -	\$ (4,500)
Supply Chain Management	\$ 5,965	\$ -	\$ -	\$ -	\$ -
Supply Chain Management - ARP 8003	\$ 23,895	\$ -	\$ -	\$ -	\$ -
Healthcare Administration Systems	\$ 387	\$ -	\$ -	\$ -	\$ -
Digital Health Platform	\$ 3,486	\$ -	\$ -	\$ -	\$ -
Corporate Portfolio	\$ 122,849	\$ 41,423	\$ 77,791	\$ 119,556	\$ 41,765
Financial Management Services	\$ -	\$ -	\$ -	\$ 119,556	\$ 119,556
Human Resources ^{1/-TF}	\$ 14,668	\$ -	\$ 36,368	\$ -	\$ (36,368)
Financial and Acquisition Management Moderniz	\$ 1,255	\$ 38,660	\$ 38,660	\$ -	\$ (38,660)
Other Corporate IT Systems ^{1/TF}	\$ 106,925	\$ 2,763	\$ 2,763	\$ -	\$ (2,763)
Benefits Portfolio	\$ 11,760	\$ 7,456	\$ 76,438	\$ 103,076	\$ 26,638
Benefits Enterprise Support - PACT Act	\$ -	\$ -	\$ -	\$ 49,000	\$ 49,000
Benefits Integration and Administration - PACT	\$ -	\$ -	\$ -	\$ 25,255	\$ 25,255
Compensation and Pension - PACT Act	\$ -	\$ -	\$ -	\$ 24,821	\$ 24,821
Loan Guaranty - PACT Act ^{2/}	\$ -	\$ -	\$ -	\$ 4,000	\$ 4,000
Benefits Systems	\$ 3,976	\$ 4,034	\$ 4,034	\$ -	\$ (4,034)
Other Benefits IT Systems	\$ 719	\$ -	\$ -	\$ -	\$ -
Other Benefits IT Systems - PACT Act	\$ -	\$ -	\$ 49,209	\$ -	\$ (49,209)
Veterans Customer Experience (VCE) - ARP 800	\$ 7,066	\$ -	\$ -	\$ -	\$ -
Veterans Benefits Management	\$ -	\$ 3,422	\$ 3,422	\$ -	\$ (3,422)
Veterans Benefits Management - PACT Act	\$ -	\$ -	\$ 19,773	\$ -	\$ (19,773)
Veteran Experience Portfolio	\$ -	\$ -	\$ -	\$ 24,785	\$ 24,785
Digital Experience - PACT Act	\$ -	\$ -	\$ -	\$ 18,623	\$ 18,623
Customer Data Management Experience - PACT	\$ -	\$ -	\$ -	\$ 6,162	\$ 6,162
GRAND TOTAL	\$ 533,934	\$ 576,996	\$ 695,170	\$ 797,301	\$ 102,131

Note: Numbers may not add due to rounding

1/ In 2022, Projects were funded by Recurring Expenses Transformational Fund

2/ 2024 PACT Act request includes funds from 2023 that will be carried forward to 2024

Appendix G: Amounts Available for Obligation

Information and Technology Systems Appropriation/Obligations (\$ in thousands)					
Description	2022	2023		2024	2023 - 2024
	Actuals	Request	Enacted	Request	Increase / Decrease
IT Systems Appropriation	\$4,842,800	\$5,782,000	\$5,782,000	\$6,401,000	\$619,000
Rescission from Unobligated Balance					
Total IT Appropriations	\$4,842,800	\$5,782,000	\$5,782,000	\$6,401,000	\$619,000
Reimbursements					
IT Non-Pay Reimbursements	108,076	115,258	153,808	172,888	19,080
IT Pay Reimbursements	10,309	10,779	12,229	13,611	1,381
Total Reimbursements	\$118,385	\$126,037	\$166,037	\$186,499	\$20,462
Budgetary Resources	\$4,961,185	\$5,908,037	\$5,948,037	\$6,587,499	\$639,461
Unobligated Balance (SOY)	37,423		47,797		-47,797
Available Balance (EOY) (+)	-47,797				
Veterans Choice Act 801 (SOY)	1,086		1,026		-1,026
Veterans Choice Act 801 (EOY)	-1,026				
PACT Act (SOY)			779,053	1,313,610	534,557
PACT Act (EOY)			-70,610		70,610
VHA Transfer (P.L. 117-43 Section 151)	9,493				
American Rescue Plan [P.L. 117-2 Section 8002]	807,522	630,057	769,242		-769,242
American Rescue Plan [P.L. 117-2 Section 8002]	-139,185				
American Rescue Plan [P.L. 117-2 Section 8003]	23,895				
Recoveries of prior year unpaid obligations	3,552				
OEF/OIF Supplemental (P.L. 110-28) SOY	2,571		2,061		-2,061
OEF/OIF Supplemental (P.L. 110-28) EOY	-2,061				
Technology Modernization Fund (P.L. 117-2 Section 4011)			10,550		-10,550
North Chicago Transfers	-7,993	-8,085	-8,085	-8,085	
Appropriations transferred from other accounts (Treas Acct) ^{1/} SOY	670,000		44,691		-44,691
Appropriations transferred from other accounts (Treas Acct) ^{1/} EOY	-44,691				
Unobligated Expiring	-\$317				
Change in Unobligated Balance (non-add)	\$1,312,471	\$621,972	\$1,575,726	\$1,305,525	-\$270,201
Total Obligations	\$6,273,656	\$6,530,009	\$7,523,763	\$7,893,024	\$369,261
Outlays, Gross	\$5,429,000	\$5,797,000	\$7,227,000	\$7,227,000	
Less Collections	-118,385	-126,037	-166,037	-186,499	-20,461
Outlays, Net	\$5,310,615	\$5,670,963	\$7,060,963	\$7,040,501	-20,461
Direct civilian full-time equivalent employment	7,897	8,918	8,918	9,177	259
PACT Act			139	341	202
Reimbursable civilian full-time equivalent employe	61	75	87	65	-22
Total Full Time Equivalent (FTE)	7,958	8,993	9,144	9,583	439

Note: Numbers may not add due to rounding

^{1/}Reflects transfer to OIT from Recurring Expenses Transformational Fund

Appendix H: Object Classification

Office of Information and Technology					
Object Classification					
(\$s in thousands)					
	2022	2023		2024	2023 - 2024 Increase / Decrease
	Actuals	Request	Enacted	Request	
Direct Obligations:					
Personnel Compensation:					
Full-time permanent	863,726	934,570	941,208	1,018,050	83,480
PACT Full-time permanent			8,837	49,573	40,736
Total Personnel Compensation	\$863,726	\$934,570	\$950,045	\$1,067,623	117,578
Civilian personnel benefits	328,787	402,425	401,098	438,202	37,104
PACT Civilian personnel benefits			3,787	21,246	17,459
Travel and transportation of persons	4,048	3,988	15,669	17,256	1,588
Communications, utilities, and miscellaneous charges	974,618	1,483,188	1,089,153	1,199,507	110,354
Communications, utilities, and miscellaneous charges - VHA Transfer (P.L. 117-43 Section 151)	7				
Communications, utilities, and miscellaneous charges - American Rescue Plan [P.L. 117-2 Section 8002]	142,460	139,128	139,128		-139,128
Communication, utilities, and miscellaneous charges - Recurring Expenses Transformational Fund	149,042				
Other services from non-Federal sources	2,363,557	2,636,692	3,022,109	3,328,312	306,203
Other services from non-Federal sources - VHA Transfer (P.L. 117-43 Section 151)	8,346				
Other services from non-Federal sources - American Rescue Plan [P.L. 117-2 Section 8002]	468,643	389,932	529,117		-529,117
Other services from non-Federal sources - American Rescue Plan [P.L. 117-2 Section 8003]	23,895				
Other services from non-Federal sources - Recurring Expenses Transformational Fund	243,216		44,691		-44,691
Other services from non-Federal sources - PACT Act			695,819	1,242,791	546,972
Other services from non-Federal sources - Technology Modernization Fund (P.L. 117-2 Section 4011)			10,550		-10,550
Supplies and materials	2,415	2,953	2,728	3,004	276
Supplies and Materials - American Rescue Plan [P.L. 117- 2 Section 8002]	22				
Equipment	289,995	308,441	351,607	387,233	35,625
Equipment - VHA Transfer (P.L. 117-43 Section 151)	1,140				
Equipment - American Rescue Plan [P.L. 117-2 Section 8002]	57,210	100,997	100,997		-100,997
Equipment - Recurring Expenses Transformational Fund	233,050				
Insurance claims and indemnities	1,091	1,659	1,227	1,351	124
Subtotal, Direct obligations	\$6,155,271	\$6,403,972	\$7,357,726	\$7,706,525	348,799
Reimbursable obligations:					
Personal compensation:					
Full-time permanent	6,821	7,545	7,545	9,528	1,982
Civilian personnel benefits	2,051	3,234	3,234	4,083	850
Travel and transportation of persons	33				
Communications, utilities, and miscellaneous charges	9,259	1,412	1,412	14,621	13,209
Other services from non-Federal sources	85,662	60,862	100,862	135,275	34,413
Supplies and Materials	10			16	16
Equipment	14,549	52,984	52,984	22,976	-30,008
Subtotal, Reimbursable obligations	\$118,385	\$126,037	\$166,037	\$186,499	20,461
Total new obligations, unexpired accounts	6,273,656	6,530,009	7,523,763	7,893,024	369,261

Note: Numbers may not add due to rounding

Appendix I: Staffing and Admin Support by Object Class

Staffing & Administrative Support Services by Object Class					
(\$s in thousands)					
	2022	2023		2024	2023-2024
	Actuals	Request	Enacted	Request	Increase / Decrease
Total Full-Time Equivalent (FTE) Employment	7,958	8,993	9,144	9,583	439
Direct civilian full-time equivalent employment	7,897	8,918	8,918	9,177	
PACT Act civilian employment Not to Exceed			139	341	202
Reimbursable civilian full-time equivalent	61	75	87	65	-22
Direct Obligations:					
Personnel compensation:					
Full-time permanent	863,726	934,570	941,208	1,018,050	76,841
PACT Act Not to Exceed			8,837	49,573	40,736
Total personnel compensation	863,726	934,570	950,045	1,067,623	117,578
Civilian personnel benefits	328,787	402,425	401,098	438,202	37,104
PACT Act Civilian personnel benefits Not to			3,787	21,246	17,459
Travel and transportation of persons	3,396	13,316	15,334	16,101	767
charges	2,870	157	14,769	15,507	738
Other services from non-Federal	213,660	136,558	120,821	112,712	-8,110
Supplies and materials	470	1,470	838	880	42
Equipment	296	263	51	54	3
Insurance claims and indemnities	1,091	1,050	1,000	1,050	50
Direct obligations	1,414,296	1,489,808	1,507,744	1,673,374	165,630
Reimbursable obligations	10,309	10,779	12,229	13,611	1,381
Total new obligations, unexpired accounts	\$1,424,604	\$1,500,587	\$1,519,973	\$1,686,985	167,012

Note: Numbers may not add due to rounding

Appendix J: Employment Summary – FTE by Grade

Employment Summary - FTE by Grade							
# of FTE	2022 Actuals	2023 Request	2023 Enacted		2024 Request		2023-2024
	Base Appropriation & RA	Base Appropriation & RA	Base Appropriation & RA	PACT Act	Base Appropriation & RA Request	PACT Act	Base and RA Increase/Decrease
SES	31	35	35	-	36	-	1
GS-15	255	278	288	13	296	32	8
GS-14	1,205	1,316	1,363	28	1,399	70	36
GS-13	2,625	2,869	2,970	31	3,048	77	78
GS-12	1,517	1,637	1,716	17	1,761	42	45
GS-11	1,989	2,330	2,251	45	2,310	108	59
GS-10	-	-	-	-	-	-	-
GS-9	213	311	241	5	247	12	6
GS-8	1	1	1	-	1	-	0
GS-7	96	186	108	-	111	-	3
GS-6	21	23	24	-	25	-	1
GS-5	6	7	7	-	7	-	0
GS-4	1	-	1	-	1	-	0
GS-3	-	-	-	-	-	-	-
GS-2	-	-	-	-	-	-	-
GS-1	-	-	-	-	-	-	-
TITLE 38	-	-	-	-	-	-	-
Wage Grade (non-GS)	-	-	-	-	-	-	-
Total Number of FTE	7,958	8,993	9,005	139	9,242	341	237

Note: Numbers may not add due to rounding
Table includes reimbursable and BA FTE's

Appendix K: Staffing and Admin Support by OIT Organizations

(\$s in thousands)	2022 Actuals		2023 Request		2023 Enacted		2024 Request	
	Staffing	Administrative Support Services	Staffing	Administrative Support Services	Staffing	Administrative Support Services	Staffing	Administrative Support Services
EUS	\$ -	\$ -	\$ -	\$ -	\$ 467,438	\$ 10,023	\$ 490,330	\$ 1,826
EUS PACT Act					\$ 6,302	\$ -	\$ 20,353	
SPM	\$ -	\$ -	\$ -	\$ -	\$ 267,232	\$ -	\$ 280,320	\$ 3,265
SPM PACT Act					\$ 639	\$ -	\$ 5,192	\$ -
IO	\$ -	\$ -	\$ -	\$ -	\$ 124,152	\$ -	\$ 124,659	\$ 1,591
IO PACT Act					\$ 639	\$ -	\$ 5,192	
IS	\$ 47,035	\$ 372	\$ 55,614	\$ 1,108	\$ 117,723	\$ 1,108	\$ 123,488	\$ 1,131
IS PACT Act					\$ 1,980	\$ -	\$ 15,784	\$ -
People Science	\$ -	\$ -	\$ -	\$ -	\$ 61,820	\$ 9,667	\$ 116,848	
People Science PACT Act					\$ 639	\$ -	\$ 5,192	\$ -
ITBF	\$ -	\$ -	\$ -	\$ -	\$ 22,704	\$ 103,867	\$ 23,994	\$ 126,002
CCS	\$ -	\$ -	\$ -	\$ -	\$ 84,002	\$ -	\$ 88,116	\$ 1,060
CCS PACT Act					\$ 1,150	\$ -	\$ 8,930	\$ -
CRR	\$ -	\$ -	\$ -	\$ -	\$ 67,282	\$ 7,798	\$ 72,179	\$ 8,274
PE	\$ -	\$ -	\$ -	\$ -	\$ 46,356	\$ -	\$ 48,626	\$ 537
PE PACT Act					\$ 894	\$ -	\$ 7,061	\$ -
BIOS (Previously AMO)	\$ 13,182	\$ 17,541	\$ 15,520	\$ 15,731	\$ 22,404	\$ 18,726	\$ 23,501	\$ 1,360
SS	\$ 27,862	\$ 140	\$ 28,593	\$ 1,221	\$ 36,871	\$ 1,232	\$ 38,676	\$ 1,257
CTO	\$ -	\$ -	\$ -	\$ -	\$ 23,439	\$ 392	\$ 24,587	
CTO PACT Act	\$ -	\$ -	\$ -	\$ -	\$ 383	\$ -	\$ 3,115	\$ -
Strategic Initiatives	\$ -	\$ -	\$ -	\$ -	\$ 884		\$ 927	
DevSecOps	\$ 1,017,822	\$ 81,489	\$ 1,111,170	\$ 13,292	\$ -	\$ -	\$ -	\$ -
ITRM	\$ 40,075	\$ 116,138	\$ 37,531	\$ 112,145	\$ -	\$ -	\$ -	\$ -
QPR	\$ 46,537	\$ 6,103	\$ 52,047	\$ 8,299	\$ -	\$ -	\$ -	\$ -
To Be Allocated ^{1/}	\$ -	\$ -	\$ 36,519	\$ 1,017	\$ -	\$ -	\$ -	\$ -
Total	\$ 1,192,513	\$ 221,783	\$ 1,336,995	\$ 152,813	\$ 1,354,931	\$ 152,813	\$ 1,527,071	\$ 146,303

Note: Numbers exclude reimbursements and transfers

Please refer to the IT Organization Restructure justification for additional details regarding the changes in IT Staffing

1/ In 2023, the amounts will be allocated to OIT organizations based on the CIO's strategic priorities

Appendix L: Information Security Details

Information Security Details ((\$ in Thousands))															
	2022 Actual			2023 Request			2023 Enacted			2024 Request			2023-2024 Increase/Decrease		
	DEV	OM	PAY/ ADMIN	DEV	OM	PAY/ ADMIN	DEV	OM	PAY/ ADMIN	DEV	OM	PAY/ ADMIN	DEV	OM	PAY/ ADMIN
Information Security Operations	\$ -	\$ 120,694	\$ -	\$ -	\$ 170,749	\$ -	\$ -	\$ 170,749	\$ -	\$ -	\$ 231,468	\$ -	\$ -	\$ 60,719	\$ -
Information Security Operations - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,058	\$ -	\$ -	\$ 5,888	\$ -	\$ -	\$ (170)	\$ -
Social Security Number Reduction	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 116,000	\$ -	\$ -	\$ 116,000	\$ -
Cyber Security	\$ 11,200	\$ 23,133	\$ -	\$ -	\$ 45,540	\$ -	\$ -	\$ 45,540	\$ -	\$ -	\$ 83,071	\$ -	\$ -	\$ 37,531	\$ -
Cyber Security - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,914	\$ -	\$ -	\$ 26,223	\$ -	\$ -	\$ 20,309	\$ -
Cyber Security - TMF	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,550	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (10,550)	\$ -
CRISP Operations ^{1/}	\$ -	\$ 116,430	\$ -	\$ -	\$ 63,911	\$ -	\$ -	\$ 63,911	\$ -	\$ -	\$ 100,000	\$ -	\$ -	\$ 36,089	\$ -
CRISP Operations - ARP 8002	\$ -	\$ 10,918	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Enterprise CyberSecurity Program (formerly Cybersecurity Implementation Strategy)	\$ -	\$ 24,567	\$ -	\$ -	\$ 60,000	\$ -	\$ -	\$ 60,000	\$ -	\$ -	\$ 56,369	\$ -	\$ -	\$ (3,631)	\$ -
Enterprise CyberSecurity Program (formerly Cybersecurity Implementation Strategy) - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,631	\$ -	\$ -	\$ 3,631	\$ -
Enterprise CyberSecurity Program (formerly Cybersecurity Implementation Strategy) - ARP 8002	\$ -	\$ -	\$ -	\$ -	\$ 9,663	\$ -	\$ -	\$ 9,663	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (9,663)	\$ -
Privacy & Records Management	\$ -	\$ 31,189	\$ -	\$ -	\$ 54,788	\$ -	\$ -	\$ 54,788	\$ -	\$ -	\$ 27,641	\$ -	\$ -	\$ (27,147)	\$ -
Information Security Policy and Strategy	\$ -	\$ 29,797	\$ -	\$ -	\$ 60,605	\$ -	\$ -	\$ 60,605	\$ -	\$ -	\$ 89,364	\$ -	\$ -	\$ 28,759	\$ -
Information Security Policy and Strategy - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Network Operations Security	\$ -	\$ 1,062	\$ -	\$ -	\$ 1,536	\$ -	\$ -	\$ 1,536	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (1,536)	\$ -
Staffing and Administration	\$ -	\$ -	\$ 276,153	\$ -	\$ -	\$ 119,895	\$ -	\$ -	\$ 119,895	\$ -	\$ -	\$ 171,588	\$ -	\$ -	\$ 51,693
Staffing and Administration - PACT Act	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,980	\$ -	\$ -	\$ 15,784	\$ -	\$ -	\$ 13,804
Subtotals	\$ 11,200	\$ 357,789	\$ 276,153	\$ -	\$ 466,792	\$ 119,895	\$ -	\$ 489,314	\$ 121,875	\$ -	\$ 739,655	\$ 187,372	\$ -	\$ 250,341	\$ 65,497
TOTAL	\$	\$	645,142	\$	\$	586,687	\$	\$	611,189	\$	\$	927,027	\$	\$	315,838

The SSNR request is included within the Information Security Operations Program

Note: In 2022, \$70.5M was obligated from the Staffing and Administration sub-account to fund Cyber Security CRISP Operations Sustainment

Appendix M: Cyber Budget Data Request (BDR)

NIST Framework Function	Capability	2022 Actual	2023 Enacted	2024 Request
BASE APPROPRIATION				
M-22-16	Cyber Human Capital	276,153	119,895	171,588
Identify	Continuous Diagnostics and Mitigation (CDM)	31,876	26,922	29,032
	Non-CDM Information Security Continuous Monitoring (ISCM)	170,175	108,056	163,449
	Authorization and Policy	28,588	58,719	114,946
	Standards Development and Propagation	19,696	50,588	29,003
	Supply Chain Risk Management (SCRM) and Acquisitions Management	0	2,550	8,714
	Other Identify Capabilities	1,408	4,259	4,470
	Zero Trust Network Architecture	0	3,200	4,673
	System Security Testing and Analysis	32,009	35,305	37,187
	Security Training	122	1,770	2,289
	Cloud Security	924	4,524	6,135
	Data Safeguarding	11,623	8,131	182,770
	Secure Data Transmission	51	5,135	7,499
	Research & Development	4,907	34,875	22,389
	Security Log Management	0	1,768	2,582
	Other Protect Capabilities	5,099	15,468	3,133
Respond	Data Loss Prevention	4,253	27,491	18,023
	Intrusion Prevention	0	4,618	5,923
	Endpoint Detection and Response	2,228	4,117	4,285
	Other Detect Capabilities	313	0	0
	Incident Management & Response	42,018	51,645	53,855
	Other Respond Capabilities	2,779	7,990	3,556
Subtotal:		634,224	577,024	875,501
Technology Modernization Fund				
Protect	Credentialing and Access Management	0	10,550	0
Subtotal:		0	10,550	0
ARP Section 8002				
Identify	Non-CDM Information Security Continuous Monitoring (ISCM)	10,918	9,663	0
Subtotal:		10,918	9,663	0
PACT Act Toxic Exposure Fund				
M-22-16	Cyber Human Capital		1,980	15,784
Identify	Non-CDM Information Security Continuous Monitoring (ISCM)	0	7,420	25,815
	Authorization and Policy	0	3,242	3,720
Respond	Incident Management & Response	0	996	5,888
	Other Respond Capabilities	0	313	319
Subtotal:		0	13,952	51,526
Grand Total:		645,142	611,189	927,027

Appendix N: IT Investments by Portfolio

Information and Technology 2024 VA IT Investment by Portfolio (\$ in thousands)														
Portfolio	Investment Type	Unique Investment Identifier (UII)	2022 Actuals				2023 Enacted				2024 Request			
			DME	OM	RA	FTE	DME	OM	RA	FTE	DME	OM	RA	FTE
HEALTH			\$ 319,334	\$ 2,960,840	\$ -	271	\$ 260,745	\$ 2,346,055	\$ -	702	\$ 221,596	\$ 2,548,343	\$ -	798
Access to Care	Major	029-55555300	\$ 12,992	\$ 36,118	\$ -	10	\$ 5,975	\$ 49,778	\$ -	23	\$ -	\$ 41,572	\$ -	23
Health Data & Information	Major	029-55555301	\$ 51,785	\$ 106,167	\$ -	14	\$ 37,169	\$ 149,273	\$ -	174	\$ 48,689	\$ 148,529	\$ -	168
Health Management Platform	Major	029-55555302	\$ 137,550	\$ 166,136	\$ -	24	\$ 156,382	\$ 199,146	\$ -	174	\$ 135,064	\$ 277,763	\$ -	174
Electronic Health Record Modernization (EHRM)	Major	029-55555305	\$ -	\$ 2,539,491	\$ -	175	\$ -	\$ 1,759,000	\$ -	264	\$ -	\$ 1,862,535	\$ -	366
Supply Chain Management	Major	029-77777502	\$ 75,769	\$ 24,391	\$ -	-	\$ 35,022	\$ 64,032	\$ -	17	\$ 24,874	\$ 110,053	\$ -	17
Other Medical IT Systems	Non-Major	029-55555306	\$ 31,537	\$ 59,481	\$ -	38	\$ 20,735	\$ 93,982	\$ -	41	\$ 7,410	\$ 62,769	\$ -	41
Health Research	Non-Major	029-55555303	\$ 9,700	\$ 29,055	\$ -	10	\$ 5,463	\$ 30,843	\$ -	9	\$ 5,559	\$ 45,122	\$ -	9
BENEFITS			\$ 198,741	\$ 215,227	\$ 89,145	117	\$ 367,643	\$ 352,353	\$ 144,426	404	\$ 505,322	\$ 451,305	\$ 169,238	405
Benefits Appeals	Major	029-66666400	\$ 14,937	\$ 5,169	\$ -	-	\$ 15,609	\$ 7,553	\$ -	7	\$ 22,628	\$ 8,398	\$ -	6
Benefits Payments	Major	029-66666401	\$ 14,980	\$ 5,965	\$ -	10	\$ 29,153	\$ 17,141	\$ -	27	\$ 23,552	\$ 57,250	\$ -	27
Veterans Benefits Management	Major	029-66666402	\$ 42,629	\$ 61,988	\$ 13,466	-	\$ 109,340	\$ 75,823	\$ 18,350	44	\$ 111,215	\$ 88,605	\$ 12,839	51
Customer Relationship Management	Major	029-66666404	\$ 76,094	\$ 111,423	\$ 7,137	62	\$ 146,830	\$ 183,046	\$ 6,843	110	\$ 218,196	\$ 210,093	\$ 7,145	128
Other Benefits IT Systems	Non-Major	029-66666403	\$ 50,101	\$ 30,682	\$ 68,542	45	\$ 66,711	\$ 68,791	\$ 119,233	216	\$ 129,731	\$ 86,958	\$ 149,254	193
CORPORATE			\$ 139,884	\$ 820,058	\$ 9,620	526	\$ 192,902	\$ 868,399	\$ 9,091	857	\$ 138,701	\$ 919,968	\$ 9,528	1,131
Financial Management	Major	029-77777501	\$ 105,353	\$ 19,637	\$ -	-	\$ 103,106	\$ 20,679	\$ -	6	\$ 119,556	\$ 21,172	\$ -	6
Other Corporate IT Systems	Non-Major	029-77777503	\$ 34,531	\$ 175,852	\$ 7,733	68	\$ 89,796	\$ 72,287	\$ 7,461	94	\$ 19,145	\$ 66,795	\$ 7,582	103
VA Franchise Fund_IT Spending	Non-Major	029-77777212	\$ -	\$ 332,129	\$ -	-	\$ -	\$ 365,522	\$ -	-	\$ -	\$ 362,323	\$ -	-
eGov LoB Benefits.Gov	Non-Major	029-44444020	\$ -	\$ 337	\$ -	-	\$ -	\$ 270	\$ -	-	\$ -	\$ 294	\$ -	-
eGov LoB E-Rulemaking	Non-Major	029-44444060	\$ -	\$ 270	\$ -	-	\$ -	\$ 283	\$ -	-	\$ -	\$ 93	\$ -	-
eGov LoB Grants.gov	Non-Major	029-444440160	\$ -	\$ 152	\$ -	-	\$ -	\$ 238	\$ -	-	\$ -	\$ 229	\$ -	-
eGov LoB Integrated Award Environment	Non-Major	029-444440230	\$ -	\$ 2,731	\$ -	-	\$ -	\$ 2,731	\$ -	-	\$ -	\$ 2,432	\$ -	-
eGov LoB Financial Management	Non-Major	029-444441100	\$ -	\$ 159	\$ -	-	\$ -	\$ 159	\$ -	-	\$ -	\$ 159	\$ -	-
eGov LoB Human Resources Management	Non-Major	029-444441200	\$ -	\$ 274	\$ -	-	\$ -	\$ 274	\$ -	-	\$ -	\$ 274	\$ -	-
eGov LoB Geospatial	Non-Major	029-444443100	\$ -	\$ 25	\$ -	-	\$ -	\$ 25	\$ -	-	\$ -	\$ 25	\$ -	-
eGov LoB Budget Formulation and Execution	Non-Major	029-444443200	\$ -	\$ 120	\$ -	-	\$ -	\$ 120	\$ -	-	\$ -	\$ 120	\$ -	-
eGov LoB Disaster Assistance Improvement Plan	Non-Major	029-444444100	\$ -	\$ 66	\$ -	-	\$ -	\$ 66	\$ -	-	\$ -	\$ 66	\$ -	-
Corporate IT Support ITRM	Non-Major	029-77777015	\$ -	\$ 288,306	\$ 1,887	458	\$ -	\$ 405,744	\$ 1,631	757	\$ -	\$ 465,986	\$ 1,946	1,022
ENTERPRISE			\$ 576,317	\$ 3,763,886	\$ 19,399	7,212	\$ 1,098,738	\$ 3,960,230	\$ 12,370	7,432	\$ 970,822	\$ 4,157,473	\$ 7,558	7,586
Enterprise Data Services	Major	029-88888601	\$ 111,283	\$ 305,195	\$ 996	41	\$ 54,504	\$ 182,179	\$ 1,911	119	\$ 69,463	\$ 461,881	\$ 1,099	131
Enterprise Security Services	Standard	029-88888600	\$ 47,953	\$ 597,189	\$ -	1,612	\$ 150,423	\$ 460,670	\$ -	607	\$ 262,597	\$ 664,430	\$ -	661
EPMO Enterprise Support	Standard	029-88888610	\$ -	\$ 127,113	\$ 1,960	435	\$ 139,151	\$ 315,869	\$ 3,246	160	\$ -	\$ 74,101	\$ 3,294	160
IT Operations Network	Standard	029-88888603	\$ 166,960	\$ 299,817	\$ 749	226	\$ 148,809	\$ 356,729	\$ 794	314	\$ 118,234	\$ 351,711	\$ 864	339
IT Operations Data Center and Cloud	Standard	029-88888604	\$ 64,943	\$ 109,385	\$ -	233	\$ 98,000	\$ 371,114	\$ -	305	\$ 114,000	\$ 313,637	\$ -	305
IT Operations Platform	Standard	029-88888608	\$ -	\$ 76,036	\$ -	391	\$ -	\$ 204,046	\$ -	514	\$ -	\$ 97,701	\$ -	514
IT Operations End User	Standard	029-88888605	\$ 185,124	\$ 1,174,003	\$ 15,694	2,966	\$ 405,923	\$ 1,242,590	\$ 6,420	3,718	\$ 274,831	\$ 1,337,252	\$ 2,301	3,779
IT Operations Application	Standard	029-88888606	\$ 53	\$ 928,407	\$ -	785	\$ 7,238	\$ 694,220	\$ -	1,033	\$ 42,276	\$ 724,401	\$ -	1,033
IT Operations Delivery	Standard	029-88888607	\$ -	\$ 146,742	\$ -	523	\$ 94,690	\$ 132,812	\$ -	662	\$ 89,421	\$ 132,360	\$ -	664
MEMORIAL AFFAIRS			\$ 20,494	\$ 12,111	\$ 220	7	\$ 23,488	\$ 14,468	\$ 150	13	\$ 8,307	\$ 17,632	\$ 175	13
Memorials Automation	Major	029-66666700	\$ 20,494	\$ 12,111	\$ 220	7	\$ 23,488	\$ 14,468	\$ 150	13	\$ 8,307	\$ 17,632	\$ 175	13
TOTAL			\$ 1,254,770	\$ 7,772,121	\$ 118,385	8,133	\$ 1,943,517	\$ 7,541,505	\$ 166,037	9,408	\$ 1,844,747	\$ 8,094,721	\$ 186,499	9,934
TOTAL REPORTED IN VA IT PORTFOLIO (Exhibit 53)					\$ 9,145,276	8,133			\$ 9,651,058	9,408			\$ 10,125,967	9,934

Note: The table above reflects the OIT (including OEHRM) investments structure for 2022,2023 and 2024. Per OMB guidance, it reflects (all funding sources (Budget Authority (BA) – Pay and Non-Pay, Reimbursements (RA), E-Gov Initiatives, EHRM, American Rescue Plan (ARP), Recurring Transformational Fund (TAF) and VA Franchise Fund_IT Spending). The information in the table gets submitted to the OMB IT Collect; (2) The DME column combines Development, Sustainment- Modernization and Sustainment- Enhancements (shown separately in the Operations and Maintenance appendix).

Appendix O: TBM Matrix

2022 IT Investment Portfolio TBM Matrix													
(\$ in thousands)		IT Towers											
		Data Center	Compute	Output	Storage	Network	Platform	End User	Security & Compliance	Application	Delivery	IT Management	Grand Total Cost Pool
Cost Pools	External Labor	\$ 46,741	\$ 141,372	\$ 12	\$ 95,156	\$ 179,618	\$ 338,838	\$ 170,509	\$ 339,705	\$ 2,297,070	\$ 481,536	\$ 1,178,467	\$ 5,269,024
	Facilities & Power	\$ 13,717	\$ -	\$ -	\$ -	\$ -	\$ 4,127	\$ 16	\$ -	\$ 190	\$ -	\$ 18,970	\$ 37,020
	Hardware	\$ 1,037	\$ 19,157	\$ -	\$ 29,036	\$ 220,375	\$ 10,307	\$ 160,209	\$ 3,323	\$ 38,761	\$ -	\$ 45,509	\$ 527,714
	Internal Labor	\$ 2,053	\$ 14,081	\$ -	\$ 18,626	\$ 29,734	\$ 29,823	\$ 701,564	\$ 255,929	\$ 165,606	\$ 61,601	\$ 273,652	\$ 1,552,669
	Internal Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,134	\$ 4,134
	Other	\$ 81	\$ -	\$ -	\$ -	\$ 1,327	\$ 2,498	\$ 895	\$ 961	\$ 6,588	\$ 2,640	\$ 17,925	\$ 32,915
	Outside Services	\$ -	\$ 15,803	\$ -	\$ 8,243	\$ 1,170	\$ 27,781	\$ 2,334	\$ 1,159	\$ 13,433	\$ 1,191	\$ 13,063	\$ 84,177
	Software	\$ 10	\$ 60,321	\$ -	\$ 1,404	\$ 10,174	\$ 48,571	\$ 406,513	\$ 21,584	\$ 682,275	\$ 14,876	\$ 6,907	\$ 1,252,635
	Telecom	\$ -	\$ 51	\$ -	\$ 52	\$ 359,502	\$ 23	\$ 18,248	\$ 40	\$ 6,274		\$ 798	\$ 384,988
	Grand Total	\$ 63,639	\$ 250,785	\$ 12	\$ 152,517	\$ 801,900	\$ 461,968	\$ 1,460,288	\$ 622,701	\$ 3,210,197	\$ 561,844	\$ 1,559,425	\$ 9,145,276

Note: The 2022 VA IT Investment Portfolio total amount of \$9,145,276 million includes the following funding sources:

- 1) OIT Request in the amount of \$4,837,731 million plus \$118,385 million Reimbursable.
- 2) Recurring Expenses Transformational Fund in the amount of \$625,309 million.
- 3) OEHRM Budget Request in the amount of \$2,663 million plus \$720,596 million unobligated balance brought forward, Oct 1.
- 4) Franchise Funds Spending Projection in the amount of \$332,129 million.
- 5) American Rescue Plan Act [P.L. 117-2 Section 8003] in the amount of \$23,895 million.
- 6) American Rescue Plan Act [P.L. 117-2 Section 8002] in the amount of \$668,336 million.
- 7) VHA CARES Act transfer [P.L. 117-43 Section 151] in the amount of \$9,493 million.
- 8) Unobligated balance brought forward, Oct 1 in the amount of \$37,423 million.
- 9) Prior Year Recoveries in the amount of \$3,552 million
- 10) Prior year Recoveries VACAA 801 in the amount of \$60 million
- 11) Prior year Recoveries OEF/OIF Emergency Appropriation in the amount of \$510million

2023 IT Investment Portfolio TBM Matrix													
(\$ in thousands)		IT Towers											
		Data Center	Compute	Storage	Network	Platform	End User	Security & Compliance	Application	Delivery	IT Management	Grand Total Cost Pool	
Cost Pools	External Labor	\$ 620	\$ 181,168	\$ 35,420	\$ 65,618	\$ 220,631	\$ 38,560	\$ 115,603	\$ 975,145	\$ 296,478	\$ 472,979	\$ 2,402,222	
	Facilities & Power	\$ -	\$ -	\$ -	\$ -	\$ 5	\$ 3,847	\$ -	\$ -	\$ -	\$ 39,362	\$ 43,214	
	Hardware	\$ -	\$ 384,113	\$ 2,094	\$ 36,139	\$ 46,903	\$ 484,633	\$ 20,247	\$ 3,051	\$ 5,990	\$ 2,964	\$ 986,134	
	Internal Labor	\$ 10,075	\$ 6,321	\$ 740	\$ 3,534	\$ 134,063	\$ 366,626	\$ 24,546	\$ 1,105,185	\$ 20,463	\$ 87,903	\$ 1,759,456	
	Internal Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,166	\$ 4,166
	Other	\$ -	\$ 322	\$ -	\$ 11	\$ 2,443	\$ 187	\$ 17,292	\$ 42,796	\$ 34	\$ 372,037	\$ 435,122	
	Outside Services	\$ -	\$ -	\$ 262	\$ 189	\$ 5,141	\$ 76,073	\$ 232,152	\$ 379,473	\$ 108,093	\$ 45,007	\$ 846,390	
	Software	\$ -	\$ 2,057	\$ 24	\$ 442	\$ 15,574	\$ 489,037	\$ 36,448	\$ 1,976,838	\$ 33,703	\$ 143,970	\$ 2,698,093	
	Telecom	\$ -	\$ -	\$ -	\$ 465,951		\$ 6	\$ 7	\$ 10,295	\$ -	\$ -	\$ -	\$ 476,260
	Grand Total	\$ 10,695	\$ 573,981	\$ 38,540	\$ 571,884	\$ 424,761	\$ 1,458,969	\$ 446,295	\$ 4,492,784	\$ 464,761	\$ 1,168,388	\$ 9,651,058	

Note: The 2023 VA IT Investment Portfolio total amount of \$9,651,058 million includes the following funding sources:

- 1) OIT Request in the amount of \$5,782 million plus \$166,037 million Reimbursable.
- 2) EHRM Budget Request in the amount of \$1,759 million.
- 3) Franchise Funds Spending Projection in the amount of \$365,522 million.
- 4) American Rescue Plan (ARP) Funding in the amount of \$769,242 million
- 5) Technology Modernization Fund in the amount of \$10,550 million
- 6) Unobligated balance brought forward for Recurring Transformation Fund in the amount of \$44,691
- 7) Unobligated balance brought forward in the amount of \$45,573

2024 IT Investment Portfolio TBM Matrix												
(\$ in thousands)		IT Towers										
		Data Center	Compute	Storage	Network	Platform	End User	Security & Compliance	Application	Delivery	IT Management	Grand Total Cost Pool
Cost Pools	External Labor	\$ 162	\$ 70,383	\$ 1,422	\$ 10,512	\$ 204,179	\$ 150,583	\$ 461,527	\$ 3,302,254	\$ 490,088	\$ 1,032,467	\$ 5,723,577
	Facilities & Power	\$ -	\$ -	\$ -	\$ -	\$ 3,476	\$ 10	\$ -	\$ -	\$ -	\$ 38,078	\$ 41,563
	Hardware	\$ -	\$ 114,172	\$ 1,302	\$ 36,534	\$ 6,094	\$ 286,856	\$ 250,588	\$ 26,367	\$ 134,000	\$ 476	\$ 856,389
	Internal Labor	\$ 2,588	\$ 17,989	\$ 22,750	\$ 39,846	\$ 39,346	\$ 825,169	\$ 241,242	\$ 309,217	\$ 99,089	\$ 379,656	\$ 1,976,893
	Internal Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,639	\$ -	\$ 3,692	\$ 12,331
	Other	\$ -	\$ -	\$ -	\$ 787	\$ 1,478	\$ 447	\$ 570	\$ 32,287	\$ 1,567	\$ 9,718	\$ 46,854
	Outside Services	\$ -	\$ 2,599	\$ -	\$ -	\$ 12,526	\$ -	\$ 19,000	\$ 3,746	\$ -	\$ 9,856	\$ 47,727
	Software	\$ -	\$ 32,921	\$ -	\$ 215	\$ 311	\$ 356,649	\$ 15,256	\$ 667,344	\$ 36,000	\$ 2,198	\$ 1,110,893
	Telecom	\$ -	\$ -	\$ -	\$ 5,505	\$ 14	\$ -	\$ -	\$ 4,216	\$ 300,000	\$ 5	\$ 309,740
	Grand Total	\$ 2,750	\$ 238,063	\$ 25,474	\$ 93,399	\$ 267,423	\$ 1,619,714	\$ 988,184	\$ 4,354,069	\$ 1,060,744	\$ 1,476,146	\$ 10,125,967

Note: 2024 VA IT Investment Portfolio total amount of \$10,125,967 million includes the following funding sources:

- 1) OIT Request in the amount of \$6,401million plus \$186,499 million Reimbursable.
- 2) OEHRM Budget Request in the amount of \$1,862,535 million.
- 3) Franchise Funds Spending Projection in the amount of \$362,323 million
- 4) PACT Act in the amount of \$1,243 million
- 5)PACT Act Unobligated brought forward in the amount of \$70,601 million

Appendix P: 1:N Prioritization List

Under the leadership of the CIO, OIT will continue to refine its prioritization criteria and budget prioritization process in close collaboration with VA Administrations and staff offices. Both funded and unfunded 1:N lists are snapshots in time based on knowledge gathered at the time of submission. These two lists are dynamic and will be assessed and updated periodically based on guidance received on the budget submission not to mention governance deliberations and decisions made by OIT and the VA.

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
1	ITIN	OIT	Cyber Security Operations	Information Security Operations (SVAC)	Sustainment-Steady-State	\$ 19,000
2	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Steady-State	\$ 780
3	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Steady-State	\$ 30,158
4	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Steady-State	\$ 6,293
5	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Steady-State	\$ 11,547
6	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Steady-State	\$ 37,226
7	Veteran Experience	VEO	Cyber Security Operations	Identity and Access	Sustainment-Steady-State	\$ 46,668
8	ITIN	OIT	Cyber Security Operations	Social Security Number Reduction (SSNR)	Sustainment-Enhancement	\$ 16,000
9	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) Enterprise CyberSecurity Plan	Sustainment-Steady-State	\$ 28,436
10	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) Enterprise CyberSecurity Plan	Sustainment-Modernization	\$ 11,864
11	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) Enterprise CyberSecurity Plan	Sustainment-Enhancement	\$ 16,069
12	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Modernization	\$ 1,139
13	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Enhancement	\$ 56,095
14	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Modernization	\$ 874
15	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Modernization	\$ 994
16	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Cyber Security Operations Center	Sustainment-Modernization	\$ 4,585
17	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) CyberSecurity Technology and Metrics	Sustainment-Steady-State	\$ 4,423
18	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) CyberSecurity Technology and Metrics	Sustainment-Steady-State	\$ 7,003
19	ITIN	OIT	Awareness, Governance, Risk, Compliance	Cybersecurity Program Integration	Sustainment-Steady-State	\$ 454
20	ITIN	OIT	Awareness, Governance, Risk, Compliance	Cybersecurity Program Integration	Sustainment-Enhancement	\$ 3,216
21	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) CyberSecurity Technology and Metrics	Sustainment-Modernization	\$ 2,181
22	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) CyberSecurity Technology and Metrics	Sustainment-Modernization	\$ 2,181
23	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Privacy	Sustainment-Steady-State	\$ 2,008
24	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Privacy	Sustainment-Steady-State	\$ 2,891
25	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) Enterprise Security Architecture	Sustainment-Steady-State	\$ 18,372

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
26	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Information Security Risk Management	Sustainment-Steady-State	\$ 5,369
27	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Information Security Risk Management	Sustainment-Steady-State	\$ 5,366
28	ITIN	OIT	Cyber Security Operations	Continuous Readiness in Information Security (CRISP)	Sustainment-Steady-State	\$ 100,000
29	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) - Information Security Policy and Compliance	Sustainment-Steady-State	\$ 1,222
30	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Information Security Risk Management	Sustainment-Modernization	\$ 4,053
31	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Information Security Risk Management	Sustainment-Modernization	\$ 8,344
32	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Information Security Risk Management	Sustainment-Modernization	\$ 1,377
33	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) - Information Security Policy and Compliance	Sustainment-Enhancement	\$ 2,747
34	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Information Security Risk Management	Sustainment-Steady-State	\$ 3,893
35	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Privacy	Sustainment-Steady-State	\$ 368
36	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Privacy	Sustainment-Enhancement	\$ 3,885
37	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Privacy	Sustainment-Modernization	\$ 148
38	ITIN	OIT	Cyber Security Operations	Information Security Operations (ISO) - Information Security Risk Management	Sustainment-Enhancement	\$ 17,024
39	ITIN	OIT	Cyber Security Operations	Field Security Service	Sustainment-Steady-State	\$ 1,367
40	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) - Information Security Policy and Compliance	Sustainment-Modernization	\$ 1,069
41	ITIN	OIT	Awareness, Governance, Risk, Compliance	Information Security Policy and Strategy (ISPS) - Information Security Policy and Compliance	Sustainment-Modernization	\$ 1,070
42	ITIN	OIT	Cyber Security Operations	Enterprise IT Support Contracts - Cyber Security Operations	Sustainment-Steady-State	\$ 52,110
43	Veteran Experience	VEO	Cyber Security Operations	Digital Identity and Access	Sustainment-Steady-State	\$ 36,403
44	Corporate	OIT	Privacy & Records Management	Control Unclassified Information	Sustainment-Steady-State	\$ 259
45	Corporate	OIT	Privacy & Records Management	Systems Quality Assurance Service (SQAS) - IV&V Support Contract	Sustainment-Steady-State	\$ 391
46	Corporate	OIT	Privacy & Records Management	Freedom of Information Act (FOIA) Support Services	Sustainment-Steady-State	\$ 417
47	Corporate	OIT	Privacy & Records Management	Data Analytics Contract	Sustainment-Steady-State	\$ 1,542
48	Corporate	OIT	Privacy & Records Management	OIT-Wide Communication Support	Sustainment-Steady-State	\$ 4,161
49	Corporate	OIT	Privacy & Records Management	Federal Managers Financial Integrity (FMFIA) - Statement of Assurance	Sustainment-Steady-State	\$ 736
50	Corporate	OIT	Privacy & Records Management	Grant Thornton Support to Compliance, Risk and Remediation (CRR)	Sustainment-Steady-State	\$ 1,051

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
51	Corporate	OIT	Privacy & Records Management	IT Governance Support Contract	Sustainment-Steady-State	\$ 410
52	Corporate	OIT	Privacy & Records Management	OIT Front office - ITPI Support Contract	Sustainment-Steady-State	\$ 6,694
53	Corporate	OIT	Privacy & Records Management	OIG FISMA Federal Information System Controls Audit Manual (FISCAM) Audit Support Contract	Sustainment-Steady-State	\$ 186
54	Corporate	OIT	Privacy & Records Management	CIO Balanced Score Card	Sustainment-Steady-State	\$ 689
55	Corporate	OIT	Privacy & Records Management	National Institute of Standards and Technology (NIST) Audit Support	Sustainment-Steady-State	\$ 896
56	Corporate	OIT	Privacy & Records Management	Investment Review Board (IRB) Support	Sustainment-Steady-State	\$ 928
57	Corporate	OIT	Privacy & Records Management	Paper Reduction Act Support Contract	Sustainment-Steady-State	\$ 287
58	Corporate	OIT	Privacy & Records Management	RMD Risk Analyst Support	Sustainment-Steady-State	\$ 862
59	Corporate	OIT	Privacy & Records Management	OIT Enterprise Roadmap Contract	Sustainment-Steady-State	\$ 223
60	Corporate	OIT	Privacy & Records Management	Release of Names and Addresses (RONA) (Legal Requirement)	Sustainment-Steady-State	\$ 502
61	Corporate	OIT	Privacy & Records Management	Business Office Budget Support	Sustainment-Steady-State	\$ 249
62	Corporate	OIT	Privacy & Records Management	CIO Strategic Support Contract_FFRDC	Sustainment-Steady-State	\$ 1,233
63	Corporate	OIT	Privacy & Records Management	Cyber Workforce Services	Sustainment-Steady-State	\$ 909
64	Corporate	OIT	Privacy & Records Management	Cloud Credit in support of the Enterprise Risk Registry	Sustainment-Steady-State	\$ 8
65	Corporate	OIT	Privacy & Records Management	Privacy, Records Assessment Data Analytics and Risk (PRADAR)	Sustainment-Steady-State	\$ 153
66	Corporate	OIT	Privacy & Records Management	Enterprise Risk Management (ERM) - Technology Risk Registry Service Level Agreement SLA	Sustainment-Steady-State	\$ 177
67	Corporate	OIT	Privacy & Records Management	Web and Applications Support	Sustainment-Steady-State	\$ 313
68	Corporate	OIT	Privacy & Records Management	E-FOIA Express	Sustainment-Steady-State	\$ 574
69	Corporate	OIT	Privacy & Records Management	DOJ required Public Access Link	Sustainment-Steady-State	\$ 19
70	Corporate	OIT	Privacy & Records Management	Enterprise IT Support Contracts - Privacy & Records Management	Sustainment-Steady-State	\$ 417
71	Corporate	OIT	Privacy & Records Management	OIT Front Office Enterprise Architecture (EA) Support Contract	Sustainment-Steady-State	\$ 412
72	Corporate	OIT	Privacy & Records Management	VA Interoperability, Standards Development and Coordination	Sustainment-Steady-State	\$ 2,943
73	ITIN	OIT	Unified Communications	Infrastructure Readiness Program (IRP) - Unified Communications Infrastructure	Sustainment-Modernization	\$ 11,750
74	ITIN	OIT	Unified Communications	Infrastructure Readiness Program (IRP) - Unified Communications Infrastructure	Sustainment-Modernization	\$ 5,250
75	ITIN	OIT	End User Compute	Infrastructure Readiness Program (IRP) - End User Infrastructure	Sustainment-Modernization	\$ 13,500

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
76	ITIN	OIT	Storage Services	Infrastructure Readiness Program (IRP) - Server/Storage Farm Infrastructure	Sustainment-Modernization	\$ 83,400
77	ITIN	OIT	Network Services	Infrastructure Readiness Program (IRP) - Network Infrastructure	Sustainment-Modernization	\$ 100,684
78	ITIN	OIT	End User Compute	Infrastructure Readiness Program (IRP) - End User Infrastructure	Sustainment-Modernization	\$ 111,500
79	ITIN	OIT	Storage Services	Infrastructure Readiness Program (IRP) - Server/Storage Farm Infrastructure	Sustainment-Modernization	\$ 30,600
80	ITIN	OIT	Shared Devices	Infrastructure Readiness Program (IRP) - Miscellaneous: Shared Devices, Very Small Aperture Terminal (VSAT)	Sustainment-Modernization	\$ 37,543
81	ITIN	OIT	Network Services	Infrastructure Readiness Program (IRP) - Network Infrastructure	Sustainment-Modernization	\$ 33,316
82	Benefits	VBA	Education Veterans Readiness and Employment	Digital GI Bill	Sustainment-Steady-State	\$ 8,242
83	Benefits	VBA	Education Veterans Readiness and Employment	Digital GI Bill	Sustainment-Enhancement	\$ 2,000
84	Corporate	OM	Financial Management Services	Financial Management	Sustainment-Modernization	\$ 119,556
85	Corporate	HRA	Human Resources	Human Capital Management	Sustainment-Steady-State	\$ 1,800
86	Corporate	HRA	Human Resources	Workforce Analytics and Employee Records	Sustainment-Steady-State	\$ 9,708
87	Corporate	HRA	Human Resources	New Hire In-Processing and Onboarding	Sustainment-Steady-State	\$ 2,500
88	Corporate	HRA	Human Resources	Human Capital Management	Sustainment-Enhancement	\$ 15,500
89	Corporate	HRA	Human Resources	Security and Preparedness	Sustainment-Steady-State	\$ 2,627
90	Corporate	HRA	Human Resources	Employee Performance Management	Sustainment-Steady-State	\$ 4,659
91	Corporate	HRA	Human Resources	Work-Life Wellness/Employee Assistance Programming	Sustainment-Steady-State	\$ 473
92	Corporate	HRA	Human Resources	New Hire In-Processing and Onboarding	Sustainment-Enhancement	\$ 500
93	Corporate	HRA	Human Resources	Compensation and Benefits	Sustainment-Steady-State	\$ 744
94	Health	VHA	Health Administration	VistA - Computerized Patient Record System (CPRS) (SSNR)	Sustainment-Enhancement	\$ 6,000
95	Health	VHA	Health Administration	VistA - Computerized Patient Record System (CPRS)	Development	\$ 6,060
96	Corporate	OM	Financial Management Services	Real Property Tools (SSNR)	Sustainment-Steady-State	\$ 2,599
97	Corporate	OALC	Acquisition and Property Management	Property and Facility Services (SSNR)	Sustainment-Steady-State	\$ 1,100
98	Corporate	OM	Financial Management Services	Debt Management (SSNR)	Sustainment-Steady-State	\$ 161
99	Corporate	OAWP	Management Information Systems	Case and Correspondence Tracking (SSNR)	Sustainment-Steady-State	\$ 2,006
100	Corporate	OM	Financial Management Services	Debt Management	Development	\$ 3,000

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
101	Corporate	OALC	Acquisition and Property Management	Property Management (SSNR)	Sustainment-Steady-State	\$ 1,295
102	Corporate	OEI	Management Information Systems	Business Architecture (SSNR)	Sustainment-Steady-State	\$ 175
103	Corporate	OCLA	Management Information Systems	Case and Correspondence Tracking (SSNR)	Sustainment-Steady-State	\$ 586
104	Corporate	OCLA	Management Information Systems	Case and Correspondence Tracking (SSNR)	Sustainment-Steady-State	\$ 1,565
105	Corporate	OALC	Acquisition and Property Management	Property Management (SSNR)	Sustainment-Steady-State	\$ 1,936
106	Corporate	OSDBU	Acquisition and Property Management	Vendor Management (SSNR)	Sustainment-Steady-State	\$ 610
107	ITIN	OIT	Application Delivery Infrastructure	DevSecOps Tools Enclave (DTE) (SSNR)	Sustainment-Steady-State	\$ 10,408
108	Corporate	OIT	Software Product Management Support	Continuous Integration/Continuous Delivery (CI/CD) Tool Suite (SSNR)	Sustainment-Steady-State	\$ 13,878
109	Health	VHA	Quality Systems	National Center for Patient Safety (NCPS) Patient Safety Operations (SSNR)	Sustainment-Modernization	\$ 4,496
110	Health	VHA	Care Coverage Services	Community Care (CC) Electronic Data Interchange (EDI) (SSNR)	Sustainment-Modernization	\$ 18,440
111	Health	VHA	Common Health Care Workflows	Community Care (CC) One Consult	Development	\$ 5,994
112	Health	VHA	Health Delivery Support	Telehealth Hub Expansion (SSNR)	Sustainment-Modernization	\$ 5,000
113	Health	VHA	Care Coverage Services	Community Care Referral and Authorization (CCRA)	Development	\$ 5,000
114	Health	VHA	Care Coverage Services	Community Care Reimbursement System (CCRS)	Development	\$ 8,608
115	Health	VHA	Health Delivery Support	VHA Innovation Ecosystem	Development	\$ 5,385
116	Health	VHA	Operational Support	Enterprise Supply Chain (eSC)	Development	\$ 23,137
117	Health	VHA	Common Health Care Workflows	Cancer Care Tracking System	Development	\$ 1,600
118	Health	VHA	Health Delivery Support	VA PMP Gateway (VAPMPG)	Development	\$ 4,477
119	Health	VHA	Health Administration	Bed Management Solution (BMS) (SSNR)	Sustainment-Enhancement	\$ 1,000
120	Health	VHA	Clinical Care Services	VA Endoscopy Quality Improvement Program (VA EQuIP)	Development	\$ 1,212
121	Veteran Experience	VEO	Digital Experience	Web Application and Platforms	Development	\$ 5,319
122	Health	VHA	Common Health Care Specific Services	Cancer Registry Software	Development	\$ 1,800
123	Veteran Experience	VEO	Digital Experience	Web Application and Platforms	Development	\$ 4,192
124	Health	VHA	Common Health Care Specific Services	National Oncology Program	Development	\$ 3,700
125	Health	VHA	Health Administration	Joint Longitudinal Viewer (SSNR)	Sustainment-Enhancement	\$ 6,924

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
126	Health	VHA	Common Health Care Workflows	Vista - Scheduling (VSE) (SSNR)	Sustainment-Modernization	\$ 2,000
127	Veteran Experience	VEO	Customer Data Management Experience	Veterans Customer Experience & Data and Analytics	Development	\$ 4,673
128	Health	VHA	Clinical Care Services	Women's Health Interactive Management System	Development	\$ 2,987
129	Health	VHA	Clinical Care Services	Computerized Cognitive Behavioral Psychotherapy	Development	\$ 2,250
130	Health	VHA	Health Delivery Support	Telemedicine (Store & Forward) (SSNR)	Sustainment-Modernization	\$ 1,464
131	Health	VHA	Health Administration	VA Policy Library	Development	\$ 860
132	Health	VHA	Health Care Infrastructure	Veterans Data Integration and Federation Enterprise Platform (VDIF-EP) (SSNR)	Sustainment-Modernization	\$ 3,816
133	Health	VHA	Health Delivery Support	Research Resource Center - Knowledge Sharing Forum/Hub	Development	\$ 29
134	Health	VHA	Health Delivery Support	VA Innovation and Research Review System (VAIRRS) Data Access Request Tracker (DART) (SSNR)	Sustainment-Modernization	\$ 1,200
135	Health	VHA	Clinical Care Services	Anesthesia Quality Improvement Program & Analytics Database	Development	\$ 1,500
136	Health	VHA	Health Delivery Support	Outbound eRx	Development	\$ 12,908
137	Health	VHA	Enterprise IT Infrastructure	VHA Employee Education System (106B) - Training Governance and Oversight System	Development	\$ 2,000
138	Health	VHA	Health Delivery Support	Bereavement Care - National Chaplain Service (NCS)	Development	\$ 800
139	Health	VHA	Health Care Infrastructure	Vista Audit Solution (VAS) (SSNR)	Sustainment-Enhancement	\$ 2,600
140	Health	VHA	Common Health Care Specific Services	Implant Tracking Registry and Alert System (ITRAS)	Development	\$ 1,600
141	Corporate	OIT	Budget Formulation	Information Technology Programing and Budget Formulation (ITPBF)	Sustainment-Steady-State	\$ 236
142	Corporate	OIT	Budget Formulation	Information Technology Budget Formulation (ITBF)	Sustainment-Steady-State	\$ 17,797
143	Health	VHA	Patient Management Services	Veteran Benefits Handbook Portlet	Development	\$ 559
144	Benefits	VBA	Loan Guaranty	Housing Grants	Development	\$ 16,000
145	ITIN	OIT	Application Delivery Infrastructure	GitHub Business Cloud (GHBC) (SSNR)	Sustainment-Steady-State	\$ 7,217
146	Corporate	OIT	Software Product Management Support	Portfolio Integration (SSNR)	Sustainment-Steady-State	\$ 3,524
147	ITIN	OIT	Network Services	Network Engineering	Sustainment-Steady-State	\$ 247
148	ITIN	OIT	Network Services	Network Engineering	Sustainment-Steady-State	\$ 254,753
149	ITIN	OIT	Network Services	Network Operations Center	Sustainment-Steady-State	\$ 36,000
150	ITIN	OIT	Solution Delivery (SD) Hardware Maintenance	Enterprise Hardware Maintenance	Sustainment-Steady-State	\$ 25,450

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
151	ITIN	OIT	End User Operations	End User Operations (EUO) Hardware Maintenance	Sustainment-Steady-State	\$ 2,960
152	ITIN	OIT	Infrastructure Operations (IO) Hardware Maintenance	Infrastructure Operations (IO) Hardware Maintenance	Sustainment-Steady-State	\$ 22,560
153	ITIN	OIT	End User Operations	EUO Software License Maintenance	Sustainment-Steady-State	\$ 10,309
154	ITIN	OIT	Infrastructure Operations (IO) Hardware Maintenance	Infrastructure Operations (IO) Hardware Maintenance	Sustainment-Steady-State	\$ 111,299
155	ITIN	OIT	End User Software	Microsoft Enterprise License Agreement (ELA) - Office 365	Sustainment-Steady-State	\$ 315,098
156	ITIN	OIT	Solution Delivery (SD) Software Maintenance	Enterprise Software Licensing	Sustainment-Steady-State	\$ 77,000
157	ITIN	OIT	Infrastructure Operations (IO) Software Maintenance	Enterprise Software Licensing	Sustainment-Steady-State	\$ 61,500
158	ITIN	OIT	Infrastructure Operations (IO) Software Maintenance	Enterprise Software Licensing	Sustainment-Steady-State	\$ 35,760
159	ITIN	OIT	Network Services	Enterprise IT Support Contracts - Network Services	Sustainment-Steady-State	\$ 38,196
160	ITIN	OIT	Unified Communications	Enterprise IT Support Contracts - Unified Communications	Sustainment-Steady-State	\$ 7,000
161	ITIN	OIT	Infrastructure Operations Support	Enterprise IT Support Contracts - Infrastructure Operations	Sustainment-Steady-State	\$ 9,819
162	ITIN	OIT	End User Operations	End User Operations (EUO) IT Support Contracts	Sustainment-Steady-State	\$ 23,194
163	ITIN	OIT	End User Operations	End User Operations (EUO) Facility Allowance	Sustainment-Steady-State	\$ 17,670
164	ITIN	OIT	Enterprise Service Level Agreement (SLA)	Service Level Agreement (SLA) - Enterprise	Sustainment-Steady-State	\$ 52,160
165	ITIN	OIT	IT Service Management	IT Service Management	Sustainment-Enhancement	\$ 80,431
166	ITIN	OIT	Operations Triage Group	Operations Triage Group (OTG)	Sustainment-Steady-State	\$ 9,288
167	Health	VHA	Health Care Infrastructure	Veterans Health Information Systems and Technology Architecture (VistA)	Sustainment-Steady-State	\$ 39,814
168	Health	VHA	Health Administration	VA Online Scheduling (VAOS)	Sustainment-Steady-State	\$ 6,000
169	Health	VHA	Virtual Veteran Record	Direct Secure Messaging (DSM)	Sustainment-Steady-State	\$ 2,929
170	Veteran Experience	VEO	Digital Experience	Mobile Applications and Platforms	Sustainment-Steady-State	\$ 940
171	Veteran Experience	VEO	Digital Experience	Web Application and Platforms	Sustainment-Steady-State	\$ 58,429
172	Veteran Experience	VEO	Digital Experience	Mobile Applications and Platforms	Sustainment-Steady-State	\$ 26,289
173	Veteran Experience	VEO	Customer Feedback and Experience	Customer Feedback	Sustainment-Steady-State	\$ 10,640
174	Benefits	VBA	Compensation and Pension	Veterans Benefits Management	Sustainment-Steady-State	\$ 41,407
175	Benefits	VBA	Benefits Enterprise Support	Benefits System Support Services	Sustainment-Steady-State	\$ 7,984

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
176	Benefits	BVA	Appeals	Appeals Processing	Sustainment-Steady-State	\$ 7,322
177	Memorials	NCA	Memorial Support	Field Programs	Sustainment-Steady-State	\$ 11,223
178	Benefits	VBA	Benefits Integration and Administration	Benefits Cloud Platform	Sustainment-Steady-State	\$ 16,973
179	Health	VHA	Health Care Infrastructure	Veterans Data Integration and Federation Enterprise Platform (VDIF-EP)	Sustainment-Steady-State	\$ 45,733
180	Health	VHA	Common Health Care Workflows	Vista - Scheduling (VSE)	Sustainment-Steady-State	\$ 6,048
181	Health	VHA	Health Administration	Emergency Department Integration System (EDIS)	Sustainment-Steady-State	\$ 500
182	Health	VHA	Health Administration	Bed Management Solution (BMS)	Sustainment-Steady-State	\$ 2,366
183	Health	VHA	Health Administration	Vista - Computerized Patient Record System (CPRS)	Sustainment-Steady-State	\$ 2,500
184	Health	VHA	Health Administration	Telehealth Management Platform (TMP/CVT-TSS)	Sustainment-Steady-State	\$ 8,357
185	Health	VHA	Clinical Care Services	Vista - Imaging (IMAGE)	Sustainment-Steady-State	\$ 4,952
186	Corporate	OM	Financial Management Services	Financial Management	Sustainment-Steady-State	\$ 27,299
187	ITIN	OIT	Foundation Platforms	ITIN VA Enterprise Cloud Solutions (VAEC) Application/Application Programming Interface (API) Hosting	Sustainment-Steady-State	\$ 50,000
188	ITIN	OIT	Foundation Platforms	ITIN Mulesoft Application/API Development and Support & ITIN MuleSoft License Distribution	Sustainment-Steady-State	\$ 43,831
189	ITIN	OIT	Foundation Platforms	ITIN Digital Transformation Center (DTC) Application Programming Interface (API) Development and Support	Sustainment-Steady-State	\$ 47,400
190	ITIN	OIT	Foundation Platforms	ITIN Salesforce Application Programming Interface (API) Development, Support, and Licensing	Sustainment-Steady-State	\$ 107,067
191	ITIN	OIT	Service Desk	Enterprise Service Desk	Sustainment-Steady-State	\$ 51,880
192	ITIN	OIT	IT Service Management	Enterprise Command Center	Sustainment-Steady-State	\$ 59,295
193	ITIN	OIT	Activations	Activations	Sustainment-Enhancement	\$ 75,288
194	Corporate	OIT	Property and Facility Management	Business Operations (BO) - Space and Facilities Management	Sustainment-Steady-State	\$ 38,078
195	Corporate	OIT	OIT Front Office Support	VA Enterprise Architecture Management Suite (VEAMS)	Sustainment-Steady-State	\$ 129
196	Corporate	OIT	OIT Front Office Support	Enterprise Architecture Program Execution Support	Sustainment-Steady-State	\$ 1,048
197	Corporate	OIT	BIOS Support	Technical Reference Model (TRM)	Sustainment-Steady-State	\$ 2,000
198	Veteran Experience	VEO	Contact Center Experience	Quality Management Workforce Management and Analytics	Sustainment-Steady-State	\$ 291
199	Benefits	VBA	Insurance	Life Insurance Benefits	Sustainment-Steady-State	\$ 515
200	Health	VHA	Enterprise IT Infrastructure	Salesforce - Oversight and Accountability Reporting and Visualization Platform (OARVP)	Sustainment-Steady-State	\$ 952

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
201	Veteran Experience	VEO	Contact Center Experience	VHA Patient Advocate and Veteran Inquiry Capability	Sustainment-Steady-State	\$ 5,808
202	Health	VHA	Patient Management Services	Vet Ride (VTSHS)	Sustainment-Steady-State	\$ 1,682
203	Corporate	OIT	TAC Fees	Office of Procurement, Acquisition, and Logistics (OPAL)	Sustainment-Steady-State	\$ 60,419
204	Benefits	VBA	Benefits Experience	Veterans Tracking Application (VTA)	Sustainment-Steady-State	\$ 2,369
205	Benefits	VBA	Compensation and Pension	Legacy Claims Processing	Sustainment-Steady-State	\$ 3,303
206	Health	VHA	Common Health Care Specific Services	COVID-19 Patient Manager - Clinical Decision Support	Sustainment-Steady-State	\$ 2,315
207	ITIN	OIT	Application Delivery Infrastructure	Data Access Services (DAS)	Sustainment-Steady-State	\$ 9,515
208	Health	VHA	Health Administration	VistA Integration Adapter (VIA)	Sustainment-Steady-State	\$ 3,000
209	Health	VHA	Enterprise IT Infrastructure	James A. Lovell Federal Health Center (JAL FHCC)	Sustainment-Steady-State	\$ 3,644
210	Benefits	VBA	VBA Finance	Benefits Payment Modernization	Sustainment-Steady-State	\$ 11,460
211	Benefits	VBA	Benefits Integration and Administration	Benefits Infrastructure Services	Sustainment-Steady-State	\$ 19,557
212	Health	VHA	Health Delivery Support	VHA Innovation Ecosystem	Sustainment-Steady-State	\$ 5,385
213	Health	VHA	Virtual Veteran Record	Veterans Health Information Exchange (VHIE)	Sustainment-Steady-State	\$ 11,000
214	Health	VHA	Operational Support	VHA Mobile Application Platform (MAP)	Sustainment-Steady-State	\$ 15,698
215	Health	VHA	Care Coverage Services	Community Care Referral and Authorization (CCRA)	Sustainment-Steady-State	\$ 38,270
216	Health	VHA	Health Administration	Status Query and Response Exchange (SQUARES)	Sustainment-Steady-State	\$ 1,713
217	Health	VHA	Clinical Care Services	Mental Health Assistant	Sustainment-Steady-State	\$ 3,308
218	Health	VHA	Patient Management Services	Informed Consent Web (ICW)	Sustainment-Steady-State	\$ 7,371
219	Health	VHA	Virtual Veteran Record	Standards and COTS Integration Platform (SCIP)	Sustainment-Steady-State	\$ 15,093
220	Memorials	NCA	Memorial Support	Data Management	Sustainment-Steady-State	\$ 576
221	Health	VHA	Operational Support	Community Care Veteran Billing System (CCVBS)	Sustainment-Steady-State	\$ 1,434
222	Health	VHA	Patient Management Services	Beneficiary Travel Self-Service System (BTSSS)	Sustainment-Steady-State	\$ 1,800
223	Health	VHA	Common Health Care Specific Services	Clinical Decision Support Platform (CDSP)	Sustainment-Steady-State	\$ 2,315
224	Health	VHA	Health Delivery Support	Web VistA Remote Access Management (WebVRam)	Sustainment-Steady-State	\$ 2,506
225	Health	VHA	Health Care Infrastructure	Service Level Agreement (SLA) - Health	Sustainment-Steady-State	\$ 113,179

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
226	Benefits	VBA	Compensation and Pension	Disability Examination	Sustainment-Steady-State	\$ 1,084
227	Benefits	VBA	Compensation and Pension	Disability Examination	Sustainment-Steady-State	\$ 1,084
228	Benefits	VBA	Compensation and Pension	Disability Examination	Sustainment-Steady-State	\$ 3,461
229	Health	VHA	Quality Systems	Salesforce - National Center For Patient Safety Tools (SF - NCPS)	Sustainment-Steady-State	\$ 1,867
230	Health	VHA	Health Administration	Enterprise Precision Scanning and Indexing (EPSI)	Sustainment-Steady-State	\$ 2,392
231	Health	VHA	Enterprise IT Infrastructure	ReachVet	Sustainment-Steady-State	\$ 2,591
232	Health	VHA	Care Coverage Services	Program Integrity Tool (PIT)	Sustainment-Steady-State	\$ 4,188
233	Health	VHA	Enterprise IT Infrastructure	Corporate Data Warehouse (CDW)	Sustainment-Steady-State	\$ 22,199
234	Memorials	NCA	Memorial Enterprise Support	Service Level Agreement (SLA) - Memorial Affairs	Sustainment-Steady-State	\$ 6,207
235	Health	VHA	Enterprise IT Infrastructure	VHA IT Support Contracts	Sustainment-Steady-State	\$ 53,358
236	Health	VHA	Health Delivery Support	VA Health Connect Customer Relationship Management (VAHC CRM)	Sustainment-Steady-State	\$ 19,972
237	Corporate	OALC	Acquisition and Property Management	Property Acquisition and Control Reporting	Sustainment-Steady-State	\$ 495
238	Corporate	OIT	Corporate Enterprise Support	Service Line Agreement (SLA) - Corporate	Sustainment-Steady-State	\$ 75,564
239	Corporate	OGC	General Counsel	General Counsel IT Systems	Sustainment-Steady-State	\$ 14,111
240	Health	VHA	Health Delivery Support	VA-Academic Collaboration Space - Box Cloud Content Management (Box)	Sustainment-Steady-State	\$ 2,184
241	Health	VHA	Operational Support	Environment of Care Assessment Compliance Tool (EOC)	Sustainment-Steady-State	\$ 4,000
242	Health	VHA	Virtual Veteran Record	Health Data Quality Tools	Sustainment-Steady-State	\$ 5,290
243	Health	VHA	Clinical Care Services	Caregiver Record Management Application (CARMA)	Sustainment-Steady-State	\$ 8,139
244	Health	VHA	Health Care Infrastructure	Health Application Project Management and Product Support	Sustainment-Steady-State	\$ 8,500
245	Health	VHA	Care Coverage Services	Community Care Reimbursement System (CCRS)	Sustainment-Steady-State	\$ 14,093
246	ITIN	OIT	Decision Intelligence	Digital Veterans Platform (DVP)	Sustainment-Steady-State	\$ 33,030
247	Health	VHA	Clinical Care Services	Occupational Health Record-Keeping System 2.0 (SF - OHRS2.0)	Sustainment-Steady-State	\$ 2,812
248	Health	VHA	Operational Support	Supply Chain GUI (SC GUI)	Sustainment-Steady-State	\$ 11,679
249	Health	VHA	Health Delivery Support	VHA Research IT Support	Sustainment-Steady-State	\$ 6,503
250	Veteran Experience	VEO	Eligibility and Enrollment Experience	Health Eligibility and Enrollment	Sustainment-Steady-State	\$ 9,159

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
251	Benefits	VBA	Benefits Integration and Administration	VBA Data Analytics	Sustainment-Steady-State	\$ 1,000
252	Health	VHA	Health Delivery Support	eScreening	Sustainment-Steady-State	\$ 600
253	Health	VHA	Health Delivery Support	Office of Healthcare Innovation and Learning	Sustainment-Steady-State	\$ 12,595
254	Health	VHA	Quality Systems	Check-in Experience (CIE)	Sustainment-Steady-State	\$ 10,700
255	Veteran Experience	VEO	Customer Data Management Experience	Military History Data	Sustainment-Steady-State	\$ 3,284
256	Health	VHA	Clinical Care Services	Computerized Cognitive Behavioral Psychotherapy	Sustainment-Steady-State	\$ 400
257	Health	VHA	Operational Support	Veteran Co-Payment Lockbox (VCPL)	Sustainment-Steady-State	\$ 3,500
258	ITIN	OIT	Application Delivery Infrastructure	Box Cloud Content Management (Box)	Sustainment-Steady-State	\$ 793
259	ITIN	OIT	Application Delivery Infrastructure	Microsoft Power Platform	Sustainment-Steady-State	\$ 10,119
260	Memorials	NCA	Memorial Operation	Enterprise Administration Management	Sustainment-Steady-State	\$ 575
261	Health	VHA	Patient Management Services	Community Living Centers Resident Assessment Instrument	Sustainment-Steady-State	\$ 4,867
262	Health	VHA	Clinical Care Services	Blind Rehabilitation Services (BRVS)	Sustainment-Steady-State	\$ 400
263	Health	VHA	Health Delivery Support	Inbound ePrescribing (eRx)	Sustainment-Steady-State	\$ 1,350
264	Health	VHA	Health Administration	Enterprise Wide Speech Recognition (EWSR)	Sustainment-Steady-State	\$ 4,644
265	Health	VHA	Health Delivery Support	Advanced Medication Platform (AMPL) - Pharmacy Graphic User Interface (GUI)	Sustainment-Steady-State	\$ 1,650
266	Memorials	NCA	Memorial Support	Veterans Memorialization	Sustainment-Steady-State	\$ 3,376
267	Corporate	OALC	Acquisition and Property Management	Property and Facility Services	Sustainment-Steady-State	\$ 236
268	Veteran Experience	VEO	Customer Data Management Experience	Veterans Customer Experience & Data and Analytics	Sustainment-Steady-State	\$ 10,440
269	Health	VHA	Health Delivery Support	Research Electronic Data Capture (VA REDCap)	Sustainment-Steady-State	\$ 500
270	Health	VHA	Health Administration	Clinical Staffing and Scheduling	Sustainment-Steady-State	\$ 700
271	Health	VHA	Health Delivery Support	4-SIGHT Automated Eyeglass Ordering	Sustainment-Steady-State	\$ 1,986
272	Health	VHA	Common Health Care Workflows	Consult Toolbox (CTB)	Sustainment-Steady-State	\$ 7,617
273	Health	VHA	Health Administration	Automated Patient Discharge	Sustainment-Steady-State	\$ 636
274	Health	VHA	Common Health Care Specific Services	Veteran Re-Entry Search Service (VRSS)	Sustainment-Steady-State	\$ 650
275	Health	VHA	Care Coverage Services	Community Care - Provider Profile Management System (PPMS)	Sustainment-Steady-State	\$ 5,041

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
276	Health	VHA	Health Delivery Support	Million Veteran Program Online/CHAMPION IAA (MVP Online)	Sustainment-Steady-State	\$ 6,000
277	ITIN	OIT	Application Delivery Infrastructure	NextGen Federated Data Architecture	Sustainment-Steady-State	\$ 2,432
278	Health	VHA	Health Care Infrastructure	VHA Software License Maintenance	Sustainment-Steady-State	\$ 166,555
279	Health	VHA	Health Care Infrastructure	VHA Hardware Maintenance	Sustainment-Steady-State	\$ 23,304
280	Veteran Experience	VEO	Customer Data Management Experience	Data Integration	Sustainment-Steady-State	\$ 4,658
281	Veteran Experience	VEO	Contact Center Experience	Contact Center Support Systems	Sustainment-Steady-State	\$ 5,410
282	Health	VHA	Common Health Care Specific Services	Veterans Administration Central Cancer Registry (VACCR)	Sustainment-Steady-State	\$ 100
283	Health	VHA	Clinical Care Services	Laboratory System Reengineering PathNet (LSRP)	Sustainment-Steady-State	\$ 4,884
284	Health	VHA	Operational Support	Supply Chain Services	Sustainment-Steady-State	\$ 85,150
285	Veteran Experience	VEO	Contact Center Experience	VHA Contact Centers	Sustainment-Steady-State	\$ 4,374
286	Health	VHA	Health Delivery Support	Methadone Dispensing Tracking	Sustainment-Steady-State	\$ 4,715
287	Health	VHA	Operational Support	MAXIMO Enterprise Asset and Work Management (EAWM)	Sustainment-Steady-State	\$ 10,000
288	Health	VHA	Operational Support	Medical Care Collections Fund Transactions Applications Suite (MCCF EDI TAS)	Sustainment-Steady-State	\$ 18,971
289	ITIN	OIT	Application Delivery Infrastructure	VA Enterprise Content Management System (TeamSite)	Sustainment-Steady-State	\$ 1,366
290	ITIN	OIT	Application Delivery Infrastructure	Pega Cloud for Government (PCG)	Sustainment-Steady-State	\$ 6,410
291	Health	VHA	Common Health Care Specific Services	VHA Geographic Information System (GIS)	Sustainment-Steady-State	\$ 1,751
292	Benefits	VBA	Education Veterans Readiness and Employment	Veteran Readiness and Employment (VR&E)	Sustainment-Enhancement	\$ 1,490
293	Benefits	VBA	Education Veterans Readiness and Employment	Veteran Readiness and Employment (VR&E)	Sustainment-Steady-State	\$ 1,913
294	Benefits	VBA	Education Veterans Readiness and Employment	Veteran Readiness and Employment (VR&E)	Sustainment-Steady-State	\$ 1,960
295	Benefits	VBA	Education Veterans Readiness and Employment	Veteran Readiness and Employment (VR&E)	Sustainment-Steady-State	\$ 2,320
296	Health	VHA	Health Delivery Support	VA PMP Gateway (VAPMPG)	Sustainment-Steady-State	\$ 7,262
297	Health	VHA	Health Administration	Joint Longitudinal Viewer	Sustainment-Steady-State	\$ 8,443
298	Health	VHA	Operational Support	Real Time Location System (RTLS)	Sustainment-Steady-State	\$ 1,805
299	Benefits	VBA	Compensation and Pension	VA Discharge	Sustainment-Steady-State	\$ 3,041
300	Health	VHA	Health Delivery Support	Cardiac Device Monitoring System (CDMS)	Sustainment-Steady-State	\$ 350

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
301	Health	VHA	Common Health Care Specific Services	Clinical Case Registries (CCR)	Sustainment-Steady-State	\$ 956
302	Health	VHA	Common Health Care Workflows	Community Care Referral Documentation (REFDOC)	Sustainment-Steady-State	\$ 2,478
303	Health	VHA	Clinical Care Services	VistA - Blood Establishment Computer Software (VBECS)	Sustainment-Steady-State	\$ 6,000
304	Health	VHA	Health Delivery Support	Home Telehealth Reporting (HTR)	Sustainment-Steady-State	\$ 6,043
305	Corporate	OIT	Human Capital Management	Talent Management Organization (TMO)	Sustainment-Steady-State	\$ 12,485
306	Health	VHA	Enterprise IT Infrastructure	Health Data and Analytics Platform	Sustainment-Steady-State	\$ 8,169
307	Health	VHA	Health Care Infrastructure	VistA Audit Solution (VAS)	Sustainment-Steady-State	\$ 700
308	Veteran Experience	VEO	Contact Center Experience	Contact Center Knowledge Management Systems	Sustainment-Steady-State	\$ 6,365
309	Health	VHA	Health Delivery Support	National Clozapine Registry (NCR)	Sustainment-Steady-State	\$ 2,184
310	Health	VHA	Common Health Care Workflows	Community Care - Standardized Episodes of Care (CC-SEOC)	Sustainment-Steady-State	\$ 1,150
311	Health	VHA	Quality Systems	Community Care Clinical and Business Intelligence Solution (EPRS)	Sustainment-Steady-State	\$ 2,401
312	Health	VHA	Enterprise IT Infrastructure	VA Patient Account Resource System (VAPARS)	Sustainment-Steady-State	\$ 2,548
313	Corporate	OEI	Management Information Systems	Organizational Management	Sustainment-Steady-State	\$ 69
314	Corporate	OIT	CRR Support	Business Rules Engine Tools Licensing	Sustainment-Steady-State	\$ 3,288
315	Health	VHA	Care Coverage Services	Payer Electronic Data Interchange Transactions Applications Suite (Product Engineering and Development TAS)	Sustainment-Steady-State	\$ 6,000
316	Health	VHA	Health Delivery Support	Genomic Information System for Integrative Sciences (Genesis)	Sustainment-Steady-State	\$ 8,000
317	Health	VHA	Common Health Care Specific Services	Veterans Integrated Registries Platform (VIRP)	Sustainment-Steady-State	\$ 4,767
318	Veteran Experience	VEO	Contact Center Experience	VBA Contact Centers	Sustainment-Steady-State	\$ 11,058
319	Health	VHA	Clinical Care Services	Health Information Gateway and Exchange (HINGE-VAROQS)	Sustainment-Steady-State	\$ 598
320	Health	VHA	Enterprise IT Infrastructure	CPAC Revenue Workflow Tools (ROWT)	Sustainment-Steady-State	\$ 2,203
321	ITIN	OIT	Decision Intelligence	Robotics Process Automation (RPA Platform)	Sustainment-Enhancement	\$ 1,160
322	ITIN	OIT	Decision Intelligence	Robotics Process Automation (RPA Platform)	Sustainment-Steady-State	\$ 5,300
323	Health	VHA	Operational Support	Clinical Trainee Registration and Tracking System (CTRTS)	Sustainment-Steady-State	\$ 4,955
324	Health	VHA	Health Administration	Business Information Office Business Intelligence Solution (BIO BIS)	Sustainment-Steady-State	\$ 1,654
325	Health	VHA	Operational Support	Strategic Equipment Planning Guide - Enterprise Equipment Request (SEPG-EER)	Sustainment-Steady-State	\$ 2,500

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
326	Health	VHA	Care Coverage Services	Fee Basis Claims Archive (FBCA)	Sustainment-Steady-State	\$ 1,646
327	Health	VHA	Health Delivery Support	Delivery Operations Claims Management Platform (DOCMP)	Sustainment-Steady-State	\$ 2,000
328	Health	VHA	Care Coverage Services	Claims Processing & Eligibility System (CP&E)	Sustainment-Steady-State	\$ 4,649
329	Health	VHA	Enterprise IT Infrastructure	VA Informatics and Computing Infrastructure (VINCI)	Sustainment-Steady-State	\$ 9,300
330	Corporate	OEI	Management Information Systems	Organizational Management	Sustainment-Steady-State	\$ 400
331	Corporate	OALC	Management Information Systems	VA Historian Office	Sustainment-Steady-State	\$ 777
332	ITIN	OIT	Application Delivery Infrastructure	Platform Services Support	Sustainment-Steady-State	\$ 10,799
333	ITIN	OIT	Application Delivery Infrastructure	Slack	Sustainment-Steady-State	\$ 1,824
334	Corporate	OIT	Product Engineering and Development Support	Product Engineering Operational Support	Sustainment-Steady-State	\$ 4,337
335	Corporate	OIT	OIT Front Office Support	Office of the CTO (OCTO) GSA Presidential Innovation Fellows	Sustainment-Steady-State	\$ 615
336	Corporate	OIT	OIT Front Office Support	Office of the CTO (OCTO) OMB USDS Technologists	Sustainment-Steady-State	\$ 1,710
337	Corporate	OIT	OIT Front Office Support	Office of the CTO (OCTO) State Translation Services	Sustainment-Steady-State	\$ 386
338	Corporate	OIT	Software Product Management Support	Software Product Management Operations Support	Sustainment-Steady-State	\$ 13,495
339	Corporate	OIT	Software Product Management Support	Section 508 Compliance	Sustainment-Steady-State	\$ 9,343
340	Corporate	OIT	OIT Front Office Support	OCTO Product Delivery Support	Sustainment-Steady-State	\$ 615
341	ITIN	OIT	Application Delivery Infrastructure	Software Factory New Work Support	Sustainment-Steady-State	\$ 4,161
342	Corporate	OIT	Product Engineering and Development Support	Capacity and Performance Engineering Services (CPE)	Sustainment-Steady-State	\$ 2,967
343	Corporate	OIT	Software Product Management Support	Software Configuration Management Services	Sustainment-Steady-State	\$ 4,829
344	Corporate	OIT	OIT Front Office Support	OIT Front Office Enterprise Architecture (EA) Support Contract	Sustainment-Steady-State	\$ 32
345	Corporate	OIT	CRR Support	VA Product Line Accountability & Reporting System (VA PARS)	Sustainment-Enhancement	\$ 2,007
346	Corporate	OIT	CRR Support	VA Product Line Accountability & Reporting System (VA PARS)	Sustainment-Steady-State	\$ 2,741
347	Corporate	OIT	Budget Execution	Budget Execution and Analysis Service (BEAS)	Sustainment-Steady-State	\$ 2,930
348	Corporate	OIT	CRR Support	ACOE Advanced Tools and Support	Sustainment-Steady-State	\$ 2,572
349	Corporate	OIT	OIS Support	Information Assurance Management Support Services	Sustainment-Steady-State	\$ 5,985
350	Corporate	OIT	ITBF Support	Program Planning and Oversight (PPO)	Sustainment-Steady-State	\$ 1,000

Priority	Portfolio	Admin	Project	Sub-Project	Strip Type	2024 Requests
351	Corporate	OIT	CRR Support	Quest Toad Tools Licensing	Sustainment-Steady-State	\$ 503
352	Corporate	OIT	CRR Support	DevOps/SAFe/Agile Transformation	Sustainment-Steady-State	\$ 9,615
353	Corporate	OIT	CRR Support	Rentouch PIPlanning (Rentouch)	Sustainment-Steady-State	\$ 332
354	Corporate	OIT	Software Product Management Support	Enterprise Testing Service Development and Acquisition Support	Sustainment-Steady-State	\$ 77
355	Corporate	OIT	CRR Support	Embarcadero License System/DelphiRAD (Delphi)	Sustainment-Steady-State	\$ 177
356	Corporate	OIT	OIT Front Office Support	Data Architecture	Sustainment-Steady-State	\$ 958
357	Health	VHA	Common Health Care Specific Services	VHA Support Service Center (VSSC) - Replace Old Servers	Sustainment-Steady-State	\$ 500
358	Health	VHA	Common Health Care Specific Services	Veterans Integrated Registries Platform (VIRP)	Sustainment-Enhancement	\$ 5,287
359	Memorials	NCA	Memorial Support	Data Management	Sustainment-Enhancement	\$ 2,326
360	Memorials	NCA	Memorial Support	Veterans Memorialization	Sustainment-Enhancement	\$ 3,655
361	Health	VHA	Enterprise IT Infrastructure	Corporate Data Warehouse (CDW) Mental Health (MH) Service Transition	Sustainment-Enhancement	\$ 2,415
362	Health	VHA	Clinical Care Services	Mental Health Assistant	Sustainment-Enhancement	\$ 3,308
363	Health	VHA	Health Delivery Support	National Clozapine Registry (NCR)	Sustainment-Enhancement	\$ 2,683
364	Health	VHA	Clinical Care Services	Occupational Health Record-Keeping System 2.0 (SF - OHRS2.0)	Sustainment-Modernization	\$ 7,410
365	ITIN	OIT	Application Delivery Infrastructure	Palantir Federal Cloud Service (Palantir)	Sustainment-Steady-State	\$ 2,000
					Grand Total	\$ 4,794,023

Appendix Q: Budget Restructure Matrix

The table below reflects the 2024 Budget Request in the old IT budget structure.

2023 Program Structure			2024 Program Structure						
			Administrative	Benefits Portfolio	Corporate Portfolio			TOTAL	
			Staffing and Admin	Benefits Services	Corporate Services	Cyber Security	OIT Operation Support Services		
\$s in Thousands									
2023 Program Structure	Administrative	Staffing and Administration	\$ 131,724	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 131,724
		2023 N/A	\$ 14,579	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14,579
	Benefits Portfolio	Benefit Systems	\$ -	\$ 16,000	\$ -	\$ -	\$ -	\$ -	\$ 16,000
		Benefits Operations and Maintenance	\$ -	\$ 99,586	\$ -	\$ -	\$ -	\$ -	\$ 99,586
		2023 N/A	\$ -	\$ 38,899	\$ -	\$ -	\$ -	\$ -	\$ 38,899
	Corporate Portfolio	Corporate Operations and Maintenance	\$ -	\$ -	\$ 276,518	\$ -	\$ 132,903	\$ -	\$ 409,421
		Enterprise Operations and Maintenance	\$ -	\$ -	\$ 500	\$ -	\$ 65,437	\$ -	\$ 65,937
		2023 N/A	\$ -	\$ -	\$ 3,000	\$ 29,435	\$ 32,007	\$ -	\$ 64,442
	TOTAL			\$ 146,303	\$ 154,485	\$ 280,018	\$ 29,435	\$ 230,347	\$ 840,588

2023 Program Structure			2024 Program Structure							
			Health Portfolio						TOTAL	
			Care Coverage Capabilities	Clinical Care Capabilities	Clinical Enabling Capabilities	Cyber Security	Health Business Services	Health IT Services		Patient Management Capabilities
\$s in Thousands										
2023 Program Structure	Health Portfolio	Benefits Operations and Maintenance	\$ -	\$ -	\$ 12,413	\$ -	\$ -	\$ -	\$ -	\$ 12,413
		Clinical Applications	\$ -	\$ 2,250	\$ 23,137	\$ -	\$ 3,400	\$ -	\$ -	\$ 28,787
		Electronic Health Record Modernization (EHRM)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		Enterprise Operations and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		Health Management Platform	\$ -	\$ 4,199	\$ 17,385	\$ -	\$ 3,700	\$ -	\$ -	\$ 25,284
		Health Operations and Maintenance	\$ 73,887	\$ 42,211	\$ 287,025	\$ -	\$ 35,434	\$ 296,259	\$ 15,720	\$ 750,536
		Health Research and Development	\$ -	\$ -	\$ 5,385	\$ -	\$ -	\$ -	\$ -	\$ 5,385
		2023 N/A	\$ 13,608	\$ 1,500	\$ 20,344	\$ 68,940	\$ 8,094	\$ 245,217	\$ 559	\$ 358,262
TOTAL			\$ 87,495	\$ 50,160	\$ 365,689	\$ 68,940	\$ 50,628	\$ 541,476	\$ 1,180,667	

Appendix R: IT Systems Appropriations History

(\$s in thousands)

	President's Budget	Enacted Appropriation	FTE
2009	2,442,066	2,539,391 ^{1/}	6,710
2010	3,307,000	3,307,000	6,853
2011	3,307,000	2,993,604 ^{2/}	7,004
2012	3,161,376	3,111,376	7,311
2013	3,327,444	3,323,053	7,362
2014	3,683,344	3,703,344	7,291
2015	3,903,344	3,902,278	7,419
2016	4,133,363	4,133,363	7,745
2017	4,278,259	4,270,259	8,334 ^{3/}
2018	4,055,500	4,055,500	7,899
2019	4,184,571	4,103,000	8,138
2020	4,343,000	4,371,615	7,890
2021	4,912,000	4,874,500	8,251
2022	4,842,800	4,842,800	8,766
2023	5,782,000	5,782,000	8,993
2024	6,401,000		9,242

Note: The Information Technology Systems account was established in P.L.109-114

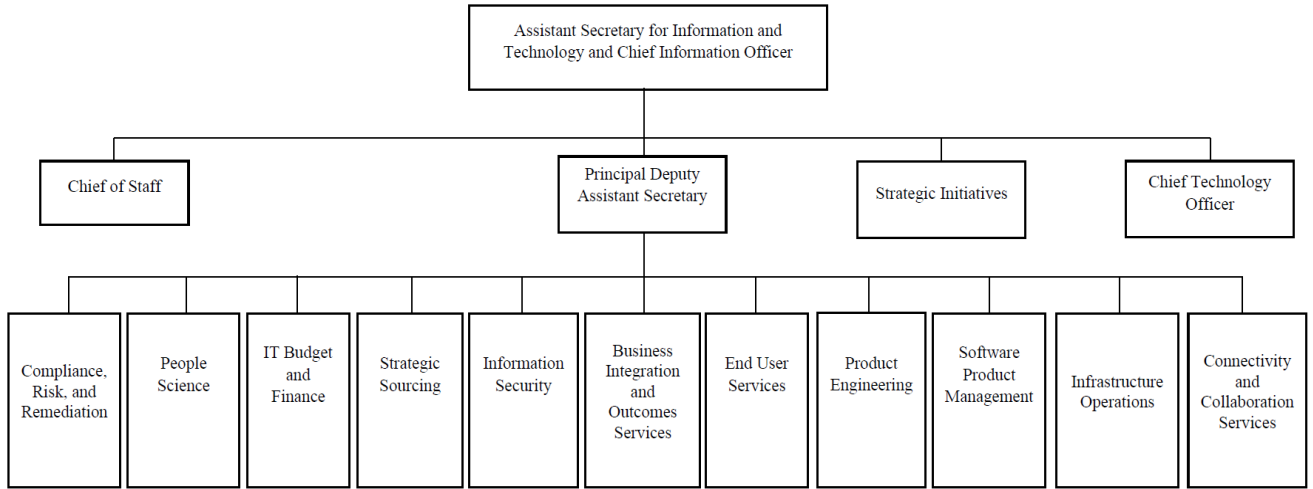
FTE includes Reimbursements

1/Includes \$50 million in emergency funding provided in P.L.111-5

2/The 2011 appropriation was \$3.141 billion (including ATB rescission) with an additional \$147 million in unobligated balances rescinded

3/ FTE includes VACAA FTE funded by the IT Appropriation

Appendix S: Office of Information Technology Organization Chart

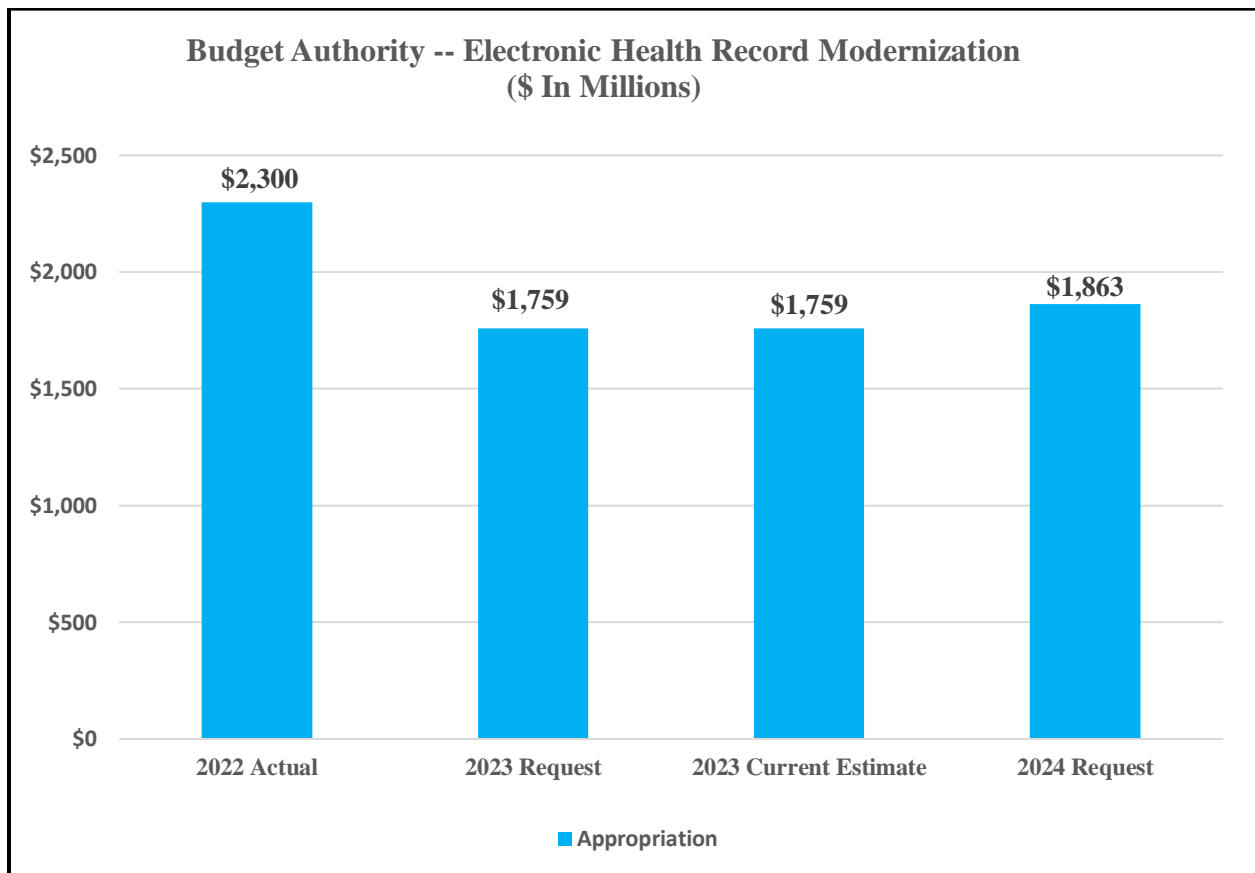


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Electronic Health Record Modernization

Budget Authority and Appropriation Language



Note: 2022 reflects \$350 million in total rescissions; \$200 million from unobligated balances enacted by P.L. 117-103, Consolidated Appropriations Act, 2022, Division J, Title II, section 255 and \$150 million from unobligated balances enacted by P.L. 117-103, Consolidated Appropriations Act, 2022, Division J, Title II, section 255.

Appropriation Language

For activities related to implementation, preparation, development, interface, management, rollout, and maintenance of a Veterans Electronic Health Record system, including contractual costs associated with operations authorized by section 3109 of title 5, United States Code, and salaries and expenses of employees hired under titles 5 and 38, United States Code, [\$1,759,000,000] \$1,863,000,000, to remain available until September 30, [2025] 2026:

Provided, That the Secretary of Veterans Affairs shall submit to the Committees on Appropriations of both Houses of Congress quarterly reports detailing obligations, expenditures, and deployment implementation by facility, including any changes from the deployment plan or schedule: *Provided further*, That the funds provided in this account shall only be available to the Office of the Deputy Secretary, to be administered by that Office [: *Provided further*, That 25 percent of the funds made available under this heading shall not be available until July 1, 2023, and are contingent upon the Secretary of Veterans Affairs—]

[(1) providing the Committees on Appropriations a report detailing the status of outstanding issues impacting the stability and usability of the new electronic health record system, including those that contributed to the October 13, 2022, deployment delay, along with a timeline and measurable metrics to resolve issues, no later than 60 days after enactment of this Act;]

[(2) certifying and detailing any changes to the full deployment schedule, no later than 60 days prior to July 1, 2023; and]

[(3) certifying in writing no later than 30 days prior to July 1, 2023, the following—]

[(A) the status of issues included in the report referenced in paragraph (1), including issues that have not been closed but have been suitably resolved or mitigated in a manner that will enhance provider productivity and minimize the potential for patient harm; and]

[(B) whether the system is stable, ready, and optimized for further deployment at VA sites]. (*Military Construction, Veterans Affairs, and Related Agencies Appropriations Act, 2023.*)

Appropriation Highlights

Electronic Health Record Modernization Appropriation Highlights (\$ thousands)						
	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted	
					\$	%
Budgetary Resources:						
Electronic Health Record (EHR)	\$1,327,758	\$1,119,145	\$1,119,145	\$1,185,884	\$66,739	6.0%
Infrastructure Readiness (IR)	\$886,537	\$440,739	\$440,739	\$424,000	(\$16,739)	-3.8%
Program Management Office (PMO)	\$285,705	\$199,116	\$199,116	\$253,116	\$54,000	27.1%
Subtotal, Appropriation	\$2,500,000	\$1,759,000	\$1,759,000	\$1,863,000	\$104,000	5.9%
Electronic Health Record (EHR)	\$551,491		\$98,450		(\$98,450)	-100.0%
Infrastructure Readiness (IR)	\$124,163		\$284,831		(\$284,831)	-100.0%
Program Management Office (PMO)	\$44,811		\$111,249		(\$111,249)	-100.0%
Subtotal, Unobligated balance brought forward, Oct 1	\$720,465	\$0	\$494,530	\$0	(\$494,530)	-100.0%
Recoveries, 2nd year of funds	\$2,128					
Recoveries, 3rd year of funds	\$11,427					
Recoveries, 3rd year of funds - IR						
Recoveries, 3rd year of funds - PMO						
Subtotal, Recoveries	\$13,556	\$0	\$0	\$0	\$0	0.0%
Rescission of Prior Year Funds - EHR	(\$187,048)					
Rescission of Prior Year Funds - IR	(\$12,952)		(\$150,000)		\$150,000	-100.0%
Rescission of Prior Year Funds - PMO	\$0					
Subtotal, Rescission of Prior Year Funds	(\$200,000)	\$0	(\$150,000)	\$0	\$150,000	-100.0%
Subtotal, Budgetary Resources	\$3,034,021	\$1,759,000	\$2,103,530	\$1,863,000	(\$240,530)	-11.4%
Program Management Office (PMO)	(\$18,123)					
Subtotal, Unobligated Balance Expiring	(\$18,123)	\$0	\$0	\$0	\$0	0.0%
Electronic Health Record (EHR)	(\$98,450)					
Infrastructure Readiness (IR)	(\$284,605)					
Program Management Office (PMO)	(\$109,202)					
Subtotal, Unexpired Unobligated Balance	(\$492,257)	\$0	\$0	\$0	\$0	0.0%
Total, Obligations	\$2,523,641	\$1,759,000	\$2,103,530	\$1,863,000	(\$240,530)	-11.4%
Direct Obligations by Program Activity						
Electronic Health Record (EHR)	\$1,591,625	\$1,119,145	\$1,217,595	\$1,185,884	(\$31,711)	-2.6%
Infrastructure Readiness (IR)	\$720,692	\$440,739	\$575,570	\$424,000	(\$151,570)	-26.3%
Program Management Office (PMO)	\$227,158	\$199,116	\$310,365	\$253,116	(\$57,249)	-18.4%
Total, Obligations	\$2,539,475	\$1,759,000	\$2,103,530	\$1,863,000	(\$240,530)	-11.4%
Full Time Equivalent (FTE):						
Direct FTE	175	227	227	313	86	37.9%
Total, FTE	175	227	227	313	86	37.9%

Budget Overview

2024 Budget Request at a Glance

(\$ in thousands)

2023 President's Budget	\$1,759,000
Program Changes	\$104,000
2024 President's Budget	\$1,863,000
Change from 2023 Request Level	5.9%

The budget includes \$1.863 billion for the Veterans Electronic Health Record, an increase of \$104 million (5.9%) relative to the 2023 President's Budget. This funding will support a continuum of care among the VA, the Department of Defense (DoD), and our community providers to organize health care around Veteran needs.

VA's \$1.863 billion request includes:

- **\$1.186 billion for EHR Contract** – This aligns with VA's revised Electronic Health Record Modernization Integration Office (EHRM-IO) deployment plan that optimizes resources, provides flexibility, preserves deployment momentum. The funding will support site assessments, site transitions, enterprise integration and site implementation support for the post go-live activities and deployment efforts at VISNs 19, 21, and 22.
- **\$424.0 million for Infrastructure Readiness** – Funds will aid in supplying deployment sites with updated computers and network infrastructure capable of supporting the EHR solution six to eighteen months in advance of scheduled deployment. The funding will also support system interfaces and cybersecurity efforts.
- **\$253.1 million for Project Management Office (PMO)** – The funding will support 313 FTE supporting effective change management as the EHR solution is implemented throughout the nation. The goal is to retain qualified experts who understand VA's legacy systems, computer programming languages and interfaces. The request supports reimbursement of 53 VHA experts that are critical to change management and effective deployment. EHRM will support the FEHRM program office for \$18 million; part of this request includes federal staff pay, contract support staff, funding for travel, training, equipment, and supplies. As federal staff increase, the contract support and VHA reimbursable field support staff will decrease to a more focused level.

Mission

The health and safety of Veterans is VA's main priority. VA is committed to providing a seamless network of care for all Veterans, which includes access to a comprehensive EHR — the software that stores health information and tracks all aspects of patient care. VA's current EHR information system, Veterans Health Information Systems and Technology Architecture (VistA), comprised of 130 customized versions, is not sustainable and cannot deliver critical capabilities, such as interoperability with DoD, the U.S. Coast Guard (USCG), and community care providers. VistA has reached the end of its life cycle and needs to be replaced.

VA is committed to providing its health care personnel with modern tools to deliver the world-class health care that Veterans deserve. VA's new EHR system is the same instance that DoD and the USCG use to store service member records, from entrance into military service to separation to Veteran status. It is a single, state-of-the-art product that enables enterprise-wide standardized workflows and configurations. With its implementation, VA is creating a single, seamless, integrated health record from military service to Veteran status. The new EHR system presents opportunities to transform the delivery of health care and standardize delivery across the enterprise to achieve improvements in the delivery of safe, high-quality care, and achieve efficiencies to deliver consistent, high value care wherever Veterans seek it.

Designed to accommodate health care delivery priorities that are unique to VA, while bringing industry best practices to Veteran health care, the EHR system will integrate modern functionality and infrastructure into a simple experience, allowing the system to operate seamlessly with community care providers. This will also eliminate dependencies on legacy systems and the risks associated with using multiple products to share Veteran medical records.

Program Update

In 2022, VA completed four deployments of the new EHR system at Jonathan M. Wainwright Memorial VA Medical Center (VAMC) in Walla Walla, Washington, on March 26, 2022; VA Central Ohio Healthcare System in Columbus, Ohio, on April 30, 2022; and Roseburg VA Health Care System in Roseburg, Oregon; and the VA Southern Oregon Rehabilitation Center and Clinics in White City, Oregon, on June 11, 2022. To date, five VA medical centers, 22 community-based outpatient clinics and 52 remote sites have gone live with the new system, with more than 10,000 end users serving more than 200,000 Veterans.

As announced October 13, 2022, VA delayed upcoming deployments of the new EHR system until June 2023 to address challenges with the system and ensure it is functioning optimally for Veterans and for VA health care personnel. As improvements are made, VA will continually evaluate site and EHR system readiness to ensure success. The continuous focus will be on assessing and remediating any identified issues at live sites and designing for safety at future deployment sites.

While executing this plan, VA will continue to focus on the five initial operating capability (IOC) facilities where the new system has already been deployed to ensure every patient is getting the world-class health care they deserve. VA is resolving issues identified at these facilities, including working to address problems that may have led to patient safety concerns, before restarting go-

live deployments at other VAMCs. The EHRM Integration Office (EHRM-IO) is working with Cerner to aggressively address technical and functional issues affecting the end-user experience and to achieve a core model EHR for VA's health care system.

Additionally, EHRM-IO and the Veterans Health Administration (VHA) have collaboratively assessed and addressed a subset of identified system challenges within a sprint process to expediently resolve some of the most critical issues. During the 12-week collaboration that ended in December 2022, the sprint project team completed an order/referral assessment audit, established health system enterprise governance, and focused on resolving standardization and usability issues that may have potential patient safety impacts. This included making changes to improve usability for VA medical personnel and instituting standardization of workflows and naming to achieve an enterprise system. Additionally, VHA has established governance bodies and processes to manage how the system is used to support health care delivery, ensure standardization, and facilitate nimble decision making.

VA is also addressing the stability of the EHR system, which has gone more than 6 months (194 days) with no complete outages, as of February 13, 2023. However, VA continues to press Cerner for improvements in degradations and partial outages, which are disruptive to medical personnel. Additionally, the top three pharmacy enhancements were installed with the routine block upgrade in February 2023. This is well ahead of the June 2023 timeframe for EHR deployments to resume and will allow the enhancements to be reviewed prior to the next deployment. These enhancements will be also available for the five currently deployed sites. VA has initiated training to support site adoption.

With key integrated activities complete by the second quarter of 2023, including the sprint final report, database fixes and the three priority pharmacy enhancements in place, VA leaders are confident of the path forward for deployments. In addition to these key enterprise activities, EHRM-IO facilitates meetings with site and Veterans Integrated Service Network (VISN) leadership and other key stakeholders to evaluate individual site readiness. These assessments include ensuring the site has the people, processes, and technology elements in place to ensure a successful go live.

VA has developed a revised schedule for the new EHR system rollout through the first quarter of 2025. As VA has always made clear, this deployment schedule is subject to change based on unforeseen events that may prevent a safe and successful deployment. VA will finalize and submit the full deployment schedule in May 2023.

Implementing Program Improvements

VA is currently working to implement a range of enhancements and improvements to the EHR system, in the areas of system stability and reliability, usability, and training, change management, and end-user engagement.

System Stability and Reliability

VA is working to resolve issues with the EHR system's performance and usability before restarting deployments at other VAMCs. VA has significantly reduced unplanned outages through corrective actions taken within the Cerner database configuration. As of February 13, 2023, it has been 194 days (over 6 months) since the last complete outage. Performance degradations of the system have also decreased.

Improving incident-free time—the percentage of time in which all Cerner solutions are functioning as intended for all users the VA, DoD, and (USCG) - remains a focus. While incident-free time has remained at 90% or above since April 2022, we are not achieving the goal of 95%. VA is continuing to work with our partners at DoD, the Federal Electronic Health Record Modernization (FEHRM) Office, Cerner and Leidos to reduce the number incidents and recovery time within the EHR and the systems connected to it. With processes in place to monitor and manage all incidents across VA, DoD, USCG, and Cerner, we are using lessons learned to improve resiliency of the EHR system so that any disruptions to end users are rare.

It remains the EHRM IO's priority to provide a system that works properly every time a clinician provides care. Tracking the type of incident is key for VA to analyze and correct issues. To that end, VA has established initial quantifiable key performance indicators (KPIs) as of January 2023 to monitor system stability.

VA also established a Performance Excellence workgroup to review technical performance issues with Cerner and resolve problems with system stability, reliability, resiliency, and performance. The goal is to remediate issues and ensure VA resumes deployment of the EHR system to all sites with high confidence. The workgroup performed technical analysis of all tickets, identified seven workstreams and established 41 projects to improve reliability of the EHR. VA has completed 26 out of 41 projects related to certificate management, configuration, health information exchange, interfaces and testing, among other areas. The remaining 15 projects continue to progress. VA has also improved systematic review of every incident and issue reported through a Corrective Action Preventative Action (CAPA) process, which is similar to a root cause analysis. All incidents now have CAPAs and VA is working to close all items out.

System Usability

On February 17, 2023, three priority pharmacy enhancements were installed as part of the Block 8 upgrade to the EHR system. These enhancements improve providers' visibility of available prescriptions, optimize system options for maintenance medications and expand details on prescription expiration dates. These enhancements underwent rigorous testing prior to installation, and initial feedback from the pharmacy community is positive. These enhancements are an important step in resuming EHR system deployment.

VA is also standardizing activities across the VA health system to optimize business processes, reduce user adoption issues, and improve training and testing. This includes standardization of data collection workbooks (DCWs), and standardization of locations and roles, which is near completion. Standardization of data across the enterprise is critical to reducing end user errors and

risk of patient safety events. Additionally, it will reduce the burden on the sites as they prepare for deployment by eliminating the need to review all data being programmed into the system. Only data points relevant to the site will need to be reviewed.

Additionally, EHRM-IO and VHA have also worked collaboratively to assess and remediate a subset of identified system challenges to expediently resolve some of the most critical issues. Examples of these issues and resolutions include:

- Behavioral health flags prominent in the patient-facing sections of the EHR (complete in RadNet and PathNet; RevCycle scheduled for August 2023)
- Physician credentialing table that will ensure clinicians orders are delivered to the intended location and leaders have the appropriate level of visibility and control (scheduled for June 2023)
- EHR system builds and management processes are in progress for medical centers with oncology research services, due to the high-risk nature and complexity of oncology medication protocols (to be completed before Level 1a facility go-lives)

Training, Change Management and End-User Engagement

End-user engagement and adoption is key to achieving usability and successful integration of the EHR system into operations. VA continues to listen to our end users and make improvements to training and adoption activities based on their feedback. We have taken steps to address concerns with contracted trainers and the sandbox simulated training environment to better prepare users for the live EHR environment. We are addressing challenges with user participation and involvement of super users, who are critical in providing specific, on-the-job guidance to our health care providers. Additionally, we have made the training more modular and based on specific system functionality. This allows us to further target training requirements to end users' specific roles in the system, better aligning content with the work they perform and reducing the overall amount of training required for many users. Lastly, we are doing a better job managing expectations around training, so that our staff understand it is only one part of the overarching adoption pathway for the new EHR system.

Based on lessons learned, ongoing feedback and general maturing of the program as deployments expand, VA and Cerner are collaborating on a variety of program improvements. These updates include additional support from clinical consultants, VHA subject matter experts, and super users on use of the EHR within VA policy, process, and operations.

Program Improvements

VA has also made progress on implementing the VA Office of Inspector General's (OIG) recommendations for the EHRM program. As of February 13, 2023, 43 of the OIG's 68 recommendations are closed; 25 remain open. One additional recommendation is targeted for closure by end of March 2023. The final recommendation from the unknown queue report was also closed on February 13, 2023. Only two recommendations remain open from the oldest report which are with VHA and targeted for closure by June 2023.

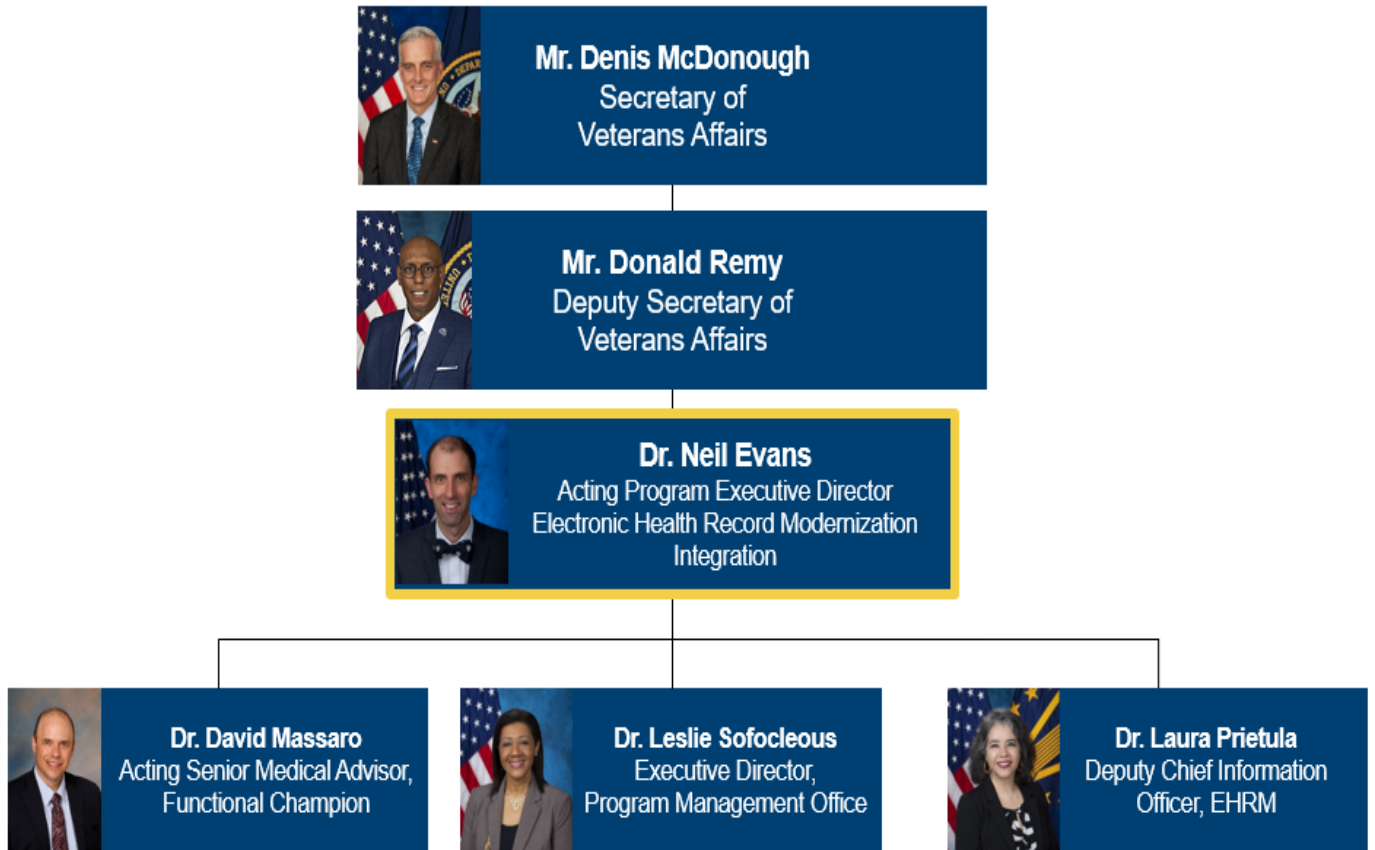
Additionally, we have established VHA EHRM governance bodies and processes to ensure enterprise standardization and health system decision-making. As part of this work, EHRM-IO transitioned the EHRM National Councils to VHA to be incorporated in VHA's governance process.

Consistent with VA's commitment to the health and safety of Veterans, VA responded to the patient safety concerns at its first deployment site and the findings of the 2021 strategic review by incorporating patient safety activities in all aspects of the EHR deployment effort: pre-deployment, at go-live and post-deployment. Pre-deployment actions to ensure safe deployment include validating the nationally approved workflows; thorough testing of the system; and the use of the site deployment readiness checklist. Additionally, VA conducts a patient safety educational activities and assessments at the local deployment sites to ensure a thorough and accurate assessment of readiness. At go-live, VA instituted a comprehensive package of activities to assess patient safety concerns and patient harm, including the deployment of staff from VA's National Center for Patient Safety to work with the local patient safety staff to triage Joint Patient Safety Reports (JPSR) for investigation. The goal of EHRM-IO is to learn from these five deployed sites to reduce risk and prevent any harm to Veterans.

The most impactful prevention activity is the robust support given to personnel during and after the go-live period to support successful adoption of the new EHR system and ensure continued timely care for Veterans. This support includes significantly improved training and change management activities to ensure end users are confident in using the new technology; ample "at-the-elbow" support from trained peer super users, as well as from adoption coaches provided by the EHR vendor who help new users navigate and complete workflows in the new system; and support for clinical operations from the VISN (Clinical Resource Hubs) and VHA (National EHRM Supplemental Staffing Unit [NESSU]) that support the local site in providing seamless service to Veterans during the immediate weeks after go-live. The result of these new activities has been a significant decline in the number of patient safety reports and more importantly few reports of assessed harm between what was experienced at the first deployment site in 2020 and the following four 2022 implementation sites.

In addition, to increased fidelity of the full EHRM-IO spend plan and life cycle costs across the VA enterprise, in December 2021, VA completed a review of the physical and information technology infrastructure costs incurred in support of the EHRM deployment from 2018 through 2021. VA included these historical costs in its most recent congressionally mandated report (CMR) on the program. Additionally, VA contracted with the Institute of Defense Analyses (IDA) to complete an independent cost estimate (ICE) of all EHRM program costs. IDA briefed congress on their nearly final findings and a copy of the final report was transmitted to the appropriations committees in September 2022. VA continues to evolve processes as lessons are learned from subsequent deployments and enhancements are made to the EHR system and to do this in an efficient and cost-effective manner.

EHRM Program Leadership Structure



Budget Request

VA established the EHRM-IO within the Office of the Deputy Secretary to ensure successful preparation, deployment, and continued operation of the new EHR solution and the health information technology tools dependent upon it. VA's main priority for 2024 is to ensure that the EHRM IO effort judiciously balances speed of implementation with little to no risk to cost, schedule and performance objectives to ensure optimal care of our Veterans and their families. For 2024, VA requests \$1.863 billion, which is an increase of \$104 million (5.9%) relative to the 2023 budget request. The 2024 budget request is separated into three subaccounts detailed below:

Electronic Health Record Modernization - \$1.186 billion

In support of this effort, VA requests \$1.186 billion for the EHR program for 2024. This is in alignment with the new strategy, which focuses on critical activities to support ongoing deployments and sustainment of live sites with the new EHR as well as those going live. This funding is critical to support the current five live sites that have received the new EHR and the anticipated go-live of six sites in 2023, 29 sites in 2024, and nine sites in the first quarter of 2025. Site Transition deployment and Site Assessment current state review activities reflects the funding needed to sustain deployed sites and prepare for the next program requirements at sites scheduled to go-live in 2024 through early 2026. Pre-deployment Site Assessment activities typically begin 20+ months in advance of go-live dates to ensure sites are equipped to receive the new EHR system. VISNs 19, 21, and 22 current state reviews were contracted in 2022 allowing the program to be ready to begin deployment activities for the corresponding sites in 2025.

The budget includes estimated cost for activities required to plan for and deploy the new EHR solution such as site activation, change management, training, data migration, data normalization, data hosting, interoperability, workflow development, testing, sustainment, help desk support, licenses, data analytics, and innovations. The new EHR solution will help simplify health care delivery for both patients and clinical providers. Medical providers will have instant and seamless access to a Veteran's full health records and history. VA will compile data from servicemembers' records to guarantee it is available to be accessed years later by DoD, VA, and private sector doctors. This centralization of data will provide clinicians with a full picture of a Veteran's medical history. Through national and local workflow design processes, VA partnered with DoD and commercial vendors and is working to strengthen and improve health care for all Veterans and active duty servicemembers and to improve the productivity and user experience for VA system users.

Infrastructure Readiness - \$424.0 million

The budget includes estimated infrastructure support costs, such as modifications to legacy systems, interfaces and wired and wireless networks at VA medical centers and their associated sites. Infrastructure readiness is a critical component of the success of the EHRM-IO effort, and VA's strategy includes ensuring upgrades are in place six to eighteen months in advance of go-live. Components of VA, namely OIT, VHA and EHRM-IO, collaborate to improve current IT infrastructure to a point of efficiency that supports the new EHR solution and positions VA to effectively deploy the solution across the enterprise. The 2024 budget will support costs to

complete all Joint Security Architecture (JSA) hardware costs and the focus will move towards implementation (to include things such as maintenance and engineering) of those JSAs in support of our 18-month readiness target for JSA Readiness. For 2024 EHRM-IO plans to procure devices in VISNs 17, 16 and 9 (approximately 26 VAMCs, with associated Community Based Outpatient Clinics (CBOCs), as well as Remote Staff) but will continue to work with OIT to further refine sites and quantities in line with OIT's hardware refresh. Interoperability costs include support of and the increasing capabilities available and being leveraged through enhanced bi-directional EHR data exchange platforms in support of Inter-agency and external clinical care coordination, benefits adjudications, population health and analytical services in compliance with existing and emerging regulatory and policy requirements (MISSION Act & CURES Act).

Program Management Office - \$253.1 million

The budget includes estimated cost of program management, including government and contract personnel, administrative and overhead expenses. EHRM-IO will ensure successful execution, oversight, active coordination, and proactive management of the program. Specifically, it ensures contractors perform to the cost, schedule and performance objectives and the corresponding management of associated project risks while guaranteeing that VA infrastructure is ready for the system's deployment. EHRM-IO employs highly trained government and contractor personnel to provide this expert oversight in a myriad of professional disciplines.

Total Obligations by Subaccount

Electronic Health Record Modernization Obligation by Subactivity Highlight (\$ thousands)						
	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted	
					\$	%
Grand Total	\$2,539,475	\$1,759,000	\$1,759,000	\$1,863,000	\$104,000	5.9%
(\$ thousands)						
EHR	\$1,591,625	\$1,119,145	\$1,119,145	\$1,185,884	\$66,739	6.0%
Site Transitions	\$1,179,165	\$598,385	\$478,905	\$66,928	-\$411,977	-86.0%
EHR Operations	\$267,372	\$235,000	\$373,702	\$928,724	\$555,022	148.5%
Enterprise Integration	\$97,409	\$209,000	\$11,869	\$153,078	\$141,209	1189.7%
VA Current Site Assessments	\$33,360	\$36,960	\$211,597	\$0	-\$211,597	-100.0%
Vendor Site Implementation Support	\$14,318	\$39,800	\$43,071	\$37,154	-\$5,917	-13.7%
Infrastructure	\$720,692	\$440,739	\$440,739	\$424,000	-\$16,739	-3.8%
Site Specific:	\$111,723	\$57,969	\$39,772	\$150,648	\$110,875	278.8%
End User Devices	\$111,723	\$57,969	\$39,772	\$150,648	\$110,875	278.8%
Enterprise:	\$143,228	\$192,797	\$179,798	\$149,340	-\$30,458	-16.9%
Data Migration & Syndication	\$37,536	\$24,283	\$55,137	\$25,999	-\$29,138	-52.8%
Identity & Access Management	\$24,989	\$39,124	\$30,301	\$26,000	-\$4,301	-14.2%
Security	\$5,416	\$47,277	\$31,362	\$30,417	-\$945	-3.0%
Testing Activities	\$38,372	\$52,026	\$39,983	\$46,364	\$6,381	16.0%
Interoperability	\$36,914	\$30,087	\$23,016	\$20,561	-\$2,456	-10.7%
Hybrid:	\$465,741	\$189,973	\$221,168	\$124,012	-\$97,156	-43.9%
VA LAN	\$35,624	\$15,980	\$14,686	\$22,134	\$7,448	50.7%
Joint Security Architecture & WAN	\$50,456	\$46,197	\$29,317	\$36,490	\$7,173	24.5%
Legacy System Mods & Interfaces	\$353,084	\$124,796	\$142,077	\$32,659	-\$109,418	-77.0%
Medical Devices	\$26,576	\$3,000	\$35,088	\$32,729	-\$2,359	-6.7%
PMO	\$227,158	\$199,116	\$199,116	\$253,116	\$54,000	27.1%
PMO Support Contracts	\$188,877	\$142,069	\$118,095	\$155,296	\$37,201	31.5%
Pay & Benefits (including reimbursements)	\$32,190	\$48,750	\$63,998	\$88,433	\$24,435	38.2%
Travel	\$603	\$1,461	\$3,797	\$3,888	\$91	2.4%
Equipment, Supplies, Leases & Other	\$5,488	\$6,836	\$13,226	\$5,499	-\$7,727	-58.4%
Carryover 2022:			\$344,530			
EHR			\$98,450			
Infrastructure			\$134,831			
PMO			\$111,249			

Electronic Health Record - \$1.186 billion (+\$66.7 million, +6.0%)

	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted	
					\$	%
(\$ thousands)						
EHR	\$1,591,625	\$1,119,145	\$1,119,145	\$1,185,884	\$66,739	6.0%
Site Transitions	\$1,179,165	\$598,385	\$478,905	\$66,928	-\$411,977	-86.0%
EHR Operations	\$267,372	\$235,000	\$373,702	\$928,724	\$555,022	148.5%
Enterprise Integration	\$97,409	\$209,000	\$11,869	\$153,078	\$141,209	1189.7%
VA Current Site Assessments	\$33,360	\$36,960	\$211,597	\$0	-\$211,597	-100.0%
Vendor Site Implementation Support	\$14,318	\$39,800	\$43,071	\$37,154	-\$5,917	-13.7%

The EHR 2024 Budget funds the core Indefinite-Delivery / Indefinite-Quantity (ID/IQ) activities and the approved modified EHR baseline requirements identified through IOC and lessons learned.

The 2024 Budget includes \$1.186 billion for the new EHR solution, and all activities required to plan for and deploy the solution, which is a \$66.7 million (6.0%) increase relative to the 2023 President’s Budget request. The primary increase is due to the increased number of 2024 EHR Operations sustainment of sites going live (29 in 2024 versus 6 in 2023) plus the sustainment of the five live sites (for cumulative total of 40 sites). These increases over the 2023 budget are largely offset by a decrease in Site Transitions deployment activities at new sites (None in 2024 vs 16 in 2023). This Budget funds enterprise operations that support system reliability, system integration, enhancements to training content to increase end user adoption, and continued efforts to achieve interoperability between VA and DoD and community care providers.

The Budget includes estimated cost for activities required to plan for and ensure successful deployment of the ongoing EHR rollout. These activities include enterprise hosting, operations and sustainment, implementation management, change management, training content maintenance and development, data migration and syndication, interoperability, workflow development, testing, licensing renewals, forward deployment of solution servers, cyber and architecture management, and required innovations. 2024 funds will be used to sustain the new EHR at multiple locations, as shown in chart below, dependent upon site readiness. The new EHR solution will help simplify health care delivery for both patients and clinical providers. Medical providers will have instant and seamless access to a Veteran’s full health records and history. VA will compile data from servicemembers’ records to guarantee it is available to be accessed years later by DoD, VA, and private sector doctors. This centralization of data will provide clinicians with a full picture of a Veteran’s medical history. Through national and local workflow design processes, VA partnered with DoD and commercial vendors and is working to strengthen and improve health care for all Veterans and active duty servicemembers and to improve the productivity and user experience for VA system users.

The high-level deployment schedule along with what is funded for each budget subcategory is shown below. The specific details for each budget subcategory provided in the budget subcategory sections that follow the EHR overview.

Site Transitions - \$66.9 million (-\$411.9 million, -86%)

The 2024 request will focus solely on acquiring Facility Space to support the ongoing deployment training and testing activities for nine Waves (29 sites) and will not fund any new deployments compared to the 16 sites that were funded with the 2023 Budget, which accounts for the decreased funding request of \$412 million. Training facilities space is needed to augment VAMC facility space to ensure there is adequate classroom and conference space to conduct super user and end user training, as well as Independent Validation and Verification testing.

EHR Operations –\$928.7 million (+\$555.0 million, +148.5%)

EHR operations are sustainment activities required to operate and maintain the new EHR solution as VA approaches site transitions. Activities include data hosting, help desk, software license maintenance, forward deployed hardware and software, end user operations, and ongoing national and local level sustainment support to ensure proper maintenance and performance of the new solution. The 2024 request will fund EHR Operations and Sustainment activities at a cumulative 40 sites versus the 15 sites that were funded with the 2023 Budget, which is the primary driver for the increased funding request of \$555.0 million

Enterprise Integration - \$153.0 million (+\$141.2 million, +1189.7%)

Enterprise integration activities are enterprise-level activities required to support the integration, installation, and design for the implementation of the new EHR solution software across the enterprise. Enterprise Integrations includes cross-cutting activities conducted at an enterprise level to ensure VA systems, organizations and staff are ready for site-level transitions to occur. The 2024 Budget will fund Enterprise Integration activities for VITAL, Change Management and Training, Interface Development, Data Migration, Testing, and council support in the amount of \$153.0 million. This is an increase of \$141.1 million over the 2023 Budget for the EHR Enterprise Integration subcategory. The increase is due to ongoing development of enterprise level workflows and the program's focus on system integration and enhancement to meet unique site-specific needs.

VA Current Site Assessments - \$0 million (-\$211.6 million, -100%)

Site assessments are pre-site transition activities that occur at each VAMC and associated facilities prior to a site's EHR transition. The purpose of these activities is two-fold: 1) a functional assessment allows VA to properly assess the current state of the site, to understand the services delivered at that site, and to properly estimate the level of effort required for site transition; and 2) a technical assessment that informs VA's site infrastructure modernization plans by providing VA with a gap analysis of current site infrastructure and upgrades required to support the new system. These upgrades must then be separately procured under non-Cerner contracts; some of which may have long lead times for actual delivery and installation, to support the capacity, security, and/or interoperability of the new EHR solution with site end-user devices.

In 2023, VA made an adjustment to the EHR deployment schedule. These schedule adjustments resulted in a shift to deployment activities. To remain consistent with the deployment methodology planning timelines, site assessment was adjusted to remain consistent with our planning

methodology. In 2022, VA funded CSRs for VISNs 15, 19, 21 which supports the long lead time required for infrastructure upgrades. Given, there will be no additional deployments occurring in 2024, the budget request will not fund Current Site Assessment activities.

Vendor Site Implementation Support - \$37.1 million (-\$5.9 million, - 13.7%)

Cerner, as the integrator, will support VA with project management functions required to successfully execute the individual task orders on the base contract. This support includes integrated planning, scheduling, communication, requirements management, site coordination, reporting, quality assurance, quality management, project planning, financial and risk management.

Infrastructure Readiness - \$424.0 million (-\$16.7 million, -3.8%)

	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted	
					\$	%
(\$ thousands)						
Infrastructure	\$720,692	\$440,739	\$440,739	\$424,000	-\$16,739	-3.8%
Site Specific:	\$111,723	\$57,969	\$39,772	\$150,648	\$110,876	278.8%
End User Devices	\$111,723	\$57,969	\$39,772	\$150,648	\$110,876	278.8%
Enterprise:	\$143,228	\$192,797	\$179,798	\$149,340	-\$30,458	-16.9%
Data Migration & Syndication	\$37,536	\$24,283	\$55,137	\$25,999	-\$29,138	-52.8%
Identity & Access Management	\$24,989	\$39,124	\$30,301	\$26,000	-\$4,301	-14.2%
Security	\$5,416	\$47,277	\$31,362	\$30,416	-\$946	-3.0%
Testing Activities	\$38,372	\$52,026	\$39,983	\$46,364	\$6,381	16.0%
Interoperability	\$36,914	\$30,087	\$23,016	\$20,561	-\$2,455	-10.7%
Hybrid:	\$465,741	\$189,973	\$221,168	\$124,012	-\$97,156	-43.9%
VA LAN	\$35,624	\$15,980	\$14,686	\$22,134	\$7,448	50.7%
Joint Security Architecture & WAN	\$50,456	\$46,197	\$29,317	\$36,490	\$7,173	24.5%
Legacy System Mods & Interfaces	\$353,084	\$124,796	\$142,077	\$32,659	-\$109,418	-77.0%
Medical Devices	\$26,576	\$3,000	\$35,088	\$32,729	-\$2,359	-6.7%

The 2024 Budget includes \$424.0 million for infrastructure readiness, which is a \$16.7 million (-3.8%) decrease relative to the 2023 Budget. . The decrease is due mainly to the transition of Data Migration, Identity, Testing, Interoperability, and Interfaces Cerner costs back to EHR. Further details are described below.

In 2024, the EHRM-IO program strategy focuses on reducing the number of specialized interfaces by having more standardized workflows which creates efficiencies in the technology infrastructure deployment. Standardized workflows mean there is a reduced scope of infrastructure readiness activities relative to 2023 and is reflected in activities such as legacy system modifications and interfaces and medical devices.

With a focus on standardized workflows, EHRM-IO will continue to place emphasis on CSRs to ensure sites are properly scoped and prepared for infrastructure readiness activities. This is especially important because information technology equipment must be ordered at least 32 months ahead of planned go-lives. In 2024, EHRM-IO will conduct CSRs for multiple facilities.

Through these site assessments, VA will determine the specific infrastructure gaps that will require mitigation. Analysis of CSRs performed to date provides a gauge of probable infrastructure upgrades VA will address at all sites across the enterprise, including upgrades to specific types of end user devices, monitors, printers, scanners, and card readers. These CSRs will provide VA with a better understanding of requirements in terms of infrastructure readiness and continue to build on a standardized workflow strategy that will continue to create operational efficiencies.

Site Specific Costs –\$150.6 million (+\$110.8 million, +278.8%)

	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted	
					\$	%
(\$ thousands)						
Site Specific:	\$111,723	\$57,969	\$39,772	\$150,648	\$110,876	278.8%
End User Devices	\$111,723	\$57,969	\$39,772	\$150,648	\$110,876	278.8%

This funding supports end user device information technology infrastructure costs at VA medical facilities to support implementation of the new EHR solution not currently covered by OIT or VHA funding. This includes costs directly related to facility IT infrastructure readiness, such as workstations, monitors, printers, scanners display boards and wall mounted items supporting End User Devices (EUD) equipment. EHRM-IO works with VHA to coordinate their facilities’ infrastructure costs to support EHRM-IO and with OIT to coordinate IT costs aligned with their Infrastructure Refresh Plan (IRP).

End User Devices –\$150.6 million (+\$110.8 million, +278.8%)

The funding for EUDs covers the Cerner-specific requirements for EUDs at each site and setup, maintenance and breakdown of training spaces and command centers in support of go-live activities. Training spaces are designed to provide clinicians hands-on training on the new EHR solution in an environment that resembles the VA clinical environment. Local site command centers are utilized to support go-live technical and programmatic activities. The CSR reports recommend expanding the number and types of EUD equipment at each site compared to current previous levels. EUD procurements are performed approximately 18 months before go-live to allow time for procurement, delivery, installation, and testing. For 2024 EHRM-IO plans to procure devices in VISNs 21, 22, 17, 16, 9, and 8 (approximately 53 VAMCs, with associated Community Based Outpatient Clinics (CBOCs), as well as Remote Staff) but will continue to work with OIT to further fine tune sites and quantities in line with OIT’s hardware refresh. The program supports the current training requirements and strategy (I.e., in-person instructor led training) which drive changes to which EUDs are needed to ensure staff are trained in advance of go-live. To gain cost savings, and leverage VA’s existing EUD processes, these devices are purchased in coordination with OIT using their existing strategically sources contracts where possible. Procurements are also done at a VISN level to allow EHRM-IO and OIT to have flexibility to manage redistributions across sites within a VISN. Devices which EHRM-IO procures will be transitioned to VA’s existing IT inventory managed by OIT.

Enterprise Costs –\$149.3 million (-\$30.4 million, -16.9%)

This funds technology infrastructure costs that support implementation at the national level, including data migration and syndication, identity and access management, cybersecurity, testing and interoperability with the community and DoD. Enterprise costs are ongoing costs that broadly support EHRM-IO and are not directly tied to site infrastructure.

	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted	
					\$	%
(\$ thousands)						
Enterprise:	\$143,228	\$192,797	\$179,798	\$149,340	-\$30,458	-16.9%
Data Migration & Syndication	\$37,536	\$24,283	\$55,137	\$25,999	-\$29,138	-52.8%
Identity & Access Management	\$24,989	\$39,124	\$30,301	\$26,000	-\$4,301	-14.2%
Security	\$5,416	\$47,277	\$31,362	\$30,416	-\$946	-3.0%
Testing Activities	\$38,372	\$52,026	\$39,983	\$46,364	\$6,381	16.0%
Interoperability	\$36,914	\$30,087	\$23,016	\$20,561	-\$2,455	-10.7%

This funding covers technology infrastructure costs that support implementation at the national level, including data migration and syndication, identity and access management, cybersecurity, testing and interoperability with the community and DoD. Enterprise costs are ongoing costs that broadly support EHRM IO and are not directly tied to site infrastructure.

Data Migration & Syndication –\$25.9 million (-\$29.1 million, -52.8%)

This funds the overall data management required to ensure VA’s VistA and the new EHR solution properly account for all existing Veteran’s data. These efforts include the support to the VX-130 system, which provides a systematic method to replicate and transfer existing VistA data to the new system through a secure and effective method. This effort is critical as it ensures the new system will have all the relevant data on patients from the legacy system. Likewise, new data entered in the new system will need to be brought back into the VA legacy systems through a data syndication strategy. This will enable sites using the legacy systems and sites using the new EHR to share and update the same information on patients. Data Migration Support is managed at the Enterprise/National level as it will support migration of data across all 130 VistA Instances (supporting all VISNs and sites) across the 10-year deployment period. This cost supports an increased need for servers, storage, network infrastructure and engineering staff needed to support the increase to the number of go lives (26 in 2024), as well as the move of VX-130 and syndicated data to the cloud (which began in 2023) to support VA’s availability, scalability and increased resiliency needs. This will support the 26 sites expected to go live in 2024. The decrease in funding from 2023 to 2024 is attributed to Cerner data requirements transitioning back to EHR.

Identity and Access Management –\$26.0 million (-\$4.3 million, -14.2%)

The funding for Identity and Access Management (IAM) includes the cost for Joint Patient Identity Management Services (JPIMS) provided by VA OIT Master Person Identity (MPI), DoD’s Defense Manpower Data Center (DMDC) and Cerner. JPIMS is required to manage the patient population for both agencies in a single system, enabling VA’s EHR solution to operate

in a manner that minimizes patient safety risks. JPIMS will be used to manage patient identities for search and selection within the EHR. It is a critical component of the architecture and is needed to ensure that patients between VA and DoD are accurately correlated and true interoperability is achieved. Additionally, VA provided VA Profile system and VA Enrollment systems are also required for integration and support to enabling sharing of VA contact, demographic and eligibility information. Existing enterprise systems and services within VA and federally shared services must be upgraded, connected, and configured to support the new electronic health record. VA will work in close coordination with all stakeholders to ensure that service requirements for the new EHR solution are accurately communicated and in line with VA standards. This support also includes any additional credentials (e.g., personal identification verification [PIV] cards) and federation services, which are needed to access the electronic health record. This support covers all VISNs and users throughout 10-year period. Reduction in funding from 2023 is based upon a reduction in VA implementation activities to enable additional enterprise level functionality in the new electronic health record. As new functionality is implemented, those implementations will support the enterprise, and costs transition to sustainment and usage costs.

Security –\$30.4 million (-\$16 million, -36%)

Cybersecurity is vital to keep Veteran’s health care information safe and to assure that the new EHR operates to its fullest potential without interruption. The funding to support cybersecurity provides for additional security controls, Authority to Operate (ATO), Authority to Connect (ATC), joint security monitoring, medical device ATOs / ATCs, security modifications and updates, and system connectivity and activation, required to the Cerner hosting environments to account for additional VA capabilities. VA needs to collaborate closely with DoD on system monitoring as well as developing policies and processes to manage security controls across the EHR. Security expenses include the support to configuration management as well as coordination with VA’s Office of Information Technology (OIT), Office of Information Security (OIS) and the Defense Health Agency (DHA). Security activities support evaluating, updating, and coordinating with DoD on VA’s current security documentation and risk posture to ensure all VA and DoD security requirements are met. Support for these activities aligns to all VA systems, throughout the 10-year period, integrating with the EHR hosted in the DoD Enclave. The decrease in cyber funding from 2023 to 2024 is attributed to the consolidation of Cyber Security support contracts that were ultimately realigned to the PMO. The 2024 budget request will support cyber related requirements at all 28 sites expected to go live in 2024.

Testing Activities –\$30.4 million (-\$0.946 million, -3.0%)

Provides for the design, staffing and fielding of pre-production enterprise test facilities in Bay Pines, FL, Albany, NY and the DOD’s Joint testing facility in Chantilly, VA, for Joint Testing activities which includes expanded performance testing. Interconnecting with VA legacy systems (to include Joint Longitudinal Viewer), Cerner’s data center and DoD’s DMDC to validate systems are working properly prior to a respective go-live. Critical to a deployment is a robust testing methodology and plan. These activities include support for VA infrastructure and systems testing needed to ensure that EHR deployments do not disrupt patient safety or existing operations and have properly met VA standards. Testing services provides experts to conduct

planning and assessments, as well as support for interagency coordination needed to test complex inter-agency workflows leveraging multiple systems in addition to the new EHR. Testing also includes coordination around both functional and technical testing. While testing is an enterprise cost, an increase in deployments (each of which have their own Independent Validation and Verification events) expected in 2024 will increase the use of these facilities. To support scalability and resilience in the system VA will be deploying greater testing automation tools. In addition to support of site deployments, these costs also cover the support to software (Cube, Block) and one-off releases which do not follow the deployment schedule. These facilities will be required to support the full deployment across 10 years and will support all current and upcoming VISNs. This will support the 28 sites expected to go live in 2024. The decrease in funding from 2023 to 2024Y24 is attributed to Cerner testing requirements transitioning back to EHR.

Interoperability –\$20.5 million (-\$2.4million, -10.7%)

The new EHR solution is being implemented in phases to integrate health records between VA and DoD that can be shared externally. The departments work together to implement a seamless, interoperable platform that shares the same source of data. In an effort to ensure joint systems satisfy existing and emergent interoperability mandates and guidance, additional funding is required to enhance VA legacy products as well as joint (VA/DoD) shared solutions. These investments will ensure we can perform the upgrades necessary, including engineering, development, application interfaces and system upgrades required to ensure interoperable health data, images and processes are maintained. Interoperability costs include support of and the increasing capabilities available and being leveraged through enhanced bi-directional EHR data exchange platforms in support of Inter-agency and external clinical care coordination, benefits adjudications, population health and analytical services in compliance with existing and emerging regulatory and policy requirements (MISSION Act & CURES Act). This support will continue throughout the life of the program based on increased support needed such as Cloud based Image Sharing for direct patient care coordination, automating data reconciliation enhancements to alleviate provider manual workflows burdens and emerging public health and surveillance solutions being implemented for VA and Federal population health administrations. This will support the 28 sites expected to go live in 2024. The decrease in funding is attributed to Cerner Interoperability requirements transitioning back to EHR.

Hybrid Costs – \$124.0 million (-\$97.1 million, -43.9%)

	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted	
					\$	%
(\$ thousands)						
Hybrid:	\$465,741	\$189,973	\$221,168	\$124,012	-\$97,156	-43.9%
VA LAN	\$35,624	\$15,980	\$14,686	\$22,134	\$7,448	50.7%
Joint Security Architecture & WAN	\$50,456	\$46,197	\$29,317	\$36,490	\$7,173	24.5%
Legacy System Mods & Interfaces	\$353,084	\$124,796	\$142,077	\$32,659	-\$109,418	-77.0%
Medical Devices	\$26,576	\$3,000	\$35,088	\$32,729	-\$2,359	-6.7%

Hybrid costs cover technology infrastructure that apply to both the physical medical facility and the enterprise national program level. For example, VA Network (LAN) consists of site-specific

costs to upgrade core switch equipment as well as costs to provide engineering and deployment support for that equipment across the enterprise.

VA Local Area Network (LAN) – \$22.1 million (+\$7.4 million, +50.7%)

The funding for the LAN modernization includes replacing aging network cables, fiber optic cables and LAN switches for wired and wireless networks, WIFI and Voice Over Internet Phones (VOIP) at all VAMCs, CBOCs, and Veteran Centers prior to go-live. VA coordinates with all stakeholders to develop a plan of action for managing responsibilities related to the modernization. Updates require engineering services to assess current infrastructure in place and provide optimizations of the current LAN to support the new EHR. This includes reviewing configurations and assessing the hardware currently deployed and supported by VA. The upgrade includes the addition of switches, routers, cables and adaptors as well as support needed to implement those items. The upgrades are focused on optimizations of information technology support to the EHR within a facility and as such are coordinated with capital improvements to the infrastructure. This includes configurations, upgrades and assessments to improve the wireless networking needed to support the additional traffic within a facility. LAN infrastructure improvements will also consider support to the data and information needs of biomedical devices. The work within this subcategory includes enterprise activities such as bulk cable orders to support all rollouts and issues, as well as engineering support to local configuration updates as part of the Cerner rollout. This includes additional support to CBOCs needed in 2024 over 2023. Wi-Fi costs are no longer anticipated throughout the 10-year deployment period. This will support the 28 sites expected to go live in 2024.

Joint Security Architecture and WAN – \$36.4 million (+\$7.1 million, +24.5%)

The funding for Joint Security Architecture and wide area network (WAN) provides for additional security controls, ATO, Joint Security monitoring, medical device ATOs and security modifications, and ATO updates required for the Cerner hosting environments to account for additional VA capabilities. The WAN MedCOI is an enterprise Multi-Protocol Label Switched Layer 3 Virtual Private Network (VPN) that provides a secure logical medical enclave. It serves as a key enabler for full personal health care information interoperability between DoD and VA. VA needs to collaborate closely with DoD on system monitoring as well as developing policies and processes to manage security controls across the EHR. Security expenses include the support to configuration management as well as coordination with VA's Office of Information Security. Security activities support evaluating, updating and coordinating with DoD on VA's current security documentation to ensure all VA and DoD security requirements are met.

Legacy System Modifications and Interfaces – \$32.6 million (-\$109.418 million, -77.0%)

This area covers the associated effort of developing interfaces to legacy systems that will no longer be connected to VistA but need to connect to other systems in the VA enterprise. Currently numerous systems are used to support the VA health care delivery process. These range from enterprise systems that provide common functions used by many users, facilities, and processes, regional or special purpose systems that integrate and support across a subset of VA facilities, and local systems and devices that are unique to installations. Many of these systems are custom,

government-built systems, which often do not utilize national industry standards for data or interfaces. EHRM-IO’s strategy is to focus on interfaces that improve information and capabilities to the clinician and patients at the point of care. VA uses a set of complex systems to deliver a variety of benefits. Even though the native systems may not be substantially modified, existing VistA interfaces need to be changed to support the new electronic health record and ensure that business processes, such as benefits determination, do not have a break in functionality due to data loss. Interfaces must be designed, developed, tested, and secured in line with VA and DoD systems development methodologies. For 2024, Interface costs include development and sustainment, and specific VISN/Wave may adjust as more information is gathered. The decrease in funding from 2023 to 2024 is attributed to Cerner Interface requirements transitioning back to EHR.

Medical Devices –\$30 million (+\$32.7 million, -2.3%)

Implementing the new EHR solution requires updates to existing healthcare technology such as medical devices/interfaces such as infusion pumps, vital sign monitors, and other bedside patient monitors. These devices handle electronic patient data that will be automatically recorded into the new EHR solution. EHRM-IO works with Cerner and other vendors to update the interfaces for these devices to ensure proper data transfer; older medical devices may need to be replaced with equipment that is compatible. Funding for medical devices will be used for medical device integration, clinical application interfaces and clinical imaging integration. For 2024 these costs will be aligned to sites where Medical Device/Interfaces requirements (determined by CSRs and Front-Facing Gap Analysis) are known in VISNs 12 and 15. EHRM-IO will cease to cover costs for medical devices after 2025. In 2024 EHRM-IO plans to pay \$10 million dollars for Contractor support to aid the VA Biomedical community purchase approved biomedical devices. The actual costs of the devices/systems will be paid for by EHRM-IO, who will cease to fund medical devices/systems in 2025. The increase in funding is attributed to Biomedical device costs not transitioning to VHA in 2024 as previously planned.

Program Management Office - \$253.1 million (+\$54 million, +27.1)

	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted	
					\$	%
(\$ thousands)						
PMO	\$227,158	\$199,116	\$199,116	\$253,116	\$54,000	27.1%
PMO Support Contracts	\$188,877	\$142,069	\$118,095	\$155,296	\$37,201	31.5%
Pay & Benefits (including reimbursements)	\$32,190	\$48,750	\$63,998	\$88,433	\$24,435	38.2%
Travel	\$603	\$1,461	\$3,797	\$3,888	\$91	2.4%
Equipment, Supplies, Leases & Other	\$5,488	\$6,836	\$13,226	\$5,499	-\$7,727	-58.4%

PMO is charged with providing oversight of VA’s EHRM IO contract with Cerner. This includes the management of associated project risks and ensuring adherence to cost, schedule and performance objectives. The 2024 PMO request is \$253.1 million, which is a \$54.0 million (27.1%) increase relative to the 2023 President’s Budget.

The increase in funding is a result of right-sizing the program and providing the resources to support ramp up in deployment schedule; in order to catch up from the past delays and meet the

deployment timeframe. For PMO, we project the federal staffing to increase from the current level of 227 staff to 313, an increase of 86 staff (27%) to facilitate the deployment of the EHR solution to more facilities in 2024. The staffing increase will include Implementations Managers and Solution Experts to aid in program management oversight which is critical to change management and effective deployment. As a result of the increase in deployments, we also project an increase in the amount of required travel to \$3.9 million.

PMO Support Contracts - \$155.2 million (+\$37.2 million, +31.5%)

PMO Support contracts includes the cost for contractor support staff working on EHRM-IO, their travel, and other direct costs. This supports VA in its effort to provide oversight of all EHRM-IO-related activities, monitor Cerner's performance, and to manage associated project risks while ensuring the successful go-lives. Contractor average rate costs rise from year to year based on the higher cost category of expertise. Contractor support costs also includes contractor travel, which is expected to increase in 2024. Contractor staff will work with government personnel to provide expert oversight in a myriad of professional disciplines that include program management, clinical and technical engineering and architecture, security, testing, acquisition, contracting, data migration, communication, Independent Verification & Validation (IV&V), training, change management and governance. Furthermore, this will also fund intra-agency financial services support and human resources management support.

Pay and Benefits - \$88.4 million (+\$24.4 million, +38.2%)

This funding is for pay and benefits of general services (GS) employees both direct and reimbursed to include Title 38 from VHA supporting EHRM IO. Pay and benefits will increase due to additional government personnel (+86 over 2023) and reimbursable staff/VHA experts. This funding level will support 313 direct staff and 53 detailed reimbursable federal support staff. Of the direct staff, a total of 7 are supporting the joint VA/DoD FEHRM project management effort. Additional information is in the EHRM staffing section.

Travel \$3.9 million (+\$0.91 million, +2.4%)

In 2024, travel will increase significantly in order to support the deployment schedule. We will continue to right-size administrative services as we realign the staffing.

Equipment, Supplies, Leases and Other - \$5.4 million (-\$7.7 million, -58.4%)

Funding for equipment, supplies, leases, and other required resources are costs that support government personnel and provide efficiencies in our everyday operations. Some of the efficiencies gained are from the reduction of employee workspace leases, as a result of increased telework and virtual capabilities.

Staffing and Organization Structure

EHRM IO staffing and structure is organized into various workstreams under the Office of the Program Executive Director (PED), Office of the Functional Champion, Office of DCIO and the Program Management Office, as outlined below:

Electronic Health Record Modernization Staffing Highlights (\$ thousands)							
	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted		
					FTE	%	
EHRM IO Organizational Structure:							
Program Executive Director (PED)	33	4	4	54	50	1250.0%	
Office of the Functional Champion	24	51	51	60	9	17.6%	
Office of the Deputy Chief Information	82	103	103	89	-14	-13.6%	
Program Management Office	36	69	69	110	41	59.4%	
Subtotal, New Org. Direct Staffing	175	227	227	313	86	37.9%	
Federal Reimbursable Staff:							
Veterans Health Administration - Core Title 38	21	37	37	53	16	43.2%	
Veterans Health Administration - Field Staff	34	0	0	0	0		
Total, Reimbursable Staff	55	37	37	53	16	43.2%	
Total, Staff	230	264	264	366	102	38.6%	
Full Time Equivalent (FTE):							
Direct FTE	175	227	227	313	86	37.9%	
Total, FTE	175	227	227	313	86	37.9%	

Office of the Program Executive Director (54 FTE)

The Office of the Program Executive Director (PED) is responsible for cross organizational and cross functional coordination of communication and implementation strategies, to include functional, technical and program management. The PED has operational control over the OFC, the Office of the DCIO, and the PMO. In addition, the PED chairs the new EHR Integration Council, which ensures fully coordinated and timely decisions by receiving input from stakeholders across the VA. The increase in FTE growth from 2023 is due to the organization realignment of sub offices.

Office of the Functional Champion (60 FTE)

The new OFC consolidates functions from the former EHRM-IO Chief Medical Officer and the functions of the VHA Functional Champion. The OFC ensures appropriate clinical involvement by having a principal role in processing and resolving patient safety concerns. The OFC bridges any divides between IT, the EHR vendor, and the care delivery teams to ensure that the needs of practicing clinicians and support staff are met.

Office of the Deputy Chief Information Officer (89 FTE)

The new DCIO will assume all information and technology integration functions for the program. The DCIO for EHRM-IO is a newly created office that reports to the PED but will also

seek guidance and expertise from the Under Secretary for Health for issues related to adherence to OIT and VHA policies. The DCIO will ensure close bidirectional communication with technical staff at the local sites.

Program Management Office (110 FTE)

The PMO, led by an Executive Director, will be responsible for program management activities, including integrated scheduling, cost estimates, contract management, and risk management. The PMO seeks concurrence and expertise on matters related to program management and contract management through the Office of Acquisition, Logistics, and Construction. The PMO also seeks guidance with the Office of Management on budget formulation and execution, cost estimates, and audits.

DoD/VA Electronic Health Record Collaboration

Modernizing the EHR has been and continues to be one of our highest national priorities, along with ensuring the health and safety of our Veterans. VA remains committed to this effort and is working diligently to ensure its success through direct engagement with the FEHRM program office, as authorized by the 2020 National Defense Authorization Act.

FEHRM Resource Support: The Budget includes \$19.0 million to fund joint responsibilities between DoD and VA for support of the FEHRM joint activities. The 2024 Budget is projected to have similar funding breakouts across the program elements as in 2023. The detailed program elements will be finalized between EHRM-IO and FEHRM.

FEHRM Support (\$ thousands)						
	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted	
					\$	%
Program Element:						
Pay & Benefits	\$661	\$1,147	\$1,147	\$1,147	\$0	0.00%
Contract Support	\$16,681	\$17,726	\$17,726	\$17,726	\$0	0.00%
Equipment	\$0	\$12	\$12	\$12	\$0	0.00%
Travel	\$9	\$75	\$75	\$75	\$0	0.00%
Total Obligations	\$17,351	\$18,960	\$18,960	\$18,960	\$0	0.00%
Federal Staffing	4	7	7	7	0	0.00%
Contractor Support Staffing	63	65	65	65	0	0.00%

Federal Electronic Health Record Modernization

DoD and VA share a common mission to support a lifetime of high-quality health care for service members, Veterans, and their families. In support of this mission, the FEHRM, chartered in December 2019, leads DoD, VA, and other partners in implementing a single, common federal EHR that enhances patient care and provider effectiveness, wherever care is provided.

With experts in analytics, clinical care, information technology and training, the FEHRM is driving federal solutions for more efficient, safer care and a better health care experience for all by working toward the following joint objectives with DoD and VA:

- Actively manage risks and the operation of the joint Federal Enclave.
- Minimize risk to EHR deployment and implementation.
- Identify opportunities for efficiency, standardization and optimization of systems and processes.
- Advance interoperability across the federal and private sectors.

2022 FEHRM Accomplishments

In 2022, the FEHRM delivered common capabilities in support of DoD, VA, US Coast Guard (USCG) and other partner missions to deploy a single, common federal EHR. These common capabilities include:

- Managing the Federal Enclave, which is a shared environment to contain the federal EHR and supporting systems.
- Managing the joint health information exchange (HIE), an enhanced network of private sector providers who agree to quickly and securely share patient electronic health information with federal EHR users and vice versa.
- Leading analysis and integration of deployment activities at joint sharing sites where DoD and VA resources are shared.
- Overseeing configuration and content changes to the EHR that are agreed on by the Departments through a joint decision-making process facilitated by the FEHRM
- Providing software upgrades and solutions to optimize EHR performance.
- Tracking joint risks, issues and opportunities as well as lessons learned regarding EHR implementation to inform continuous improvement.
- Maintaining an integrated master schedule to help coordinate EHR activities.
- Advancing interoperability, which refers to the meaningful use and exchange of data, including working closely with the Office of National Coordinator for Health Information Technology and national standards organizations to improve the continuity of care among and between public- and private-sector providers.

The joint HIE is now one of the largest and well-connected health information exchanges in the country, connecting with more than 127,000 external provider sites (27,000+ CommonWell provider sites and 100,000+ eHealth Exchange provider sites), including 65% of private sector hospitals. The joint HIE is a modernized health data sharing capability that enhances the ability of DOD, VA and USCG to share bidirectional EHR data quickly and securely with participating community health care providers. The FEHRM Implemented a joint HIE heat map to show the geographical location of all joint HIE partners.

Accomplishments

1. EHRM-IO continued implementing the Forward Deployed Solution Set (FDSS) and Joint Security Architecture (JSA) and initiated JSA installations in support of the EHR deployment. FDSS provides managed components and services that are foundational for the EHR implementation, including hardware, software, support, storage requirements, remote operational management and monitoring. JSA provides greater cyber security for connectivity to the Joint Federal EHR Enclave and is required for interface testing and evaluation and medical device isolation. It allows secure communication across the VA enterprise to the same cyber posture as DOD and allows secure access for interface testing, evaluation, special medical device isolation and production use. Both FDSS and JSA will be deployed to each VAMC in advance of future EHR implementations.
2. EHRM-IO continued IT infrastructure readiness activities that must be completed 12-32 months prior to go-live at sites in Veterans Integrated Service Networks (VISNs) 12 and 23, which are scheduled for deployment in 2023 and in early 2024.
3. EHRM-IO migrated over 10 million records. In addition, VA made significant improvements through automation of data migration capabilities, which provided significant relief of manual entry needs after a site's cutover to the new EHR system. These improvements in data migration will continue to be used at future go-live sites, which will enhance transfer of current orders to the new EHR system.
4. VA completed four successful deployments of the new EHR system in fiscal year (FY) 2022 at Jonathan M. Wainwright Memorial VA Medical Center in Walla Walla, Washington, on March 26, 2022; VA Central Ohio Healthcare System in Columbus, Ohio, on April 30, 2022; and Roseburg VA Health Care System in Roseburg, Oregon, and the VA Southern Oregon Rehabilitation Center and Clinics in White City, Oregon, on June 11, 2022. To date, five VA medical centers, 22 community-based outpatient clinics and 52 remote sites have gone live with the new system, with more than 10,000 end users. In preparation for deployments, EHRM-IO developed an integrated site readiness checklist to ensure critical activities were completed for a successful go-live.
5. EHRM-IO completed two releases of EHR system upgrades during 2022 as part of a standard, biannual plan to enhance existing capabilities and interfaces and ensure platforms remain current on software code. Block 6 release was completed Feb.18-19 at Mann-Grandstaff VA Medical Center in Spokane, Washington. Block 7 release was completed Aug. 12-13. All five sites that were live with the EHR or had an affiliation with a live site (e.g., remote sites) were part of the release. As a collaborative effort among Cerner, VA, the Department of Defense and U.S. Coast Guard, Block 7 updates approximately 14 platforms, features, interfaces and capabilities for all VA facilities and affiliated sites live with the EHR. The release benefits various user experience areas, including TrackCore, Pharmacy, ScriptPro and more, eliminating the need for double documentation, improving data analysis and reducing manual processing by staff. This is VA's third release since the system was launched in October 2020.

6. With the goal of encouraging adoption of the new system, EHRM-IO implemented a number of change management strategies to ensure that leadership and staff understand that EHR implementation represents an entirely different and innovative way of delivering health care. For example, EHRM-IO launched a series of VISN Medical Center Directors' Conferences to bring together site leadership within a VISN to communicate how to prepare for implementation, answer questions and give leadership at already deployed sites a platform to share their lessons learned and tips with their peers. The first conference was held for VISN 10 in May 2022 and received extremely positive feedback from attendees.

Other change management accomplishments include 1) launched and managed the administration of more than 15 change readiness surveys and change management post-event evaluations; 2) distributed more than 170 content change notifications and more than 80 EHR system alerts to end users; 3) led eight monthly VISN-level Change Leadership Team (CLT) Community of Practice (CoP) collaboration sessions to share lessons learned and experiences across VISNs and 4) reviewed and distributed more than 2,500 localized site-tailored communications in support of more than 150 EHRM events and activities.

7. EHRM-IO, in collaboration with Cerner, successfully completed comprehensive testing of new capabilities, system integrations, data migrations and solutions for the four site deployments and two Block releases in 2022. Ninety-eight percent of all test findings, including all critical and high category test findings, were closed or fixed at the time of go-live.
8. VA used feedback from the Spokane, Walla Walla and Columbus sites to evolve and enhance its training content to ensure better competency in using the new system. This involved improvements to both quality and quantity of training, including course redesigns to incorporate additional workflows and better address the needs of learners. Another important improvement was identifying super users earlier in the deployment process and engaging them as part of the change management network to support their peers.

EHRM-IO trained thousands of end users and super users and supported post go-live training. Training content continues to be migrated to computer-based training and virtual instructor-led training.

9. EHRM-IO focused on hiring leaders and staff with the right skills and experience for successfully completing large complex projects. This included the successful recruitment and hiring of an experienced program manager to lead the Program Management Office (PMO) and oversee contracting and program management and a Functional Champion to lead the Office of Functional Champion (OFC), serving as the clinical executive representing VHA and leading functional initiatives to support VA's medical personnel, including collaborating closely across VA offices to coordinate the development and implementation of EHRM-related activities. A new executive director for training and change management was also hired to oversee this critical area of successful EHR adoption. Additionally, the EHRM program strategy has been updated to rebuild a core

foundation to right size the organization with a focus on people, processes, policies and systems.

10. In 2022, VA obligated funds in support of program requirements, including supporting four deployments in two VISNs. Continuity of funding is integral to our ability to prepare sites for the deployment of the new EHR, and to execute VA's rollout schedule. By the end of 2022, EHRM-IO will have invested infrastructure readiness funding in 15 out of VHA's 18 VISNs. VA will also complete the vast majority of infrastructure modernization work in VISNs 10 and 20, and initial progress will be made in 13 additional VISNs.
11. Budget Execution: In 2022, EHRM-IO obligated \$2.539.4 billion to fund activities throughout each of its budget categories: EHR contract, infrastructure readiness and program management. For the EHR budget category, VA obligated \$1,591.6 billion to fund enterprise integration activities required to support the integration, installation, and design for the implementation of the new EHR solution across VA's enterprise. For the infrastructure readiness cost category, VA obligated \$720.6 million to fund end-user EHR devices, identity and access management, interfaces, interoperability, Medical Community of Interest (MedCOI) and VA LAN. For the program management cost category, VA obligated \$227.1 million to fund pay and benefits for government staff, program management contracts, travel, equipment, leases, and supplies. Of the remaining funds from 2022 we plan to execute by the third quarter. We have planned requirements for the remaining balances and should see the vast majority of those depleted.

Appendix

Appendix A: Obligations by Object Class

Electronic Health Record Modernization						
Obligations by Object Class						
(\$ thousands)						
	2022 Actual	2023 Request	2023 Enacted ^{1/}	2024 Request	24 Request vs. 23 Enacted	
					\$	%
Personal Services	\$32,184	\$39,369	\$51,462	\$64,039	\$12,577	24.4%
Travel	\$13,893	\$1,461	\$3,797	\$3,928	\$131	3.5%
Transportation of Things	\$0	\$132	\$132	\$246	\$114	85.8%
Rent, Communications and Utilities	\$58,162	\$33,570	\$26,570	\$58,720	\$32,150	121.0%
Printing and Reproduction	\$0	\$25	\$25	\$25	\$0	0.0%
Other Services	\$2,347,050	\$1,578,305	\$1,915,164	\$1,634,126	(\$281,038)	-14.7%
Supplies and Materials	\$866	\$180	\$180	\$180	\$0	0.0%
Equipment	\$87,321	\$105,957	\$106,200	\$101,736	(\$4,464)	-4.2%
Lands and Structures	\$0	\$0	\$0	\$0	\$0	0.0%
Total Obligations	\$2,539,475	\$1,759,000	\$2,103,530	\$1,863,000	(\$240,530)	-11.4%

1/ The 2023 Enacted column includes carryover from prior years.

Appendix B: End of Year Staffing Level by Grade

EHRM Employment Summary By Grade							
	2022 Actual	2023 Request	2023 Enacted	2024 Request	24 Request vs 23 Enacted		
					FTE	%	
Direct Staff:							
SES	6	5	5	8	3	60.0%	
ST	0	1	1	0	-1	-100.0%	
GS-15	30	30	30	39	9	30.0%	
GS-14	69	93	93	143	50	53.8%	
GS-13	62	83	83	95	12	14.5%	
GS-12	1	12	12	19	7	58.3%	
GS-11	5	3	3	4	1	33.3%	
GS-9	2	0	0	5	5	0.0%	
Total, Direct Staff	175	227	227	313	86	37.9%	
Reimbursable VHA Staff:							
SES & SES EQV	0	4	4	4	0	0.0%	
VM-15	4	7	7	9	2	28.6%	
VN-V	2	5	5	3	-2	-40.0%	
VN-IV	9	11	11	18	7	63.6%	
VN-III	0	3	3	3	0	0.0%	
GS-15	1	2	2	3	1	50.0%	
GS-14	5	5	5	13	8	160.0%	
GS-13	0	0	0	0	0	0.0%	
GS-12	0	0	0	0	0	0.0%	
VAMC Field Staff	0	0	0	0	0	0.0%	
Subtotal, VHA Staff	21	37	37	53	-78	43.2%	
Total, Staffing	196	264	264	366	8	38.6%	

The above chart reflects count of staff versus FTE levels

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