

Exhibit 300: Capital Asset Summary

Part I: Summary Information And Justification (All Capital Assets)

Section A: Overview & Summary Information

Date Investment First Submitted: 2009-06-30
Date of Last Change to Activities: 2012-05-22
Investment Auto Submission Date: 2012-02-23
Date of Last Investment Detail Update: 2012-02-23
Date of Last Exhibit 300A Update: 2012-07-23
Date of Last Revision: 2012-07-23

Agency: 009 - Department of Health and Human Services **Bureau:** 17 - Indian Health Services

Investment Part Code: 01

Investment Category: 00 - Agency Investments

1. Name of this Investment: IHS Resource and Patient Management System (RPMS) - Maintenance & Enhancements

2. Unique Investment Identifier (UII): 009-000001362

Section B: Investment Detail

- 1. Provide a brief summary of the investment, including a brief description of the related benefit to the mission delivery and management support areas, and the primary beneficiary(ies) of the investment. Include an explanation of any dependencies between this investment and other investments.**

The Indian Health Service (IHS) Resource and Patient Management System (RPMS) is a comprehensive health information system (HIS) created to support the delivery of high quality health care to American Indians and Alaska Natives who attend several hundred Federal, Tribal, and Urban facilities nationwide. RPMS is critical to IHS operations and integrates practice management, medical, behavioral health, population health and performance reporting functions into a fully capable electronic health record (EHR) suite. RPMS evolved alongside the Veterans Administration's acclaimed VistA HIS but occupies a unique place as the only system designed specifically to support the direct care and public health mission of the IHS. RPMS aligns with the Administration's commitment to promoting the adoption of EHRs due to their ability to improve health outcomes and decrease costs. RPMS supports the Health Information Technology for Economic and Clinical Health Act (HITECH) by establishing interoperability through the electronic sharing of information with states, interoperability with commercial labs, and electronic communication among medical staff participating in patient care. RPMS supports HHS Goal 1 Objective F by providing a Meaningful Use Certified EHR and empowering the patient with personal health information. The RPMS EHR is certified as a complete EHR for ambulatory and inpatient settings according to the criteria for Stage 1 Meaningful Use, and is in use at more than 300 sites

nationwide, including all Federal facilities. IHS participated in trials of the Nationwide Health Information Network (NwHIN) and is progressing in the full implementation of the NwHIN gateway, supporting HIT Principle 3. RPMS is in the mixed lifecycle phase; much of the suite is in operations and maintenance, while modernization and enhancements are planned for FY12-13 for the ICD-10 conversion. RPMS continues to invest in maintenance, including protecting the privacy and security of information, supporting HIT Principle 5. RPMS has incorporated open source software, maintaining an effective system with low cost, supporting HIT Principle 4. As a high-quality, low-cost public domain system, RPMS has also proven attractive to private and public sector health care entities outside of IHS. RPMS is dependent upon the IHS Infrastructure, Office Automation, and Telecommunications (IOAT) Investment as it provides the physical computer and networking systems and support on which RPMS is operated.

2. How does this investment close in part or in whole any identified performance gap in support of the mission delivery and management support areas? Include an assessment of the program impact if this investment isn't fully funded.

Electronic information systems, including practice management and electronic health record systems, are an industry standard for health care. Performance gaps that would exist if RPMS were not operational and continually enhanced would include electronic submission of claims, meaningful use of electronic health record technology, performance assessment and clinical quality measurement (e.g. GPRA), and data interoperability and health information exchange.

3. Provide a list of this investment's accomplishments in the prior year (PY), including projects or useful components/project segments completed, new functionality added, or operational efficiency achieved.

The RPMS Program completed and deployed 8 major package releases, 7 medium and minor releases, including 14 major and 69 medium and minor patches, delivering operational improvements to multiple integrated applications in response to mandated Health Information Technology (HIT) initiatives and regulatory requirements. Functionality provided resulted in the successful attainment of Stage 1 Meaningful Use Certification facilitating the first CMS incentive payments made to Cherokee Nation WW Hastings Hospital, deployment of IHS' first Personal Health Record (PHR) portal, as well as improved graphical user interfaces for Patient Registration and Scheduling. Additional functionality supporting enhanced population health and epidemiology surveillance was deployed through the iCare application. The RPMS Program delivered 450 training events, reaching more than 7000 users through virtual and on-site trainings. The Certified EHR was deployed to 59 sites for a total of 311 sites system wide.

4. Provide a list of planned accomplishments for current year (CY) and budget year (BY).

FY2012 funding made available for development will be utilized for planning and analysis of multiple applications to determine gaps to be remediated in order to transition to the International Classification of Disease, 10th Revision (ICD-10), as well as beginning remediation development and testing to meet the 2013 deadline for ICD-10 implementation. Operational FY2012 and FY2013 funding will be utilized as efficiently as possible to support ongoing maintenance in RPMS resulting from enhancements made with funding received

under the American Recovery and Reinvestment Act (ARRA) of 2009. These activities are focused on maintaining functionality and to ensure ongoing certification of the EHR and supporting applications required to remain compliant with Meaningful Use Certification, compliance with new HIPAA 5010 Transaction Standards, as well as prepare for additional needs identified for future stages of Meaningful Use planned for completion in FY2013 and FY2014. RPMS plans to facilitate approximately 638 training events, expected to reach more than 10500 users through virtual and on-site sessions.

5. **Provide the date of the Charter establishing the required Integrated Program Team (IPT) for this investment. An IPT must always include, but is not limited to: a qualified fully-dedicated IT program manager, a contract specialist, an information technology specialist, a security specialist and a business process owner before OMB will approve this program investment budget. IT Program Manager, Business Process Owner and Contract Specialist must be Government Employees.**

2011-03-11

Section C: Summary of Funding (Budget Authority for Capital Assets)

1.

Table I.C.1 Summary of Funding

	PY-1 & Prior	PY 2011	CY 2012	BY 2013
Planning Costs:	\$45.3	\$3.3	\$0.8	\$0.5
DME (Excluding Planning) Costs:	\$229.6	\$29.6	\$4.3	\$9.5
DME (Including Planning) Govt. FTEs:	\$35.9	\$9.5	\$0.9	\$0.9
Sub-Total DME (Including Govt. FTE):	\$310.8	\$42.4	\$6.0	\$10.9
O & M Costs:	\$274.3	\$22.5	\$50.4	\$53.3
O & M Govt. FTEs:	\$107.8	\$28.6	\$37.3	\$37.5
Sub-Total O & M Costs (Including Govt. FTE):	\$382.1	\$51.1	\$87.7	\$90.8
Total Cost (Including Govt. FTE):	\$692.9	\$93.5	\$93.7	\$101.7
Total Govt. FTE costs:	\$143.7	\$38.1	\$38.2	\$38.4
# of FTE rep by costs:	848	283	283	283
Total change from prior year final President's Budget (\$)		\$0.0	\$0.0	
Total change from prior year final President's Budget (%)		0.00%	0.00%	

2. If the funding levels have changed from the FY 2012 President's Budget request for PY or CY, briefly explain those changes:

Section D: Acquisition/Contract Strategy (All Capital Assets)

Table I.D.1 Contracts and Acquisition Strategy

Contract Type	EVM Required	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Agency ID	Solicitation ID	Ultimate Contract Value (\$M)	Type	PBSA ?	Effective Date	Actual or Expected End Date
Awarded	4735	GST0709BG0099	GS35F0304M	4730							
Awarded	4735	GST0707BG0124	GS35F0548S	4730							
Awarded	4735	GST0708BG0041	GS09K99BHD0010	4735							
Awarded	4735	GST0710BG0089	GS35F0343T	4730							
Awarded	7527	HHSI236201100001W	GS06F0067Z	4730							
Awarded	1406	IND10PD18681	GS06F0616Z	4730							
Awarded	1406	IND10PD18623	GS35F0380V	4730							
Awarded	1406	IND10PD18708	GS00Q09BGD0061	4735							
Awarded	1406	IND10PD18719	GS06F0616Z	4730							
Awarded	1406	IND10PD18723	GS35F0554W	4730							
Awarded	1406	IND10PD18692	GS35F0343T	4730							
Awarded	1406	IND10PD18727	GS06F0635Z	4730							
Awarded	7527	HHSI236201100029W	NNG07DA16B	8000							
Awarded	7527	HHSI23624002	HHSI236201100001B	7527							
Awarded	7527	HHSI23624004	HHSI236201100001B	7527							

Table I.D.1 Contracts and Acquisition Strategy

Contract Type	EVM Required	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Agency ID	Solicitation ID	Ultimate Contract Value (\$M)	Type	PBSA ?	Effective Date	Actual or Expected End Date
Awarded	7527	HHSI23624006	HHSI236201100001B	7527							
Awarded	7527	HHSI23624003	HHSI236201100001B	7527							
Awarded	7527	HHSI23624008	HHSI236201100001B	7527							
Awarded	7527	HHSI23624009	HHSI236201100001B	7527							
Awarded	7527	HHSI23624010	HHSI236201100001B	7527							

2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why:

Item # 287203 for PIID HHSI236201100029 is a FFP purchase for license renewal; Item # 16361 for PIID GST0710BG0050 is a FFP contract for HL7 Bridge Communication services; item #16368 is FFP for implementation services and EVM was not included in the original contract.

Exhibit 300B: Performance Measurement Report

Section A: General Information

Date of Last Change to Activities: 2012-05-22

Section B: Project Execution Data

Table II.B.1 Projects

Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)
293844	ICD-10 Transition	<p>Transitioning to the International Classification of Disease, 10th Revision (ICD-10) includes the design, programming, testing and implementation of the ASC X12 5010 and NCPDP D.0 transaction sets and the ICD-10 code sets within the Resource and Patient Management System (RPMS). Design of this project will include the capability of running ICD-9 and ICD-10 in parallel. Strategic management and planning, extensive system changes, specialized education, and effective training and implementation are essential to a successful transition. The process will require the Office of Information Technology (OIT) to significantly modify the RPMS to accommodate the new codes. To this end, training of all staff that utilize ICD-10, including providers, billers, coders and others, will be required to ensure not only an efficient</p>			

Table II.B.1 Projects

Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)
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implementation of the code set conversion software, but also an understanding of the documentation requirements and coding guidelines.

Activity Summary

Roll-up of Information Provided in Lowest Level Child Activities

Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M)	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities
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293844 ICD-10 Transition

Key Deliverables

Project Name	Activity Name	Description	Planned Completion Date	Projected Completion Date	Actual Completion Date	Duration (in days)	Schedule Variance (in days)	Schedule Variance (%)
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293844 293844: Initiation, Concept Development, and Planning 2011-09-30 2011-09-30 2011-09-30 364 0 0.00%

293844 293844: Requirements Analysis and Design of Foundational Electronic Data Interchange (EDI) Standards Updates 2011-09-30 2011-09-30 2011-09-30 333 0 0.00%

293844 293844: Development of Foundational Electronic Data Interchange (EDI) Standards Updates 2011-12-15 2011-12-15 2011-12-15 75 0 0.00%

293844 293844: Requirements Analysis - Phase 3 2012-01-31 2012-01-31 120 -213 -177.50%

293844 293844: 2012-01-31 2012-01-31 120 -213 -177.50%

Key Deliverables								
Project Name	Activity Name	Description	Planned Completion Date	Projected Completion Date	Actual Completion Date	Duration (in days)	Schedule Variance (in days)	Schedule Variance (%)
	Requirements Analysis - Phase 4							
293844	293844: Requirements Analysis - Phase 1		2012-01-31	2012-01-31		155	-213	-137.42%
293844	293844: Requirements Analysis - Phase 2		2012-01-31	2012-01-31		120	-213	-177.50%
293844	293844: Design - Phase 2		2012-03-31	2012-03-31		180	-153	-85.00%
293844	293844: Design - Phase 3		2012-03-31	2012-03-31		180	-153	-85.00%
293844	293844: Design - Phase 4		2012-03-31	2012-03-31		180	-153	-85.00%
293844	293844: Design - Phase 1		2012-03-31	2012-03-31		180	-153	-85.00%
293844	293844: Development and Training Implementation Strategy - Phase 1		2012-05-31	2012-05-31		120	-92	-76.67%
293844	293844: Development and Training Implementation Strategy - Phase 2		2012-06-30	2012-06-30		121	-62	-51.24%

Section C: Operational Data

Table II.C.1 Performance Metrics

Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency
Percentage of RPMS facilities/sites that install patches and versions for utilized applications within 45 days of release	Percentage	Customer Results - Service Accessibility	Over target	0.000000	0.000000		70.000000	Semi-Annual
Average days in accounts receivable for small ambulatory clinics	Number	Process and Activities - Productivity	Under target	65.000000	60.000000		59.000000	Quarterly
Percentage of IHS federal hospitals attaining meaningful use	Percentage	Technology - Quality Assurance	Over target	0.000000	90.000000		96.000000	Semi-Annual
Percentage of classroom attendees surveyed rated an 80% satisfaction level or better with Trainer	Percentage	Customer Results - Service Quality	Over target	0.000000	0.000000		80.000000	Quarterly
Percentage of National OIT Help Desk Tickets for RPMS Closed Within 30 Days of Creation	Percentage	Process and Activities - Cycle Time and Timeliness	Over target	69.000000	0.000000		75.000000	Monthly
Percentage of patients identified by RPMS Clinical Decision Support logic as at-risk who have a comprehensive assessment for all Cardiovascular Disease-related risk factors	Percentage	Mission and Business Results - Services for Citizens	Over target	30.000000	33.800000		40.600000	Semi-Annual
Percentage of adults ages 18 and over as	Percentage	Mission and Business Results - Services for	Over target	15.000000	57.300000		56.500000	Semi-Annual

Table II.C.1 Performance Metrics

Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency
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identified by RPMS Clinical Decision Support tools who are screened for depression.

Citizens