

EPMO System Security Categorization Report

VistA Adaptive Maintenance (VAM) Assessing

February 12th, 2019

System Identification

From Risk Vision	
System Name	VistA Adaptive Maintenance (VAM) Assessing
Acronym	VAM
RV Unique Identifier	029-555555302
Related Data from VASI	
System Type	Support System
VA Business Reference Model (BRM) Capabilities	Provide Health Care Administration Provide Information Technology Services"
BRM Functions	Manage Health Care Costs and Administrative Efficiency Provide and Maintain IT Infrastructure
BRM Business Functions	Manage Data Center

For additional information on this information system (IS), see the following sections at the end of this report, as extracted from Risk Vision:

System Description - Risk Vision

Owners – Risk Vision

Information System Security Category

As described in FIPS 200, following the high watermark concept, **VistA Adaptive Maintenance (VAM) Assessing** is a **High** impact system.

Using the notation in FIPS 199 the security category of this information system is:

SC VistA Adaptive Maintenance (VAM) Assessing = (confidentiality, HIGH), (integrity, HIGH), (availability, HIGH)

The system security category is based on the potential impact assessments for loss of each security objective for each identified information type (SP 800-60 Volume 2):

SC Health Care Delivery Services = **(confidentiality, HIGH), (integrity, HIGH), (availability, HIGH)**

SC Health Care Research and Practitioner Education = **(confidentiality, HIGH), (integrity, HIGH), (availability, HIGH)**

Categorization Detail

On 9/26/2018, 1/25/2019, 1/28/2019 selected system stakeholders and EPMO IA personnel listed in the Categorization Review Teams table met to categorize the system using procedures based on VA



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Handbook 6500, FIPS 199, and NIST SP 800-60. A member of the EPMO IA team led the discussion, assisting the system stakeholders in identifying information types in accordance with SP 800-60, then defining specific potential results from losing each of the security objectives of confidentiality, integrity, and availability (C-I-A), as defined in FIPS 199. The team used information type definitions and C-I-A descriptions from SP 800-60 Volume 2 and considered whether any Special Factors existed for each information type.

As each results statement was confirmed, the team applied the potential impact level definitions from FIPS 199 and determined the information type potential impact categories for the security objectives.

To save time, if any security objective impact was set to HIGH for one information type, the team did not consider that objective for subsequent information types. The team used this approach because that one HIGH value drives the High Water Mark (FIPS 200) impact category for that objective. As long as the team identified only LOW or MODERATE impacts, they continued to consider all three security objectives for each information type. Using this process ensures that each security objective receives the correct High Water Mark potential impact level, but may not provide analysis for all three objectives for every identified information type.

Potential Impact Analysis

The system stakeholder identified the following information types as stored or processed in the information system, and described the operational results detailed below for the loss of each security objective. The team then mapped those results to the potential impact level shown.

800-60 Para	Information Type	Security Objective	Result of Loss	Impact
D.14.4	Health Care Delivery Services	Confidentiality	This system has PHI and PII; loss of confidentiality would be a violation of the Privacy Act and HIPAA. Moreover, there is large-scale sensitive PHI in the data, which could cause loss of reputation to the VA if the confidentiality were to be compromised. In addition, there is the probability that any health data such as mental health data, HIV, cancer, psychiatric history, substance abuse, etc., could be released. These unauthorized disclosure of information would be embarrassing for the patients and could negatively affect the patients' ability to find employment. This could cause severe hardship to veteran and may lead to possible suicide.	HIGH
		Integrity	Loss of integrity would cause a severe degradation in or loss of mission capability to an extent and duration that the organization is not able to perform one or more of its primary functions.	HIGH

800-60 Para	Information Type	Security Objective	Result of Loss	Impact
			There could be loss of life due to any possible medical errors. For example, an allergy could be listed incorrectly or not be listed, which would result in the patient losing their life.	
		Availability	Loss of availability would cause severe or catastrophic adverse effect to the agency's operations and the Veteran. Safe health care delivery would be disrupted greatly. This could cause loss of life as the critical health information would not be available to save patients' lives. The disaster recovery plan would be a read-only system to allow read-only access, but there would be no capability to do order entry or any transactions. For example, one would not be able to order medications and lab tests for medications.	HIGH
D.14.5	Health Care Research and Practitioner Education	Confidentiality	This system has PHI and PII; loss of confidentiality would be a violation of the Privacy Act and HIPAA. Moreover, there is large-scale sensitive PHI in the data, which could cause loss of reputation to the VA if the confidentiality were to be compromised. In addition, there is the probability that any health data such as mental health data, HIV, cancer, psychiatric history, substance abuse, etc., could be released. These unauthorized disclosure of information would be embarrassing for the patients and could negatively affect the patients' ability to find employment. This could cause severe hardship to veteran and may lead to possible suicide.	HIGH
		Integrity	Loss of integrity would cause a severe degradation in or loss of mission capability to an extent and duration that the organization is not able to perform one or more of its primary functions. There could be loss of life due to any possible medical errors. For example, an	HIGH

800-60 Para	Information Type	Security Objective	Result of Loss	Impact
			allergy could be listed incorrectly or not be listed, which would result in the patient losing their life.	
		Availability	Loss of availability would cause severe or catastrophic adverse effect to the agency's operations and the Veteran. Safe health care delivery would be disrupted greatly. This could cause loss of life as the critical health information would not be available to save patients' lives. The disaster recovery plan would be a read-only system to allow read-only access, but there would be no capability to do order entry or any transactions. For example, one would not be able to order medications and lab tests for medications.	HIGH

Categorization Review Teams

System Stakeholders/Participants

Name	e-Mail	Role
Thomas Spinelli	thomas.spinelli@va.gov	System Owner
Charles A. Adejumo	charles.adejumo@va.gov	Consultant
Bobbi Begay	bobbi.begay@va.gov	ISO
Rafael Richards	rafael.richards@va.gov	System Owner

EPMO IA Team

Name	e-Mail	Role
Bayo Iferika	Bayo.iferika@va.gov	Team Lead
Abbas Ali	Abbas.Ali3@va.gov	IT Specialist
Bailey G. Zhang	Bailey.Zhang@va.gov	Statistical Analyst
Edmund Addei	Edmund.Addei@va.gov	IA Analyst

System Description – Risk Vision

The purpose of the VistA Adaptive Maintenance (VAM) project is to establish a secure, sustainable, high-performing, cloud-based service to implement provider workflow logic back-end processing and storage. The VAM service will replicate the Remote Procedure Call (RPC) functionality currently provided via VistA in a modern, well-documented platform (i.e., Node.js and NoSQL database). VAM will enable the incremental transition of clinical workflow logic out of VistA into VAM services, while maintaining full compatibility with current VistA clients such as CPRS. VAM will be hosted in production within the VA's Enterprise Cloud (VAEC) using the Amazon Web Services (AWS) service provider.

Owners – Risk Vision

Name	Role
Badhan S. Mandal	System Steward
Bill James	Authorizing Official
Bobbi Begay	Information Security Officer (ISO)
Daniel Davis	Project Support
Rafael Richards	System Owner
Thomas Spinelli	System Owner
EPMO ATO Review Team (3 Members)	CIO
EPMO Team (35 Members)	System Steward
John Allen	System Steward
Joseph A Fourcade	System Steward
OCS - CA (9 Members)	Certification Authority (CA)
OCS Review Team (5 Members)	OCS
OIS ADAS Team (1 Member)	ADAS
Robert Ballon	System Steward
Roger Sigley	Project Support
William P. McDonough	System Steward

EPMO Security Categorization Report:

APPROVAL

System Owner

Name:

Date:

Signature:

Information Security Officer

Name:

Date:

Signature:

Disposition

Once all required approvals are recorded on this report, post a copy as a permanent artifact in the system record in the VA Governance, Risk, & Compliance (GRC) system.

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References

Document	Title
VA Handbook 6500	Risk Management Framework for VA Information Systems - Tier 3: VA Information Security Program
FIPS 199	Standards for Security Categorization of Federal Information and Information Systems
FIPS 200	Minimum Security Requirements for Federal Information and Information Systems
NIST SP 800-60, Vol I, Revision 1	Guide for Mapping Types of Information and Information Systems to Security Categories
NIST SP 800-60, Vol II, Revision 1	Appendices: Guide for Mapping Types of Information and Information Systems to Security Categories

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