

Part I. Project Identification and Determination of PIA Requirement

1. PROJECT IDENTIFICATION:

1.1) Project Basic Information:

1.1.a) Project or Application Name:

My HealtheVet-2009

1.1.b) OMB Unique Project Identifier:

029-00-01-11-01-1242-00

1.1.c) Project Description

Project description is pre-populated from Exhibit 300 Part I.A.8. You will not be able to edit the description on this form.

MHV is a nationwide initiative intended to improve the overall health of veterans. It provides an eHealth portal, a secure environment where veterans can view and manage their Personal Health Record (PHR) online, as well as access health information, health assessments, and electronic services online. Online health resources will enable and encourage patient/provider collaboration, as clinicians will be able to communicate with veterans much more easily. The new online environment will complement existing VHA clinical business practices, and also transform the way healthcare is delivered and managed. Veterans can request copies of key portions of their VA electronic health record and store it in a secure, personalized eVault along with their PHRs, they will be able to share the ability to view and manage all or part of the information in their accounts with healthcare providers, both inside and outside VHA, as well as with family or others of their choice (delegates). This has the potential to dramatically improve the quality and outcome of care available to our nation's veterans through increased access, information, education, co-management and advocacy. This is in alignment with VA Strategic Objective 3.1 (Provide high-quality, reliable, accessible, timely, and efficient healthcare that maximizes the health and functional status of enrolled veterans with special focus on veterans with service-connected conditions, those unable to defray cost, and those statutorily eligible for care.). This is also in alignment with the President's agenda of implementing a personal health record.

Through the MHV Web Portal, veterans and their delegates will be able to access their PHR via the internet. They will also have access to healthcare information, training, and educational materials.

1.1.d) Additional Project Information (Optional)

The project description provided above should be a concise, stand-alone description of the project. Use this section to provide any important, supporting details.

1.2) Contact Information:

1.2.a) Person completing this document:	
Title:	Acting MHV ISO - Bernard M Brauner
Organization:	Department of Veterans Affairs - OIFO
Telephone Number:	301-734-0369
Email Address:	Bernard.Brauner@va.gov
1.2.b) Project Manager:	
Title:	Program Manager - Aiden Barr
Organization:	Department of Veterans Affairs - OIFO
Telephone Number:	301-734-0371

Email Address:	aiden.barr@va.gov
1.2.c) Staff Contact Person:	
Title:	Management Analyst - Julius L. Allen
Organization:	Department of Veterans Affairs - OIFO
Telephone Number:	301-734-0511
Email Address:	julius.allen@va.gov

ADDITIONAL INFORMATION: If appropriate, provide explanation for limited answers, such as the development stage of project.

2. DETERMINATION OF PIA REQUIREMENTS:

A privacy impact assessment (PIA) is required for all VA projects with IT systems that collect, maintain, and/or disseminate personally identifiable information (PII) of the public, not including information of Federal employees and others performing work for VA (such as contractors, interns, volunteers, etc.), unless it is a PIV project. All PIV projects collecting any PII must complete a PIA. PII is any representation of information that permits the identity of an individual to be reasonably inferred by either direct or indirect means. Direct references include: name, address, social security number, telephone number, email address, financial information, or other identifying number or code. Indirect references are any information by which an agency intends to identify specific individuals in conjunction with other data elements. Examples of indirect references include a combination of gender, race, birth date, geographic indicator and other descriptors.

2.a) Will the project collect and/or maintain personally identifiable information of the public in IT systems?

Yes

2.b) Is this a PIV project collecting PII, including from Federal employees, contractors, and others performing work for VA?

No

If "YES" to either question then a PIA is required for this project. Complete the remaining questions on this form. If "NO" to both questions then no PIA is required for this project. Skip to section 14 and affirm.

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

Part II. Privacy Impact Assessment

3. PROJECT DESCRIPTION:

Enter the information requested to describe the project.

3.a) Provide a concise description of why personal information is maintained for this project, such as determining eligibility for benefits or providing patient care.

Personal information is maintained in MHV to:

- identify and verify a user in the system
- identify the permissions of a user
- link a user to a personal health record
- allow a user to request a prescription refill
- allow a user to message with a provider or healthcare team
- link a user to his/her self entered information
- identify and verify a delegate in the system
- identify the permissions of a delegate

3.b) What specific legal authorities authorize this project, and the associated collection, use, and/or retention of personal information?

Title 38, United States Code, Section 501.

3.c) Identify, by selecting the appropriate range from the list below, the approximate number of individuals that (will) have their personal information stored in project systems.

100,000 - 999,999
3.d) Identify what stage the project/system is in: (1) Design/Planning, (2) Development/Implementation, (3) Operation/Maintenance, (4) Disposal, or (5) Mixed Stages.
(2) Development/Implementation
3.e) Identify either the approximate date (MM/YYYY) the project/system will be operational (if in the design or development stage), or the approximate number of years that the project/system has been in operation.
The system is operational today, however it is in full scale Development/Implementation phase for new functionalities that will be added. Full production is planned for completion in 2009.
ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

4. SYSTEM OF RECORDS:
<i>The Privacy Act of 1974 (Section 552a of Title 5 of the United States Code) and VA policy provide privacy protections for employee or customer information that VA or its suppliers maintain in a System of Records (SOR). A SOR is a file or application from which personal information is retrieved by an identifier (e.g. name, unique number or symbol). Data maintained in a SOR must be managed in accordance with the requirements of the Privacy Act and the specific provisions of the applicable SOR Notice. Each SOR Notice is to be published in the Federal Register. See VA Handbook 6300.5 "Procedures for Establishing & Managing Privacy Act Systems Of Records", for additional information regarding Systems of Records.</i>
4.a) Will the project or application retrieve personal information on the basis of name, unique number, symbol, or other identifier assigned to the individual?
If "No" then skip to section 5, 'Data Collection'.
Yes
4.b) Are the project and/or system data maintained under one or more approved System(s) of Records?
IF "No" then SKIP to question 4.c.
Yes
4.b.1) For each applicable System of Records, list:
(1) The System of Records identifier (number),
My HealtheVet Administrative Records-VA (130VA19)
(2) The name of the System of Records, and
My HealtheVet Administrative Records-VA
(3) Provide the location where the specific applicable System of Records Notice(s) may be accessed (include the URL).
http://a257.g.akamaitech.net/7/257/2422/06jun20041800/edocket.access.gpo.gov/2004/pdf/04-22437.pdf
<i>IMPORTANT: For each applicable System of Records Notice that is not accessible via a URL: (1) Provide a concise explanation of why the System of Records Notice is not accessible via a URL in the "Additional Information" field at the end of this section, and (2) Send a copy of the System of Records Notice(s) to the Privacy Service.</i>
4.b.2) Have you read, and will the application comply with, all data management practices in the System of Records Notice(s)?
Yes
4.b.3) Was the System(s) of Records created specifically for this project, or created for another project or system?
Created specifically for this project
If created for another project or system, briefly identify the other project or system.
4.b.4) Does the System of Records Notice require modification?
If "No" then skip to section 5, 'Data Collection'.
Modification of the System of Records is NOT Required.
4.b.5) Describe the required modifications.
4.c) If the project and/or system data are not maintained under one or more approved System(s) of Records, select one of the following and provide a concise explanation.

Explanation:

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

PIA SECTION 5

Project Name

My HealtheVet-2009

5. DATA COLLECTION:

5.1 Data Types and Data Uses

Identify the types of personal information collected and the intended use(s) of that data:

a) Select all applicable data types below. If the provided data types do not adequately describe a specific data collection, select the "Other Personal Information" field and provide a description of the information.

b) For each selected data type, concisely describe how that data will be used.

Important Note: Please be specific. If different data types or data groups will be used for different purposes or multiple purposes, specify. For example: "Name and address information will be used to communicate with individuals about their benefits, while Name, Service, and Dependent's information will be used to determine which benefits individuals will be eligible to receive. Email address will be used to inform individuals about new services as they become available."

Yes	Veteran's or Primary Subject's Personal Contact Information (name, address, telephone, etc.)
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Specifically identify the personal information collected, and describe the intended use of the information.

User ID: used to identify a user with his/her permissions in the system; Legal First Name: used to identify a user; Legal Last Name: used to identify a user; Address 1: used to identify the street address of the user; Address 2: used to identify additional address information for the user; City: used to identify the city of a user; County: used to identify the county of a user; Province: used to identify the province of a user living in Canada; State: used to identify the state of a user living in the United States of America; Zip Code: used to identify the zip code of the user; Telephone Number: used to identify the users telephone number; Email address (optional): used to send information that the user has requested to be sent through this medium (for example forgotten User ID); MHV ID: used to identify a user within the MHV system and during help desk communication; ICN (Individual Control Number): used to link a user to his/her VA health records in VistA.

Yes	Other Personal Information of the Veteran or Primary Subject
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Specifically identify the personal information collected, and describe the intended use of the information.

Date of birth: used to identify the birth date of the user Gender: used to identify the gender of the user Social Security Number: used to identify the social security number of the user About you: used to identify the user (for example: Veteran, Veteran Advocate/Family Member, Friend, VA Employee, etc.) When he/she forgets their password they must provide date of birth, first name, last name, gender, and provide answers to two password hint questions to validate the user against the MHV system. Date of birth Social Security Number, first/last name are also used to perform data validation against the Master Patient Index (MPI) to allow users to access their on-line prescription refills and Personal Health Information retrieved from VistA.

No	Dependent Information
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Specifically identify the personal information collected, and describe the intended use of the information.

Yes	Service Information
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Specifically identify the personal information collected, and describe the intended use of the information.

The My HealthVet portal includes self entered information (SEI) portlet which enables users to record and maintain individual health information. The SEI Treatment Location will allow users to document names and addresses of various facilities the patient frequented for healthcare. Used for Self Entered Information on a voluntary basis. In case the user is VA Patient and selected to use the Online Rx Refill component, the portal captures the information of the treatment facilities as provided by the Master Patient Index (MPI).

Yes	Medical Information
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Specifically identify the personal information collected, and describe the intended use of the information.

The system does not collect Medical Information rather it acts as a mechanism by which the user can obtain their health information. The following Medical Information is available to the user through the system: Refill Prescription: allow a user, who is also a VA patient, to refill a VA prescription online Health Assessments: allow a user to document health assessments online Personal Health Record: allow a user to view copies of selected health records online (currently in progress) Self Entered Information (SEI): allow a user to store any information they choose to document or comment on (this is done on a voluntary basis)

No	Criminal Record Information
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Specifically identify the personal information collected, and describe the intended use of the information.

No	Guardian Information
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Specifically identify the personal information collected, and describe the intended use of the information.

No	Education Information
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Specifically identify the personal information collected, and describe the intended use of the information.

No	Rehabilitation Information
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Specifically identify the personal information collected, and describe the intended use of the information.

No	Other Personal Information (specify):
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The "Other Personal Information" field is intended to allow identification of collected personal information that does not fit the provided categories. If personal information is collected that does not fit one of the provided categories, specifically identify this information and describe the intended use of the information.

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

5.2 Data Sources

Identify the source(s) of the collected information.

a) Select all applicable data source categories provided below.

b) For each category selected:

i) Specifically identify the source(s) - identify each specific organization, agency or other entity that is a source of personal information. ii) Provide a concise description of why information is collected from that source(s). iii) Provide any required additional clarifying information.

Your responses should clearly identify each source of personal information, and explain why information is obtained from each identified source. (Important Note: This section addresses sources of personal information; Section 6.1, "User Access and Data Sharing" addresses sharing of collected personal information.)

Note: PIV projects should use the "Other Source(s)" data source.

Yes	Veteran Source
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Provide a concise description of why information is collected from Veterans. Provide any required additional, clarifying information.

The Veteran Sources within MHV are:

MHV account owner

Delegate

No	Public Source(s)
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i) Specifically identify the Public Source(s) - identify the specific organization(s) or other entity(ies) that supply personal information. ii) Provide a concise description of why information is collected from each identified source. iii) Provide any required additional, clarifying information.

Yes	VA Files and Databases
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i) Specifically identify each VA File and/or Database that is a source of personal information. ii) Provide a concise description of why information is collected from each identified source. iii) Provide any required additional, clarifying information.

MHV allows an in-person authenticated user to view EHR data which is pulled from the VistA database.

No	Other Federal Agency Source(s)
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i) Specifically identify each Federal Agency that is a source of personal information. ii) Provide a concise description of why information is collected from each identified source. iii) Provide any required additional, clarifying information.

No	State Agency Source(s)
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i) Specifically identify each State Agency that is a source of personal information. ii) Provide a concise description of why information is collected from each identified source. iii) Provide any required additional, clarifying information.

No	Local Agency Source(s)
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i) Specifically identify each Local Agency (Government agency other than a Federal or State agency) that is a source of personal information. ii) Provide a concise description of why information is collected from each identified source. iii) Provide any required additional, clarifying information.

No	Other Source(s)
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i) If the provided Data Source categories do not adequately describe a source of personal information, specifically identify and describe each additional source of personal information. ii) For each identified data source, provide a concise description of why information is collected from that source. iii) Provide any required additional, clarifying information.

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

5.3 Collection Methods

Identify and describe how personal information is collected:

a) Select all applicable collection methods below. If the provided collection methods do not adequately describe a specific data collection, select the "Other Collection Method" field and provide a description of the collection method. b) For each collection method selected, briefly describe the collection method, and provide additional information as indicated.

Yes	Web Forms:	Information collected on Web Forms and sent electronically over the Internet to project systems.
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Identify the URL(s) of each Web site(s) from which information will be submitted, and the URL(s) of the associated privacy statement. (Note: This question only applies to Web forms that are submitted online. Forms that are accessed online, printed and then mailed or faxed are considered "Paper Forms.")

The URL for the My HealthVet website is: <http://www.myhealth.va.gov/>
 The web form available through MHV is:
 Registration Form

Yes	Paper Forms:	Information collected on Paper Forms and submitted personally, submitted via Postal Mail and/or submitted via Fax Machine.
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Identify and/or describe the paper forms by which data is collected. If applicable, identify standard VA forms by form number.

Currently there is one paper form relevant to the MHV system: Individuals' Request For A Copy Of Their Own Health Information (VA FORM 10-5345a)

Yes	Electronic File Transfer:	Information stored on one computer/system (not entered via a Web Form) and transferred electronically to project IT systems.
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Describe the Electronic File Transfers used to collect information into project systems. (Note: This section addresses only data collection – how information stored in project systems is acquired. Sharing of information stored in project systems and data backups are addressed in subsequent sections.)

Information security officers and system data stewards review and authorize electronic data access requests. VA regulates data access with security software that authenticates My HealthVet administrative users and requires individually unique codes and passwords. VA provides information security training to all staff and instructs staff on the responsibility each person has for safeguarding data confidentiality. VA regularly updates security standards and procedures that are applied to systems and individuals supporting this program. Data transmissions between operational systems and My HealthVet Administrative Records maintained by this system of records are protected by telecommunications software and hardware as prescribed by VA standards and practices. This includes firewalls, encryption, and other security measures necessary to safeguard data as it travels across the VA Wide Area Network. Copies of back-up computer files are maintained at secure off-site locations.

Yes	Computer Transfer Device:	Information that is entered and/or stored on one computer/ system and then transferred to project IT systems via an object
		or device that is used to store data, such as a CD-ROM, floppy disk or tape.

Describe the type of computer transfer device, and the process used to collect information.

Most of the patient information stored in the eVAult(a personal repository where health information is stored, and access to which is controlled entirely by the veteran) will be extracted from the Master Patient Index (MPI) and VistA databases through an electronic data extraction mechanism.

No	Telephone Contact:	Information is collected via telephone.
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Describe the process through which information is collected via telephone contacts.

No	Other Collection Method:	Information is collected through a method other than those listed above.
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If the provided collection method categories do not adequately describe a specific data collection, select the "Other Collection Method" field and specifically identify and describe the process used to collect information.

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

5.4 Notice

The Privacy Act of 1974 and VA policy requires that certain disclosures be made to data subjects when information in identifiable form is collected from them. The following questions are directed at notice to the individual of the scope of information collected, the right to consent to uses of said information, and the right to decline to provide information.

5.4.a) Is personally identifiable information collected directly from individual members of the public and maintained in the project's IT systems?

Yes

Note: If you have selected NO above, then SKIP to Section 5.5, 'Consent'.

5.4.b) Is the data collection mandatory or voluntary?

Voluntary

5.4.c) How are the individuals involved in the information collection notified of the Privacy Policy and whether provision of the information is mandatory or voluntary?

Information pertaining to data collection is maintained in the Terms and Conditions of the site on each webpage.

5.4.d) Is the data collection new or ongoing?

Ongoing

5.4.e.1) If personally identifiable information is collected online, is a privacy notice provided that includes the following elements? (Select all applicable boxes.)

Yes	Not applicable
Yes	Privacy notice is provided on each page of the application.
No	A link to the VA Website Privacy Policy is provided.
Yes	Proximity and Timing: the notice is provided at the time and point of data collection.
Yes	Purpose: notice describes the principal purpose(s) for which the information will be used.

Yes	Authority: notice specifies the legal authority that allows the information to be collected.
Yes	Conditions: notice specifies if providing information is voluntary, and effects, if any, of not providing it.
Yes	Disclosures: notice specifies routine use(s) that may be made of the information.

5.4.e.2) If necessary, provide an explanation on privacy notices for your project:

My HealthVet has developed a privacy policy which has been approved by General Council to display on the MHV site. https://www.myhealth.va.gov/mhvPortal/anonymous.portal?_nfpb=true&_nfto=false&_pageLabel=privacy

5.4.f) For each type of collection method used (identified in Section 5.3, "Collection Method"), explain:

a) What the subjects will be told about the information collection. b) How this message will be conveyed to them (e.g., written notice, electronic notice if a web-based collection, etc.). c) How a privacy notice is provided.

Note: if PII is transferred from other projects, explain any agreements or understandings regarding notification of subjects.

Yes	Web Forms:
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Explain:

a) What the subjects will be told about the information collection. b) How this message will be conveyed to them (e.g., written notice, electronic notice if a web-based collection, etc.). c) How a privacy notice is provided.

Information pertaining to data collection is maintained in the Terms and Conditions of the site on each webpage and may be printed.

Yes	Paper Forms:
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Explain:

a) What the subjects will be told about the information collection. b) How this message will be conveyed to them (e.g., written notice, electronic notice if a web-based collection, etc.). c) How a privacy notice is provided.

Information pertaining to data collection is maintained in the Terms and Conditions of the site on each webpage and may be printed.

Yes	Electronic File Transfer:
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For electronic transfers of information, where this system is receiving the information from another system and is not collected from the primary information source, please explain what agreements are in place that govern the responsibilities of the system collecting information from the primary information source to notify subjects regarding:

a) What they will be told about the information collection? b) How the message will be conveyed (e.g. written notice, electronic notice if web-based collection, etc.)? c) How a privacy notice is provided?

Information pertaining to data collection is maintained in the Terms and Conditions of the site on each webpage and may be printed.

Yes	Computer Transfer Device:
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For electronic transfers of information, where this system is receiving the information from another system and is not collected from the primary information source, please explain what agreements are in place that govern the responsibilities of the system collecting

information from the primary information source to notify subjects regarding:

a) What they will be told about the information collection? b) How the message will be conveyed (e.g. written notice, electronic notice if web-based collection, etc.)? c) How a privacy notice is provided?

Terms and conditions for the use of MyHealthVet are found on the website. In order to use the various features of the system, account holders are asked to review the terms and conditions, and are required to acknowledge their agreement by clicking that they agree. Once an account holder has indicated that he or she agrees to the terms and conditions, a file is stored on the system that will be used to determine future levels of access that the user grants.

No	Telephone:
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Explain:

a) What the subjects will be told about the information collection. b) How this message will be conveyed to them (e.g., written notice, electronic notice if a web-based collection, etc.). c) How a privacy notice is provided.

No	Other Method:
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Explain:

a) What the subjects will be told about the information collection. b) How this message will be conveyed to them (e.g., written notice, electronic notice if a web-based collection, etc.). c) How a privacy notice is provided.

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

5.5 Consent For Secondary Use of PII:

The Privacy Act and VA policy require that personally identifiable information only be used for the purpose(s) for which it was collected, unless consent (opt-in) is granted. Individuals must be provided an opportunity to provide consent for any secondary use of information, such as use of collected information for marketing.

5.5.a) Will personally identifiable information be used for any secondary purpose?

Note: If you have selected No above, then SKIP to question 5.6, "Data Quality."

No

5.5.b) Describe and justify any secondary uses of personal information.

5.5.c) For each collection method identified in question 5.3, "Collection Method," describe:

1) The opportunities individuals have to decline to provide information, for instances where providing information is voluntary. 2) The opportunities individuals have to grant consent for particular uses of the information. 3) How individuals may grant consent.

Some examples of consent methods are: (1) Approved OMB consent forms and (2) VA Consent Form (VA Form 1010EZ). Provide justification if no method of consent is provided.

	Web Forms:
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Describe:

1) The opportunities individuals have to decline to provide information, for instances where providing information is voluntary. 2) The opportunities individuals have to grant consent for particular uses of the information. 3) How individuals may grant consent.

	Paper Forms:
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Describe:

1) The opportunities individuals have to decline to provide information, for instances where providing information is voluntary. 2) The opportunities individuals have to grant consent for particular uses of the information. 3) How individuals may grant consent.

	Electronic File Transfer:
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For electronic transfers of information, where this system is receiving the information from another system and is not collected from the primary information source, please explain what agreements are in place that govern the responsibilities of the system collecting information from the primary information source to provide the following:

a) The opportunities individuals have to decline to provide information, for instances where providing information is voluntary. b) The opportunities individuals have to grant consent for particular uses of the information. c) How individuals may grant consent.

	Computer Transfer Device:
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For electronic transfers of information, where this system is receiving the information from another system and is not collected from the primary information source, please explain what agreements are in place that govern the responsibilities of the system collecting information from the primary information source to provide the following:

a) The opportunities individuals have to decline to provide information, for instances where providing information is voluntary. b) The opportunities individuals have to grant consent for particular uses of the information. c) How individuals may grant consent.

	Telephone Contact Media:
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Describe:

1) The opportunities individuals have to decline to provide information, for instances where providing information is voluntary. 2) The opportunities individuals have to grant consent for particular uses of the information. 3) How individuals may grant consent.

	Other Media
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Describe:

1) The opportunities individuals have to decline to provide information, for instances where providing information is voluntary. 2) The opportunities individuals have to grant consent for particular uses of the information. 3) How individuals may grant consent.

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

5.6 Data Quality

5.6.a) Explain how collected data are limited to required elements:

Data collected by MHV is only gathered via preprogrammed data element specific messages. The message makeup is specified in jointly approved data requirement documents. The coding and data quality is verified by multiple layers of testing via government acceptance testing. Only after the data has been verified at each level of testing is the final product approved for production implementation.

5.6.b) How is data checked for completeness?

MHV alerts a user when required fields are incomplete.

5.6.c) What steps or procedures are taken to ensure the data are current and not out of date?

Each time the MHV user selects to view a subset of their Personal Health Record by clicking on the appropriate link in the Left Navigation Panel or any PHR link on the Site Map (e.g., Chemistry/Labs, Copay) to view a category of PHR information (a.k.a., an extract), the following process will be initiated:

- MHV will receive the final prepared extracts from the VAMC facilities, once a day
- The extracts will be read and MHV database tables will be updated. Data from those tables will be displayed to the user via the new View screens.
- Business and error messages will be logged in MHV and displayed to the user via the new View screens.

5.6.d) How is new data verified for relevance, authenticity and accuracy?

Existing validations will support the MHV-to-VistA system interface for the PHR project. A set of test messages using test data is first tested by the developers, then the government. Then at the implementation field testing real patient data is extracted from the VistA databases at selected treatment facilities and VistA for accuracy at the receiving database . Only when there is a 100% accuracy is the system certified for production.

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

PIA SECTIONS 6 - 13

Project Name

My HealtheVet-2009

6. Use and Disclosure

6.1 User Access and Data Sharing

Identify the individuals and organizations that have access to system data.

--> Individuals - Access granted to individuals should be limited to the data needed to perform their assigned duties. Individuals with access to personal information stored in project system must be identified, and documented assurance must be provided that appropriate policies and procedures are in place to prevent as well as detect unauthorized access and browsing.

--> Other Agencies – Any Federal, State or local agencies that have authorized access to collected personal information must be identified, and documented assurance must be provided that appropriate policies and procedures are in place to protect personal information.

--> Other Systems – Information systems of other programs or projects that interface with the information system(s) of this project must be identified and the transferred data must be defined. Also, the controls that are in place to ensure that only the defined data are transmitted must be defined.

6.1.a) Identify all individuals and organizations that will have access to collected information. Select all applicable items below.

Yes	System Users
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Yes	System Owner, Project Manager
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Yes	System Administrator
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Yes	Contractor
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If contractors to VA have access to the system, describe their role and the extent of access that is granted to them. Also, identify the contract(s) that they operate under.

Contractors are held to the same standard as the VA employees - they have to take privacy and security training. All My HealthVet contractors are required to complete privacy and security training and present proof of successful completion prior to being granted access to VA systems. Pamela Grissette Bowman is the contact person for this effort and her contact information is (301) 734-0507 Pamela.Grissette-Bowman@va.gov.

No	Internal Sharing: Veteran Organization
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If information is shared internally, with other VA organizations identify the organization(s). For each organization, identify the information that is shared and for what purpose.

No	Other Veteran Organization
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If information is shared with a Veteran organization other than VA, identify the organization(s). For each organization, identify the information that is shared and for what purpose.

No	Other Federal Government Agency
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If information is shared with another Federal government agency(ies), identify the agency(ies). For each organization, identify the information that is shared and for what purpose.

No	State Government Agency
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If information is shared with a State government agency(ies), identify the agency(ies). For each organization, identify the information that is shared and for what purpose.

No	Local Government Agency
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If information is shared with a local government agency(ies), identify the agency(ies). For each organization, identify the information that is shared and for what purpose.

No	Other Project/ System
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If information is shared with other projects or systems:

1) Identify the other projects and/or systems, and briefly describe the data sharing. 2) For each project and/or system with which information will be shared, identify the information that will be shared with that project or system. 3) For each project and/or system with which information will be shared, describe why information is shared. 4) For each project and/or system with which information will be shared, describe who will be responsible for protecting the privacy rights of the individuals whose data will be shared across this interface.

No	Other User(s)
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If information is shared with persons or organization(s) that are not described by the categories provided, use this field to identify and describe what other persons or organization(s) have access to personal information stored on project systems. Also, briefly describe the data sharing.

6.1.a.1) Describe here who has access to personal information maintained in project's IT systems:

System Owner, Project Manager System Administrator The My HealtheVet account holder or user has access to the portal but not to the IT systems on the server. Account holders actually have access to the system.

6.1.b) How is access to the data determined?

Access to data is determined based on role based access (e.g., staff). A user will only have permissions depending on if he/she registered or also "in-person-authenticated", for his/her account. A user will also have specified permissions for any account which he/she has been given as a delegate.

6.1.c) Are criteria, procedures, controls, and responsibilities regarding access documented? If so, identify the documents.

Yes, the criteria, procedures, controls, and responsibilities are documented in the MHV Security Plan and audit requirements and functional design document.

6.1.d) Will users have access to all data on the project systems or will user access be restricted? Explain.

A user will have different access to data depending on if they are simply registered or registered and "in-person-authenticated". All registered users have access to all data in their personal eVault such as self entered information, and health education. An "in-person-authenticated" user has access to PHR, prescription refill, messaging, health education information, and self entered information. A system administrator shall be able to disable and re-enable the viewing of PHR information across the enterprise in MHV. An administrator may disable and re-enable any or all categories of information. This functionality gives control to the VHA enterprise in the event some business circumstance warrants that PHR information not be viewable by patients.

6.1.e) What controls are in place to prevent the misuse (e.g. unauthorized browsing) of data by those having access? (Please list processes and training materials that specifically relate to unauthorized browsing)

For security purposes and to ensure that this service remains available to all users, My HealtheVet employs software programs to monitor network traffic to identify unauthorized attempts to upload or change information, or otherwise cause damage. Except for authorized law enforcement investigations, no attempts are made to identify individual users or their usage habits. Unauthorized attempts to upload information or change information on this service are strictly prohibited.

- MHV IPA Authenticators are provided training on how to use the IPA Portlet for "Hold for Review" function.
- MHV IPA Authenticators are provided training on how to deal with users who cannot access his/her PHR electronically for various reasons (Hold for Review/Denied Access).
- Standard forms are developed and available through MHV for ROI consent and MHV participation.
- Standard Operating Procedures are in place to deal with Electronic Release of Information (ROI) and Hold for Review processes.

6.1.f) Is personal information shared (is access provided to anyone other than the system users, system owner, Project Manager, System Administrator)? (Yes/No)

No

Note: If you have selected No above, then SKIP to question 6.2, "Access to Records and Requests for Corrections".

6.1.g) Identify the measures taken to protect the privacy rights of the individuals whose data will be shared.

6.1.h) Identify who is responsible, once personal information leaves your project's IT system(s), for ensuring that the information is protected.

6.1.i) Describe how personal information that is shared is transmitted or disclosed.

6.1.j) Is a Memorandum of Understanding (MOU), contract, or any other agreement in place with all external organizations with whom information is shared, and does the agreement reflect the scope of the information currently shared? If an MOU is not in place, is the sharing covered by a routine use in the System of Records Notice? If not, explain the steps being taken to address this omission.

6.1.k) How is the shared information secured by the recipient?

6.1.l) What type of training is required for users from agencies outside VA prior to receiving access to the information?

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

6.2 Access to Records and Requests for Corrections

The Privacy Act and VA policy provide certain rights and mechanisms by which individuals may request access to and amendment of information relating to them that is retained in a System of Records.

6.2.a) How can individuals view instructions for accessing or amending data related to them that is maintained by VA? (Select all applicable options below.)

No	The application will provide a link that leads to their information.
Yes	The application will provide, via link or where data is collected, written instructions on how to access/amend their information.
No	The application will provide a phone number of a VA representative who will provide instructions.
Yes	The application will use other method (explain below).
No	The application is exempt from needing to provide access.

6.2.b) What are the procedures that allow individuals to gain access to their own information?

Users must go to the MHV homepage and login, at which time they are authenticated.

6.2.c) What are the procedures for correcting erroneous information?

If data is incorrect within MHV application through self-entry the user is informed through error messages on how to repair this issue; if data is incorrect within the MPI/VistA system they are referred to the facility that they receive care

6.2.d) If no redress is provided, are alternatives available?

Redress is provided

6.2.e) Provide here any additional explanation; if exempt, explain why the application is exempt from providing access and amendment.

The user is only provided information on data collected for the creation of accounts maintained as part of 130VA19. The health information self-entered and/or extracted from VistA and saved in the user's eVault is the property of the user or account holder.

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

7 Retention and Disposal

By completing this section, you provide documented assurance that proper data retention and disposal practices are in place.

The "Retention and disposal" section of the applicable System of Records Notice(s) often provides appropriate and sufficiently detailed documented data retention and disposal practices specific to your project.

VA HBK 6300.1 Records Management Procedures explains the Records Control Schedule procedures.

System of Records Notices may be accessed via:

<http://vaww.vhaco.va.gov/privacy/SystemofRecords.htm>

or

http://vaww.va.gov/foia/err/enhanced/privacy_act/privacy_act.html

For VHA projects, VHA Handbook 1907.1 (Section 6j) and VHA Records Control Schedule 10-1 provide more general guidance.

VHA Handbook 1907.1 may be accessed at:

http://www1.va.gov/vhapublications/ViewPublication.asp?pub_ID=434

For VBA projects, Records Control Schedule (RCS) VB-1 provides more general guidance. VBA Records Control Schedule (RCS) VB-1 may be accessed via the URL listed below.

[Start by looking at the http://www.warms.vba.va.gov/20rcs.html](http://www.warms.vba.va.gov/20rcs.html)

7.a) What is the data retention period? Given the purpose of retaining the information, explain why the information is needed for the indicated period.

Records are maintained and disposed of in accordance with the Records from this system, 7 years.

7.b) What are the procedures for eliminating data at the end of the retention period?

Routine administrative records will be disposed of when the agency determines they are no longer needed for administrative, legal, audit, or other operational purposes. These retention and disposal statements are pursuant to the National Archives and Records Administration (NARA) General Records Schedules GRS 20, item 1c and GRS 24, item 6a.

7.c) Where are procedures documented?

Not documented yet. MHV is still being developed. All documentation will be maintained in manner consistent with all other program procedures.

7.d) How are data retention procedures enforced?

Not documented yet. MHV is still being developed. Data retention procedures will be documented in a manner consistent with all other program procedures and in compliance with Government requirements. Cognizant personnel will be trained on the retention procedures.

7.e) If applicable, has the retention schedule been approved by the National Archives and Records Administration (NARA)?

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

8 SECURITY

OMB Guidance for Implementing the Privacy Provisions of the E-Government Act of 2002, (OMB M-03-22) specifies that privacy impact assessments must address how collected information will be secured.

8.1 General Security Measures

8.1.a) Per OMB guidance, citing requirements of the Federal Information Security Management Act, address the following items (select all applicable boxes.):

Yes	The project is following IT security requirements and procedures required by federal law and policy to ensure that information is appropriately secured.
Yes	The project has conducted a risk assessment, identified appropriate security controls to protect against that risk, and implemented those controls.
Yes	Security monitoring, testing, and evaluating are conducted on a regular basis to ensure that controls continue to work properly, safeguarding the information.

8.1.b) Describe the security monitoring, testing, and evaluating that is conducted on a regular basis:

1) Users will be identified and authenticated through a username, password, and user ID. A user will have specific modification abilities based on his/her permissions 2) There are detailed instructions on how a user can establish an account. A user can establish an account online to self-enter data, but in order to use offered PHR functionality a user must complete a face to face in-person authentication (IPA) process, and sign all mandatory consent forms. 3) Role based access controls will be in place to safeguard an individual's information. This information is documented in the MHV Security Plan.

8.1.c) Is adequate physical security in place to protect against unauthorized access?

Yes

8.2 Project-Specific Security Measures

8.2.a) Provide a specific description of how collected information will be secured.

- A concise description of how data will be protected against unauthorized access, unauthorized modification, and how the availability of the system will be protected.

- A concise description of the administrative controls (Security Plans, Rules of Behavior, Procedures for establishing user accounts, etc.).

- A concise description of the technical controls (Access Controls, Intrusion Detection, etc.) that will be in place to safeguard the information.

- Describe any types of controls that may be in place to ensure that information is used in accordance with the above described uses. For example, are audit logs regularly reviewed to ensure appropriate use of information? Are strict disciplinary programs in place if an individual is found to be inappropriately using the information?

Note: Administrative and technical safeguards must be specific to the system covered by the PIA, rather than an overall description of how the VA's network is secured. Does the project/system have its own security controls, independent of the VA network? Is so, describe these controls.

1) Users will be identified and authenticated through a username, password, and user ID. A user will have specific modification abilities based on his/her permissions 2) There are detailed instructions on how a user can establish an account. A user can establish a "light proofed" account online, but in order to get "heavy proofed" a user must complete a face to face authentication, and sign all mandatory consent forms. 3) Role based access controls will be in place to safeguard an individuals information. This information is documented in the MHV Security Plan.

8.2.b) Explain how the project meets IT security requirements and procedures required by federal law.

At all times, security maintenance and administration is an essential element of web site operation and maintenance. My HealthVet employs several levels of security to protect the personal identifiable information of registered users. When you type in your personal information, My HealthVet establishes a secure connection with your browser so your information is 'encrypted' or scrambled for transmission and storage. In addition, these security levels are believed to be in compliance with the Health Information Portability and Accountability Act of 1996 (HIPAA) (Pub. L. 104-191, Aug 21, 1996, 110 Stat. 1936), and implementing regulations 45 CFR, Parts 160 and 164.

9. CHANGE RECORD

OMB Memorandum M-03-22, OMB Guidance for Implementing the Privacy Provisions of the E-Government Act of 2002, mandates that PIAs address any project/ system changes that potentially create new privacy risks. By completing this section, you provide documented assurance that significant project/ system modifications have been appropriately evaluated for privacy-related impacts.

9.a Since the last PIA submitted, have any significant changes been made to the system that might impact the privacy of people whose information is retained on project systems? (Yes, No, n/a: first PIA)

No

If no, then proceed to Section 10, "Children's Online Privacy Protection Act."

If yes, then please complete the information in the table below. List each significant change on a separate row. 'Significant changes' may include:

Conversions - when converting paper-based records to electronic systems;

Anonymous to Non-Anonymous - when functions applied to an existing information collection change anonymous information into information in identifiable form;

Significant System Management Changes - when new uses of an existing IT system, including application of new technologies, significantly change how information in identifiable form is managed in the system:

- For example, when an agency employs new relational database technologies or web-based processing to access multiple data stores; such additions could create a more open environment and avenues for exposure of data that previously did not exist.

Significant Merging - when agencies adopt or alter business processes so that government databases holding information in identifiable form are merged, centralized, matched with other databases or otherwise significantly manipulated:

- For example, when databases are merged to create one central source of information; such a link may aggregate data in ways that create privacy concerns not previously at issue.

New Public Access - when user-authenticating technology (e.g., password, digital certificate, biometric) is newly applied to an electronic information system accessed by members of the public;

Commercial Sources - when agencies systematically incorporate into existing information systems databases of information in identifiable form purchased or obtained from commercial or public sources. (Merely querying such a source on an ad hoc basis using existing technology does not trigger the PIA requirement);

New Interagency Uses - when agencies work together on shared functions involving significant new uses or exchanges of information in identifiable form, such as the cross-cutting E-Government initiatives; in such cases, the lead agency should prepare the PIA;

Internal Flow or Collection - when alteration of a business process results in significant new uses or disclosures of information or incorporation into the system of additional items of information in identifiable form:

- For example, agencies that participate in E-Gov initiatives could see major changes in how they conduct business internally or collect information, as a result of new business processes or E-Gov requirements. In most cases the focus will be on integration of common processes and supporting data. Any business change that results in substantial new requirements for information in identifiable form could warrant examination of privacy issues.

Alteration in Character of Data - when new information in identifiable form added to a collection raises the risks to personal privacy (for example, the addition of health or financial information);

List All Major Project/System Modification(s)	State Justification for Modification(s)	*Concisely describe:	Modification Approver	Date

* The effect of the modification on the privacy of collected personal information

* How any adverse effects on the privacy of collected information were mitigated.

10. CHILDREN'S ONLINE PRIVACY PROTECTION ACT

10.a) Will information be collected through the Internet from children under age 13?

No

If "No" then SKIP to Section 11, "PIA Considerations".

10.b) How will parental or guardian approval be obtained.

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

11. PIA CONSIDERATIONS

11) Identify what choices were made regarding the project/system or collection of information as a result of performing the PIA. Examples of choices made include reconsideration of: collection source, collection methods, controls to mitigate misuse of information, provision of consent and privacy notice, and security controls.

None

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

12. PUBLIC AVAILABILITY

The Electronic Government Act of 2002 requires that VA make this PIA available to the public. This section is intended to provide documented assurance that the PIA is reviewed for any potentially sensitive information that should be removed from the version of the PIA that is made available to the public.

The following guidance is excerpted from M-03-22, "OMB Guidance for Implementing the Privacy Provisions of the E-Government Act of 2002," Section II.C.3, "Review and Publication": iii. Agencies must ensure that the PIA document and, if prepared, summary, are made publicly available (consistent with executive branch policy on the release of information about systems for which funding is proposed).

1. Agencies may determine to not make the PIA document or summary publicly available to the extent that publication would raise security concerns, reveal classified (i.e., national security) information or sensitive information (e.g., potentially damaging to a national interest, law enforcement effort or competitive business interest) contained in an assessment⁹. Such information shall be protected and handled consistent with the Freedom of Information Act (FOIA).

2. Agencies should not include information in identifiable form in their privacy impact assessments, as there is no need for the PIA to include such information. Thus, agencies may not seek to avoid making the PIA publicly available on these grounds.

12.a) Does this PIA contain any sensitive information that could cause harm to the Department of Veterans Affairs or any party if disclosed to the public?

No

12.b) If yes, specify:

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)

13. ACCEPTANCE OF RESPONSIBILITY AND ACKNOWLEDGEMENT OF ACCOUNTABILITY:

13.1) I have carefully reviewed the responses to each of the questions in this PIA. I am responsible for funding and procuring, developing, and integrating privacy and security controls into the project. I understand that integrating privacy and security considerations into the project may affect the development time and cost of this project and must be planned for accordingly. I will ensure that VA privacy and information security policies, guidelines, and procedures are followed in the development, integration, and, if applicable, the operation and maintenance of this application.

Yes

13.2) Project Manager/Owner Name and Date (mm/dd/yyyy)

Aiden Barr, 8/22/2007

ADDITIONAL INFORMATION: (Provide any necessary clarifying information or additional explanation for this section.)