

(FY 2012) PIA: System Information		*Green Highlight = Must Answer Question		*Yellow Highlight = Required to Sign PIA	
Program or System Name (as shown in SMART):		REGION 2 > VHA > VISN 16 > Gulf Coast HCS (Biloxi) > PBX			
OMB Unique System / Application / Program Identifier (AKA: UPID #):		029-00-02-00-01-1120-00			
Description of System/ Application/ Program : "must match what is stated in System Security Plan (SSP)"		The PBX System is the primary voice communications system and network that supports VA Gulf Coast HCS users in their day-to-day operations. This system is continuously used during business and non-business hours, supporting many businesses processing within the agency's communications environment.			
Facility or Program Office Name:		Biloxi, Mississippi			
Title:		Name:	Phone:	Email:	
Privacy Officer:		Melanie Lane	228-523-5526	melanie.lane@va.gov	
Information Security Officer:		David Merit	228-523-4789	david.merit2@va.gov	
System Owner/Delegate:		Dale Nelson	479-444-5011	dlev.nelson@va.gov	
Chief Information Officer:		David Wagner	228-523-5700	david.wagner@va.gov	
Information Owner:		Thomas Wisnieski	228-523-5766	thomas.wisnieski@va.gov	
Other Titles:		Paula Nichols	228-523-5247	paula.nichols@va.gov	
Person Completing Document:		Sandra Hedtke	701-237-2566	sandra.hedtke@va.gov	
Other Titles:					
Date of Last Full Approved PIA by VACO Privacy Services: (MM/YYYY)		06/2009			
What specific legal authorities authorize this program or system:		Title 5 U.S.C.			
What is the expected number of individuals that will have their PII stored in this system:		0			
Identify what stage the System / Application / Program is at:		Operations/Maintenance			
The approximate date (MM/YYYY) the system will be operational (if in the Design or Development stage), or the approximate number of years the system/application/program has been in operation.		6			
Is there an authorized change control process which documents any changes to existing applications or systems?		<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A : First PIA			
If No, (Explain on Tab 8)					
Is there a contingency plan in place to process information when the system is down?		<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A : First PIA			
Has a PIA been completed within the last three years?		<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A : First PIA			
FISMA QUESTIONS					
1. Is this a new system?		<input type="radio"/> Yes <input checked="" type="radio"/> No			
2. Does this system contain Federal information in identifiable form?		<input type="radio"/> Yes <input checked="" type="radio"/> No			
3. Does the system include information on the public?		<input type="radio"/> Yes <input checked="" type="radio"/> No			
4. Is there a Privacy Impact Assessment (PIA) that covers this system?		<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> National Security System under 40 U.S.C. 11103, a PIA is not required for this system			
5. Is Federal-owned information in this system retrieved by name or unique		<input type="radio"/> Yes <input checked="" type="radio"/> No			
6. What is the System of Records Notice (SORN) for this system?		No SORN			
7. Has this SORN been reviewed or updated within the last three years?		No, never reviewed			
Date of Report (MM/YYYY):		1-Dec-11			
Any check mark in the boxes below will require a full PIA. Please continue to the next TAB and complete the remaining questions.					
If there is no Personally Identifiable Information on your system, please complete TAB 2 & TAB 12. (See Comment for Definition of PII)					
<input type="checkbox"/> Have any changes been made to the system since the last PIA?					
<input type="checkbox"/> Is this a PIV system/application/program collecting PII data from Federal employees, contractors, or others performing work for the VA?					
<input type="checkbox"/> Will this system/application/program retrieve information on the basis of name, unique identifier, symbol or other PII data?					
<input type="checkbox"/> Does this system/application/program collect, store, or disseminate PII/PHI data?					
<input type="checkbox"/> Does this system/application/program collect, store or disseminate the SSN?					
Directions					

(FY 2012) PIA: System of Records

*Green Highlight = Must Answer Question

- 1. Is a SORN (System of Records Notice) Required?
- 2. Is there a SORN already in place?

Yes No Not Sure

Yes No

***If Yes, select all of the appropriate SORN number(s):
 ***If Not Sure, continue to question 3

***Click to add. Delete SORN by highlighting SORN and comma if included and press the Delete key or place focus on area to delete all SORNs.

LIST OF SORN NUMBER(S) :

[Redacted input field]

For each applicable System(s) of Records, list:

- 3. If records are retrieved using any of the following entities, A SORN will be required (Please check all that apply)

<input type="checkbox"/> Full Name
<input type="checkbox"/> Maiden Name
<input type="checkbox"/> Mother's Maiden Name
<input type="checkbox"/> Alias
<input type="checkbox"/> Social Security Number
<input type="checkbox"/> Passport Number
<input type="checkbox"/> Driver's License Number
<input type="checkbox"/> Taxpayer Identification Number
<input type="checkbox"/> Financial Account Number
<input type="checkbox"/> Credit Card Number
<input type="checkbox"/> Street Address
<input type="checkbox"/> Email Address
<input type="checkbox"/> Photographic Image
<input type="checkbox"/> Fingerprints
<input type="checkbox"/> Handwriting
<input type="checkbox"/> Other Biometric Data
<input type="checkbox"/> Other (Explain on Tab 8)

- 4. Based on Question 3, is a SORN required?
- ***If Yes, has the process begun to obtain/acquire a SORN

Yes No

Yes No

Location where the specific applicable System of Records Notice may be accessed:

http://www.rms.oit.va.gov/SOR_Records.asp

(FY 2012) PIA: Data Collection And Storage *Green Highlight = Must Answer Question

Please fill in each column for the data types selected.

Data Type	Collection Method	What are the subjects told about the intended use of their information?	How is this message conveyed to them?	How is a privacy notice provided?
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)				
Family Relation (spouse, children, parents, grandparents, etc)				
Service Information				
Medical Information				
Criminal Record Information				
Guardian Information				
Education Information				
Benefit Information				
Other (Explain on Tab 8)				

Data Type	Storage Method	Source (If requested, identify the specific file, entity and/or name of agency)	Is data collection Mandatory or Voluntary?
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary
Family Relation (spouse, children, parents, grandparents, etc)	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary
Service Information	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary
Medical Information	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary
Criminal Record Information	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary
Guardian Information	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary
Education Information	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary
Benefit Information	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary
Other (Explain on Tab 8)	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary

	(Please Select Yes/No)
Proximity and Timing: Is the privacy notice provided at the time of data collection?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Purpose: Does the privacy notice describe the principal purpose(s) for which the information will be used?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Authority: Does the privacy notice specify the effects of providing information on a voluntary basis?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Disclosures: Does the privacy notice specify routine use(s) that may be made of the information?	<input checked="" type="radio"/> Yes <input type="radio"/> No
routine use(s)	

(FY 2012) PIA: Data Sharing *Green Highlight = Must Answer Question	** Any connection external to VA requires an ISA/MOU per VA 6500. This section below must be consistent with your System Security Plan Interconnection Security Agreement section.				
Organization	Name of Agency/Organization	Do they access this system?	Identify the type of Data Sharing	Is PII or PHI Shared?	What is the procedure you reference for the release of information?
Internal Sharing: VA Organization		<input checked="" type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	
Other Veteran Organization		<input checked="" type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	
Other Federal Government Agency		<input checked="" type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	
State Government Agency		<input checked="" type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	
Local Government Agency		<input checked="" type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	
Research Entity		<input checked="" type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	
<input type="checkbox"/> Other Project/ System (Explain on Tab 8)					
(FY 2012) PIA: Access to Records					
Does the system gather information from another system?		<input checked="" type="radio"/> Yes <input type="radio"/> No			
Please enter the name of the system:					
(FY 2012) PIA: Secondary Use					
Will PII data be included with any secondary use request?		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="checkbox"/> Mental Health	<input type="checkbox"/> HIV	<input type="checkbox"/> Drug/Alcohol Counseling
Check all that apply			<input type="checkbox"/> Sickle Cell	<input type="checkbox"/> Other (Explain on Tab 8)	<input type="checkbox"/> Research

(FY 2012) PIA: Records Management		*Green Highlight = Must Answer Question	
Does this PIA form contain any sensitive information that could cause harm to the Department of Veterans Affairs or any party if disclosed to the public?			
<input type="radio"/> Yes (Explain on Tab 8) <input checked="" type="radio"/> No			
Is the data collected to only what is necessary to provide requested service?			
<input checked="" type="radio"/> Yes <input type="radio"/> No (Explain on Tab 8)			
Has the data provided been verified as complete?			
<input type="checkbox"/> Veteran Verified <input type="checkbox"/> Received From Database <input type="checkbox"/> Verification Unknown			
(FY 2012) PIA: Retention & Disposal			
What is the data retention period?			
		RCS 10-1 link for VHA: www.va.gov/vhapublications/rcs10/rcs10-1.pdf	
		RCS VB-1, Part II Revised for VBA: www.benefits.va.gov/WARMS/docs/admin20/rcs/part2/part2.pdf	
		National Archives and Records Administration: www.nara.gov	
Explain why the information is needed for the indicated retention period?			
Answer:			
What are the procedures for eliminating data at the end of the retention period?			
Answer:			
Where are these procedures documented?			
Answer:			
How are data retention procedures enforced?			
Answer:			
Has the retention schedule been approved by the National Archives and Records Administration (NARA)			
<input checked="" type="radio"/> Yes <input type="radio"/> No (Explain on Tab 8)			
(FY 2012) PIA: Children's Online Privacy Protection Act (COPPA)			
Will information be collected through the internet from children under age 13?			
<input type="radio"/> Yes (Explain on Tab 8) <input checked="" type="radio"/> No			

(FY 2012) PIA: Security *Green Highlight = Must Answer Question

Is the system/application/program following IT security Requirements and procedures required by federal law and policy to ensure that information is appropriately secured.	<input checked="" type="radio"/> Yes	<input type="radio"/> No (Explain on Tab 8)
Has the system/application/program conducted a risk assessment, identified appropriate security controls to protect against that risk, and implemented those controls..	<input checked="" type="radio"/> Yes	<input type="radio"/> No (Explain on Tab 8)
Is security monitoring conducted annually or as needed to ensure that controls continue to work properly, safeguarding the information?	<input checked="" type="radio"/> Yes	<input type="radio"/> No (Explain on Tab 8)
Is security assessment conducted annually or as needed to ensure that controls continue to work properly, safeguarding the information?	<input checked="" type="radio"/> Yes	<input type="radio"/> No (Explain on Tab 8)
Is adequate physical security in place to protect against unauthorized access?	<input checked="" type="radio"/> Yes	<input type="radio"/> No (Explain on Tab 8)

*Ensure PE 2, PE-3, PE-6, PE-7, PE-8 have been addressed appropriately for your categorization

Explain what security risks were identified in the security assessment? (Check all that apply)

<input type="checkbox"/> Biological Release	<input type="checkbox"/> Fire	<input type="checkbox"/> Lightning Strike	<input type="checkbox"/> Terrorist
<input type="checkbox"/> Blizzard	<input type="checkbox"/> Flood	<input type="checkbox"/> Malicious Code	<input type="checkbox"/> Thunderstorm
<input type="checkbox"/> Burglary/Break In	<input type="checkbox"/> Hacker, Cracker	<input type="checkbox"/> Password Privacy Negligence	<input type="checkbox"/> Tornado
<input type="checkbox"/> Civil Unrest	<input type="checkbox"/> Hail	<input type="checkbox"/> Personnel Unavailable	<input type="checkbox"/> Tsunami
<input type="checkbox"/> Component Failure	<input type="checkbox"/> HAZMAT Release/Spill	<input type="checkbox"/> Power Failure	<input type="checkbox"/> User Negligence
<input type="checkbox"/> Dam Failure	<input type="checkbox"/> Human Health Emergency	<input type="checkbox"/> Sabotage	<input type="checkbox"/> User Sabotage
<input type="checkbox"/> Dust/Debris	<input type="checkbox"/> Hurricane	<input type="checkbox"/> System Intrusion, Break-Ins	<input type="checkbox"/> Vibration
<input type="checkbox"/> Earthquake	<input type="checkbox"/> HVAC Failure	<input type="checkbox"/> System Misconfiguration	<input type="checkbox"/> Volcano
<input type="checkbox"/> Extreme Cold	<input type="checkbox"/> Indoor Humidity	<input type="checkbox"/> System Penetration	<input type="checkbox"/> Water Damage
<input type="checkbox"/> Extreme Heat	<input type="checkbox"/> Landslide	<input type="checkbox"/> System Tampering	<input type="checkbox"/> Winter Weather Hazards

*If any other risks identified, explain in Tab 8

Based upon the risks identified above, Explain what security controls are being used to mitigate these risks. (Check all that apply)

<input type="checkbox"/> Access Control	<input type="checkbox"/> Configuration Management	<input type="checkbox"/> Media Protection	<input type="checkbox"/> System and Services Acquisition
<input type="checkbox"/> Audit and Accountability	<input type="checkbox"/> Contingency Planning	<input type="checkbox"/> Personnel Security	<input type="checkbox"/> System and Communication Protection
<input type="checkbox"/> Awareness and Training	<input type="checkbox"/> Identification and Authentication	<input type="checkbox"/> Physical and Environmental Protection	<input type="checkbox"/> System and Information Integrity
<input type="checkbox"/> Security Assessment and Authorization	<input type="checkbox"/> Incident Response	<input type="checkbox"/> Risk Assessment	<input type="checkbox"/> Planning
<input type="checkbox"/>	<input type="checkbox"/> Maintenance		

Answer: (Other Controls) Explain on Tab 8

PIA: PIA Assessment

Based upon NIST 800-60, volume II; List the Information data types chosen as a basis for your FIPS 199 System Categorization.

Answer:

<p>Availability Assessment: If the data being collected is not available to process for any reason what will the potential impact be upon the system or organization? (Choose One)</p>	<input type="checkbox"/> The potential impact is high if the loss of availability could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. <input type="checkbox"/> The potential impact is moderate if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals. <input type="checkbox"/> The potential impact is low if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals.
<p>Integrity Assessment: If the data being collected has been corrupted for any reason what will the potential impact be upon the system or organization? (Choose One)</p>	<input type="checkbox"/> The potential impact is high if the loss of integrity could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. <input type="checkbox"/> The potential impact is moderate if the loss of integrity could be expected to have a serious adverse effect on operations, assets or individuals. <input type="checkbox"/> The potential impact is low if the loss of integrity could be expected to have a limited adverse effect on operations, assets or individuals.
<p>Confidentiality Assessment: If the data being collected has been shared with unauthorized individuals what will the potential impact be upon the system or organization? (Choose One)</p>	<input type="checkbox"/> The potential impact is high if the loss of confidentiality could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. <input type="checkbox"/> The potential impact is moderate if the loss of confidentiality could be expected to have a serious adverse effect on operations, assets or individuals. <input type="checkbox"/> The potential impact is low if the loss of confidentiality could be expected to have a limited adverse effect on operations, assets or individuals.

The controls are being considered for the project based on the selections from the previous assessments?
FALSE

(FY 2012) PIA: Additional Comments

Add any additional comments or information that may have been left out for any question. Please indicate the question you are responding to and then add your comments.

(FY 2012) PIA: VBA Minor Applications

Which of these are sub-components of your system?		
Access Manager	Automated Sales Reporting (ASR)	Automated Folder Processing System (AFPS)
Actuarial	BCMA Contingency Machines	Automated Medical Information Exchange II (AIME II)
Agent Orange		Automated Medical Information System (AMIS)290
Appraisal System	Centralized Property Tracking System	Automated Standardized Performance Elements Nationwide (ASPEN)
ASSISTS	Common Security User Manager (CSUM)	Broome Closet
Awards	Compensation and Pension (C&P)	Centralized Accounts Receivable System (CARS)
Baker System	Control of Veterans Records (COVERS)	Committee on Waivers and Compromises (COWC)
	Courseware Delivery System (CDS)	Compensation and Pension (C&P) Record Interchange (CAPRI)
Bbraun (CP Hemo)	Dental Records Manager	
	Education Training Website	Compensation & Pension Training Website
C&P Payment System	Electronic Appraisal System	Distribution of Operational Resources (DOOR)
C&P Training Website	Electronic Card System (ECS)	Educational Assistance for Members of the Selected Reserve Program CH 1606
	Electronic Payroll Deduction (EPD)	Electronic Performance Support System (EPSS)
CONDO PUD Builder	Eligibility Verification Report (EVR)	Enterprise Wireless Messaging System (Blackberry)
	Fiduciary Beneficiary System (FBS)	Financial Management Information System (FMI)
EndoSoft	Fiduciary STAR Case Review	Hearing Officer Letters and Reports System (HOLAR)
FOCAS	Financial and Accounting System (FAS)	Inquiry Routing Information System (IRIS)
Inforce	Insurance Unclaimed Liabilities	
INS - BIRLS	Inventory Management System (IMS)	Modern Awards Process Development (MAP-D)
Insurance Online	Interactive Voce Response (IVR)	Personal Computer Generated Letters (PCGL)
Insurance Self Service	LGY Centralized Fax System	Personnel Information Exchange System (PIES)
LGY Home Loans	Loan Service and Claims	Post Vietnam Era educational Program (VEAP) CH 32
LGY Processing		Purchase Order Management System (POMS)
	Loan Guaranty Training Website	Reinstatement Entitlement Program for Survivors (REAPS)
MES		Reserve Educational Assistance Program CH 1607
Mobilization	Mental Health Assistant	RightFax
Montgomery GI Bill	National Silent Monitoring (NSM)	Service Member Records Tracking System
MUSE	Powerscribe Dictation System	
Omicell	Rating Board Automation 2000 (RBA2000)	Survivors and Dependents Education Assistance CH 35
Priv Plus	Records Locator System	Systematic Technical Accuracy Review (STAR)
RAI/MDS	Remittance Processing System	Training and Performance Support System (TPSS)
Right Now Web	Review of Quality (ROQ)	VA Online Certification of Enrollment (VA-ONCE)
SAHSHA	Search Participant Profile (SPP)	
Script Pro	Spinal Bifida Program Ch 18	VA Reserve Educational Assistance Program
SHARE	State Benefits Reference System	Veterans Assistance Discharge System (VADS)
Sidexis	State of Case/Supplemental (SOC/SSOC)	Veterans Exam Request Info System (VERIS)
Synquest	Telecare Record Manager	Veterans Insurance Claims Tracking and Response System (VICTARS)
VBA Training Academy	VBA Enterprise Messaging System	Veterans Service Representative (VSR) Advisor
Veterans Canteen Web		Vocational Rehabilitation & Employment (VR&E) CH 31
VETSNET Housekeeping	Web Electronic Lender Identification	Web Automated Folder Processing System (WAFPS)
		Web Automated Reference Material System (WARMS)
VR&E Training Website		Web Automated Verification of Enrollment
Web LGY		Web-Enabled Approval Management System (WEAMS)
		Web Service Medical Records (WebSMR)
		Work Study Management System (WSMS)
Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.		
Name		
Description		
Comments		
Is PII collected by this min or application?		
Does this minor application store PII?		
If yes, where?		
Who has access to this data?		
Name		
Description		
Comments		
Is PII collected by this min or application?		
Does this minor application store PII?		
If yes, where?		
Who has access to this data?		
Name		
Description		
Comments		
Is PII collected by this min or application?		
Does this minor application store PII?		
If yes, where?		
Who has access to this data?		

(FY 2012) PIA: Minor Applications A-M

Which of these are sub-components of your system?			
1184 Web	Citrix	Electronic Signature	Imaging
A4P	Clinical Case Registries	Embedded Fragment Registry	Incentive Awards
ACCu Care	Clinical Data Repository/Health Data Repository	ENCORE 2	Incident Reporting
ACCU Check	Clinical Info Resource Network	ENDSOFT	Income Verification Match
ACCU Med	Clinical Monitoring System	Engineering	Incomplete Records Tracking
Adobe Acrobat	Clinical Notes Templates	Enrollment Application System	Inpatient Medications
ADP Planning (PlanMan)	Clinical Procedures	Enterprise Terminology Server & VHA Enterprise Terminology Services	Intake/ Output
ADT	Clinical Reminders	ePROMISE	Integrated Billing
Adverse Reaction Tracking	Clippership	Equipment/ Turn-in Request	Integrated Patient Funds
Agent Cashier	Combat Veteran Outreach	Event Capture	Interim Mangement Support
Air Fortress	Committee on Waiver and Compromises	Event Driven Reporting	Inventory Management System
ASISTS	Consult/ Request Tracking	Extensible Editor	Kernal
Authorization/ Subscription	Controlled Correspondence	External Peer Review	Kids
Auto Instrument	Controlled Substances	EYECAP	KOWA
Auto Replenishment/ Ward Stock	CP&E	Fee Based Claims System	Lab Service
AUTOCAD	CPRS	Fee Basis	Laboratory Electronic Data Interchange
Automated Access Request	CPT/ HCPCS Codes	Financial and Accounting System (FAS)	Letterman
Automated Info Collection Sys	Credentials Tracking	Financial Management System (FMS)	Lexicon Utility
Automated Lab Instruments	Credit Card Authentication	Functional Independence	Library
Automated Med Info Exchange	Data Innovations	Gen. Med. Rec. - I/O	List Manager
Automated Sales Reporting	DELIVEREX	Gen. Med. Rec. - Vitals	Lynx Duress Alarm
AutoMed	Dental	Gen. Med.Rec. - Generator	Mallman
Bad Code Med Admin	DICTATION-Power Scribe	GENDEX	MCCR National Database
Barcode Medication Administration Contingency Plan (BCU)	Dietetics	Generic Code Sheet	Meadows (MDWS)
BCMA Contingency Workstations	Discharge Summary	Genesys	Medicine
BDN 301	DRG Grouper	Get Well Networks	Mental Health
Beneficiary Travel	DRM Plus	GMED	MHTP
Big Fix	Drug Accountability	GRECC	MICOM
CA Verified Components - DSSI	DSIT	Health Data and Informatics	Microsoft Exchange E-mail System
Capacity Management - RUM	DSS Extracts	Health Level Seven	Military/Vet Eye Injury Registry
Capacity Management Tools	DSS Quadramed	Health Summary	Minimal Patient Dataset
CAPRI	EDS Whiteboard (AVJED)	Health Summary Contingency	Missing Patient Reg (Original) A4EL
Cardiff Teleform	Education Tracking	HINQ	Mumps AudioFAX
Cardiology Systems (stand alone servers from the network)	EEO Complaint Tracking	Hospital Based Home Care	MyHealthEvet
Care Management	EKG System	ICB	
CareTracker	Electronic Card System (ECD)	ICR - Immunology Case Registry	
CHECKPOINT	Electronic Payroll Deduction (EPD)	IFCAP	
Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.			
Name			
Description			
Comments			
Is PII collected by this minor application?			
Does this minor application store PII?			
If yes, where?			
Who has access to this data?			
Name			
Description			
Comments			
Is PII collected by this minor application?			
Does this minor application store PII?			
If yes, where?			
Who has access to this data?			
Name			
Description			
Comments			
Is PII collected by this minor application?			
Does this minor application store PII?			
If yes, where?			
Who has access to this data?			

(FY 2012) PIA: VISTA Minor Applications N-Z

Which of these are sub-components of your system?			
National Cemetery Association	Pharmacy Data Management	Scanning Exam and Evaluation System	VBECs
National Drug File	Pharmacy National Database	Scheduling	VDEF
National Laboratory Test	Pharmacy Prescription Practice	Security Suite Utility Pack	Vendor - Document Storage Sys
NDBI	PICIS OR	Sentillion	Veterans Canteen Web
Network Health Exchange	Police & Security	Shift Change Handoff Tool	Veterans Information Solution
NOAHLINK	Problem List	ShoreTel	VHAHUNAPP1
NOIS	Progress Notes	Social Work	VHAHUNFPC1
Nursing Service	Prosthetics	Stellant	VHS & RA Tracking System
Occurrence Screen	Purchase Order Management System	Stentor	Visit Tracking
Omnicell	Pyxis	Surgery	VISTA RAD
Oncology	Q-Matic	Survey Generator	VISTA RO
Onicord (VLOG)	QMSI Prescription Processing	Telecare Record Manager	VistALink
Optifill	Quality Assurance Integration	Temp Trak	VistALink Security
Order Entry/ Results Reporting	Quality Improvement Checklist	Text Integration Utilities	Visual Impairment Service Team ANRV
Outpatient Pharmacy	QUASER	Tickler Database	Vitria BusinessWare
P2000 ROBOT	Radiology/ Nuclear Medicine	Toolkit	VIXS
PACS database	RAFT	TopCon	Voluntary Timekeeping
Patch Module	RALS	TraceMaster	Voluntary Timekeeping National
Patient Data Exchange	Record Tracking	Tracking Continuing Education	WEB HINQ
Patient Feedback	Registration	Traumatic Brain Injury	Whiteboard
Patient Representative	Release of Information - DSSI	Unwinder	Women's Health
PCE Patient Care Encounter	Remote Order/ Entry System	Utility Management Rollup	Workload and Overtime
Personal Computer Generated Letters	RPC Broker	Utilization Review	
Pharmacy Benefits Mangement	Run Time Library	VA Conference Room Registration	
	SAGG	VA Fileman	
	SAN	VAMedSafe	
Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.			
Name			
Description			
Comments			
Is PII collected by this minor application?			
Does this minor application store PII?			
If yes, where?			
Who has access to this data?			
Name			
Description			
Comments			
Is PII collected by this minor application?			
Does this minor application store PII?			
If yes, where?			
Who has access to this data?			
Name			
Description			
Comments			
Is PII collected by this minor application?			
Does this minor application store PII?			
If yes, where?			
Who has access to this data?			

(FY 2012) PIA: Final Signatures		*Green Highlight = Must Answer Question	
Facility Name:	Biloxi, Mississippi		
Title:	Name:	Phone:	Email:
Privacy Officer:	Melanie Lane	228-523-5526	melanie.lane@va.gov
Digital Signature Block			
Information Security Officer:	David Merit	228-523-4789	david.merit2@va.gov
Digital Signature Block			
System Owner/Delegate:	Dale Nelson	479-444-5011	riley.nelson@va.gov
Digital Signature Block			
Chief Information Officer:	David Wagner	228-523-5700	david.wagner@va.gov
Digital Signature Block			
Other Titles:	Sandra Hedtke	701-237-2566	sandra.hedtke@va.gov
Digital Signature Block			
Date of Report:	1-Dec-11		
OMB Unique Project Identifier	029-00-02-00-01-1120-00		
Project Name	REGION 2 > VHA > VISN 16 > Gulf Coast HCS (Biloxi) > PBX		
<p>The Signature Process:</p> <ul style="list-style-type: none"> • Complete the PIA form. • Name the PIA Excel FORM ["FY12-Region # - Facility Name - Facility # -Date(mmdyyy).xls"] <ul style="list-style-type: none"> • Example: "FY12-Region3-Lexington VAMC-596-10302008.xls" • Submit the completed PIA Excel form to SMART Database. • Fix errors the reviewers sent back, rename the file and submit to SMART Database <ul style="list-style-type: none"> • If no errors, convert form into PDF with Nuance PDF Professional. • Name the PIA PDF form ["FY12-Region #-Facility Name- Facility # -Date(mmdyyy).xls"] <ul style="list-style-type: none"> • Obtain digital signatures on the "Final Signatures tab" • Submit signed PIA PDF form to the SMART Database. 			