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| <u>Welcome to the PIA for FY 2012!</u> | |
| Congress passed the E-Government Act of 2002 to encourage the use of Web-based Internet applications or other information technology by Government agencies, with the intention of enhancing access to government information and services and increasing the effectiveness, efficiency, and quality of government operations. | Macros Must Be Enabled To Use Full Functionality For This Form Template! |
| | Microsoft Office 2003: To enable macros, go to: 1) Tools > Macros > Security - Set to Medium; 2) Click OK; 3) Close the file and when reopening click on <u>Enable Macros at the prompt</u> . Or 1) When file opens click on <u>Enable Macros at the prompt</u> . |
| To combat public concerns regarding the disclosure of private information, the E-Government Act mandated various measures, including the requirement that Federal agencies conduct a Privacy Impact Assessment (PIA) for projects with information technology systems that collect, maintain, and/or disseminate "personally identifiable information" of the public. Personally identifiable information, or "personal information," is information that may be used to identify a specific person. | Microsoft Office 2007: To enable macros, go to: 1) Office Button > Prepare > Excel Options > Trust Center > Trust Center Settings > Macro Settings > Enable All Macros; 2) Click OK |
| | Final Signatures |
| 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. | Final signatures are digitally signed or wet signatures on a case by case basis. All signatures should be done when all modifications have been approved by the VA Privacy Service and the reviewer has indicated that the signature is all that is necessary to obtain approval. |
| Directions: | Privacy Impact Assessment Uploaded into SMART |
| VA 6508 is the directive which outlines the PIA requirement for every System/Application/Program. If you find that you can't click on checkboxes, make sure that you are: 1) Not in "design mode" and 2) you have enabled macros. | All PIA Validation Letters should be mailed to Christina.Pettit@va.gov to receive full credit for submission. |
| INTERNAL WEBSITE : http://vawww.privacy.va.gov/PIA.asp EXTERNAL WEBSITE : http://www.privacy.va.gov/PRIVACY/Privacy_Impact_Assessment.asp | Various Privacy Data Websites: SORNS : http://www.rms.oit.va.gov/SOR_Records.asp Directive Itself (6508): http://www.va.gov/vapubs/viewPublication.asp?Pub_ID=414&FTYPE=2 Schedule FY 2012 : http://www.privacy.va.gov/PRIVACY/Privacy_Impact_Assessment.asp |
| Roles and Responsibilities: | |
| Roles and responsibilities for the specific process are clearly defined for all levels of staff in the VA Directive 6508 referenced in the procedure section of this document. | |
| a. Privacy Officer is responsible for the overall coordination and review of the PIA to ensure compliance with VA Directive 6508 | |
| b. Records Officer is responsible for supplying records retention and deletion schedules | |
| c. Information Technology (IT) staff responsible for the privacy of the system data will perform a PIA in accordance with VA Directive 6508 and to immediately report all anomalies to the Privacy Service and appropriate management chain. | |
| d. Information Security Officer (ISO) is responsible for assisting the Privacy Officer and providing information regarding security controls. | |
| e. Chief Information Officer (CIO) is responsible for ensuring that the systems under his or her jurisdiction undergo a PIA. This responsibility includes identifying the IT systems; coordinating with the Privacy Officer, Information Security Officer, and others who have concerns about privacy and security issues; and reviewing and approving the PIA before submission to the Privacy Service. | |
| Definition of PII (Personally Identifiable Information) | |
| Personally Identifiable Information (PII) is —any information about an individual maintained by an agency, including (1) any information that can be used to distinguish or trace an individual's identity, such as name, social security number, date and place of birth, mother's maiden name, or biometric records; and (2) any other information that is linked or linkable to an individual, such as medical, educational, financial, and employment information. | |
| Examples of PII include, but are not limited to: | |
| • Personal identification number, such as social security number (SSN), passport number, driver's license number, taxpayer identification number, or financial account or credit card number | |
| • Address information, such as street address or email address | |
| • Personal characteristics, including photographic image (especially of face or other identifying characteristic), fingerprints, handwriting, or other biometric data (e.g., retina scan, voice signature, facial geometry) | |
| • Information about an individual that is linked or linkable to one of the above (e.g., date of birth, place of birth, race, religion, weight, activities, geographical indicators, employment information, medical information, education information, financial information). | |
| Organizations should minimize the use, collection, and retention of PII to what is strictly necessary to accomplish their business purpose and mission. | |
| A "routine use" is a Privacy Act discretionary authority published in the Federal Register that permits VA to disclose information or records from a Privacy Act-protected record without the patient's prior signed authorization. A "routine use" permits the: | |
| (1) Release of PHI only when disclosure is also authorized by other applicable legal authorities, including 45 CFR Parts 160 and 164; | |
| (2) Release of drug or alcohol abuse, HIV, or sickle cell anemia medical information only when the disclosure is also authorized by 38 U.S.C. 7332. | |

| (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 1>VHA>VISN18>Prescott>VA HealthCare | |
| OMB Unique System / Application / Program Identifier (UPID #): | | 029-00-01-11-01-1180-00 | |
| Description of System/ Application/ Program : "must match what is stated in System Security Plan (SSP)" ***Do not type more than allotted space!!*** | | <p>Each Veterans Affairs (VA) medical center uses VistA , an integrated hospital information system. DHCP was an M-based internally developed portfolio and VistA encompasses DHCP and a variety of other clinical and administrative applications, some on single-use platforms. VistA is currently running on a core platform, Virtual Memory System (VMS)/Cache. This facility operates the following: [X] InterSystems Cache on VMS [VMS/Cache]</p> <p>VistA is structured so that it can be customized in certain specialized areas and most local medical centers have taken advantage of this flexibility. Applications within VistA support a multitude of areas including medical imaging, supply management, decision support, medical research, and education. VHA began deploying DHCP in 1982 with a core set of applications. Today, VistA is one of the most comprehensive integrated health information systems in the United States. Since episode-of-care workload reporting was an initial motivation for corporate databases, most of VHA's corporate systems collect their information from VistA . Recent enhancements have clearly shifted the focus from workload to enabling the integration of clinical information from various disciplines, forming the basis for an automated and distributed health information system.</p> | |
| Facility or Program Office Name: | | Northern Arizona VA Healthcare System | |
| Title: | | Name: Phone: Email: | |
| Privacy Officer: | | Lori Rosenberg (928)445-4860 X6218 Lori.Rosenberg@va.gov | |
| Information Security Officer: | | John.M.Caldwell (928)776-6091 Mike.Caldwell@va.gov | |
| System Owner/Delegate: | | Scott McCrimmon (928)445-4860 X6186 Scott.McCrimmon@va.gov | |
| Chief Information Officer: | | Scott McCrimmon (928)445-4860 X6186 Scott.McCrimmon@va.gov | |
| Information Owner: | | | |
| Other Titles: | | | |
| Person Completing Document: | | Lori Rosenberg (928)445-4860 X6128 lori.Rosenberg@va.gov | |
| Other Titles: | | | |
| Date of Last Full Approved PIA by VACO Privacy Services: 08/2011 | | | |
| What specific legal authorities authorize this program or system: | | Title 38, United States Code, Section 7301(a) | |
| What is the expected number of individuals that will have their PII stored in this system: | | 100,000 plus | |
| 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. | | Over twenty years. | |
| 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 checked="" type="radio"/> Yes <input type="radio"/> No | |
| 3. Does the system include information on the public? | | <input checked="" type="radio"/> Yes <input 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 | |
| Identifier? | | <input checked="" type="radio"/> Yes <input type="radio"/> No | |

mation

| | | | | |
|---|---|----------|--|--|
| 6. What is the System of Records Notice (SORN) for this system? | 79VA19 | | | |
| 7. Has this SORN been reviewed or updated within the last three years? | Yes three years ago | | | |
| Date of Report (MM/YYYY): | | 1-Jan-12 | | |
| 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 | | | |
| <input checked="" type="checkbox"/> | Is this a PIV system/application/program collecting PII data from Federal employees, contractors, or others performing work for the VA? | | | |
| <input checked="" type="checkbox"/> | Will this system/application/program retrieve information on the basis of name, unique identifier, symbol or other PII data? | | | |
| <input checked="" type="checkbox"/> | Does this system/application/program collect, store, or disseminate PII/PHI data? | | | |
| <input checked="" 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?

Yes No Not Sure

Yes No

2. Is there a SORN already in place?

***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) :

79VA19

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

Full Name

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

| |
|---|
| <input checked="" type="checkbox"/> Maiden Name |
| <input checked="" type="checkbox"/> Mother's Maiden Name |
| <input checked="" type="checkbox"/> Alias |
| <input checked="" type="checkbox"/> Social Security |
| <input type="checkbox"/> Passport Number |
| <input checked="" type="checkbox"/> Driver's License Number |
| <input checked="" type="checkbox"/> Taxpayer Identification |
| <input checked="" type="checkbox"/> Financial Account |
| <input checked="" type="checkbox"/> Credit Card Number |

| |
|--|
| <input checked="" type="checkbox"/> Street Address |
| <input checked="" type="checkbox"/> Email Address |
| <input checked="" type="checkbox"/> Photographic Image |
| <input checked="" type="checkbox"/> Fingerprints |
| <input checked="" type="checkbox"/> Handwriting |
| <input checked="" type="checkbox"/> Other Biometric |
| <input type="checkbox"/> Other (Explain on Tab) |

4. Based on Question 3, is a SORN required?

Yes

No

***If Yes, has the process begun to obtain/acquire a SORN

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) | Verbal | Healthcare | Verbal | Verbal |
| Family Relation (spouse, children, parents, grandparents, etc) | Verbal | N/A | Written | Written |
| Service Information | Electronic/File Transfer | Eligibility | Verbal/Automatic | Written |
| Medical Information | Verbal | Healthcare | Verbal | Automated |
| Criminal Record Information | Electronic/File Transfer | N/A | Automated | Automated |
| Guardian Information | Verbal | Healthcare | Verbal | Verbal |
| Education Information | Verbal | N/A | Verbal | Verbal |
| Benefit Information | Web Data Storage Device | Benefits | Automated | Automated |
| 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 | VA Files/Databases (Identify File) | | On The Form |
| Family Relation (spouse, children, parents, grandparents, etc) | <input type="radio"/> Yes <input checked="" type="radio"/> No | Public (Identify specific entity) | <input type="radio"/> Mandatory <input type="radio"/> Voluntary | On The Form |
| Service Information | <input checked="" type="radio"/> Yes <input type="radio"/> No | Veteran | <input type="radio"/> Mandatory <input checked="" type="radio"/> Voluntary | On The Form |
| Medical Information | <input checked="" type="radio"/> Yes <input type="radio"/> No | VA Files/Databases (Identify File) | <input type="radio"/> Mandatory <input checked="" type="radio"/> Voluntary | On The Form |
| Criminal Record Information | <input checked="" type="radio"/> Yes <input type="radio"/> No | VA Files/Databases (Identify File) | <input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary | On The Form |
| Guardian Information | <input checked="" type="radio"/> Yes <input type="radio"/> No | VA Files/Databases (Identify File) | <input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary | On The Form |
| Education Information | <input checked="" type="radio"/> Yes <input type="radio"/> No | VA Files/Databases (Identify File) | <input type="radio"/> Mandatory <input checked="" type="radio"/> Voluntary | On The Form |
| Benefit Information | <input checked="" type="radio"/> Yes <input type="radio"/> No | VA Files/Databases (Identify File) | <input type="radio"/> Mandatory <input checked="" type="radio"/> Voluntary | On The Form |
| Other (Explain on Tab 8) | <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary | |
| | <i>(Please Select Yes/No)</i> | | <input checked="" type="radio"/> Mandatory <input type="radio"/> Voluntary | |
| 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 | Austin Automation Center | <input type="radio"/> Yes <input type="radio"/> No | Other (Explain in Tab 8) | <input type="radio"/> Yes <input checked="" type="radio"/> No | Other (Explain in Tab 8) | |
| Other Veteran Organization | Health Eligibility Center | <input type="radio"/> Yes <input type="radio"/> No | Patient Eligibility | <input checked="" type="radio"/> Yes <input type="radio"/> No | VHA Handbook 1605.2 | |
| Other Federal Government Agency | Administration, DOD, | <input type="radio"/> Yes <input type="radio"/> No | Income Verification | <input checked="" type="radio"/> Yes <input type="radio"/> No | VHA Handbook 1605.2 | |
| State Government Agency | Adult protective Service | <input type="radio"/> Yes <input type="radio"/> No | Healthcare | <input checked="" type="radio"/> Yes <input type="radio"/> No | VHA Handbook 1605.2 | |
| Local Government Agency | | <input type="radio"/> Yes <input type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | |
| Research Entity | | <input 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: | | Hospital Inquiry (HINQ) | | | | |
| (FY 2012) PIA: Secondary Use | | | | | | |
| Will PII data be included with any secondary use request? | | <input checked="" type="radio"/> Yes <input type="radio"/> No | | | | |
| Check all that apply | | <input checked="" type="checkbox"/> Mental Health | <input checked="" type="checkbox"/> HIV | <input checked="" type="checkbox"/> Drug/Alcohol Counseling | | |
| | | <input checked="" type="checkbox"/> Sickle Cell | <input type="checkbox"/> Other (Explain on Tab | <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 checked="" type="radio"/> Yes (Explain on Tab 8) <input 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 checked="" type="checkbox"/> Veteran Verified <input checked="" type="checkbox"/> Received From <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 | |
| Answer: Infinite | | 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: To retain a complete patient profile necessary for continuity of care. | | | |
| What are the procedures for eliminating data at the end of the retention period? | | | |
| Answer: Purging procedures as applicable and permitted. | | | |
| Where are these procedures documented? | | | |
| Answer: Veterans Health Administration Records Control Schedule 10-1 | | | |
| How are data retention procedures enforced? | | | |
| Answer: Audit of procedures, training of users. | | | |
| Has the retention schedule been approved by the National Archives and Records Administration (NARA)? | | | |
| <input 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 <input 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.

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) |
| <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 checked="" type="checkbox"/> Fire | <input checked="" type="checkbox"/> Lightning Strike | <input type="checkbox"/> Terrorist |
| <input type="checkbox"/> Blizzard | <input checked="" type="checkbox"/> Flood | <input type="checkbox"/> Malicious Code | <input type="checkbox"/> Thunderstorm |
| <input checked="" type="checkbox"/> Burglary/Break In | <input type="checkbox"/> Hacker, Cracker | <input checked="" type="checkbox"/> Password Privacy Negligence | <input type="checkbox"/> Tornado |
| <input type="checkbox"/> Civil Unrest | <input type="checkbox"/> Mail | <input type="checkbox"/> Personnel Unavailable | <input type="checkbox"/> Tsunami |
| <input type="checkbox"/> Component Failure | <input type="checkbox"/> NADNAT Business/Spill | <input checked="" 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"/> Dams/Dikes | <input type="checkbox"/> Hurricane | <input type="checkbox"/> System Infections, Bots, etc. | <input type="checkbox"/> Vibration |
| <input type="checkbox"/> Earthquake | <input checked="" type="checkbox"/> HVAC Failure | <input type="checkbox"/> System Misconfiguration | <input type="checkbox"/> Volcano |
| <input checked="" type="checkbox"/> Extreme Cold | <input type="checkbox"/> Indoor Humidity | <input type="checkbox"/> System Penetration | <input checked="" type="checkbox"/> Water Damage |
| <input checked="" type="checkbox"/> Extreme Heat | <input type="checkbox"/> Landslide | <input type="checkbox"/> System Tampering | <input checked="" 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 checked="" type="checkbox"/> Configuration Management | <input type="checkbox"/> Media Protection | <input type="checkbox"/> System and Services Acquisition |
| <input checked="" type="checkbox"/> Audit and | <input type="checkbox"/> Contingency Planning | <input checked="" type="checkbox"/> Personnel Security | <input checked="" type="checkbox"/> System and Communication Protection |
| <input checked="" type="checkbox"/> Awareness and | <input checked="" type="checkbox"/> Identification and Authentication | <input checked="" type="checkbox"/> Physical and Environmental Protection | <input type="checkbox"/> System and Information Integrity |
| <input checked="" type="checkbox"/> Security Assessment and | <input type="checkbox"/> Incident Response | <input checked="" type="checkbox"/> Risk Assessment | <input checked="" type="checkbox"/> Planning |
| | | | <input checked="" 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: Reconsideration of data collection, controls, safeguarding both patient and employee data and security.

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)

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.

The potential impact is **moderate** if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals.

The potential impact is **low** if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals.

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)

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.

The potential impact is **moderate** if the loss of integrity could be expected to have a serious adverse effect on operations, assets or individuals.

The potential impact is **low** if the loss of integrity could be expected to have a limited adverse effect on operations, assets or individuals.

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)

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.

The potential impact is moderate if the loss of confidentiality could be expected to have a serious adverse effect on operations, assets or individuals.

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?

The minimum security requirements for our high impact system cover seventeen security-related areas with regard to protecting the confidentiality, integrity, and availability of VA information systems and the information processed, stored, and transmitted by those systems. The security-related areas include: access control; awareness and training; audit and accountability; certification, accreditation, and security assessments; configuration management; contingency planning; identification and authentication; incident response; maintenance; media protection; physical and environmental protection; planning; personnel security; risk assessment; systems and services acquisition; system and communications protection; and system and information integrity. Our facility employs all security controls in the respective high impact security control baseline unless specific exceptions have been allowed based on the tailoring guidance provided in NIST Special Publication 800-53 and specific VA directives.

(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.

Tab-5 Austin- used only for Publication Controls- FORMS -The VISTA computer system collects Personal Identifiable and Protected Health Information to provide the best medical treatment for the Veterans . The data is stored on servers located on LAN. This PIA addresses the VISTA computer system storage device that is utilized within the VHA.

(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 | x 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) |
| MES | Loan Guaranty Training Website | Reinstatement Entitlement Program for Survivors (REAPS) |
| Mobilization | Mental Health Assistant | Reserve Educational Assistance Program CH 1607 |
| Montgomery GI Bill | National Silent Monitoring (NSM) | RightFax |
| MUSE | Powerscribe Dictation System | Service Member Records Tracking System |
| Omnicell | 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 Trancing and Response System (VICTARS) |
| | | Veterans Service Representative (VSR) Advisor |
| VBA Training Academy | VBA Enterprise Messaging System | |
| 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? | | |
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(FY 2012) PIA: Minor Applications A-M

| Which of these are sub-components of your system? | | | | |
|---|--|---|---|--|
| | | | | |
| | 1184 Web | x Citrix | x Electronic Signature | x Imaging |
| | AAP | x Clinical Case Registries | x Embedded Fragment Registry | x Incentive Awards |
| x | ACCU Care | x Clinical Data Repository/Health Data Repository | ENCORE 2 | x Incident Reporting |
| x | ACCU Check | x Clinical Info Resource Network | ENDSOFT | x Income Verification Match |
| | ACCU Med | x Clinical Monitoring System | x Engineering | x Incomplete Records Tracking |
| x | Adobe Acrobat | x Clinical Notes Templates | x Enrollment Application System | x Inpatient Medications |
| | ADP Planning (PlanMan) | x Clinical Procedures | Enterprise Terminology Server & VHA Enterprise Terminology Services | x Intake/ Output |
| | ADT | x Clinical Reminders | ePROMISE | x Integrated Billing |
| | Adverse Reaction Tracking | Clippership | Equipment/ Turn-in Request | x Integrated Patient Funds |
| x | Agent Cashier | Combat Veteran Outreach | x Event Capture | x Interim Management Support |
| x | Air Fortress | Committee on Waiver and Compromises | Event Driven Reporting | x Inventory Management System |
| x | ASISTS | x Consult/ Request Tracking | Extensible Editor | Kernal |
| x | Authorization/ Subscription | Controlled Correspondence | x External Peer Review | Kids |
| | Auto Instrument | x Controlled Substances | EYECAP | KOWA |
| x | Auto Replenishment/ Ward Stock | CP&E | x Fee Based Claims System | x Lab Service |
| x | AUTOCAD | x CPRS | x Fee Basis | Laboratory Electronic Data Interchange |
| x | Automated Access Request | x CPT/ HCPCS Codes | x Financial and Accounting System (FAS) | Letterman |
| x | Automated Info Collection Sys | x Credentials Tracking | x Financial Management System (FMS) | x Lexicon Utility |
| x | Automated Lab Instruments | x Credit Card Authentication | x Functional Independence | Library |
| x | Automated Med Info Exchange | x Data Innovations | x Gen. Med. Rec. - I/O | List Manager |
| | Automated Sales Reporting | x DELIVEREX | x Gen. Med. Rec. - Vitals | Lynx Duress Alarm |
| x | AutoMed | x Dental | x Gen. Med. Rec. - Generator | x Mailman |
| | Bad Code Med Admin | x DICTATION-Power Scribe | GENDEX | x MCCR National Database |
| x | Barcode Medication Administration Contingency Plan (BCU) | x Dietetics | x Generic Code Sheet | Meadows (MDWS) |
| x | BCMA Contingency Workstations | x Discharge Summary | Genesys | x Medicine |
| | BDN 301 | x DRG Groupier | Get Well Networks | x Mental Health |
| x | Beneficiary Travel | DRM Plus | GMED | MHTP |
| x | Big Fix | x Drug Accountability | GRECC | MICOM |
| | CA Verified Components - DSSI | DSIT | x Health Data and Informatics | x Microsoft Exchange E-mail System |
| | Capacity Management - RUM | x DSS Extracts | x Health Level Seven | Military/Vet Eye Injury Registry |
| | Capacity Management Tools | x DSS Quadramed | x Health Summary | Minimal Patient Dataset |
| x | CAPRI | EDS Whiteboard (AVIED) | Health Summary Contingency | x Missing Patient Reg (Original) A4EL |
| | Cardiff Teleform | Education Tracking | x HINQ | Mumps AudioFAX |
| | Cardiology Systems (stand alone servers from the network) | x EEO Complaint Tracking | x Hospital Based Home Care | x MyHealthEVet |
| | Care Management | x EKG System | x ICB | |
| x | CareTracker | Electronic Card System (ECD) | ICR - Immunology Case Registry | |
| | CHECKPOINT | x Electronic Payroll Deduction (EPD) | x 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? | | | |
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| | 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 | x Pharmacy Data Management | Scanning Exam and Evaluation System | x VBECs |
| x | National Drug File | x Pharmacy National Database | x Scheduling | VDEF |
| | National Laboratory Test | Pharmacy Prescription Practice | Security Suite Utility Pack | x Vendor - Document Storage Sys |
| | NDBI | x PICIS OR | x Sentillion | x Veterans Canteen Web |
| x | Network Health Exchange | x Police & Security | Shift Change Handoff Tool | Veterans Information Solution |
| | NOAHLINK | x Problem List | x ShoreTel | VHAHUNAPP1 |
| | NOIS | x Progress Notes | x Social Work | VHAHUNFPC1 |
| x | Nursing Service | x Prosthetics | Stellant | VHS & RA Tracking System |
| x | Occurrence Screen | x Purchase Order Management System | Stentor | x Visit Tracking |
| x | Omnicell | x Pyxis | Surgery | x VISTA RAD |
| x | Oncology | Q-Matic | Survey Generator | VISTA RO |
| | Onvicond (VLOG) | QMSI Prescription Processing | Telecare Record Manager | VistALink |
| | Optifill | Quality Assurance Integration | x Temp Trak | VistALink Security |
| x | Order Entry/ Results Reporting | Quality Improvement Checklist | Text Integration Utilities | Visual Impairment Service Team ANRV |
| x | Outpatient Pharmacy | QUASER | Tickler Database | Vitria BusinessWare |
| | P2000 ROBOT | x Radiology/ Nuclear Medicine | x Toolkit | VIXS |
| | PACS database | RAFT | x TopCon | x Voluntary Timekeeping |
| x | Patch Module | x RALS | TraceMaster | x Voluntary Timekeeping National |
| x | Patient Data Exchange | x Record Tracking | Tracking Continuing Education | WEB HINQ |
| | Patient Feedback | x Registration | x Traumatic Brain Injury | Whiteboard |
| x | Patient Representative | x Release of Information - DSSI | Unwinder | x Women's Health |
| x | PCE Patient Care Encounter | Remote Order/ Entry System | Utility Management Rollup | Workload and Overtime |
| | Personal Computer Generated Letters | x RPC Broker | x Utilization Review | |
| | Pharmacy Benefits Mangement | x Run Time Library | x VA Conference Room Registration | |
| | | SAGG | x 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.

| | |
|---|--|
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| | |

| (FY 2012) PIA: Final Signatures | | *Green Highlight = Must Answer Question | |
|---|--|---|------------------------|
| Facility Name: | Northern Arizona VA Healthcare System | | |
| Title: | Name: | Phone: | Email: |
| Privacy Officer: | Lori Rosenberg | (928)445-4860 X6218 | Lori.Rosenberg@va.gov |
| Digital Signature Block | | | |
| Information Security Officer: | John.M.Caldwell | 928-776-6096 | Mike.Caldwell@va.gov |
| Digital Signature Block | | | |
| System Owner/Delegate: | Scott McCrimmon | (928)445-4860 X6186 | Scott.McCrimmon@va.gov |
| Digital Signature Block | | | |
| Chief Information Officer: | Scott McCrimmon | (928)445-4860 X6186 | Scott.McCrimmon@va.gov |
| Digital Signature Block | | | |
| Other Titles: | 0 | 0 | 0 |
| Digital Signature Block | | | |
| Date of Report: | 1-Jan-12 | | |
| OMB Unique Project Identifier | 029-00-01-11-01-1180-00 | | |
| Project Name | Region 1>VHA>VISN18>Prescott>VA HealthCare | | |
| <p>The Signature Process:</p> <ul style="list-style-type: none"> • Complete the PIA form. <ul style="list-style-type: none"> • Name the PIA Excel FORM ["FY12-Region # - Facility Name - Facility # -Date(mmddyyyy).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(mmddyyyy).xls"] <ul style="list-style-type: none"> • Obtain digital signatures on the "Final Signatures tab" • Submit signed PIA PDF form to the SMART Database. | | | |

- 1.16 Update buttons from default to non-default
- 1.16 Fix background of buttons to blend in with cells
 - Expand description cell to accommodate for long
- 1.17 descriptions in tab 2
 - Change Name of Tab 10 from Minor Applications A-M to
- 1.17 VISTA Minor Applications A-M