



UNITED STATES
DEPARTMENT OF VETERANS AFFAIRS

Eliminating the Unnecessary Collection and Use of Social Security Numbers at the Department of Veterans Affairs

Revised October 2012

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I. OVERVIEW

This is the Department of Veterans Affairs' (VA) revised Social Security Number (SSN) Reduction Plan, which was originally submitted to the Office of Management and Budget (OMB) on September 25, 2007.¹ It highlights what progress has been made, and it clarifies many of the activities that must take place over the next few years to reduce the unnecessary collection and use of the SSN within VA. Many of the timeframes in the original plan have been modified to account for the additional time that will be needed to develop a comprehensive inventory of VA collections and uses of the SSN.

VA's mission is to serve America's Veterans and their families with dignity and compassion, to be their principal advocate, and to ensure that they receive the medical care, benefits, social support, and lasting memorials for which they are eligible because of their service to our Nation. VA is the second largest Federal Department with over 320,000 employees. As advocates for Veterans and their families, VA employees are committed to providing world-class services in the provision of benefits.

VA is composed of a Central Office (VACO), located in Washington, DC, and field facilities throughout the United States, American Samoa, Guam, Puerto Rico, the Philippines, and the Virgin Islands. VA has three major line organizations: the Veterans Health Administration (VHA), the Veterans Benefits Administration (VBA), and the National Cemetery Administration (NCA). VA currently has over 320,000 employees and provides services and benefits through a nationwide network of 152 medical centers, 802 community-based outpatient clinics, 135 nursing homes, 49 residential rehabilitation treatment programs, 280 readjustment-counseling centers (Vet Centers), 108 comprehensive home-care programs, 58 Veterans' benefits regional offices, and 131 national cemeteries. Almost a quarter of the U.S. population is potentially eligible for VA benefits and services because they are Veterans, family members, or survivors of Veterans.

VA's three Administrations have three very different missions – health, benefits, and memorial affairs. To complete these missions, VA needs to collect and maintain a tremendous store of personal information about Veterans and their beneficiaries. In addition to operating over 1,500 facilities around the country, the Department interfaces with many other Federal agencies including, but not limited to, the Department of Defense (DoD), the Social Security Administration (SSA), the Internal Revenue Service (IRS), and the Department of Education (DOE).

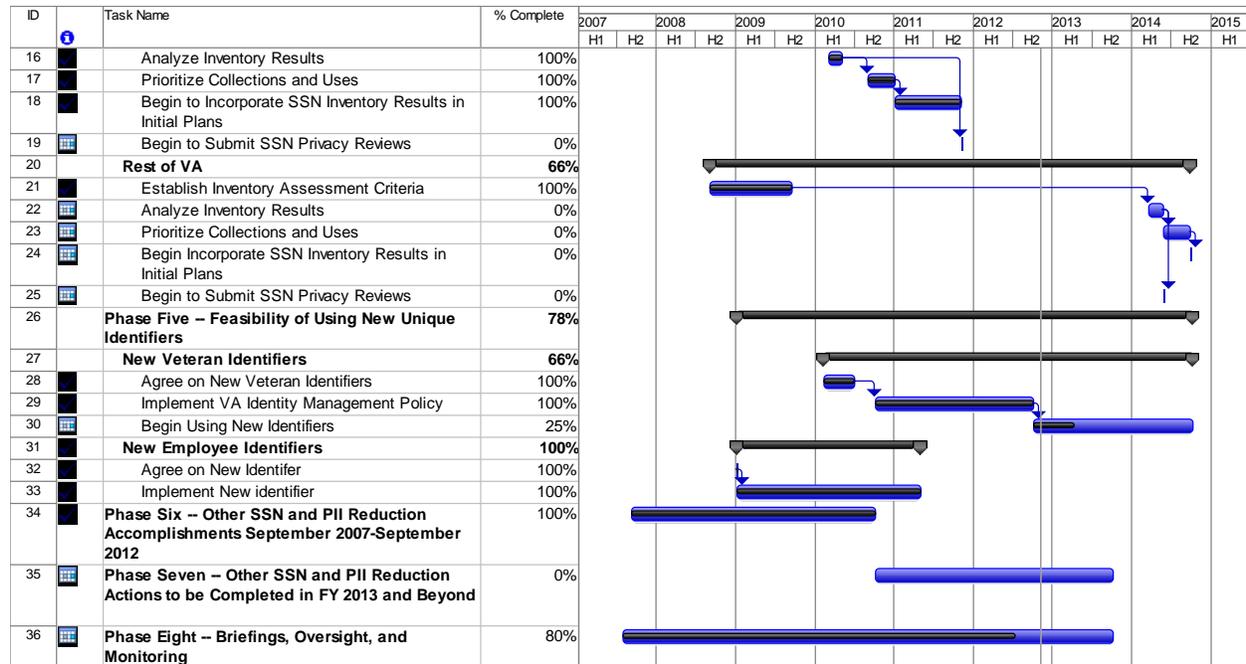
Currently, VA's primary uses of the SSN are to identify employees for employment-related record keeping, and to identify Veterans and their dependents in order to ensure accurate identification associated with the delivery of VA benefits and services. Mistaken identity, particularly in the case of healthcare, could be catastrophic. One of the key goals of the VA's SSN reduction effort is to eliminate the collection and use of

¹ In May 2007, the Office of Management and Budget issued Memorandum 07-16, "Safeguarding Against and Responding to the Breach of Personally Identifiable Information." One of its requirements was for Federal agencies to review their use of SSNs in agency systems and programs to identify instances in which their collection and use is unnecessary. Specifically, Federal agencies were to establish a plan to eliminate the unnecessary collection and use of SSNs. These plans are submitted annually with the agency's annual Federal Information Security Management Act (FISMA) report.

the Social Security Number (SSN) as the Department’s primary identifier. However, the SSN will still be used if required by law (such as for background investigations and security checks), for validation purposes (such as computer matching of records between government agencies), as an attribute in support of unique identification, or as a backup identifier if issues arise over new primary identifier(s).

Major activities in VA’s plan of action are illustrated in **Figure 1**. The timelines, placement, and descriptions for many of the tasks continue to be clarified as the Department works to compile a complete inventory of its SSN collections and uses.

Figure 1 – Summary of SSN Plan, as of October 15, 2012



II. Phase Zero – Project Initiation

In June 2007, VA issued a memorandum establishing the VA SSN Work Group (SSN-WG), composed of representatives from the three Administrations and many Staff Offices. The SSN-WG meets regularly to discuss progress to date and future plans for eliminating the unnecessary collection and use of the SSN. Based on general guidance from the SSN-WG, each Administration and appropriate Staff Office continues to develop its own SSN reduction plan. Upon acceptance by the SSN-WG, these individual plans roll up into a single overall VA plan to eliminate the unnecessary collection and use of the SSN.

In the summer of 2007, VA also became an active member of two interagency groups: the Interagency Best Practices Collaborative and its Subcommittee of High Volume Personally Identifiable Information (PII) Agencies. While the Collaborative disbanded in the spring of 2008, VA continued to contribute actively to the on-going meetings of the Subcommittee, which has been renamed the Interagency Meeting on SSN Elimination and Reduction. This group disbanded in 2010.

III. Phase One – Accomplishments through September 2007

Phase One consists of SSN reduction activities completed before OMB issued Memorandum 07-16: (1) actions to reduce the unnecessary collection, use, and display of Veteran SSNs; (2) actions to reduce the unnecessary collection, use and display of employee SSNs; and (3) actions to protect a Veteran's SSN or an employee's SSN when collection and use is required by law or addresses a compelling business need under the mission of the Department. Examples are highlighted below.

- New Veteran Identification Cards no longer display the Veteran's SSN. Instead, the SSN is contained within a barcode and magnetic strip.
- The Veteran's SSN was removed from health care authorization cards issued for Civilian Health and Medical Program of Department of Veterans Affairs (CHAMPVA), Spina Bifida Health Care Program (SB), and Children of Women Vietnam Veterans Health Care Program.
- The Veteran's SSN was either removed or truncated to the last four digits for most VA correspondence.
- VA's Consolidated Mail Outpatient Pharmacy eliminated the use of SSNs on prescription bottles and mailing labels.
- The employee's SSN was eliminated or truncated on most human resource system related outputs, such as forms, notices and reports.
- The SSN is not used on any employee identification badges/materials.
- VA installed a filter at all VA electronic mail gateways that scans all outgoing e-mails and MS Office attachments (*i.e.*, MS Word, Power Point, Excel) for patterns resembling the SSN. If a pattern is recognized as an SSN, the e-mail transmission does not go through. In addition, the sender is notified that sending SSNs unencrypted violates VA policy, and directs the individual to his or her Information Security Officer or Privacy Officer for resolution.

IV. Phase Two – Policy Development

Reducing SSN collection and use across VA requires new policies and procedures. Because of their importance, these tasks have been reorganized under this new Phase. Over the past four years, VA has developed and implemented several important directives and handbooks that deal with PII:

- VA Directive 6500, Managing Information Security Risk: VA Security Program, was implemented in August 2006, and revised in September 2012. The associated VA Handbook 6500, Risk Management Framework for VA Information Systems – Tier 3: VA Security Program, was implemented in September 2007 and was also revised in September 2012. Together they establish VA policy and responsibilities for incorporating National Institute of Standards and Technology (NIST) Special Publication (SP) 800-37, *Guide for Applying the Risk Management Framework to Federal Information Systems: A Security Life Cycle Approach*; SP 800-39, *Managing*

Information Security Risk: Organization, Mission, and Information System View; and SP-800-53, *Recommended Security Controls for Federal Information Systems and Organizations*, requirements into VA's information system environment to ensure appropriate security for VA information technology assets that store, process, or transmit VA information.

- VA Directive 6600, Responsibility of Employees and Others Supporting VA in Protecting Personally Identifiable Information (PII), was implemented in February 2007. This Directive establishes VA policy toward protecting the personal data of all individuals, including Veterans, dependents and employees. This policy extends the protections stated to all data formats and media, including electronic, paper and oral information
- VA Directive 6609, Mailing of Personally Identifiable and Sensitive Information, was implemented in November 2007. It supplements existing VA mail policy to ensure the protection of the Personally Identifiable Information (PII) of all individuals, including Veterans, dependents and employees.
- VA Directive 6502, VA Enterprise Privacy Program, was updated in May 2008. It reaffirms the Department's policy to protect the privacy of records created or maintained on Veterans, dependents and beneficiaries, employees, and contractors.
- VA Directive 6507, Reducing the Unnecessary Use of the SSN, was implemented in November 2008. It issues policy requirements for the Department to reduce and, where possible, eliminate the collection and use of the Social Security Number (SSN) as a primary identifier for uniquely identifying individuals in VA operations, programs and services. While the SSN should not be used as the primary identifier for Veterans and employees, it will still be used if required by law (such as for security clearances), for validation purposes (such as for Computer Matching), or as a backup identifier if issues arise over new primary identifier(s).
- VA Handbook 6500.5, Incorporating Security and Privacy into the System Development Lifecycle, was implemented in March 2010. This Handbook establishes VA policy, responsibilities and processes for incorporating security and privacy in the system development lifecycle of VA IT assets that store, process or transmit VA information by or on behalf of VA.
- VA Handbook 6500.6, Contract Security, was implemented in March 2010. It outlines the Department's procedures, responsibilities, and processes for implementing security in appropriate contracts and acquisitions. This Handbook applies when VA sensitive information (including the SSN) is stored, generated, transmitted or exchanged by VA, a contractor, subcontractor, or a third party, on or on behalf of these entities regardless of format or whether it resided on a VA system or contractor or subcontractor's electronic information system(s) operating for or on the Department's behalf.
- VHA Directive 2011-030, VHA SSN Reduction Policy, was initially implemented in July 2011, but was rescinded in February 2012 to comply with VA Handbook 6507.1. It will be reissued by the end of 2012. It provides VHA specific guidance on its SSN collections and uses.

- VA Handbook 6507.1, Acceptable Uses of the Social Security Number and VA SSN Review Board, was implemented in September 2011. The Handbook provides specific guidance on acceptable uses of the SSN within the Department. It also calls for the creation of a VA SSN Review Board. Composed of representatives from each Administration and key Staff Offices, the VA SSN Review Board will oversee the current use of SSNs required by law, authorized by law, or when there is a compelling business need. Administrations and Staff Offices will need to submit SSN Privacy Reviews for all collections and uses that they want to continue. The focus of this effort will be on when the SSN is used as a primary identifier. Information and system owners with uses that are determined not to be required by law will be given reasonable opportunity to develop and implement a plan to reduce their SSN usage. The Board will also formalize processes to enable a review of all new collections and uses of the SSN during system/application design and before data collection tools (e.g., forms) are finalized.
- VHA Handbook 1907.01, Health Information Management and Health Records, was revised in September 2012. Now, only the Veteran's full name and last four of the SSN are required for documents used for patient care and that are scanned into the CPRS medical records.

V. Phase Three – Create SSN Inventory

In October, 2007, an initial baseline inventory was created, consisting of over 1,600 items. However, the SSN-WG quickly realized that a more comprehensive inventory was needed. The Veterans Health Administration (VHA) took the lead in developing an SSN “holdings” inventory tool and database. The VHA inventory identified all instances of SSN collections and uses across operational and technical components of VHA, including applications, programs, systems, processes, system displays and outputs, forms, locally-developed software products, commercial-off-the-shelf (COTS) programs, medical devices, web sites, databases and registries. Development took somewhat longer than originally anticipated. The inventory pilot, originally scheduled for the spring of 2009, was conducted in November of 2009 and a second pilot was conducted in December 2009. The survey was rolled out VHA-wide January-March 2010.

The VHA SSN holding survey identified over 25,000 individual instances of the SSN and over 11,500 processes using the SSN². Approximately 96 percent of VHA's SSN uses are for internal processes, with almost two-thirds of the processes using SSN related directly to identifying patients or Veterans. Interestingly, over 93 percent of the responses indicated “unknown” as the response to the authority for SSN usage. In other words, they did not know if the SSN use was required or authorized by law or if it just met a compelling business need until VA implements new Veteran identifier(s). VHA then conducted an SSN exposure assessment on all of these instances and processes, this assessment was completed in early FY 2011. The exposure assessment had two parts: (1) the development of a vulnerability score and a threat score to create a total risk score; and (2) the potential risk associated with making any changes to the SSN use. In December 2010 VHA established a VHA SSN Review Board to review the inventory, examine the exposure assessment results, prioritize them, and send them to

² Many of the respondents also identified employee SSN usage. Since the scope of VHA's reduction/elimination efforts did not include employee SSNs, this information was submitted to the Office of Human Resource Management for their information and action.

the appropriate program offices and/or local facilities to develop plans of action and milestones. Facility and program office feedback was collected through July 2011.

The findings were compiled into a VHA SSN reduction plan, which contains near term and long term plans, and recommendations, for reducing unnecessary SSN usage within VHA. The final version of this plan was presented at the Health Information Governance Director's (HIG) meeting in July 2012.

VA's Office of Information and Technology will be making VHA's SSN inventory tool and SSN database available to the rest of the Department. The original goal was to have a single SSN inventory database for the entire Department by the end of FY 2012. Unfortunately several contractual and coding issues emerged that delayed this effort. The effort should be back on track by the end of 2012. Several modifications will be made to the tool, database, and reports to enable the Administrations and Staff Offices to track progress made toward the reduction or elimination of SSN usage. In the meantime, some offices have already begun to inventory their uses. These include NCA, the Office of Finance, the Office of General Counsel, the Office of the Inspector General, and the Office of the Secretary. Their data will be added to the broader SSN inventory in FY 2013. VBA is in the final stages of planning for its participation in the inventory effort. Also in FY 2013, VHA plans to update its information already contained within the SSN database.

Finally, several offices continue to review their records management processes to determine what information needs to be kept and for how long, and to facilitate timely destruction of records when the retention period is over.

VI. Phase Four – Develop SSN Reduction Action Plans

With general guidance from the VA SSN-WG, each Administration and Staff Office is responsible for its methodology for developing medium-term and long-term compliance with OMB's mandate to eliminate the unnecessary collection and use of the SSN. VA Directive 6507 requires each Administration and Staff Office to inventory their SSN collections and uses, develop an SSN reduction action plan, and submit quarterly updates and implementation plans. Unfortunately, without a complete SSN inventory, most of these plans have been and will continue to be general in nature. Once their inventories are complete, the Administrations and Staff Offices will be able to develop realistic priorities and detailed remediation/action plans. VHA has created a fairly comprehensive list of plans of action and milestones. It is expected that the other Administrations and Staff Offices will develop their detailed plans in the summer of 2013, after they have participated in the SSN inventory survey.

One of the key pieces of information to be collected during the inventory is a determination of whether an SSN collection/use is necessary or not. This is done during the assessment process. All necessary collections and uses not required by law will be reviewed by the VA SSN Review Board, and plans will be developed for their eventual reduction and/or elimination. The information needed to make these determinations is expected to be derived from the SSN inventory. The SSN tool and database will help the Administrations and Staff Offices prioritize, track progress, and report their SSN reduction/elimination activities.

Prioritization of SSN collections and uses to be reduced/eliminated will be based on several criteria, including assessment of risk, overall impact, budgeting, staffing, and availability of other resources. Once prioritized, they will be included in the Administration and Staff Office SSN reduction action plans, which will include short and long-term activities. These plans will then need to be coordinated with OMB Exhibit 300 project funding requests for FY 2015 and beyond.

VII. Phase Five – Feasibility of Using New Unique Identifiers

A. New Veteran Identifiers-Background

As mentioned above, VA often uses the SSN to identify Veterans and their dependents uniquely in order to ensure accurate identification associated with the delivery of VA benefits and services. However, other numbers are also used. For example, in 1998, VHA implemented the Master Patient Index (MPI) that assigns an Integrated Control Number (ICN), a unique identifier for each patient. This **system** identifier allows for a comprehensive view of a patient's electronic healthcare information across different VHA applications and systems. The ICN is a sequentially assigned, non-intelligent number which, in itself, does not provide any identifying information about the patient. It conforms to the ASTM International standard for a universal healthcare identifier.³ The ICN was implemented as a VHA system-to-system identifier, as a VHA enterprise identifier, and in some VHA enterprise systems to search for and select patients/beneficiaries, but it was not implemented across the rest of VA.⁴ This has been changing since 2010 under the Veterans Relationship Management initiative (see Section E below for more information).

In 2006, VA began to explore the feasibility of minimizing the use of the SSN and reducing its visibility within routine VA health care and business processes.⁵ VA found that replacing the present SSN-based identifier would be complex and that broad action would be necessary to accomplish this goal. The replacement of the SSN as an identifier should be approached as a One VA effort: (1) to avoid the possibility of Veterans having multiple identifiers in VA systems (which could have unintended catastrophic consequences), and (2) to recognize the pervasiveness of the SSN look-up and identification functionality in VHA systems and in data sharing initiatives with business partners including DoD, the Social Security Administration, and the Indian Health Service. Changing to a non-SSN based identifier would stop the need for many, but not all, VA systems to capture, store, and display the SSN. Instead, the intent of the change would be to minimize the use of the SSN and to reduce its visibility within routine VA health care and business processes.

In 2007, the Enterprise Identity Management Tiger Team was chartered to develop a single, coherent, department-wide strategy regarding identity and access management for all persons of interest to VA – Veterans, their dependents and families, VA

³ ASTM International, formerly known as the American Society for Testing and Materials (ASTM), is a globally recognized leader in the development and delivery of international voluntary consensus standards.

⁴ The ICN is an identifying trait in the magnetic stripe on all Veteran Identity Cards (VICs) issued since 2004. Most active VA patients use the new VIC, but some VA patients still use the old VIC, and the old VIC does not contain the ICN in its magnetic strip. The new card is not required for treatment, and some Veterans do not want to change their cards.

⁵ VHA developed a white paper that recommended a single replacement identifier, and the One VA Registration and Enrollment Board recommended a single replacement identifier.

employees, volunteers, contractors, business partners, and other affiliates. Final recommendations issued in May 2008 included the following:

- Create an enterprise identity management governance structure. While much of an enterprise level identity and access management solution is technology focused, the primary purpose remains to meet the business needs. A combination of business and IT leadership will best serve the enterprise level strategy.
- Establish IT Identity and Access Management Program Management Office.

An Identity and Access Management Program Office was created in early 2008 to develop new identifiers. Funds were requested for FY 2010 to begin to design and implement a “One VA Identification System” (now called the Master Veteran Index; see section E below for more information).

B. New Veteran Identifiers-New Veteran Identification Cards

When Veterans enroll for VA health care, they receive a Veteran identification Card (VIC).⁶ In 2004, the VIC was redesigned so that it no longer displayed the Veteran’s SSN. Instead, the SSN, as well as the Veteran’s ICN, is contained within a barcode and magnetic stripe. In 2011, VHA began a new VIC redesign effort, which will be implemented in FY 2013. The new card will display the Veteran’s Electronic Data Interchange Personal Identifier (EDIPI)⁷ on the front of the card. The EDIPI⁸ will also be included in the bar code and magnetic stripe, and the SSN will be removed. Meanwhile, VA will continue to replace the old VIC with the new one for Veterans whose VIC has not been replaced to date. VA person look up functionality has been updated to accept input from the old VIC, the new VIC, and the DoD Common Access Card (CAC).

C. New Veteran Identifiers-Virtual Lifetime Electronic Records (VLER)

On April 9, 2009, President Obama, along with VA Secretary Shinseki and Defense Secretary Gates, announced a plan to create a joint Virtual Lifetime Electronic Record (VLER). VLER is neither an Information Technology program nor an information service provider. Instead, VLER is a multi-faceted business and technology initiative that includes a portfolio of health, benefits, personnel, and administrative information sharing capabilities. When VLER is fully implemented, all information needed to quickly and accurately provide services and benefits to our Veterans and Servicemembers will be exchanged electronically and proactively, putting the right information in front of the right people at the right time for them to take action.

⁶ While the VIC is the preferred method for VHA patient identification, VHA will honor other forms for photo or even non-photo identification. To get all but emergent care, however, individuals need to be enrolled into VHA health care program.

⁷ The EDIPI is DoD’s system identifier. It is a 10-digit non-intelligent number issued by the Defense Enrollment Eligibility Reporting System (DEERS). The EDIPI, in and of itself, does not provide any identifying information about the person. The EDIPI is imbedded in all DoD identification cards. As of June 1, 2011, the EDIPI became DoD’s formal identification number. It will replace the printed SSN on all new and renewed DoD identification cards issued after this date. In addition, all new DoD identification cards issued after January 2012 will no longer include the SSN in the bar code.

⁸ Over 16 million Veterans have been assigned as EDIPI. However, DoD has agreed to assign EDIPIs for Veterans who do not yet have one. This would most likely apply to Veterans who served before 1982.

The initial phase of VLER focuses on health record interoperability to enable both Departments and selected privacy healthcare providers to share certain health information over a secure network. Direct access to the Veteran's health records is not involved or authorized; only requested information is exchanged via a virtual architecture. As of March 2012, there were 13 participating VA facilities in the VLER health information exchange. Initial identity matching or patient correlation between the VA and an external partner involves matching various patient traits across the organizations, and one of these traits is the SSN. Once a match is made, then future information flows between VA and the external partner will be based on the system health record identifier for each partner. For VA, this is the ICN. For DoD, this is the EDIPI.

D. New Veteran Identifiers-Integrated Electronic Health Records (iEHR)

Lessons learned from the Captain A. Lovell Federal Health Care Center in North Chicago⁹ have shown that it is very difficult to create effective interoperability between VA's existing electronic health record system (the Veterans Health Information Systems and Technology Architecture, or VistA) and DOD's existing electronic health record system (the Armed Forces Health Longitudinal Technology Application, or AHLTA). Thus, VA and DoD have begun to work collaboratively to create an integrated Electronic Health Record (iEHR) that will eventually replace each Department's legacy electronic health record system. The iEHR will use the EDIPI as the unique patient identifier.¹⁰ The iEHR will rely on shared, common enterprise services and use a common set of services, interface and data standards, data centers, presentation layer, and information interoperability framework. The creation of additional integrated VA-DoD health care facilities will need to rely on the iEHR in order to be successful.

E. New Veteran Identifiers-Creation of Master Veteran Index (MVI)

In June 2010, the Department announced the establishment of a VA Identity Management Policy. Beginning in October 2010, the VA Office of Information and Technology collaborated with the Veterans Relationship Management Initiative to establish a Master Veteran Index (MVI) system and require MVI integration for every VA system. The MVI serves as the authoritative identity service within VA and will do the following:

- Establish unique identities within VA for all persons of interest to VA (e.g., Veterans, beneficiaries, employees, contractors and affiliates)
- Establish a correlation with any external partners sharing information with VA, including the Department of Defense and the Nationwide Health Information Network
- Manage updates to identity traits and share those with integrated systems

⁹ The Lovell Center was established in October 2010 as a five year demonstration project, combining resources and manpower from the Naval Health Clinic Great Lakes and the North Chicago VA Medical Center. It is the first fully integrated VA-DoD health care facility.

¹⁰ The 2011 memorandum of understanding between the Defense Manpower Data Center (DMDC) and VA that governs the exchange, use, and sharing of data between the two Departments states that data sharing "supports the establishment of a unique identifier to be used across the Departments to reduce the need for using the SSN." The EDIPI has been identified as this unique identifier. In addition, on August 1, 2012, DoD issued DoD Instruction 1000.30, Reduction of Social Security Number (SSN) Use within DoD. It states that the DoD identification number (the EDIPI) can be used by entities outside DoD so long as they are "acting on behalf of or in support of the Department of Defense." DoD has stated that use of the EDIPI by VA is in the best interests of both Departments, Veterans, and Servicemembers.

- Maintain the location of all client records (e.g., for Veterans and beneficiaries) known in the VA

Specifically, the MVI will build upon the Master Patient Index (MPI), which currently contains ICNs for more than 18 million Veterans and beneficiaries who have applied for or used VA healthcare. The DoD EDIPI will be added as a trait for all individuals in the MVI. The MVI established a unique index and will maintain the record locations. The goal is to have all VA legacy systems integrated into the MVI by the end of FY 2012.

In FY 2011 and FY 2012 the MVI processed millions of correlations between VA ICNs and DoD EDIPI numbers. This allows increased interoperability with DoD, reduces the need for separate legacy identity services, and improves the processes for matching DoD and VA records. Approximately one million records remain to be correlated before both Departments achieve full synchronization.

In FY 2013, VA systems from NCA will have their records enumerated to the MVI, establishing unique VA identifiers, ICNs, for that Veteran, beneficiary or client. In other words, Veterans, beneficiaries, and clients with NCA records were checked with the MVI to ensure that they are enumerated with an ICN and that their system records are linked to that ICN in the MVI. This will also ensure linkage to that person's EDIPI within the MVI. In FY 2012, the analysis phase for the MVI integration with VBA's Corporate Database systems was completed. Design and implementation are the next steps for FY 2013.

F. New Employee Identifiers

On April 28, 2011, VA implemented a new identification number for most VA employees.¹¹ This number replaces the SSN for internal VA HR services. In addition, VA plans to convert payroll reports to use the new VA employee number where possible. However, the SSN will continue to be the official Federal employee identifier. Thus, the SSN will continue to appear on Office of Personnel and Management employee forms, including the SF 50, Notification of Personnel Action.

The new VA identification number is based on an OPM initiative that was stopped in 2009. Between 2004 and 2008, VA participated in the Multi Agency Executive Strategy Committee (MAESC) to provide feedback to OPM on how to replace the SSN with a nine character alpha-numeric Unique Employee Identification Number (UEID) for all Federal employees. The goal was to have all agencies, including VA, replace their current employee identifier with the UEID. When work on the UEID ended, VA decided to go ahead and implement its own non-SSN employee identification number for internal use.

VIII. Phase Six –Other Accomplishments 2007-2012

In addition to the activities described in Phases Two, Three, Four, and Five, numerous other activities and initiatives addressing the reduction and elimination of the SSN were completed between September 2007 and September 2012. Many of these addressed

¹¹ Only employees who receive human resource services through VA's Personnel and Accounting Integrated Data (PAID) system received the new VA employee identification number. Other employees will need to wait until their human resource service provider issues non-SSN employee identifiers.

broader PII reduction as well. Examples of these accomplishments include the following.

- VA continues to develop and enhance the eBenefits Portal, a joint VA/DoD web portal that provides resources and self-service capabilities to Veterans, Servicemembers, and their families to research, access, and manage their VA and military benefits and personal information. eBenefits uses secure credentials to allow access to personal information and gives users the ability to perform numerous self-service functions. Registering for and using the DS Logon Premium Account allows the Veteran to access his or her personal information with a username and password through the secure web portal, eliminating the need to provide his or her SSN. Currently, there are more than 30 features available.
- In FY 2010, the Veterans Affairs Authentication Federated Infrastructure (VAAFI) was established. VAAFI provides a single identification credential and sign-on process that Veterans and their beneficiaries can use for eBenefits and My HealthVet. In FY 2012, the use of VAAFI services continued to grow exponentially. For example, there were over 1.3 million authentications using VAAFI for the eBenefits portal in June 2012, as compared to 620,000 in August 2011 and 55,000 in September 2010. In addition, there are more than 275,000 unique VAAFI users.
- In FY 2012, VBA replaced the Servicemember's SSN with his or her EDIPI on VBA Initial Outreach letters: Welcome Home letters, six month Welcome Home follow-up letters, and the twenty-four and twelve month letters. These letters are all mailed to active duty members
- In FY 2012, VA is in the process of implementing an enterprise wide identity proofing system that will allow for a standardized business process workflow across VA for proofing Veterans, beneficiaries, and other persons of interest. This identity proofing system will be integrated with and support the Master Veteran Index and will minimize the number of times the Veteran or beneficiary must present identity documentation to VA.
- VA has updated and republished 103 of its Privacy Act System of Records Notices (SORNs).¹² The remaining eight SORNs are in various stages of being republished.
- VA implemented the Remote Enterprise Security Compliance Update Environment (RESCUE). RESCUE enforces VA remote access requirements by ensuring all client computers comply with VA policy prior to remote access being granted. VA employees and contractors with compliant Government Furnished Equipment (GFE) are granted full access to authorized VA resources. VA employees and contractors with non-VA owned Other Equipment (OE) are granted restricted access to authorized resources. The OE access is provided via a virtual desktop, which provides view-only access, and prevents users from downloading and saving VA data on OE.

¹² VA System of Records Notices inform the public about what types of records and information (including the SSN) the Department collects and maintains, who the records are about, and what uses are made of them.

- VA deployed Windows Rights Management Service (RMS) nationwide for internal VA communications. RMS is encryption security for Microsoft Outlook e-mail messages as well as files created with Microsoft applications (Word, Excel, Access, PowerPoint, etc.) RMS is persistent protection that stays with the message or attachment even after it is opened. RMS works in conjunction with Public Key Infrastructure (PKI).
- VA developed an SSN Awareness campaign that kicked off in 2008. The goals of this campaign are threefold: (1) to reach VA employees and let them know about the SSN reduction initiative; (2) to raise the awareness of the importance of protecting personally identifiable information used in the course of official duties, and (3) to let Veterans know that VA is committed to protecting their personal information, including their SSN. SSN awareness is now incorporated in all privacy and security awareness activities for employees. In addition, a key component of this awareness campaign is to provide Veterans, Veteran Service Organizations, and the public information on VA's SSN Reduction Plan via the Internet at www.privacy.va.gov.
- VHA developed and implemented an extensive communications campaign to brief facility directors and employees about VA and VHA SSN reduction efforts. This campaign includes the publication of articles in internal newsletters, an intranet web page that serves as a resource for information on VHA SSN reduction and elimination events, and detailed briefings to VHA leadership. SSN awareness is now included in new employee orientation at numerous VHA facilities around the nation. Also, facilities identify possible areas for SSN reduction and elimination during weekly Environment of Care rounds.
- Medical Records Review Committees have been tasked with reviewing and, where possible, eliminating the use of SSN on forms and templates for either initial use or revision.
- In FY 2010 and FY 2011, numerous VHA sites reviewed their local forms to determine if they are still needed or if they need to contain the SSN. The full SSN requirement on several forms was revised to either eliminate the SSN or require only the last four of the SSN. In FY 2011, nine local VHA programs and menus using the SSN were eliminated.
- Several VHA sites are continuing to locate and inventory records and are ensuring that record control schedules are being followed (*i.e.*, records that no longer need to be retained are being disposed of appropriately).
- In November 2009, VHA implemented a patch to VistA Outpatient Pharmacy so that the SSN no longer appears on VistA printed prescription labels and forms. VistA printed prescription labels now match the Consolidated Mail Out Pharmacy (CMOP) printed prescription labels. In addition, the ability to lookup by prescription number or wand a barcode with the prescription was added to the patient look up prompt on several VistA options.
- VBA established its Benefits Portfolio Governance Framework. Two governance bodies within this framework – the Benefits Portfolio Executive Board and the Benefits Portfolio Steering Committee – authorized the establishment of the Data Sharing Agreement/Governance Integrated Project Team (IPT). The Data Sharing

Agreement /Governance IPT is tasked with improving and streamlining VBA's data access, and documenting formal data sharing agreements ensuring protection of Veterans' personal identifiable information (PII). Consistent standards for data security and privacy will be applied to all data access requests, prior to releasing to internal/external parties. Furthermore, all requests will be subject to business review and approval prior to implementation. This business review will include an assessment of proposed uses for requested SSNs and the exploration of alternative solutions that will satisfy business needs.

- VBA altered its proposed redesign of a system-to-system data exchange that included the Veteran Examination Request Information System (VERIS) after review determined that SSN alternatives could be used. The original request specified utilizing Veteran SSNs in the data stream that would be sent to a third-party vendor.
- In FY2012, VBA began to deploy its new claims processing system. The Veterans Benefits Management System (VBMS) allows VBA staff to process claims without paper claims files. This will result in reduced proliferation of and greater control over SSNs stored on paper.
- NCA reviewed and reevaluated all of its forms requiring the SSN. VBA eliminated 16 forms because they were either redundant or not longer in use, and all contained the SSN. The Office of the Inspector General (OIG) reviewed all of its forms that included the SSN and eliminated unnecessary collections. Other offices are also reviewing their forms.
- The OIG issued and implemented its Protection of PII in Electronic Data Sets Directive. Also, many OIG operations have become paperless, which has greatly reduced the volume of paper records in day-to-day OIG work. These include OIG Hotline operations and audit working papers. In addition, OIG is planning on participating in a secure File Transfer Protocol servicer initiative. This will provide for the ability to securely transmit sensitive information to entities outside of VA, such as law enforcement agencies, required to conduct business with OIG.
- In FY 2010, the Office of General Counsel (OGC) implemented regular records scheduling and destruction for electronic records, which reduced SSN usage by 20 percent. In FY2012 OGC renewed its effort to enforce on-going compliance with electronic records retirement, which lags behind the retirement of paper files. Between May and September 2012, the number of cases containing SSNs decreased by almost four percent.
- The Office of Policy and Planning (OPP) developed a FIPS 140-2 compliant encryption algorithm tool to "mask" the SSN and other forms of PII data in the course of their data-related activities. All internal and external requests for record-level PII data are vetted through a data review board. In FY 2011, OPP kicked off an initiative to develop a single integrated dataset of Veteran demographic and socioeconomic data to support complex statistical, trend, and longitudinal analyses. This single repository will drastically reduce, and in some cases eliminate, the need to access multiple datasets for SSNs and other frequently used variables, lessening the possibility of a data breach. This is part of on-going enhancements to the U.S. Veterans Eligibility Trends and Statistics (USVETS) to develop additional on-line

analytical processing reporting capabilities that rely on aggregated data sets rather than record-level data containing SSNs.

- The Office of the Secretary has conducted an assessment of its current uses of the SSN and implemented a plan that improved and enhanced protection and collections of all documents that contain the SSN.
- The Financial Services Center (FSC) within the Office of Finance created an internal SSN reduction task force to conduct monthly reviews of those systems and applications relating to its five business processes – the Credit Card System, Document Management, Health Claims Processing, Permanent Change of Station (PCS) system, and the LAN/Telephone systems. In FY 2011, the FSC completed its review and inventory of all of its business processes and three of its five major systems using the SSN. The FSC found that in the PCS system, the SSN could be replaced with the last name and travel authority number to identify users in the Government Home Buyout Program. However, the SSN must still be maintained in the system for tax purposes. The processes put in place to support the PCS program changes resulted in the reduction of SSN use by 33 percent. In FY2012, the FSC completed its review of the Health Claim Processing System and began its review of approximately 117 major and minor applications installed or in use within the FSC and on the LAN system. Also in FY 2012, the FSC began development on three new applications. Two applications require the use of the SSN. The third application, however, does not. The Payroll Support Services' Customer Relationship Management system will allow payroll customers to use their VA system login information in place of their SSN to identify themselves to the FSC help desk staff.
- In FY 2010, the VA Privacy Service completed its inventory of data elements on all VA OMB approved forms that collect PII, including the SSN. This information was compared to the information identified in SORN associated with each form. In FY 2011, the Privacy Service normalized and validated the data in the inventory of data elements on VA approved forms and SORNs. Beginning in FY 2012, VA Privacy Impact Assessments (PIAs) are now reviewed against this inventory to verify data elements in the PIAs for VA's major and minor systems and applications.¹³
- In May 2011, the VA Privacy Office completed a reasonably comprehensive list of SSN uses and authorities for the Administrations and Staff Offices. The list identified numerous collections and uses of the SSN that are required by law or authorized by law.
- In FY 2011, all VHA facilities began to identify and review their use of hard copy logbooks, and several were converted to electronic format with limited access. In FY 2012, this effort continued. Many facilities and services have eliminated hard copy logbooks and several have revised the data collected within them. A VHA Directive on Logbooks has been drafted and placed into concurrence. It addresses logbook usage and protection as well as processes for reducing logbooks within VHA facilities.

¹³ PIAs are required by Section 208 of the E-Government Act of 2002. In FY 2009, VA began a staggered process of conducting a complete PIA of each VA system once every three years. In addition, VA began to review minor applications. In FY 2012, there were almost 800 major applications and 8000 minor applications.

- In FY 2011, the SSN was eliminated from the Explanation of Benefits denial statements. In addition, VHA's new Fee basis Claims System software limited the necessity of printing information containing SSNs.
- Some sites are beginning to use the new employee identification number instead of the SSN. For example, in VISN 11, the Human Resources Management System is now using the new identification number in at least one of its applications.
- VHA has implemented new precautions and safeguards in its Community Based Outpatient Clinics regarding auditory privacy when discussing Veteran's personal information in public areas.
- VHA is increasing the use of Secure Messaging through My HealthVet, which enables Veterans to communicate with their provider through a web-based portal.
- The patient check-in at some VHA facilities now uses approved demographic identifiers other than the SSN to verify patient identity. Other sites are requiring that the Veteran Identification Card (VIC) be scanned at check in in lieu of asking Veterans to state their last name and last four of their SSN. Still other sites continue to encourage Veterans who have old VIC cards (pre-2005) to replace them with the new card, which does not display the SSN.
- In FY 2012, Congress tasked VHA to identify issues and make recommendations regarding the removal of human readable display of the SSN from patient identification bands. A work group was chartered and an issue brief was completed.
- In FY 2012, laundry/patient clothing bags used within the medical centers that contain the SSN were removed.
- VHA eliminated the SSN display on accounting of disclosures reports contained in its release of information (DSS ROI Manager) software.

IX. Phase Seven – Other Actions to be Completed in FY 2013 and Beyond

In addition to the activities described in Phases Two, Three, Four, and Five, several activities and initiatives are planned for FY 2013 and beyond. Examples of these include the following:

- VHA will continue to assess alternatives to the human readable SSN display on the patient wrist band. One possibility, already implemented in the San Diego VA Healthcare System, is to replace the SSN with a photo of the patient.
- VHA will work to rescind unused forms that require the SSN. VHA will also re-evaluate the need for the SSN on all of its remaining forms. All local forms scanned into Computerized Patient Record System (CPRS) or printed for the paper health records that currently contain the full SSN will be modified so that they only require the last four of the SSN. National forms, and local forms not scanned into CPRS, will be reviewed to determine if the full SSN can be reduced to the last four of the SSN.

- In FY 2012, VBA reviewed 310 VA forms it uses and found numerous redundant collections of SSNs within and across forms. In FY 2013, VBA will develop a comprehensive model and mapping of its use of the SSN by following a “middle out” approach. This approach will focus on identifying processes and instances of SSN usage in VBA forms and matching the instances to the originating processes.
- VBA plans to upload the VA Form 21-526EZ to the eBenefits Portal. This will enable Veterans to apply for disability compensation benefits and upload supporting documentation without having to mail these documents to VBA.
- The vehicle for accomplishing the MVI is being developed under the Veterans Relationship Management initiative by the Identity Access Management (IAM) Integrated Project Team (IPT). In FY 2013, the IPT will continue to develop the business requirements, acquisition packages, and the project plan for the solution.
 - The Financial Services Center will complete its review of its LAN System.
 - VA will continue to work on republishing its remaining SORNs.
 - The results of the VA Privacy Service’s data elements inventory (and the VHA and non-VHA SSN holdings inventory) will encourage the Administrations and Staff Offices to consolidate and/or remove SSNs from as many data collection forms and websites as feasible (with the goal of collecting once and using many times). This will begin in FY 2013. In addition, these results will be used to encourage the Administrations and Staff Offices to consolidate and/or remove the SSN from as many business processes as feasible.
 - The VA Privacy Service will develop the standard operating procedures for the VA SSN Review Board.¹⁴

X. Phase Eight – Briefings, Oversight, and Monitoring

The key to the success of any effort is to monitor and report progress to an oversight body. VA’s Chief Information Officer, who is also the VA’s Senior Agency Official for Privacy, designated the Office of Privacy and Records Management (OPRM) the responsible office for oversight of the VA plan and is the lead office on the VA SSN-WG. The Administrations and Staff Offices provide regular updates to OPRM, and OPRM is responsible for providing updates to VA senior executives on the progress of the plan. OPRM is also responsible for answering the privacy questions in VA’s quarterly and annual FISMA reports, and for preparing the annual Department-wide SSN Reduction Plan.

XI. Issues

There are several major challenges facing VA regarding the elimination of the unnecessary collection and use of the SSN.

¹⁴ This cannot begin until the contractual and coding issues with the SSN database are resolved.

- Resources must be balanced among high priority projects. There are many system changes needed before VA can implement new unique identifiers that will replace the SSN as the primary identifier. For example, the extension of the MVI across VA and the subsequent correlation of VBA records will take at least one more year, and it will have to be balanced against other changes that may need to be made to VA systems during this time.
- Culture change among employees is required. Long time VA employees are accustomed to using the SSN to authenticate Veterans, as well as VA employees, contractors, and volunteers. VA will need to implement education and retraining programs for employees to break the habit of using the SSN as the primary way to verify identity. This has already begun, but it will take time to instill in the workforce and processes across the Department. After the MVI correlation is complete, it will still take several years to change system look up tables to search for Veterans and beneficiaries with the ICN or EDIPI instead of the SSN.
- Culture change is necessary for Veterans as well. For example, Veterans will need to get a new identification card, and the redesigned VIC will display the EDIPI, a number which will be unfamiliar to most Veterans. Resistance to change will need to be balanced against the continued threat to identity theft if the old card is lost or stolen.

XII. Summary

VA has taken many steps to eliminate the use of SSNs where they are not mission-critical. However, there are instances where the collection and use of the SSN are, and will continue to be, required by regulation or legislation, or to address a compelling business need under the mission of the Department. In these instances protection of the SSN, and all personally identifiable information, is critical. As part of its effort to protect the SSN, VA has been working diligently to develop tools, monitoring capabilities, a governance structure, and policies and guidance to ensure the protection of the SSN. These steps will help to maintain a culture where appropriate uses of the SSN are balanced with data quality and the need for confidential, realistic, and flexible approaches that enhance privacy and security for Veterans, beneficiaries, and our employees.