PRIVACY IMPACT ASSESSMENT (PIA)

For the

88 MDG Medical Treatment Facility - HOST Enclave
USAF

SECTION 1: IS A PIA REQUIRED?

a. Will this Department of Defense (DoD) information system or electronic collection of information (referred to as an "electronic collection" for the purpose of this form) collect, maintain, use, and/or disseminate PII about members of the public, Federal personnel, contractors or foreign nationals employed at U.S. military facilities internationally? Choose one option from the choices below. (Choose (3) for foreign nationals).

☐   (1) Yes, from members of the general public.

☐   (2) Yes, from Federal personnel* and/or Federal contractors.

☒   (3) Yes, from both members of the general public and Federal personnel and/or Federal contractors.

☐   (4) No

 * "Federal personnel" are referred to in the DoD IT Portfolio Repository (DITPR) as "Federal employees."

b. **If "No," ensure that DITPR or the authoritative database that updates DITPR is annotated for the reason(s) why a PIA is not required. If the DoD information system or electronic collection is not in DITPR, ensure that the reason(s) are recorded in appropriate documentation.**

c. If "Yes," then a PIA is required. Proceed to Section 2.

SECTION 2: PIA SUMMARY INFORMATION

a. Why is this PIA being created or updated? Choose one:

☐ **New DoD Information System**   ☐ **New Electronic Collection**

☒ **Existing DoD Information System**   ☐ **Existing Electronic Collection**

☐ **Significantly Modified DoD Information System**

b. Is this DoD information system registered in the DITPR or the DoD Secret Internet Protocol Router Network (SIPRNET) IT Registry?

☐ **Yes, DITPR**   Enter DITPR System Identification Number

☐ **Yes, SIPRNET**   Enter SIPRNET Identification Number

☒ **No**

c. Does this DoD information system have an IT investment Unique Project Identifier (UPI), required by section 53 of Office of Management and Budget (OMB) Circular A-11?

☐ **Yes**   ☒ **No**

If "Yes," enter UPI

If unsure, consult the Component IT Budget Point of Contact to obtain the UPI.

d. Does this DoD information system or electronic collection require a Privacy Act System of Records Notice (SORN)?

A Privacy Act SORN is required if the information system or electronic collection contains information about U.S. citizens or lawful permanent U.S. residents that is <u>retrieved</u> by name or other unique identifier. PIA and Privacy Act SORN information should be consistent.

☒ **Yes**   ☐ **No**

If "Yes," enter Privacy Act SORN Identifier   EDHA07

DoD Component-assigned designator, not the Federal Register number.
Consult the Component Privacy Office for additional information or
access DoD Privacy Act SORNs at: http://www.defenselink.mil/privacy/notices/

or

Date of submission for approval to Defense Privacy Office
Consult the Component Privacy Office for this date.   18 Nov 2013

e. Does this DoD information system or electronic collection have an OMB Control Number?
Contact the Component Information Management Control Officer or DoD Clearance Officer for this information.

This number indicates OMB approval to collect data from 10 or more members of the public in a 12-month period regardless of form or format.

☐   **Yes**

Enter OMB Control Number [   ]

Enter Expiration Date [   ]

☒   **No**

f. Authority to collect information. A Federal law, Executive Order of the President (EO), or DoD requirement must authorize the collection and maintenance of a system of records.

(1) If this system has a Privacy Act SORN, the authorities in this PIA and the existing Privacy Act SORN should be the same.

(2) Cite the authority for this DoD information system or electronic collection to collect, use, maintain and/or disseminate PII. (If multiple authorities are cited, provide all that apply.)

(a) Whenever possible, cite the specific provisions of the statute and/or EO that authorizes the operation of the system and the collection of PII.

(b) If a specific statute or EO does not exist, determine if an indirect statutory authority can be cited. An indirect authority may be cited if the authority requires the operation or administration of a program, the execution of which will require the collection and maintenance of a system of records.

(c) DoD Components can use their general statutory grants of authority ("internal housekeeping") as the primary authority. The requirement, directive, or instruction implementing the statute within the DoD Component should be identified.

The authorities for this PIA are the same as in EDHA07 Military Health System SORN.

5 U.S.C. 301, Department Regulation; 10 U.S.C., Chapter 55; Pub.L. 104-91, Health Insurance Portability and Accountability Act of 1996; DoD 6025.18-R, DoD Health Information Privacy Regulation; 10 U.S.C. 1071-1085, Medical and Dental Care; 42 U.S.C. Chapter 117, Sections 11131-11152, Reporting of Information; 10 U.S.C. 1097a and 1097b, TRICARE Prime and TRICARE Program; 10 U.S.C. 1079, Contracts for Medical Care for Spouses and Children; 10 U.S.C. 1079a, Civilian Health and Medical Program of the Uniformed Services (CHAMPUS); 10 U.S.C. 1086, Contracts for Health Benefits for Certain Members, Former Members, and Their Dependents; DoD Instruction 6015.23, Delivery of Healthcare at Military Treatment Facilities (MTFs); DoD 6010.8-R, CHAMPUS; 10 U.S.C. 1095, Collection from Third Party Payers Act; and E.O. 9397 (SSN).

g. Summary of DoD information system or electronic collection. Answers to these questions should be consistent with security guidelines for release of information to the public.

(1) Describe the purpose of this DoD information system or electronic collection and briefly describe the types of personal information about individuals collected in the system.

The Medical Treatment Facility (MTF) Enclave will provide core services to the medical center's enterprise to include collections of storage arrays, networking infrastructure, backup and recovery devices, virtual server infrastructure, physical servers, file and print servers, and COTS based server applications that manage MTF business processes and operations. The MTF Enclave will adopt and inherit higher level security controls, when and where possible, from the Wright Patterson base enclave. The MTF Enclave will be an enclave within the Wright Patterson enclave. The rationale for the clear division of boundary scope from the parent base enclave will be to realize the unique and demanding levels of service and regulatory compliances that are uniquely imposed on medical operations and the need for specialized on-site staff to address these demands with clear lines of demarcation between the two.

(2) Briefly describe the privacy risks associated with the PII collected and how these risks are addressed to safeguard privacy.

The privacy risks associated with the personally identifiable information (PII)/protected health information (PHI) collected are due to sharing, using, and viewing PII/PHI. However, all applicable security and privacy processes and regulations have been defined and implemented, reducing risks and safeguarding privacy.

The MTFs computer facilities housing the system have physical, technical, and administrative controls created in accordance with local policies such as office door locks, monitoring by facility staff, and application timeouts. Safeguards include techniques deployed on the system itself, including password protection, and where applicable, encryption techniques. Software installation includes security patch installation current at the time of that software release.

h. With whom will the PII be shared through data exchange, both within your DoD Component and outside your Component (e.g., other DoD Components, Federal Agencies)? Indicate all that apply.

☒ **Within the DoD Component.**

Specify. System to system data exchanges between Air Force systems.

☒ **Other DoD Components.**

Specify. Army, Navy and Marines

☒ **Other Federal Agencies.**

Specify. VA

☐ **State and Local Agencies.**

Specify.

☐ **Contractor** (Enter name and describe the language in the contract that safeguards PII.)

Specify.

☐ **Other** (e.g., commercial providers, colleges).

Specify.

i. Do individuals have the opportunity to object to the collection of their PII?

☒ **Yes** ☐ **No**

(1) If "Yes," describe method by which individuals can object to the collection of PII.

Under the Privacy Act the individual has the opportunity to object to the collection of their PII. MTF Admission processes contain patient admission forms that include detailed PII/PHI discussion. By agreeing to an appointment or treatment/procedure, the individual is providing implied consent. Under the HIPAA Privacy Rule certain information is required in the course of treating the patient, in order to identify the patient and document treatment. The HIPAA privacy rules do not require that a patient have an opportunity to object to or consent to the use of their information for treatment, payment, or health care operations. Treatment is not subject to the minimum necessary rules. Conversely, the HIPAA Notice of Privacy Practices, which is available to all patients and posted in the MTF, describes the uses and disclosures of protected health information and how, where applicable, a patient can request a restriction to a use or disclosure. However, the covered entity is not required to agree to the restriction, except in limited circumstances.

(2) If "No," state the reason why individuals cannot object.

j. Do individuals have the opportunity to consent to the specific uses of their PII?

☒ **Yes** ☐ **No**

(1) If "Yes," describe the method by which individuals can give or withhold their consent.

Under the Privacy Act the individual has the opportunity to consent to the collection of their PII. MTF Admission processes contain patient admission forms that include detailed PII/PHI discussion. By agreeing to an appointment or treatment/procedure, the individual is providing implied consent. The HIPAA privacy rules do not require that a patient have an opportunity to object to or consent to the use of their information for treatment, payment, or health care operations. Treatment is not subject to the minimum necessary rules. Conversely, the HIPAA Notice of Privacy Practices, which is available to all patients and posted in the MTF, describes the uses and disclosures of protected health information and how, where applicable, a patient can request a restriction to a use or disclosure. However, the covered entity is not required to agree to the restriction, except in limited circumstances.

(2) If "No," state the reason why individuals cannot give or withhold their consent.

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k. What information is provided to an individual when asked to provide PII data? Indicate all that apply.

☒ **Privacy Act Statement**   ☒ **Privacy Advisory**

☐ **Other**   ☐ **None**

Describe each applicable format.

A Privacy Act System of Records Notice was published in the Federal Register with a 30 day public comment period. Forms that collect personal data will contain a Privacy Act Statement, as required by 5 USC 552a(e)(3), allowing the individual to make an informed decision about providing the data or participating in the program. Individuals may raise an objection with the Air Force Privacy Act Office during the comment period, during data collection, or at any time after the program is launched. If no objections are received, consent is presumed.

NOTE:

Sections 1 and 2 above are to be posted to the Component's Web site. Posting of these Sections indicates that the PIA has been reviewed to ensure that appropriate safeguards are in place to protect privacy.

A Component may restrict the publication of Sections 1 and/or 2 if they contain information that would reveal sensitive information or raise security concerns.