PRIVACY IMPACT ASSESSMENT (PIA)

For the

Data Quality (DQ) Program

Department of Navy - TMA Defense Health Program Funded System

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
- No

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

- Yes, DITPR
- Yes, SIPRNET
- No

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

No

If “Yes,” enter UPI

- Yes
- No

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

No

If “Yes,” enter Privacy Act SORN Identifier

- Yes
- No

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/

No

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


Title 10, Chapter 55, U.S.C., Section 1071 through Section 1106.

5 USC, 552a, The Privacy Act of 1974
Office of Management and Budget (OMB) M-06-16, Protection of Sensitive Agency Information, June 23, 2006
OMB Circular Number A-130, Management of Federal Info Resources Appendix III, Nov 28, 2002
Military Health Systems Information Assurance Implementation Plan
Health Affairs Policy 06-010, Health Affairs HIPPAA (Health Insurance Portability and Accountability Act) Security Compliance Policy, June 27, 2006
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 DQ system is a centrally managed Navy Medicine enterprise-wide Application Architecture comprised of a suite of applications that provides Bureau of Medicine and Surgery (BUMED), Naval Medical Support Command (NMSC), Navy Medicine Regional Headquarters, and Military Treatment Facilities (MTFs) with tools for reporting, monitoring, and improving health-care data quality. DQ receives data on a daily and monthly basis from over 40 Composite Health Care System (CHCS) host sites that gather, store, and transmit computerized information about the type of care, and severity of illness for each patient seen within a Navy MTF, and/or within the TRICARE Network.

Data for both inpatient and outpatient care are transmitted to Navy Medicine Information Systems Support Activity (NAVMISSA) from each host CHCS site, via the Standard Inpatient Data Record (SIDR), the Standard Ambulatory Data Record (SADR) and the Appointment File (APPT). SIDR/SADR files are used to provide a means to measure resource intensity for delivering care, and a means to resource MTFs based on the care being provided. APPT files are used to calculate various DQ Management Control Program metrics used to determine the accuracy and timeliness of workload reporting for each MTF and their supported sites.

SIDR/SADR/APPT standard file formats were designed to support medical commands from each military service. Each file format contains PII and non-PII data. For the Navy DQ program, only non-PII data is extracted for use (PII data is never used). After the extraction, the files are then moved to a repository where they are maintained for historical purposes if needed.

Personal information included in these files include the individual's name, social security number, family data, disability data, military status, medical history, and other demographics.

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

All DQ systems are vulnerable to "insider threats." DQ managers are vigilant to this threat by limiting system access to those individuals who have a defined need, and meet the criteria to access the information. These individuals have gone through DoD background and employment investigations.

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.

- [x] **Within the DoD Component.**
  
Specify. Only SPAWAR New Orleans and DQ system administrators and Program Management authorized personnel have access to this data.

- [ ] **Other DoD Components.**
  
Specify.

- [ ] **Other Federal Agencies.**
Specify.

☐ **State and Local Agencies.**

Specify.

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

Specify. NAVMISSA and designated contractor (The Chief Information Group (TCIG) and SPAWAR New Orleans) support personnel have access to DQ data files and database.

Contract Verbiage: the contractor may require access to information which may be sensitive and is to be handled as “For Official Use Only”, and which may be covered by the privacy act and the Health Insurance Portability and Accountability Act (HIPAA). The contractor shall ensure that staff assigned to this task understands the meaning of these categories of data, have the appropriate HIPAA training and handle them accordingly.

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

Specify.

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**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.

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

DQ does not collect PII directly from the patient; all data files are created by the MTF at the CHCS host site and then transmitted to SPAWAR New Orleans. This data exchange is considered to be part of routine health care operations.

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

DQ does not collect PII directly from the patient; all data files are created by the MTF at the CHCS host site and then transmitted to SPAWAR New Orleans. This data exchange is considered to be part of routine health care operations.

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

- [ ] Privacy Act Statement
- [ ] Privacy Advisory
- [ ] Other
- [x] None

Describe each applicable format.
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.