



Privacy Impact Assessment for the VA IT System called:

TriZetto Facets – ClaimsXM - E (ECM CXM- E)

Veterans Health Administration (VHA)

Office of Integrated Veteran Care (IVC)

eMASS ID # 1330

Date PIA submitted for review:

11/16/2023

System Contacts:

System Contacts

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Abstract

The abstract provides the simplest explanation for “what does the system do?”.

TriZetto Facets -ClaimsXM, is a managed service, contracted with Signature Choice Limited Liability Company (LLC) and it is hosted at Microsoft Azure Commercial Cloud-High. Signature Choice LLC subcontracts with Signature Performance Incorporated (Inc.), Principle Choice Solutions and Signature Performance Healthcare Administrative Services LLC. The service receives community medical, dental and pharmacy claims, applies industry standard and VA specific business rules and policy to determine what, if any, payment is due to the provider. The system ingests standard medical claim data, maintains beneficiary eligibility and utilization data, and displays in or transports status and payment data to user-accessible portals and Veteran Affairs (VA) data systems."

Overview

The overview is the most important section of the PIA. A thorough and clear overview gives the reader the appropriate context to understand the responses in the PIA. The overview should contain the following elements:

1 General Description

A. What is the IT system name and the name of the program office that owns the IT system?

The TriZetto Facets – ClaimsXM - E is a contracted system for the Veteran Health Administration (VHA) Office of Integrated Veteran Care (IVC). The TriZetto Facets – ClaimsXM - E is a Signature Performance contractor-owned system under a managed service contract to provide claims adjudication for VHA Office of Integrated Veteran Care (IVC). This system does not fall under the traditional regions (1-5). The VHA Office of Integrated Veteran Care (IVC) transmits specified files via a Secure File Transfer Protocol (SFTP) server. The TriZetto Facets – ClaimsXM - E system then retrieves the files from the SFTP server for processing within the system. Files are returned to the VHA Office of Integrated Veteran Care (IVC) by pushing files to the SFTP server and the VHA Office of Integrated Veteran Care (IVC) retrieves those files. Additionally, TriZetto Facets – ClaimsXM - E receives healthcare claims from VA’s Electronic Data Interchange (EDI) gateway for care provided to VA health care beneficiaries (Civilian Health and Medical Program of the Department of Veteran’s Affairs (CHAMPVA), Spina Bifida (SB), Children of Women Vietnam Veterans (CWVV)). TriZetto Facets – ClaimsXM - E transfers payment instructions to VA’s financial management systems using file transfer. The components of the information system (servers) collecting/storing PII are Microsoft Azure Government Cloud Service – VM dynamic and AWS Microsoft Azure Government Cloud Service. The information being shared is for the Claims Processing of Veteran Family Member Program claims. The data and information follow health care industry standards for the exchange of Health Insurance Portability and Accountability Act (HIPAA) and other Federal Regulatory information for the health care industry.

B. What is the business purpose of the program, IT system, or technology and how it relates to the program office and agency mission?

The VHA Office of Integrated Veteran Care (IVC) supports critical services provided to Veterans and their family members by community health care providers. These services, in some cases, augment VA health care services and in others, are the sole source of health care services for the respective beneficiary population. Programs include Veteran community-based health care, Veteran Community Care Networks, Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA), Spina Bifida, Camp Lejeune Family Member Program, Children of Women Vietnam Veterans, and Foreign Medical Program. Accurate and timely health care claims processing services across these programs is critical to meet VA's Strategic Priorities, Veteran and family member service levels and assure appropriate use of government funds. VA seeks to have Signature Choice (prime contractor) [through its subcontractor, Signature Performance, Inc.] provide claims processing services for the CHAMPVA Program. Through use of these services, the government will improve overall process cycle times as well as accuracy with auto-adjudication of claims based on government provided business rules, regulations and policies.

C. *Who is the owner or control of the IT system or project?*

Signature Performance owns and operates Trizetto ClaimsXM – E.

2. *Information Collection and Sharing*

D. *What is the expected number of individuals whose information is stored in the system and a brief description of the typical client or affected individual?*

Expected number of individual records is in between 500,000- 600,000. The typical client are family members of eligible veterans receiving Veteran Affairs (VA) benefits. This system falls under VA\EPMO\Cloud.

E. *What is a general description of the information in the IT system and the purpose for collecting this information?*

Veteran and Beneficiary claim data elements are used to positively identify the beneficiary and associate claims to a beneficiary.

F. *What information sharing conducted by the IT system? A general description of the modules and subsystems, where relevant, and their functions.*

AWS Government Cloud Service / VM Dynamic - Tool supporting claims processing.
AWS Government Cloud Service – S3 Bucket – Tool supporting claims processing.
TriZetto Facets Insights – TriZetto Facets Database – TriZetto Facets is the claims processing database tool supporting claims processing adjudication services.

G. *Is the system is operated in more than one site, and if so, a description of how use of the system and PII is maintained consistently in all sites and if the same controls are used across sites?*

ClaimsXM employs Azure Site Recovery, which is a built-in feature in Azure. All the machines are set to replicate to another region. The ClaimsXM primary region is Arizona (AZ), and the secondary region is Texas (TX). The primary machines have disk replication in place. The ClaimsXM system is configured to automatically fall over to the alternate site. Alternate storage sites are established by way of Azure's multiple geographic regions and across multiple availability zones within each region. Each availability zone is designed as an independent failure zone. In the case of failure, automated processes move customer data traffic away from the affected area. The

alternate storage sites are operated by Azure therefore, they have the same information security safeguards as that of the primary site.

3. Legal Authority and SORN

H. What is the citation of the legal authority to operate the IT system?

Legal Authorities

Title 5, U.S. Code § 55 - PAY ADMINISTRATION

Title 5 U.S. Code § 301 - Departmental regulations

Title 5 U.S. Code § 306 - Agency Strategic Plans

Title 26 U.S. Code § 61 - Gross income defined

Title 28, U.S. Code - JUDICIARY AND JUDICIAL PROCEDURE

Title 31 U.S. Code § 3101 - Public debt limit

Title 31 U.S. Code § 3102. - Bonds

Title 31, U.S. Code § 37 - Claims

Title 38 U.S. Code § Section 31 - Foreign Medical Program

Title 38, United States Code, chapter 53 - . SPECIAL PROVISIONS RELATING TO BENEFITS

Title 38 U.S. Code § 109 - Benefits for discharged members of allied forces

Title 38 U.S. Code § 111 - Payments or allowances for beneficiary travel

Title 38 U.S. Code § 304 - Deputy Secretary of Veterans Affairs

Title 38 U.S. Code § 501 - VETERANS' BENEFITS Rules and regulations , 501(a), 501(b),

Title 38 U.S. Code § 527 - Evaluation and Data Collection

Title 38 U.S. Code § 1151 - Benefits for persons disabled by treatment or vocational rehabilitation

Title 38 U.S. Code § 1703 - Contracts for hospital care and medical services in non-Department facilities

Title 38 U.S. Code § 1705 - Management of health care: patient enrollment system

Title 38 U.S. Code § 1710 - Eligibility for hospital, nursing home, and domiciliary care

Title 38 U.S. Code § 1712 - Dental care; drugs and medicines for certain disabled veterans; vaccines,

Title 38 U.S. Code § 1717 - Home health services; invalid lifts and other devices,

Title 38 U.S. Code § 1720 - Transfers for nursing home care; adult day health care

Title 38 U.S. Code § 1720G - Assistance and support services for caregivers

Title 38 U.S.C. § 1721 - POWER TO MAKE RULES AND REGULATIONS

Title 38 U.S.C. § 1722 - Determination of inability to defray necessary expenses; income thresholds

Title 38 U.S. Code § 1724 - Hospital care, medical services, and nursing home care abroad

Title 38 U.S. Code § 1725 - Reimbursement for emergency treatment

Title 38 U.S.C. § 1727 - PERSONS ELIGIBLE UNDER PRIOR LAW

Title 38 U.S. Code § 1728 - Reimbursement of certain medical expenses

Title 38 U.S.C. 1741-1743. Per Diem Grant- State Home

Title 38 U.S. Code § 1781 - Medical care for survivors and dependents of certain veterans,

Title 38 U.S. Code § 1786 - Care for newborn children of women veterans receiving maternity care

Title 38 U.S. Code § 1787 - Health care of family members of veterans stationed at Camp Lejeune, North Carolina,
Title 38 U.S. Code § 1802 - CHILDREN OF VIETNAM VETERANS BORN WITH SPINA BIFIDA Sec. 1802 - Spina bifida conditions covered
Title 38 U.S. Code § Sec. 1803 - CHILDREN OF VIETNAM VETERANS BORN WITH SPINA BIFIDA -Healthcare
Title 38 U.S. Code 1812 Children of Women Vietnam Veterans Born with Certain Birth Defects - Covered Birth Defects
Title 38 U.S. Code 1813 Children of Women Vietnam Veterans Born with Certain Birth Defects-Health Care,
Title 38 U.S. Code § 1821 - Benefits for children of certain Korea service veterans born with spina bifida
Title 38 U.S. Code § 3102 - Basic entitlement-A person shall be entitled to a rehabilitation program
Title 38 U.S. Code § 5317 - Use of income information from other agencies: notice and verification
Title 38 U.S. Code § 5701 - Confidential nature of claims (b)(6)(g)(2)(g)(4)(c)(1),
Title 38 U.S. Code § 5724 - Provision of credit protection and other services,
Title 38 U.S. Code § 7105 - Filing of notice of disagreement and appeal,
Title 38, United States Code, section 7301(a). Functions of Veterans Health Administration: in general
Title 38 U.S. Code § 7332 - Confidentiality of certain medical records
Title 38 U.S.C. 8131-8137. Construction Grant- State Home.
Title 38 Code of Federal Regulations 2.6 - Secretary's delegations of authority to certain officials (38 U.S.C. 512).
Title 44 U.S. Code - PUBLIC PRINTING AND DOCUMENTS Veterans Access, Choice, and Accountability Act of 2014
Title 45 U.S. Code - Veterans Access, Choice, and Accountability Act of 2014.
Title 45 CFR Public Welfare Subtitle A—DEPARTMENT OF HEALTH AND HUMAN SERVICES part 160 - GENERAL ADMINISTRATIVE REQUIREMENTS.
Title 45 CFR Public Welfare Subtitle A—DEPARTMENT OF HEALTH AND HUMAN SERVICES part 164 - SECURITY AND PRIVACY
Public Law 103–446, section 107 Veterans Education and Benefits Expansion Act of 2001"- Sec. 107. Expansion of work-study opportunities.
Public Law 111–163 section 101. CAREGIVERS AND VETERANS’ OMNIBUS HEALTH SERVICES ACT OF 2010- Sec. 101. Assistance and support services for caregivers.

SORNs

23VA10NB3, Non-VA Care (Fee) Records - VA (7-30-2015)
24VA10A7, Patient Medical Records - VA (10-2-2020)
43VA008, Veterans, Service Members, Family Members, and VA Beneficiary Survey Records - VA (1-25-2021)
54VA10NB3, Veterans and Beneficiaries Purchased Care Community Health Care Claims, Correspondence, Eligibility, Inquiry and Payment Files - VA (3-3-2015)
79VA10, Veterans Health Information Systems and Technology Architecture (VistA) Records - VA (12-23-2020)

88VA244, Centralized Accounts Receivable System/Centralized Accounts Receivable On-Line System (CAR/CAROLS, combined system referred to as CAO) (8-13/2018)
147VA10, Enrollment and Eligibility Records - VA (8-17-2021)

- I. *If the system is in the process of being modified and a SORN exists, will the SORN require amendment or revision and approval? If the system is using cloud technology, does the SORN for the system cover cloud usage or storage?*

No, system will not require amendment or revision of current SORNS

4. *System Changes*

- J. *Will the completion of this PIA will result in circumstances that require changes to business processes?*

No, system will not require change to business processes.

- K. *Will the completion of this PIA could potentially result in technology changes?*

No, this PIA will not result in technology changes.

Section 1. Characterization of the Information

The following questions are intended to define the scope of the information requested and collected as well as the reasons for its collection as part of the program, IT system, or technology being developed.

1.1 What information is collected, used, disseminated, created, or maintained in the system?

Identify and list all Sensitive Personal Information (SPI) that is collected and stored in the system, including Individually Identifiable Information (II), Individually Identifiable Health Information (IIHI), Protected Health Information (PHI), and Privacy- Protected Information. For additional information on these information types and definitions, please see VA Directives and Handbooks in the 6500 series (<https://vawww.va.gov/vapubs/>). If the system creates information (for example, a score, analysis, or report), list the information the system is responsible for creating.

If a requesting system receives information from another system, such as a response to a background check, describe what information is returned to the requesting system.

This question is related to privacy control AP-1, Authority To Collect, and AP-2, Purpose Specification.

The information selected below must match the information provided in question 2.1 as well as the data elements columns in 4.1 and 5.1. It must also match the information provided in question 3.4 of the PTA.

Please check any information listed below that your system collects, uses, disseminates, creates, or maintains. If additional SPI is collected, used, disseminated, created, or maintained, please list those in the text box below:

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Name | <input checked="" type="checkbox"/> Personal Phone | Number, etc. of a different individual) |
| <input checked="" type="checkbox"/> Social Security Number | Number(s) | <input type="checkbox"/> Financial Information |
| <input checked="" type="checkbox"/> Date of Birth | <input type="checkbox"/> Personal Fax Number | <input checked="" type="checkbox"/> Health Insurance |
| <input type="checkbox"/> Mother's Maiden Name | <input type="checkbox"/> Personal Email | Beneficiary Numbers |
| <input checked="" type="checkbox"/> Personal Mailing Address | Address | Account numbers |
| | <input checked="" type="checkbox"/> Emergency Contact Information (Name, Phone | |

- Certificate/License numbers¹
- Vehicle License Plate Number
- Internet Protocol (IP) Address Numbers
- Medications
- Medical Records
- Race/Ethnicity

- Tax Identification Number
- Medical Record Number
- Gender
- Integrated Control Number (ICN)
- Military History/Service Connection

- Next of Kin
- Other Data Elements (list below)

Other PII/PHI data elements: Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, Financial Management System (FMS) Document ID

PII Mapping of Components (Servers/Database)

TriZetto Facets - ClaimsXM-E consists of 3 key components (servers/databases/instances/applications/software/application programming interfaces (API). Each component has been analyzed to determine if any elements of that component collect PII. The type of PII collected by **TriZetto Facets - ClaimsXM-E** and the reasons for the collection of the PII are in the table below.

Note: Due to the PIA being a public facing document, please do not include server names in the table.

The first table of 3.9 in the PTA should be used to answer this question.

Internal Components Table

Component Name (Database, Instances, Application, Software, Application Program Interface (API) etc.) that contains PII/PHI	Does this system collect PII? (Yes/No)	Does this system store PII? (Yes/No)	Type of PII (SSN, DOB, etc.)	Reason for Collection/ Storage of PII	Safeguards
Aurora Postgres	Yes	Yes	Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address,	Claims Adjudication	MFA controlled access point. RBAC in place. FIPS 140-2 Encryption for data in transit. Data

¹ *Specify type of Certificate or License Number (e.g., Occupational, Education, Medical)

			Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID		at rest is encrypted with SHA- 256 algorithm.
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S3 Bucket	Yes	Yes	Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National	Claims Adjudication	MFA controlled access point. RBAC in place. FIPS 140-2 Encryption for data in transit. Data at rest is encrypted with SHA-256 algorithm.
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			Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID		
TriZetto Facets Database	Yes	Yes	Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan	Claims Adjudication	MFA controlled access point. RBAC in place. FIPS 140-2 Encryption for data in transit. Data at rest is encrypted with SHA-256 algorithm.

			Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID		
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1.2 What are the sources of the information in the system?

These questions are related to privacy controls DI-1, Data Quality, and IP-1, Consent.

1.2a List the individual, entity, or entities providing the specific information identified above. For example, is the information collected directly from the individual as part of an application for a benefit, or is it collected from other sources such as commercial data aggregators?

The VHA Office of Integrated Veteran Care (IVC) provides all PII/PHI required information. Optum Insights PPS provides product pricing. Wolters Kluwer provides product pricing. The information is transmitted via Secure File Transfer Protocol (SFTP).

1.2b Describe why information from sources other than the individual is required? For example, if a program’s system is using data from a commercial aggregator of information or data taken from public Web sites, state the fact that this is where the information is coming from and then in question indicate why the system is using this source of data.

All information is used for the purpose of claims adjudication. The VHA Office of Integrated Veteran Care (IVC) provides all required PII/PHI information. Optum Insights PPS provides product pricing. Wolters Kluwer provides product pricing information.

1.2c Does the system create information (for example, a score, analysis, or report), list the system as a source of information?

TriZetto Facets ClaimsXM system and Dundas Reporting

1.3 How is the information collected?

These questions are related to privacy controls DI-1, Data Quality, and IP-1, Consent.

1.3a This question is directed at the means of collection from the sources listed in question 1.2. Information may be collected directly from an individual, received via electronic transmission from another system, or created by the system itself. Specifically, is information collected through technologies or other technologies used in the storage or transmission of information in identifiable form?

The VHA Office of Integrated Veteran Care (IVC), Optum Insights PPS, and Wolters Kluwer transmit specified files via a Secure File Transfer Protocol (SFTP) server. The TriZetto Facets - ClaimsXM system retrieves the files from the SFTP server for processing within the system. Files are returned to the VHA Office of Integrated Veteran Care (IVC) by pushing files to the SFTP server and the VHA Office of Integrated Veteran Care (IVC) pulling those files down. Additionally, TriZetto Facets - ClaimsXM receives healthcare claims from VA's Electronic Data Interchange (EDI) gateway for care provided to VA health care beneficiaries (CHAMPVA, Spina Bifida – SB, Children of Women Vietnam Veterans – CWVV). TriZetto Facets - ClaimsXM transfers payment instructions to VA's financial management systems using file transfer from both Commercial aggregator and individuals.

1.3b If the information is collected on a form and is subject to the Paperwork Reduction Act, what is the form's OMB control number and the agency form number?

Not Applicable. The information is not collected on a form.

1.4 How will the information be checked for accuracy? How often will it be checked?

These questions are related to privacy controls DI-1, Data Quality, and DI-2, Data Integrity and Integrity Board.

1.4a Discuss whether and how often information stored in the system is checked for accuracy. Is information in the system checked against any other source of information (within or outside your organization) before the information is used to make decisions about an individual? For example, is there a computer matching agreement in place with another government agency? For systems that receive data from internal data sources or VA IT systems, describe the system checks to ensure that data corruption has not occurred during transmission.

Daily, due to claims lifecycle utilizing a VA aggregator, Change Health Care Clearing House. The VHA Office of Integrated Veteran Care (IVC) transmits specified files via a Secure File Transfer Protocol (SFTP) server. The TriZetto Facets - ClaimsXM- E system then retrieves the files from the SFTP server for processing within the system. Files are returned to the VHA Office of Integrated Veteran Care (IVC) by pushing files to the SFTP server and the VHA Office of Integrated Veteran Care (IVC) pulling those files down. Additionally, TriZetto Facets - ClaimsXM- E receives healthcare claims from VA's Electronic Data Interchange (EDI) gateway for care provided to VA health care beneficiaries (CHAMPVA, Spina Bifida – SB, Children of Women Vietnam Veterans – CWVV). TriZetto Facets - ClaimsXM transfers payment instructions to VA's financial management systems using file transfer. Claims data is processed utilizing a VA aggregator, Change Health Care Clearing House.

1.4b Does the system check for accuracy by accessing a commercial aggregator of information, describe this process and the levels of accuracy required by the contract?

The system does not check for accuracy by accessing a commercial aggregator of information.

1.5 What specific legal authorities, arrangements, and agreements defined the collection of information?

List the full legal authority for operating the system, specifically the authority to collect the information listed in question 1.1. Provide the authorities in a manner understandable to any potential reader, i.e., do not simply provide a legal citation; use statute names or regulations in addition to citations. Legal authorities include Federal laws, regulations, statutes, and Executive Orders. This question is related to privacy control AP-1, Authority to Collect

SORNs

23VA10NB3, Non-VA Care (Fee) Records - VA (7-30-2015)

24VA10A7, Patient Medical Records - VA (10-2-2020)

43VA008, Veterans, Service Members, Family Members, and VA Beneficiary Survey Records - VA (1-25-2021)

54VA10NB3, Veterans and Beneficiaries Purchased Care Community Health Care Claims, Correspondence, Eligibility, Inquiry and Payment Files - VA (3-3-2015)

79VA10, Veterans Health Information Systems and Technology Architecture (VistA) Records - VA (12-23-2020)

88VA244, Centralized Accounts Receivable System/Centralized Accounts Receivable On-Line System (CAR/CAROLS, combined system referred to as CAO) (8-13/2018)

147VA10, Enrollment and Eligibility Records - VA (8-17-2021)

Legal Authorities

Title 5, U.S. Code § 55 - PAY ADMINISTRATION

Title 5 U.S. Code § 301, Departmental regulations

Title 5 U.S. Code § 306 - Agency Strategic Plans

Title 26 U.S. Code § 61. Gross income defined

Title 28, U.S. Code - JUDICIARY AND JUDICIAL PROCEDURE

Title 31 U.S. Code § 3101 - Public debt limit

Title 31 U.S. Code § 3102. - Bonds

Title 31, U.S. Code § 37 - Claims

Title 38 U.S. Code § Section 31 - Foreign Medical Program

Title 38, United States Code, chapter 53 - SPECIAL PROVISIONS RELATING TO BENEFITS

Title 38 U.S. Code § 109 - Benefits for discharged members of allied forces

Title 38 U.S. Code § 111 - Payments or allowances for beneficiary travel

Title 38 U.S. Code § 304 - Deputy Secretary of Veterans Affairs

Title 38 U.S. Code § 501 - VETERANS' BENEFITS Rules and regulations , 501(a), 501(b),

Title 38 U.S. Code § 527 - Evaluation and Data Collection

Title 38 U.S. Code § 1151 - Benefits for persons disabled by treatment or vocational rehabilitation

Title 38 U.S. Code § 1703 - Contracts for hospital care and medical services in non-Department facilities

Title 38 U.S. Code § 1705 - Management of health care: patient enrollment system

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Title 38 U.S. Code § 1717 - Home health services; invalid lifts and other devices,
Title 38 U.S. Code § 1720 - Transfers for nursing home care; adult day health care
Title 38 U.S. Code § 1720G - Assistance and support services for caregivers
Title 38 U.S.C. § 1721 - POWER TO MAKE RULES AND REGULATIONS
Title 38 U.S.C. § 1722 - Determination of inability to defray necessary expenses; income thresholds
Title 38 U.S. Code § 1724 - Hospital care, medical services, and nursing home care abroad
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Title 38 U.S.C. § 1727 - PERSONS ELIGIBLE UNDER PRIOR LAW
Title 38 U.S. Code § 1728 - Reimbursement of certain medical expenses
Title 38 U.S.C. 1741-1743 - Per Diem Grant- State Home
Title 38 U.S. Code § 1781 - Medical care for survivors and dependents of certain veterans,
Title 38 U.S. Code § 1786 - Care for newborn children of women veterans receiving maternity care
Title 38 U.S. Code § 1787 - Health care of family members of veterans stationed at Camp Lejeune, North Carolina,
Title 38 U.S. Code § 1802 - CHILDREN OF VIETNAM VETERANS BORN WITH SPINA BIFIDA Sec. 1802 - Spina bifida conditions covered
Title 38 U.S. Code § Sec. 1803 - CHILDREN OF VIETNAM VETERANS BORN WITH SPINA BIFIDA -Healthcare
Title 38 U.S. Code 1812 - Children of Women Vietnam Veterans Born with Certain Birth Defects - Covered Birth Defects
Title 38 U.S. Code 1813 - Children of Women Vietnam Veterans Born with Certain Birth Defects- Health Care,
Title 38 U.S. Code § 1821 - Benefits for children of certain Korea service veterans born with spina bifida
Title 38 U.S. Code § 3102 - Basic entitlement-A person shall be entitled to a rehabilitation program
Title 38 U.S. Code § 5317 - Use of income information from other agencies: notice and verification
Title 38 U.S. Code § 5701 - Confidential nature of claims (b)(6)(g)(2)(g)(4)(c)(1),
Title 38 U.S. Code § 5724 - Provision of credit protection and other services,
Title 38 U.S. Code § 7105 - Filing of notice of disagreement and appeal,
Title 38, United States Code, section 7301(a). - Functions of Veterans Health Administration: in general
Title 38 U.S. Code § 7332 - Confidentiality of certain medical records
Title 38 U.S.C. 8131-8137 - Construction Grant- State Home.
Title 38 Code of Federal Regulations 2.6 - Secretary's delegations of authority to certain officials (38 U.S.C. 512).
Title 44 U.S. Code - PUBLIC PRINTING AND DOCUMENTS Veterans Access, Choice, and Accountability Act of 2014
Title 45 U.S. Code - Veterans Access, Choice, and Accountability Act of 2014.
Title 45 CFR Public Welfare Subtitle A—DEPARTMENT OF HEALTH AND HUMAN SERVICES part 160 - GENERAL ADMINISTRATIVE REQUIREMENTS.
Title 45 CFR Public Welfare Subtitle A—DEPARTMENT OF HEALTH AND HUMAN SERVICES part 164 - SECURITY AND PRIVACY
Public Law 103–446, section 107 Veterans Education and Benefits Expansion Act of 2001"- Sec. 107. Expansion of work-study opportunities.

Public Law 111–163 section 101. CAREGIVERS AND VETERANS’ OMNIBUS HEALTH SERVICES ACT OF 2010- Sec. 101. Assistance and support services for caregivers

1.6 PRIVACY IMPACT ASSESSMENT: Characterization of the information

Consider the specific data elements collected and discuss the potential privacy risks and what steps, if any are currently being taken to mitigate those identified risks. (Work with your System ISSO to complete this section)

Consider the following Fair Information Practice Principles (FIPPs) when assessing the risk to individual privacy:

Principle of Purpose Specification: Explain how the collection ties with the purpose of the underlying mission of the organization and its enabling authority.

Principle of Minimization: Is the information directly relevant and necessary to accomplish the specific purposes of the program?

Principle of Individual Participation: Does the program, to the extent possible and practical, collect information directly from the individual?

*Principle of Data Quality and Integrity: Are there policies and procedures for VA to ensure that personally identifiable information is accurate, complete, and current?
This question is related to privacy control AR-1, Governance and Privacy Program, and AR-2, Privacy Impact and Risk Assessment.*

Follow the format below when entering your risk assessment:

Privacy Risk: There is a potential privacy risks that the data is inaccurate when transmitted to the TriZetto Facets-Claims XM-E system.

Mitigation: Data received by the VA is verified by the VA before transmission to the TriZetto Facets- Claims XM-E system. Data is encrypted during transit and at rest when received and maintained in the TriZetto Facets-Claims XM-E system.

Section 2. Uses of the Information

The following questions are intended to clearly delineate the use of information and the accuracy of the data being used.

2.1 Describe how the information in the system that will be used in support of the program’s business purpose.

Identify and list each use (both internal and external to VA) of the information collected or maintained. This question is related to privacy control AP-2, Purpose Specification.

PII/PHI Data Element	Internal Use	External Use
Name	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Social Security Number (SSN),	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Date of Birth (DOB),	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Personal Mailing Address,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Personal Phone,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Medical Record Number,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Gender,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Emergency Contact Info,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Health Insurance Beneficiary Numbers Account numbers,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Medications,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Medical Records,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Tax Identification Number (TIN),	Positively identify the beneficiary process and	Claims processing. Data Transmission

PII/PHI Data Element	Internal Use	External Use
	associate claims to a beneficiary.	
Subscriber ID,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Medicare Number (MBI, HICN),	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Member Health ID,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Date of Death,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Plan Name,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Current Procedural Terminology (CPT) Codes,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
International Code Designator (ICD) Codes,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
National Drug Codes (NDC),	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Billed Amounts,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Paid Amounts,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission
Other Health Information,	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission

PII/PHI Data Element	Internal Use	External Use
FMS Document ID	Positively identify the beneficiary process and associate claims to a beneficiary.	Claims processing. Data Transmission

2.2 What types of tools are used to analyze data and what type of data may be produced?

These questions are related to privacy controls DI-1, Data Quality, DI-2, Data Integrity and Integrity Board, and SE-1, Inventory of Personally Identifiable Information.

2.2a Many systems sift through large amounts of information in response to a user inquiry or programmed functions. Systems may help identify areas that were previously not obvious and need additional research by agents, analysts, or other employees. Some systems perform complex analytical tasks resulting in, among other types of data, matching, relational analysis, scoring, reporting, or pattern analysis. Describe any type of analysis the system conducts and the data that is created from the analysis?

TriZetto Facets Insights is used to analyze the number of claims processed for given periods of time. If a new enrollment is received, Signature performs an insert to the database to establish eligibility for the new member. Once the member has eligibility, Signature can process claims with DOS within the eligibility span for that member. For existing members, a change to demographic data, eligibility dates, Plan information, Other Health Insurance (COB), etc. would require an update to the existing record in Facets. When the change record is received, it is processed through matching logic to find the correct member in which to apply the changes. The match logic may consist of the member's last name, DOB, SSN or some combination of key PII/PHI fields to identify the correct member from the inbound file.

2.2b If the system creates or makes available new or previously unutilized information about an individual, explain what will be done with the newly derived information. Will it be placed in the individual's existing record? Will a new record be created? Will any action be taken against or for the individual identified because of the newly derived data? If a new record is created, will the newly created information be accessible to Government employees who make determinations about the individual? If so, explain fully under which circumstances and by whom that information will be used.

TriZetto Facets Insights is used to analyze the number of claims processed for given periods of time. If a new enrollment is received, Signature performs an insert to the database to establish eligibility for the new member. Once the member has eligibility, Signature can process claims with DOS within the eligibility span for that member. For existing members, a change to demographic data, eligibility dates, Plan information, Other Health Insurance (COB), etc. would require an update to the existing record in Facets. When the change record is received, it is processed through matching logic to find the correct member in which to apply the changes. The match logic may consist of the member's last name, DOB, SSN or some combination of key PII/PHI fields to identify the correct member from the inbound file.

2.3 How is the information in the system secured?

These questions are related to security and privacy controls SC-9, Transmission Confidentiality, and SC-28, Protection of Information at Rest.

2.3a What measures are in place to protect data in transit and at rest?

Data in transit is encrypted with TLS 1.1 or 1.2 active. FIPS 140-2 compliant encryption settings in place. All data at rest is encrypted by Microsoft Azure AES 256 encryption algorithms.

2.3b If the system is collecting, processing, or retaining Social Security Numbers, are there additional protections in place to protect SSNs?

Yes, additional protections in place to protect SSNs. Data in transit is encrypted with TLS 1.1 or 1.2 active. FIPS 140-2 compliant encryption settings in place. All data at rest is encrypted by Microsoft Azure AES 256 encryption algorithms.

2.3c How is PII/PHI safeguarded in accordance with OMB Memorandum M-06-15?

All data is encrypted while at rest and when transmitted electronically. Appropriate security controls are in place to guard against unauthorized access to the data..

2.4 PRIVACY IMPACT ASSESSMENT: Use of the information.

Describe any types of controls that may be in place to ensure that information is handled in accordance with the uses described above. Example: Describe if training for users of the project covers how to appropriately use information. Describe the disciplinary programs or system controls (i.e. denial of access) that are in place if an individual is inappropriately using the information.

Consider the following FIPPs below to assist in providing a response:

Principle of Transparency: Is the PIA and SORN, if applicable, clear about the uses of the information?

Principle of Use Limitation: Is the use of information contained in the system relevant to the mission of the project?

This question is related to privacy control AR-4, Privacy Monitoring and Auditing, AR-5, Privacy Awareness and Training, and SE-2, Privacy Incident response.

2.4a How is access to the PII determined?

Access to PII by Signature Performance's associates is based on a need to know to perform the Associate's job function. Additionally, system access is based on Role-Based Access Controls (RBAC). The RBAC model will ensure proper separation of duties in the system. Access to the system will be requested through the IT ticketing system where the Associate's manager will need to provide approval for the system access. Once access is approved the Associates profile will be developed based on the designated RBAC model for the Associates job function. Upon termination of employment, the Associate's access to the system is removed immediately. System access is reviewed quarterly and documented in the ticketing system. Access to the TriZetto Facets - ClaimsXM system is logged and monitored through a Security Information and Event Management (SIEM) solution managed and maintained by Signature Performance.

2.4b Are criteria, procedures, controls, and responsibilities regarding access documented?

Criteria, procedures, controls, and responsibilities are documented in the ClaimsXM SSP, SSP attachments, Signature Performance policies and procedure documentation.

2.4c Does access require manager approval?

Yes, manager approval is required.

2.4d Is access to the PII being monitored, tracked, or recorded?

Access to the TriZetto Facets - ClaimsXM system is logged and monitored through a Security Information and Event Management (SIEM) solution managed and maintained by Signature Performance.

2.4e Who is responsible for assuring safeguards for the PII?

Signature Performance Information Security Office and the ClaimsXM admin team is responsible for assuring safeguards for the PII.

Section 3. Retention of Information

The following questions are intended to outline how long information will be retained after the initial collection.

3.1 What information is retained?

*Identify and list all information collected from question 1.1 that is **retained** by the system. This question is related to privacy controls DM-1, Minimization of Personally Identifiable Information, and DM-2, Data Retention and Disposal*

Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID

3.2 How long is information retained?

*In some cases, VA may choose to retain files in active status and archive them after a certain period of time. State active file retention periods, as well as archived records, in number of years, for the information and record types. For example, financial data held within your system may have a different retention period than medical records or education records held within your system, please be sure to list each of these retention periods. **The VA records officer should be consulted early in the development process to ensure that appropriate retention and destruction schedules are implemented.** If the system is using cloud technology, will it be following the NARA approved retention length and schedule? This question is related to privacy control DM-2, Data Retention and Disposal.*

The contractor will follow the VHA Records Retention Schedule 10-1 @ <https://vaww.va.gov/vhapublications/rcs10/rcs10-1.pdf>. Sections 1260- Civilian Health and Medical Care Program and 4000- Financial Management and Reporting Records or 6000- Health Information Management Service (HIMS). Also, procedures under the contract, Media Sanitization Policy (OIT-OIS SOP MP-6-Electronic Media Sanitization) and Records Management Policy (VHA Directive 6300 Records Management). 1260 Care in Community, Health and Medical Care Program, VA. Compensation, Pension and Vocational Rehabilitation, Records Control Schedule 10-1, 1180 1180 Office of General Counsel; VA Central Office (VACO) and Regional Offices; 1180.17. Veterans Benefits.

3.3 Has the retention schedule been approved by the VA records office and the National Archives and Records Administration (NARA)?

An approved records schedule must be obtained for any IT system that allows the retrieval of a record via a personal identifier. The VA records officer will assist in providing a proposed schedule. The schedule must be formally offered to NARA for official approval. Once NARA approves the proposed schedule, the VA records officer will notify the system owner. Please work with the system Privacy Officer and VA Records Officer to answer these questions.

This question is related to privacy control DM-2, Data Retention and Disposal.

3.3a Are all records stored within the system of record indicated on an approved disposition authority?

ClaimsXM is not the system of record. Please see Record Control Schedule (RCS) 10–1 item (<http://www.va.gov/vhapublications/rcs10/rcs10-1.pdf>).

3.3b Please indicate each records retention schedule, series, and disposition authority?

Record Control Schedule (RCS) 10–1 item (<http://www.va.gov/vhapublications/rcs10/rcs10-1.pdf>).

3.4 What are the procedures for the elimination or transfer of SPI?

Explain how records are destroyed, eliminated or transferred to NARA at the end of their mandatory retention period. Please give the details of the process. For example, are paper records shredded on site, or by a shredding company and accompanied by a certificate of destruction, etc.? This question is related to privacy control DM-2, Data Retention and Disposal.

Prior to termination or completion of this contract, Signature must not destroy information received from VA, or gathered/created by the contractor in the course of performing this contract without prior written approval by the VA. Any data destruction done on behalf of VA by a contractor/subcontractor must be done in accordance with National Archives and Records Administration (NARA) requirements as outlined in VA Directive 6300, Records and Information Management and VA Handbook 6300.1 Records Management Procedures, applicable VA Records Control Schedules, and Media Sanitization Policy (OIT-OIS SOP MP-6-Electronic Media Sanitization), Self-certification by the contractor that the data destruction requirements above have been met must be sent to the VA Contracting Officer within 30 days of termination of the contract. Paper documents are destroyed to an unreadable state in accordance with the Department of Veterans' Affairs VA Directive 6371, (April 8, 2014), <https://www.va.gov/vapubs>. Electronic data and files of any type, including Protected Health Information (PHI), Sensitive Personal Information (SPI), Human Resources records, and more

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are destroyed in accordance with the Department of Veterans' Affairs Handbook 6500.1, Electronic Media Sanitization (November 3, 2008), <https://www.va.gov/vapubs>. When required, this data is deleted from their file location and then permanently deleted from the deleted items or Recycle bin. Magnetic media is wiped and sent out for destruction per VA Handbook 6500.1. Digital media is shredded or sent out for destruction per VA Handbook 6500.1. Additionally, this system follows Field Security Service (FSS) Bulletin #176 dated April 9, 2014, for Media Sanitization Program, SOPs - FSS - All Documents as well as FSS Standard Operating Procedures (SOP) MP-6 Electronic Media Sanitization.

3.5 Does the system, where feasible, use techniques to minimize the risk to privacy by using PII for research, testing, or training?

Organizations often use PII for testing new applications or information systems prior to deployment. Organizations also use PII for research purposes and for training. These uses of PII increase the risks associated with the unauthorized disclosure or misuse of the information. Please explain what controls have been implemented to protect PII used for testing, training and research. This question is related to privacy control DM-3, Minimization of PII Used in Testing, Training and Research.

The system does not allow this, and third-party service providers are not permitted to do so either. All testing data is de-identified prior to transference, use, and testing.

3.6 PRIVACY IMPACT ASSESSMENT: Retention of information

Discuss the risks associated with the length of time data is retained and what steps, if any, are currently being taken to mitigate those identified risks. (Work with your System ISSO to complete all Privacy Risk questions inside the document this section).

While we understand that establishing retention periods for records is a formal process, there are policy considerations behind how long a project keeps information. The longer a project retains information, the longer it needs to secure the information and assure its accuracy and integrity. The proposed schedule should match the requirements of the Privacy Act to keep the minimum amount of PII for the minimum amount of time, while meeting the Federal Records Act. The schedule should align with the stated purpose and mission of the system.

Consider the following FIPPs below to assist in providing a response:

Principle of Minimization: Does the project retain only the information necessary for its purpose? Is the PII retained only for as long as necessary and relevant to fulfill the specified purposes?

Principle of Data Quality and Integrity: Has the PIA described policies and procedures for how PII that is no longer relevant and necessary is purged?

This question is related to privacy controls DM-1, Minimization of Personally Identifiable Information, and DM-2, Data Retention and Disposal.

Follow the format below:

Privacy Risk: There is a risk that the information maintained by TriZetto Facets ClaimsXM – E could be retained for longer than is necessary to fulfill the VA mission. Records held longer than required are at greater risk of being unintentionally released or breached.

Mitigation: To mitigate the risk posed by information retention, TriZetto Facets ClaimsXM – E adheres to the NARA General Records Schedule. When the retention date is reached for a record, the individual’s information is carefully disposed of by the determined method as described in the records control schedule.

Section 4. Internal Sharing/Receiving/Transmitting and Disclosure

The following questions are intended to define the scope of information sharing/receiving/transmitting within VA.

4.1 With which internal organizations is information shared/received/transmitted? What information is shared/received/transmitted, and for what purpose? How is the information transmitted?

NOTE: Question 3.9 (second table) on Privacy Threshold Analysis should be used to answer this question.

Identify and list the names of any program offices, contractor-supported IT systems, and any other organization or IT system within VA with which information is shared.

State the purpose for the internal sharing. If you have specific authority to share the information, provide a citation to the authority.

For each interface with a system outside your program office, state what specific data elements (PII/PHI) are shared with the specific program office, contractor-supported IT system, and any other organization or IT system within VA.

Describe how the information is transmitted. For example, is the information transmitted electronically, by paper, or by some other means? Is the information shared in bulk, on a case-by-case basis, or does the sharing partner have direct access to the information?

This question is related to privacy controls AP-2, Purpose Specification, AR-3, Privacy Requirements for Contractors and Service Providers, AR-8, Accounting of Disclosures, TR-1, Privacy Notice, and UL-1, Internal Use.

Data Shared with Internal Organizations

<i>List the Program Office or IT System information is shared/received with</i>	<i>List the purpose of the information being shared /received with the specified program office or IT system</i>	<i>List the specific PII/PHI data elements that are processed (shared/received/transmitted) with the Program Office or IT system</i>	<i>Describe the method of transmittal</i>

<p>VA Office of Information Technology</p> <p>Veterans Data Integration and Federation Enterprise Platform</p>	<p>The information being shared is for the Claims Processing of Veteran Family Member Program claims. The data and information follow health care industry standards for the exchange of HIPPA and other Federal Regulatory information for the health care industry.</p>	<p>Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID</p>	<p>Secure File Transfer Protocol (SFTP)</p>
<p>VA Enterprise Cloud Amazon (AWS)</p> <p>Payer Electronic Data Interchange (EDI) Transactions Application Suite (TAS)</p>	<p>The information being shared is for the Claims Processing of Veteran Family Member Program claims. The data and information follow health care industry standards for the exchange of HIPPA and other Federal Regulatory information for the health care industry.</p>	<p>Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID</p>	<p>SFTP</p>

<p>Veterans Health Administration Office of Integrated Veteran Care</p> <p>Claims Processing and Eligibility (CP&E)</p>	<p>The information being shared is for the Claims Processing of Veteran Family Member Program claims. The data and information follow health care industry standards for the exchange of HIPPA and other Federal Regulatory information for the health care industry.</p>	<p>Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID</p>	<p>SFTP</p>
<p>Financial Service Center (FSC)</p> <p>Financial Management System</p>	<p>The information being shared is for the Claims Processing of Veteran Family Member Program claims. The data and information follow health care industry standards for the exchange of HIPPA and other Federal Regulatory information for the health care industry.</p>	<p>Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID</p>	<p>File Transfer Protocol with SSL Security</p>

<p>VA Enterprise Cloud Microsoft Azure</p> <p>Program Integrity Tool (PIT)</p>	<p>The information being shared is for the Claims Processing of Veteran Family Member Program claims. The data and information follow health care industry standards for the exchange of HIPPA and other Federal Regulatory information for the health care industry.</p>	<p>Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID</p>	<p>SFTP</p>
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4.2 PRIVACY IMPACT ASSESSMENT: Internal sharing and disclosure

Discuss the privacy risks associated with the sharing of information within the Department and what steps, if any, are currently being taken to mitigate those identified risks. (Work with your System ISSO to complete all Privacy Risk questions inside the document this section).

This question is related to privacy control UL-1, Internal Use.

Follow the format below:

Privacy Risk: There is a risk that information may be shared with unauthorized VA programs or systems.

Mitigation: This is a cloud-based system where the CSP 3PAO already conducts penetration testing and defense in depth. Flaw remediation is centrally managed through four separate processes:

- The deployment of antivirus configurations to all system servers
- The use of configuration management to centrally manage the identification of all required Windows patches and to install them on appropriate servers.

- The use of Ansible to centrally manage the identification of all required Linux patches and to install them on appropriate servers.
- Monthly Nessus scanning informs system staff of required security vulnerabilities and fixes. System staff also conduct their own monthly Nessus scans to identify and interpret system vulnerabilities. Scanning results are reported, analyzed and recorded for remediation. The information system fails to a stopped state for database integrity and disk space problems, preserving existing data and audit records in failure. Systems are backed up continuously to an alternate site. In the event of a catastrophic failure, the system can be restored from alternate site or failed over to run at the alternate site. As stated within the Azure System Security Plan, Azure will prevent the unauthorized release of information outside of the information system boundary or any unauthorized communication through the information system boundary when there is an operational failure of the boundary protection mechanisms. Data confidentiality and integrity is ensured via administrative, technical and physical controls. Physical access to the servers is restricted to authorized personnel in a data center at a facility with 24-hour security. Network access to servers is managed through firewalls. Access via the network requires authentication for both the application and servers.

Section 5. External Sharing/Receiving and Disclosure

The following questions are intended to define the content, scope, and authority for information sharing external to VA, which includes Federal, State, and local governments, and the private sector.

5.1 With which external organizations (outside VA) is information shared/received? What information is shared/received, and for what purpose? How is the information transmitted and what measures are taken to ensure it is secure?

Is the sharing of information outside the agency compatible with the original collection? If so, is it covered by an appropriate routine use in a SORN? If not, please describe under what legal mechanism the IT system is allowed to share the information in identifiable form or personally identifiable information outside of VA.

NOTE: Question 3.10 on Privacy Threshold Analysis should be used to answer this question.

Identify and list the names of any Federal, State, or local government agency or private sector organization with which information is shared.

For each interface with a system outside VA, state what specific data elements (PII/PHI) are shared with each specific partner.

What legal mechanisms, authoritative agreements, documentation, or policies are in place detailing the extent of the sharing and the duties of each party? For example, is the sharing of data compatible with your SORN? Then list the SORN and the applicable routine use from the SORN. Is there a Memorandum of Understanding (MOU), Computer Matching Agreement (CMA), or law that mandates the sharing of this information?

Describe how the information is transmitted to entities external to VA and what security measures have been taken to protect it during transmission.

This question is related to privacy control UL-2, Information Sharing with Third Parties

Data Shared with External Organizations

List External Program Office or IT System information is shared/received with	List the purpose of information being shared / received / transmitted with the specified program office or IT system	List the specific PII/PHI data elements that are processed (shared/received/transmitted)with the Program or IT system	List the legal authority, binding agreement, SORN routine use, etc. that permit external sharing (can be more than one)	List the method of transmission and the measures in place to secure data
Change Health Care Clearing House Change Health Care (Contractor)	Claims processing. Data Transmission through SFTP	Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID	MOU/ISA, BAA	Business Partner Extranet (BPE)
Signature Choice (Contractor) Signature Performance (Sub Contractor)	Claims processing. Data Transmission through SFTP	Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID,	MOU/ISA, BAA	B Business Partner Extranet (BPE) [Business Partner Extranet [BPE], firewall, and other

		Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID		connections) on and to a VA. Trusted Internet Connection (TIC) Gateway]
Globalscape (System) Change Healthcare (Contractor)	Claims processing. Data Transmission through SFTP	Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID	MOU/ISA BAA	S2S VPN Tunnel [Trusted Internet Connection (TIC) Gateway.]
Pharmacy Benefits Manager Optum RX (Contractor)	Claims processing. Data Transmission through SFTP	Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other	MOU/ISA BAA	Business Partner Extranet (BPE)

		Health Information, FMS Document ID		
Signature Choice (Contractor) Principle Choice Solutions (Sub Contractor)	Claims processing. Data Transmission through SFTP	Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID	MOU/ISA BAA	Business Partner Extranet (BPE)
Signature Choice (Contractor) Signature Performance Healthcare Administrative Services LLC (Sub Contractor)	Claims processing. Data Transmission through SFTP	Name, Social Security Number (SSN), Date of Birth (DOB), Personal Mailing Address, Personal Phone, Medical Record Number, Gender, Emergency Contact Info, Health Insurance Beneficiary Numbers Account numbers, Medications, Medical Records, Tax Identification Number (TIN), Subscriber ID, Medicare Number (MBI, HICN), Member Health ID, Date of Death, Plan Name, Current Procedural Terminology (CPT) Codes, International Code Designator (ICD) Codes, National Drug Codes (NDC), Billed Amounts, Paid Amounts, Other Health Information, FMS Document ID	Business Partner Extranet (BPE)	ISA/MOU BAA

5.2 PRIVACY IMPACT ASSESSMENT: External sharing and disclosure

Discuss the privacy risks associated with the sharing of information outside the Department and what steps, if any, are currently being taken to mitigate those identified risks.

If no External Sharing listed on the table above, (State there is no external sharing in both the risk and mitigation fields).

Discuss whether access controls have been implemented and whether audit logs are regularly reviewed to ensure appropriate sharing outside of the Department. For example, is there a Memorandum of Understanding (MOU), contract, or agreement in place with outside agencies or foreign governments.

Discuss how the sharing of information outside of the Department is compatible with the stated purpose and use of the original collection.

This question is related to privacy control AR-2, Privacy Impact and Risk Assessment, AR-3, Privacy Requirements for Contractors and Service Providers, and AR-4, Privacy Monitoring and Auditing

Follow the format below:

Privacy Risk: There is a risk that information may be shared with an unauthorized program, system, or individual.

Mitigation: All users with access to Trizetto Facets- Claim XM undergo Privacy and Security training (VA10176 or equivalent) and sign a Rules of Behavior. There are penalties for non-compliance with rules of behavior for VA users and contractual penalties for the vendor. Access is limited based on need to know.

Section 6. Notice

The following questions are directed at providing notice to the individual of the scope of information collected, the right to consent to uses of the information, and the right to decline to provide information.

6.1 Was notice provided to the individual before collection of the information? If yes, please provide a copy of the notice as an Appendix-A 6.1 on the last page of the document. Also provide notice given to individuals by the source system (A notice may include a posted privacy policy, a Privacy Act notice on forms, or a system of records notice published in the Federal Register.) If notice was not provided, why not?

These questions are related to privacy control TR-1, Privacy Notice, and TR-2, System of Records Notices and Privacy Act Statements, and TR-3, Dissemination of Privacy Program Information.

6.1a This question is directed at the notice provided before collection of the information. This refers to whether the person is aware that his or her information is going to be collected. A notice may include a posted privacy policy, a Privacy Act statement on forms, or a SORN published in the Federal Register, Notice of Privacy Practice provided to individuals for VHA systems. If notice was provided in the Federal Register, provide the citation.

This Privacy Impact Assessment is the only form of notice, as information is not collected directly from an individual. PII/PHI is collected by a commercial non-VA provider at the point of service. Information is collected from a non-government source and sent either from

the Third-Party Administrators (TPA) or directly from a non-VA provider, so there is no opt-out or explanation of government use.

SORNs

23VA10NB3, Non-VA Care (Fee) Records - VA (7-30-2015)

24VA10A7, Patient Medical Records - VA (10-2-2020)

43VA008, Veterans, Service Members, Family Members, and VA Beneficiary Survey Records - VA (1-25-2021)

54VA10NB3, Veterans and Beneficiaries Purchased Care Community Health Care Claims, Correspondence, Eligibility, Inquiry and Payment Files - VA (3-3-2015)

79VA10, Veterans Health Information Systems and Technology Architecture (VistA) Records - VA (12-23-2020)

88VA244, Centralized Accounts Receivable System/Centralized Accounts Receivable On-Line System (CAR/CAROLS, combined system referred to as CAO) (8-13/2018)

147VA10, Enrollment and Eligibility Records - VA (8-17-2021)

Privacy Act System of Records Notices (SORNs) site:

<https://department.va.gov/privacy/system-of-records-notice/>

6.1b If notice was not provided, explain why. If it was provided, attach a copy of the current notice.

This Privacy Impact Assessment is the only form of notice, as information is not collected directly from an individual. Information is collected from a non-government source and sent either from the Third-Party Administrators (TPA) or directly from a non-VA provider, so there is no opt-out or explanation of government use.

6.1c Describe how the notice provided for the collection of information is adequate to inform those affected by the system that their information has been collected and is being used appropriately. Provide information on any notice provided on forms or on Web sites associated with the collection.

This Privacy Impact Assessment is the only form of notice and is posted publicly.

SORNs

23VA10NB3, Non-VA Care (Fee) Records - VA (7-30-2015)

24VA10A7, Patient Medical Records - VA (10-2-2020)

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<https://department.va.gov/privacy/system-of-records-notice/>

6.2 Do individuals have the opportunity and right to decline to provide information? If so, is a penalty or denial of service attached?

This question is directed at whether the person from or about whom information is collected can decline to provide the information and if so, whether a penalty or denial of service is attached. This question is related to privacy control IP-1, Consent, IP-2, Individual Access, and IP-3, Redress.

PII/PHI is collected by a commercial non-VA provider at the point of service.

Information is collected from a non-government source and sent either from the Third-Party Administrators (TPA) or directly from a non-VA provider, so there is no opt-out or explanation of government use.

SORNs

23VA10NB3, Non-VA Care (Fee) Records - VA (7-30-2015)

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Privacy Act System of Records Notices (SORNs) site:

<https://department.va.gov/privacy/system-of-records-notice/>

6.3 Do individuals have the right to consent to particular uses of the information? If so, how does the individual exercise the right?

This question is directed at whether an individual may provide consent for specific uses, or the consent is given to cover all uses (current or potential) of his or her information. If specific consent is required, how would the individual consent to each use? This question is related to privacy control IP-1, Consent.

PII/PHI is collected by a commercial non-VA provider at the point of service.

Information is collected from a non-government source and sent either from the Third-Party Administrators (TPA) or directly from a non-VA provider, so there is no opt-out or explanation of government use.

SORNs

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Privacy Act System of Records Notices (SORNs) site:
<https://department.va.gov/privacy/system-of-records-notice/>

6.4 PRIVACY IMPACT ASSESSMENT: Notice

Describe the potential risks associated with potentially insufficient notice and what steps, if any, are currently being taken to mitigate those identified risks. (Work with your System ISSO to complete all Privacy Risk questions inside the document this section).

Consider the following FIPPs below to assist in providing a response:

Principle of Transparency: Has sufficient notice been provided to the individual?

Principle of Use Limitation: Is the information used only for the purpose for which notice was provided either directly to the individual or through a public notice? What procedures are in place to ensure that information is used only for the purpose articulated in the notice?

This question is related to privacy control TR-1, Privacy Notice, AR-2, Privacy Impact and Risk Assessment, and UL-1, Internal Use.

Follow the format below:

Privacy Risk: Sufficient notice has not been provided to the individual therefore the individuals are unaware that their information is being collected.

Mitigation: This system does not collect data directly. Privacy Rights are provided at the point of care and through program guides individuals are notified that their information is being collected and used. Individuals can decline to provide information, as a result services will be delayed. Data is encrypted at rest.

Section 7. Access, Redress, and Correction

The following questions are directed at an individual's ability to ensure the accuracy of the information collected about him or her.

7.1 What are the procedures that allow individuals to gain access to their information?

These questions are related to privacy control IP-2, Individual Access, and AR-8, Accounting of Disclosures.

*7.1a Cite any procedures or regulations your program has in place that allow access to information. These procedures, at a minimum, should include the agency's FOIA/Privacy Act practices, but may also include additional access provisions. **For example, if your program has a customer satisfaction unit, that information, along with phone and email contact information, should be listed in this section in addition to the agency's procedures. See 5 CFR 294 and the VA FOIA Web page at <http://www.foia.va.gov/> to obtain information about FOIA points of contact and information about agency FOIA processes.***

Privacy notice provided at the point of service addressed redress. Any records generated by the system will be the responsibility of the VA to maintain, retain, and act upon any applicable Freedom of Information Act, Privacy Act, or HIPAA requests. Individuals can submit a request for information through the VHA Office of Integrated Care FOIA/Privacy Office vha.ivc.po@va.gov or vha.ivc.FOIA@va.gov.

7.1b If the system is exempt from the access provisions of the Privacy Act, please explain the basis for the exemption or cite the source where this explanation may be found, for example, a Final Rule published in the Code of Federal Regulations (CFR)?

Not Applicable. The system is not exempt from the access provisions of the Privacy Act.

7.1c If the system is not a Privacy Act system, please explain what procedures and regulations are in place that covers an individual gaining access to his or her information?

Not Applicable. The system is a Privacy Act system.

7.2 What are the procedures for correcting inaccurate or erroneous information?

Describe the procedures and provide contact information for the appropriate person to whom such issues should be addressed? If the correction procedures are the same as those given in question 7.1, state as much. This question is related to privacy control IP-3, Redress, and IP-4, Complaint Management.

To correct data in VHA Systems the Beneficiary will call the VHA Call center at: 1-916-692-7450 Beneficiary Customer service telephone line: 1-800-733-8387. Right to Request Amendment of Health Information. You have the right to request an amendment (correction) to your health information in our records if you believe it is incomplete, inaccurate, untimely, or unrelated to your care. You must submit your request in writing, specify the information that you want corrected, and provide a reason to support your request for amendment. All amendment requests should be submitted to the facility Privacy Officer at the VHA health care facility that maintains your information. If your request for amendment is denied, you will be notified of this decision in writing and provided appeal rights. In response, you may do any of the following:

- File an appeal.
- File a “Statement of Disagreement”
- Ask that your initial request for amendment accompany all future disclosures of the disputed health information.

7.3 How are individuals notified of the procedures for correcting their information?

How are individuals made aware of the procedures for correcting his or her information? This may be through notice at collection or other similar means. This question is meant to address the risk that even if procedures exist to correct information, if an individual is not made fully aware of the existence of those procedures, then the benefits of the procedures are significantly weakened. This question is related to privacy control IP-3, Redress, and IP-4, Complaint Management.

Beneficiary will call the VHA Call center at: 1-916-692-7450
Beneficiary Customer service telephone line: 1-800-733-8387

Right to Request Receipt of Communications in a Confidential Manner. You have the right to request that we provide your health information to you by alternative means or at an alternative location. We will Version Date: February 27,2020 Page 32 of 38 accommodate reasonable requests, as determined by VA/VHA policy, from you to receive communications containing your health information:

- At a mailing address (e.g., confidential communications address) other than your permanent address
- In person, under certain circumstances.

7.4 If no formal redress is provided, what alternatives are available to the individual?

*Redress is the process by which an individual gains access to his or her records and seeks corrections or amendments to those records. Redress may be provided through the Privacy Act and Freedom of Information Act (FOIA), and also by other processes specific to a program, system, or group of systems. **Example: Some projects allow users to directly access and correct/update their information online. This helps ensure data accuracy.***

This question is related to privacy control IP-3, Redress, and IP-4, Complaint Management.

Beneficiary will call the VHA Call center at: 1-916-692-7450

Beneficiary Customer service telephone line: 1-800-733-8387

7.5 PRIVACY IMPACT ASSESSMENT: Access, redress, and correction

*Discuss what risks there currently are related to the Department's access, redress, and correction policies and procedures for this system and what, if any, steps have been taken to mitigate those risks. **For example, if a project does not allow individual access, the risk of inaccurate data needs to be discussed in light of the purpose of the project. For example, providing access to ongoing law enforcement activities could negatively impact the program's effectiveness because the individuals involved might change their behavior.** (Work with your System ISSO to complete all Privacy Risk questions inside the document this section).*

Consider the following FIPPs below to assist in providing a response:

Principle of Individual Participation: Is the individual provided with the ability to find out whether a project maintains a record relating to him?

Principle of Individual Participation: If access and/or correction is denied, then is the individual provided notice as to why the denial was made and how to challenge such a denial?

Principle of Individual Participation: Is there a mechanism by which an individual is able to prevent information about him obtained for one purpose from being used for other purposes without his knowledge?

This question is related to privacy control IP-3, Redress.

Follow the format below:

Privacy Risk: If the VHA IVC employee enters the data incorrectly, and the veteran/beneficiary is not paid accurately.

Mitigation: The Veteran/Beneficiary or provider can contact the claims payment customer service support telephone line, Beneficiary: 1-800-733-8387 or they may contact the VHA IVC Privacy office vha.ivc.po@va.gov.

Section 8. Technical Access and Security

The following questions are intended to describe technical safeguards and security measures.

8.1 What procedures are in place to determine which users may access the system, and are they documented?

These questions are related to privacy control AR-7, Privacy-Enhanced System Design and Development.

8.1a Describe the process by which an individual receives access to the system?

Access to PII by Signature Performance Associates is based on a need to know to perform the Associate's job function. Additionally, system access is based on Role Based Access Controls (RBAC). The RBAC model ensures proper separation of duties in the system. Access to the system will be requested through the IT ticketing system where the Associate's manager must provide approval for the system access. Once access is approved the Associates profile will be developed based on the designated RBAC model for the Associates job function. There are no users from other agencies that have access to the TriZetto Facets - ClaimsXM system. Administrators, Domain Admins, and Service Accounts are privileged accounts; these functions are issued for use and management of applications, devices and systems and used to run services such as backups/restores. User accounts Identification are general user accounts and use data viewer/manipulation. Process identification rolls are application accounts, these include general user functions.

8.1b Identify users from other agencies who may have access to the system and under what roles these individuals have access to the system. Who establishes the criteria for what PII can be shared?

There are no other agencies with access to the system.

8.1c Describe the different roles in general terms that have been created to provide access to the system? For example, certain users may have "read-only" access while others may be permitted to make certain amendments or changes to the information.

Role	Internal or External	Privileged (P), Non-Privileged (NP), or No Logical Access (NLA)	Sensitivity Level	Authorized Privileges	Functions Performed
Administrators	Internal	P	Moderate	Full administrative access	Issued for use and management of applications, devices and systems
Domain Admins	Internal	P	Moderate	Full administrative access	Add/remote client users. Create, modify and delete client applications
User Account IDs	Internal	NP	Limited	N/A	Data viewer/manipulation
Processor IDs	Internal	NP	Moderate	N/A	General users
Service Account	Internal	P	Limited	NA	Used to run services such as backups/restores.

8.2 Will VA contractors have access to the system and the PII? If yes, what involvement will contractors have with the design and maintenance of the system? Has a contractor confidentiality agreement, Business Associate Agreement (BAA), or a Non-Disclosure Agreement (NDA) been developed for contractors who work on the system?

If so, how frequently are contracts reviewed and by whom? Describe the necessity of the access provided to contractors to the system and whether clearance is required. If Privacy Roles and Responsibilities have been established to restrict certain users to different access levels, please describe the roles and associated access levels. Explain the need for VA contractors to have access to the PII. This question is related to privacy control AR-3, Privacy Requirements for Contractors, and Service Providers.

Signature Choice, LLC, is the prime contractor in support of the US Department of Veterans Affairs (VA) and its joint venture partners personnel are required to sign non-disclosure agreements (NDAs) as part of VA security clearance requirements. Contractors will have access to the system to perform claims adjudication and system administrative functions. The design and maintenance of the system is maintained and performed by Signature Performance, Inc. in accordance with its subcontract agreement with Signature Choice, LLC.

8.3 Describe what privacy training is provided to users either generally or specifically relevant to the program or system?

VA offers privacy and security training. Each program or system may offer training specific to the program or system that touches on information handling procedures and sensitivity of information. Please describe how individuals who have access to PII are trained to handle it appropriately. This question is related to privacy control AR-5, Privacy Awareness and Training.

Privacy and Security Training

- Security awareness (cyber awareness) and HIPAA Security and Privacy Rule training is administered.
- VA 10176: Privacy and Info Security Awareness and Rules of Behavior
- VA 10203: Privacy and HIPAA Training
- VA 3812493: Annual Government Ethics

Role-based Training includes but is not limited to and based on the role of the user.

- VA 1016925: Information Assurance for Software Developers IT Software Developers
- VA 3193: Information Security for CIOs Executives, Senior Managers, CIOs and CFOs
- VA 1357084: Information Security Role-Based Training for Data Managers
- VA 64899: Information Security Role-Based Training for IT Project Managers
- VA 3197: Information Security Role-Based Training for IT Specialists
- VA 1357083: Information Security Role-Based Training for Network Administrators
- VA 1357076: Information Security Role-Based Training for System Administrators
- VA 3867207: Information Security Role-Based Training for System Owners
- VA 3914020 Contingency Plan Role Based Training

8.4 Has Authorization and Accreditation (A&A) been completed for the system? Yes

8.4a If Yes, provide:

1. *The Security Plan Status:* Completed
2. *The System Security Plan Status Date:* 06/22/2023
3. *The Authorization Status:* Granted
4. *The Authorization Date:* 11/19/2020
5. *The Authorization Termination Date:* 11/19/2023
6. *The Risk Review Completion Date:* 10/19/2020
7. *The FIPS 199 classification of the system (LOW/MODERATE/HIGH):* MODERATE

Please note that all systems containing SPI are categorized at a minimum level of “moderate” under Federal Information Processing Standards Publication 199.

8.4b If No or In Process, provide your **Initial Operating Capability (IOC) date**.

The system categorization was determined to be moderate. This is in process. Initial Operating Capability date is 01/01/2021.

Section 9 – Technology Usage

The following questions are used to identify the technologies being used by the IT system or project.

9.1 Does the system use cloud technology? If so, what cloud model is being utilized?

If so, Does the system have a FedRAMP provisional or agency authorization? If the system does use cloud technology, but does not have FedRAMP authorization, explain how the Cloud Service Provider (CSP) solution was assessed and what FedRAMP documents and processes were used for the assessment in order to comply with VA Handbook 6517. Types of cloud models include: Software as a Service (SaaS), Infrastructure as a Service (IaaS), Platform as a Service (PaaS), Commercial off the Shelf (COTS), Desktop as a Service (DaaS), Mobile Backend as a Service (MBaaS), Information Technology Management as a Service (ITMaaS). This question is related to privacy control UL-1, Information Sharing with Third Parties.

Note: For systems utilizing the VA Enterprise Cloud (VAEC), no further responses are required after 9.1. (Refer to question 3.3.1 of the PTA)

Yes. Government Cloud, Microsoft Azure Government Cloud. FedRAMP approved.

9.2 Does the contract with the Cloud Service Provider, Contractors and VA customers establish who has ownership rights over data including PII? (Provide contract number and supporting information about PII/PHI from the contract). (Refer to question 3.3.2 of the PTA) This question is related to privacy control AR-3, Privacy Requirements for Contractors, and Service Providers.

All data is the intellectual property of the U.S. Department of Veterans Affairs; Vendors do not have any direct access to the government data and must maintain confidentiality under its contract terms and conditions with Signature Performance, Inc.

9.3 Will the CSP collect any ancillary data and if so, who has ownership over the ancillary data?

Per NIST 800-144, cloud providers hold significant details about the accounts of cloud consumers that could be compromised and used in subsequent attacks. Ancillary data also involves information the cloud provider collects or produces about customer-related activity in the cloud. It includes data collected to meter and charge for consumption of resources, logs and audit trails, and other such metadata that is generated and accumulated within the cloud environment.

This question is related to privacy control DI-1, Data Quality.

No, the CSP does not collect any ancillary data.

9.4 NIST 800-144 states, “Organizations are ultimately accountable for the security and privacy of data held by a cloud provider on their behalf.” Is this principle described in contracts with customers? Why or why not?

What are the roles and responsibilities involved between the organization and cloud provider, particularly with respect to managing risks and ensuring organizational requirements are met? This question is related to privacy control AR-3, Privacy Requirements for Contractors and Service Providers.

Our Business Associate Agreements (BAAs) with sub-business associates includes this language.

9.5 If the system is utilizing Robotics Process Automation (RPA), please describe the role of the bots.

Robotic Process Automation is the use of software scripts to perform tasks as an automated process that executes in parallel with or in place of human input. For example, will the automation move or touch PII/PHI information. RPA may also be referred to as “Bots” or Artificial Intelligence (AI).

The system does not utilize Robotics Process Automation (RPA).

Section 10. References

Summary of Privacy Controls by Family

Summary of Privacy Controls by Family

ID	Privacy Controls
AP	Authority and Purpose
AP-1	Authority to Collect
AP-2	Purpose Specification
AR	Accountability, Audit, and Risk Management
AR-1	Governance and Privacy Program
AR-2	Privacy Impact and Risk Assessment
AR-3	Privacy Requirements for Contractors and Service Providers
AR-4	Privacy Monitoring and Auditing
AR-5	Privacy Awareness and Training
AR-7	Privacy-Enhanced System Design and Development
AR-8	Accounting of Disclosures
DI	Data Quality and Integrity
DI-1	Data Quality
DI-2	Data Integrity and Data Integrity Board
DM	Data Minimization and Retention
DM-1	Minimization of Personally Identifiable Information
DM-2	Data Retention and Disposal
DM-3	Minimization of PII Used in Testing, Training, and Research
IP	Individual Participation and Redress
IP-1	Consent
IP-2	Individual Access
IP-3	Redress
IP-4	Complaint Management
SE	Security
SE-1	Inventory of Personally Identifiable Information
SE-2	Privacy Incident Response
TR	Transparency
TR-1	Privacy Notice
TR-2	System of Records Notices and Privacy Act Statements
TR-3	Dissemination of Privacy Program Information
UL	Use Limitation
UL-1	Internal Use
UL-2	Information Sharing with Third Parties

Signature of Responsible Officials

The individuals below attest that the information provided in this Privacy Impact Assessment is true and accurate.

Privacy Officer, Michael Hartmann

Information Systems Security Officer, Faimafili Monaghan

Information Systems Owner, Dena Liston

APPENDIX A-6.1

Please provide a link to the notice or verbiage referred to in Section 6 (a notice may include a posted privacy policy; a Privacy Act notice on forms; screen shot of a website collection privacy notice).

Department of Veterans Affairs Veterans Health Administration NOTICE OF PRIVACY PRACTICES

23VA10NB3, Non-VA Care (Fee) Records-VA - (7-30-2015)

24VA10A7, Patient Medical Records-VA -(10-2-2020)

43VA008, Veterans, Service Members, Family Members, and VA Beneficiary Survey Records - VA (1-25-2021)v

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147VA10, Enrollment and Eligibility Records - VA (8-17-2021)

HELPFUL LINKS:

General Records Schedule

<https://www.archives.gov/records-mgmt/grs.html>

National Archives (Federal Records Management):

<https://www.archives.gov/records-mgmt/grs>

VA Publications:

<https://www.va.gov/vapubs/>

VA Privacy Service Privacy Hub:

<https://dvagov.sharepoint.com/sites/OITPrivacyHub>

Notice of Privacy Practice (NOPP):

[VHA Notice of Privacy Practices](#)

[VHA Handbook 1605.04: Notice of Privacy Practices](#)