

## PRIVACY IMPACT ASSESSMENT (PIA)

#### For the

Coagulation Clinic (CoagClinic) Web Application

US Army Medical Command - DHP Funded Web Application

### **SECTION 1: IS A PIA REQUIRED?**

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

	(1)	Yes, from members of the general public.
	(2)	Yes, from Federal personnel* and/or Federal contractors.
$\times$	(3)	Yes, from both members of the general public and Federal personnel and/or Federal contractors.
	(4)	No

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

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

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<sup>\* &</sup>quot;Federal personnel" are referred to in the DoD IT Portfolio Repository (DITPR) as "Federal employees."

## **SECTION 2: PIA SUMMARY INFORMATION**

a.	Why	is this PIA being	created or update	ed? C	choose one:		
		New DoD Informat	tion System		New Electron	nic Collection	
		Existing DoD Info	rmation System	$\times$	Existing Elec	etronic Collection	
		Significantly Modi System	fied DoD Informati	on			
		s DoD information Network (SIPRNE		ed in	the DITPR or th	e DoD Secret Internet Protocol	
	$\boxtimes$	Yes, DITPR	Enter DITPR Syste	m Ider	ntification Number	15758	
		Yes, SIPRNET	Enter SIPRNET Ide	entifica	tion Number		_
		No					_
		this DoD informa on 53 of Office of				ique Project Identifier (UPI), require llar A-11?	ed
	$\boxtimes$	Yes		No			
	If "Ye	es," enter UPI	UII: 007	-00000	5769		
		If unsure,	consult the Compone	ent IT E	Budget Point of Con	tact to obtain the UPI.	
	A Priva	S Notice (SORN)? acy Act SORN is requi	red if the information s idents that is <u>retrieved</u>	ystem o	or electronic collectic	equire a Privacy Act System of on contains information about U.S. citizens entifier. PIA and Privacy Act SORN	
	$\boxtimes$	Yes		No			
	If "Ye	es," enter Privacy <i>I</i>	Act SORN Identifier		A0040-66b DAS0	3	
		Consult the Compo	nssigned designator, i conent Privacy Office f cy Act SORNs at: ht	or addi	tional information o	r	
		or					
	Date	of submission for a Consult the C	approval to Defensomponent Privacy Of		•		

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Contact the Component Information Management Control Officer or DoD Clearance Officer for this information. This number indicates OMB approval to collect data from 10 or more members of the public in a 12-month period regardless of form or format. Yes **Enter OMB Control Number Enter Expiration Date**  $\times$ No f. Authority to collect information. A Federal law, Executive Order of the President (EO), or DoD requirement must authorize the collection and maintenance of a system of records. (1) If this system has a Privacy Act SORN, the authorities in this PIA and the existing Privacy Act SORN should be the same. (2) Cite the authority for this DoD information system or electronic collection to collect, use, maintain and/or disseminate PII. (If multiple authorities are cited, provide all that apply.) (a) Whenever possible, cite the specific provisions of the statute and/or EO that authorizes the operation of the system and the collection of PII. (b) If a specific statute or EO does not exist, determine if an indirect statutory authority can be cited. An indirect authority may be cited if the authority requires the operation or administration of a program, the execution of which will require the collection and maintenance of a system of records. (c) DoD Components can use their general statutory grants of authority ("internal housekeeping") as the primary authority. The requirement, directive, or instruction implementing the statute within the DoD Component should be identified. 10 U.S.C. 1071, Medical and Dental Care; 10 U.S.C. 1079, Contracts for medical care for spouses and children; 10 U.S.C. 1079a, CHAMPUS: treatment of refunds and other amounts collected; 10 U.S.C. 1086, Contracts for Health Benefits for Certain Members, Former Members, and Their Dependents; 10 U.S.C. 1097a and 1097b TRICARE Prime and TRICARE Program; 42 U.S.C. Chapter 117, Sections 11131-11137 Reporting of Information and 11151-11152 Definitions and Reports; DoD Instruction 6015.23, Foreign Military Personnel Care and Uniform Business Offices in Military Treatment Facilities (MTFs); 32 CFR Part 199, Civilian Health and Medical Program of the Uniformed Services (CHAMPUS); E.O. 9397 (SSN);

e. Does this DoD information system or electronic collection have an OMB Control Number?

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

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

The purpose of the CoagClinic application is to provide critical long-term tracking of patients receiving anticoagulation therapy (Coumadin) using a proven web based methodology. This system provides the ability to improve the monitoring of the anti-coagulation therapy levels, improve patient safety, and reduce the likelihood of the patient developing further complications that could result in hospitalization.

CoagClinic maintains selected PII to include Name, Social Security Number, Gender, Race, Date of Birth, Address, Telephone Number, Medical Information, Family Member Program Category, Sponsor Social Security Number, and Email Address.

Categories of individuals that information may be collected from may include: active duty and their dependents, retirees, contractors, foreign nationals, former spouses, reservist, and national guard personnel.

The CoagClinic application is currently hosted at the North Beach Pavilion (NBP) Fort Sam Houston, San Antonino TX.

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

Risks include unauthorized access to PII and unauthorized disclosure of PII. These risks areaddressed by the following:

- 1) The system has role-based access.
- 2) System usersare required to take initial and annual refresher training concerning PII and protected health information.
- 3) The system has no external interface with other systems and does not transfer data to any other system.
- 4) Appropriates afeguards are in place to minimize the possibility of disclosure. The database is physically housed in an access-controlled server room and appropriate application level security is in effect.
- 5) CACaccessonly and userscan only accessvia the .mil domain

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

$\boxtimes$	Within the I	DoD Component.
	Specify.	The PII is shared with health care providers within the DHA medical treatment facility using this application. Authorized users are registered in the appropriate active directory security group.
$\boxtimes$	Other DoD C	components.
	Specify.	The PII is shared with health care providers within other Service medical treatment facility using this application
	Other Federa	al Agencies.
	Specify.	
	State and Lo	cal Agencies.
	Specify.	

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		Contractor	(Enter name and describe the language in the contract that safeguards Ph.)
		Specify.	The manufacturer/developer; Standing Stone Inc. servicing this application may have access to some data. Contracts for manufacturer support include standard Military health System (MHS) HIPAA Business Associate Agreement which require the protection of PII/PHI.
		Other (e.g.	, commercial providers, colleges).
		Specify.	
i.	Do	individuals	have the opportunity to object to the collection of their PII?
		Yes	⊠ No
		(1) If "Yes,"	describe method by which individuals can object to the collection of PII.
		(2) If "No," s	state the reason why individuals cannot object.
	<b>T</b> L.		and modising to in the DII collection manages for this confication. The DII is obtained from
		e patient does sting systems	s not participate in the PII collection process for this application. The PII is obtained from and records.
j.	Do i	ndividuals l	have the opportunity to consent to the specific uses of their PII?
		Yes	No
		(1) If "Yes,"	describe the method by which individuals can give or withhold their consent.

The patient does not participate in the PII collection process for this application. The PII is obtained from existing systems and records.

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

What information is provided to an individual when asked to provide PII data? Indicate all that bly.						
Privacy Act Statement		Privacy Advisory				
Other	$\boxtimes$	None				
applicable format.						

#### NOTE:

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

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

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