



## PRIVACY IMPACT ASSESSMENT (PIA)

For the

Enterprise Web AMEDD Electronic Forms Support System (WEB-AEFSS) (EWA)

US Army Medical Command - Defense Health Program (DHP) Funded System

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

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

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

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

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

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



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

Contact the Component Information Management Control Officer or DoD Clearance Officer for this information.

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

**Yes**

**Enter OMB Control Number**

**Enter Expiration Date**

**No**

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

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

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

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

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

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

OPM/GOVT-1 - 5 U.S.C. 1302, 2951, 3301, 3372, 4118, 8347, and Executive Orders 9397, as amended by 13478, 9830, and 12107.

A0040-66b DASG - 10 U.S.C. 3013, Secretary of the Army; 10 U.S.C. 1071-1085, Medical and Dental Care; 50 U.S.C. Supplement IV, Appendix 454, as amended, Persons liable for training and service; 42 U.S.C. Chapter 117, Sections 11131-11152, Reporting of Information; 10 U.S.C. 1097a and 1097b TRICARE Prime and TRICARE Program; 10 U.S.C. 1079, Contracts for Medical Care for Spouses and Children; 10 U.S.C. 1079a, CHAMPUS; 10 U.S.C. 1086, Contracts for Health Benefits for Certain Members, Former Members, and Their Dependents; E.O. 9397 (SSN); DoD Instruction 6015.23, Delivery of Healthcare at Military Treatment Facilities (MTFs); DoD Directive 6040.37, Confidentiality of Medical Quality Assurance (QA) Records; DoD 6010.8-R, Civilian Health and Medical Program of the Uniformed Services (CHAMPUS); Army Regulation 40-66, Medical Record Administration and Health Care Documentation.

**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 this DoD information system is to provide an easy to access the repository of electronic forms used by all US Army Medical Command (MEDCOM) personnel. All levels of forms are provided ranging from Department of Defense, Service forms including Army, Navy, and Air Force, to local and unique forms. These forms constitute the full range of MEDCOM functions, including but not limited to, personnel, administrative, logistics, information technology, clinical, financial, medical and training. There are more than 2400 electronic forms available in this system.

The types of personal information collected on the various electronic forms include: demographic data, financial, employment, legal, and medical information.

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

The privacy risks associated with the PII collected are unauthorized access and unauthorized disclosure if the system is compromised. Security safeguards are in place to mitigate these risks. The security safeguards are addressed in Section 3d below.

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

**Within the DoD Component.**

Specify.

Each electronic form has its own workflow and process. Some forms are used exclusively within the US Army Medical Command while others are coordinated with other organizations as listed below. PII entered in the electronic form is only shared with individuals who have a need to know.

**Other DoD Components.**

Specify.

Select organizations within the Department of Defense, Navy, and Air Force.

**Other Federal Agencies.**

Specify.

**State and Local Agencies.**

Specify.

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

Specify.

Some individuals who use this system are employed on a contractual basis. There are clauses in their contracts requiring compliance with the Privacy Act and the Health Insurance Portability and Accountability Act (HIPAA) requirements to protect personal

information.

**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.

There are Privacy Act Statements annotated on the electronic forms which collect PII. The use of the electronic forms in this system is voluntary. If individuals object to the collection of their PII on a specific form, this objection must be addressed with the proponent for that particular form.

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

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

**Yes**  **No**

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

There are Privacy Act Statements annotated on the electronic forms which collect PII. The use of the forms in this system is voluntary. If individuals object to the specific uses of their PII, this must be addressed with the proponent for that particular form.

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

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

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> <b>Privacy Act Statement</b> | <input type="checkbox"/> <b>Privacy Advisory</b> |
| <input type="checkbox"/> <b>Other</b>                            | <input type="checkbox"/> <b>None</b>             |

Describe each applicable format.

There are Privacy Act Statements annotated on the electronic forms which collect PII.

**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.**