



## PRIVACY IMPACT ASSESSMENT (PIA)

For the

Executive Medicine Database
US Army Medical Command - DHP Funded 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? Choose one option from the choices below. (Choose (3) for foreign nationals).**

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

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

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

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

**SECTION 2: PIA SUMMARY INFORMATION**

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

- New DoD Information System
- New Electronic Collection
- Existing DoD Information System
- Existing Electronic Collection
- Significantly Modified DoD Information System

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

- Yes, DITPR      Enter DITPR System Identification Number
- Yes, SIPRNET      Enter SIPRNET Identification Number
- No

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

- Yes
- No

If "Yes," enter UPI

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

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

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

- Yes
- No

If "Yes," enter Privacy Act SORN Identifier

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

or

Date of submission for approval to Defense Privacy Office

Consult the Component Privacy Office for this date.

**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.

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 Executive Medicine Database will be used to document and track the administrative health care coordination services available to US Army General Officers (GO), TRICARE-eligible Senior Executive Service (SES) members, and their families located in the National Capital Region (NCR). This database will capture the workload and actions taken to coordinate health care during the frequent moves/travel and track mandatory medical readiness parameters. The individuals who elect to use these services will complete a Medical Treatment Facility (MTF) and Provider Preference Form.

The personal information collected and managed in this database includes: Name; Rank/Grade; Social Security Number (SSN); Gender; Date of Birth; Phone Number; Address; Spouse Information; 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 collection are unauthorized access, inaccurate information in the database, and unauthorized disclosure of PII. There are security measures in place to mitigate these risks.

**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.

The PII is shared with the Executive Medicine staff at the Office of The Army Surgeon General. PII may be shared with members of the individual's primary medical care team as needed.

**Other DoD Components.**

Specify.

PII may be shared with members of the individual's primary medical care team as needed.

**Other Federal Agencies.**

Specify.

**State and Local Agencies.**

Specify.

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

Specify.

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

Specify.

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

**Yes**

**No**

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

Use of the Executive Medicine administrative health care coordination services is optional. A Privacy Act Statement is available on the MTF and Provider Preference Form which is completed by individuals who request these services. If the individual objects to the collection of their PII, comprehensive health care coordination may not be possible, but care is not denied.

(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.

Use of the Executive Medicine administrative health care coordination services is optional. A Privacy Act Statement is available on the MTF and Provider Preference Form which is completed by individuals who request these services. If individuals object to the specific uses of their PII, comprehensive health care coordination may not be possible, but care is not denied.

(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.

- Privacy Act Statement                       Privacy Advisory  
 Other                                               None

Describe each applicable format.

MTF AND PROVIDER PREFERENCE FORM - PRIVACY ACT STATEMENT.

1. AUTHORITY FOR COLLECTION OF INFORMATION INCLUDING SOCIAL SECURITY NUMBER (SSN)  
Sections 133, 1071-87, 3012, 5031 and 8012, title 10, United States Code and Executive Order 9397.

2. PRINCIPAL PURPOSES FOR WHICH INFORMATION IS INTENDED TO BE USED  
This form provides you the advice required by The Privacy Act of 1974. The personal information will facilitate and document your health care. The Social Security Number (SSN) of member or sponsor is required to identify and retrieve health care records.

3. ROUTINE USES  
The primary use of this information is to facilitate the health care coordination for general officers, their beneficiaries and other senior level military and national leaders during changes in duty station and mission related travel. Care coordination services include transferring care between providers and tracking mission required medical readiness for active duty patients. Any additional coordination service outside of those listed above is patient-initiated and would only involve the information voluntarily provided by the patient. Information provided may be further disclosed to the health care providers with whom care is being coordinated.

4. WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION.  
  
Disclosure of requested information is voluntary. Use of the Executive Medicine administrative health care coordination services is optional. If the requested information is not furnished, comprehensive health care coordination may not be possible, but CARE WILL NOT BE DENIED.

**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.**