



Privacy Impact Assessment for the VA IT System called:

VBMS Core (VBMSCORE)

Veterans Benefits Administration (VBA) Benefits, Appeals, and Memorials (BAM)

eMASS ID # 2490

Date PIA submitted for review:

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System Contacts:

System Contacts

| | Name | E-mail | Phone Number |
|--|------------------|-------------------------|-----------------------|
| Privacy Officer | Marvis Harvey | Marvis.Harvey@va.gov | 202-461-8401 |
| Information System Security Officer (ISSO) | Joseph Facciolli | Joseph.Facciolli@va.gov | 212-842-2999 x2012 |
| Information System Owner | Christina Lawyer | Christina.Lawyer@va.gov | 518-210-0581 |

Abstract

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

VBMS Core is a component of the VBMS effort which is a key piece of the Department of VA Office of Information and Technology (OIT). This system is an offering to modernize computer systems that support the Veterans benefits segment at the Veterans Benefit Administration (VBA) and is used to create and develop a Veteran's claim. VBMS Core components provide global support for basic claim management services, document storage (eFolder), the National Work Queue (NWQ) application, interfaces to other VA and partner systems, and workflow management. The VBA contains distinct functions that can be categorized and sequenced as follows; Core - Establishment: involves receiving the Veteran's request and creating a claim for processing, and Core - Development involves collecting necessary evidence to prepare the claims for rating determination. Core is part of the larger VBMS initiative aimed at modernizing benefit systems, eliminating a paper-centric process, and reducing the claims backlog at the VBA.

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?
VBMS Core (VBMSCORE) is under the authority of the Benefits, Appeals, and Memorials (BAM).

B. What is the business purpose of the program, IT system, or technology and how it relates to the program office and agency mission?
Establish claims, that is the ability to receive a claim, verify a Veteran's service and record, manage folders, and create/establish a new or reopened claim.

C. Who is the owner or control of the IT system or project?
VBMS Core is owned and controlled by Benefits, Appeals, and Memorials (BAM).

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?
Veterans and dependents of Veterans that file a claim will have information stored or processed by this system. The expected number of Veterans and/or dependents is around 100 thousand to start.

E. What is a general description of the information in the IT system and the purpose for collecting this information?
The following information is collected and processed for Veterans and dependents including, Name, Social Security Number, Date of Birth, Mother's Maiden Name,

Personal Mailing Address, Personal Email Address, Financial Information, Medications, Race / Ethnicity, Tax Identification Number, Gender, Military History / Service Connection, Benefit Information, Medical Records for the purpose of processing Veterans claims.

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

VBMS Core shares information with the Veterans Benefits Administration (VBA) through the Compensation and Pension Record Interchange (CAPRI) Electronic software package. VBMS Core also shares information with Data Access Services (DAS) that brokers data for the following systems: Compensation & Pension Record Interchange (CAPRI), Exam Management, Health Artifact & Image Management Solution (HAIMS). VBMS Core shares information with Performance Analysis & integrity (PA&I), to send Veteran and claim data and fetches exam data. VBMS Core shares information Clinical User Interface (CUI), to provide an interface for clinicians to upload completed exam results in Portable Document Format (PDF), Enterprise Veterans Self-service (EVSS) to provide several services to the Veterans Relationship Management (VRM) program. VBMS Core shares information with Digits to Digits (D2D), because the D2D initiative is a data delivery service that allows accredited partners, such as VSOs, to use their current claim management systems to prepare claims and submit them to VBMS. VBMS Core shares information with Veterans Claims Intake Programs (VCIP), which VBMS provides an interface for third-party scanning vendors, collectively referred to as the VCIP, to upload scanned images of documents sent as part of the claims processing workflow. VBMS requires that document upload functionality includes the ability to extract document metadata. VBMS Core shares information with Benefit Gateway Services (BGS), which provides the bulk of the claims processing functionality that is not directly related to scanned document storage and routing, as well as a common security framework for authentication and authorization. VBMS Core shares information with Centralized Printing Service (CPS), the VA CPS is designed to centralize outbound correspondence, enable electronic communication, and standardize the letters sent to communicate with Veterans and other relevant parties. VBMS Core shares information with Caseflow, which is a Board of Veterans' Appeals (BVA) system used to track and process paperless appeals and maintain appeals information in the Veteran Appeals Control and Locator System (VACOLS). This system interacts with VBMS to verify and reconcile claims and appeals information. VBMS Core shares information with Master Veteran Index (MVI), which is a database that is the VA identity service, which provides a unique identifier used to establish, maintain, and synchronize Veteran and beneficiary identity information.

G. Is the system 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?

VBMS Core is on the Benefits Integration Platform (BIP) which resides on the VAEC (Veterans Administration Enterprise Cloud), which are cloud platforms that offers several on-demand operations and therefore has no issues with synchronization.

3. Legal Authority and SORN

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

- 5 U.S.C. § 552a, Freedom of Information Act of 1996, As Amended By Public Law No. 104--- 231, 110 Stat. 3048
- 5 U.S.C. § 552a, Privacy Act of 1974, As Amended
- Public Law 100---503, Computer Matching and Privacy Act of 1988
- Privacy Act of 1974; U.S Code title 5 USC section 301 title 38 section 1705, 1717, 2306-2308 & Title38, US Code section 7301 (a) and Executive Order 9397
- OMB Circular A---130, Management of Federal Information Resources, 1996
- OMB Memo M---03---22, OMB Guidance for Implementing the Privacy Provisions
- OMB Memo M---07---16, Safeguarding Against and Responding to the Breach of PII
- The Health Insurance Portability and Accountability Act of 1996 (HIPAA) •
- State Privacy Laws
- The legal authority is 38 U.S.C 7601-7604 and U.S.C 7681-7683 and Executive Order 9397
- System of Record Notice (SORN) 58VA21/22/28 (November 8, 2021)
Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records – VA
<https://www.govinfo.gov/content/pkg/FR-2021-11-08/pdf/2021-24372.pdf>

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 amendments or revisions to the SORN are required.

Yes, the SORN does cover cloud usage.

System of Record Notice (SORN) 58VA21/22/28 (November 8, 2021)

Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records – VA

<https://www.govinfo.gov/content/pkg/FR-2021-11-08/pdf/2021-24372.pdf>

4. System Changes

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

Completion of this PIA will not result in changes to existing business processes.

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

Completion of the 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 (III), 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://vaww.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 type="checkbox"/> Health Insurance | <input type="checkbox"/> Integrated Control |
| <input checked="" type="checkbox"/> Social Security | <input type="checkbox"/> Beneficiary Numbers | <input type="checkbox"/> Number (ICN) |
| <input type="checkbox"/> Number | <input type="checkbox"/> Account numbers | <input checked="" type="checkbox"/> Military |
| <input checked="" type="checkbox"/> Date of Birth | <input type="checkbox"/> Certificate/License | <input type="checkbox"/> History/Service |
| <input checked="" type="checkbox"/> Mother's Maiden Name | <input type="checkbox"/> numbers ¹ | <input type="checkbox"/> Connection |
| <input checked="" type="checkbox"/> Personal Mailing | <input type="checkbox"/> Vehicle License Plate | <input type="checkbox"/> Next of Kin |
| <input type="checkbox"/> Address | <input type="checkbox"/> Number | <input checked="" type="checkbox"/> Other Data Elements |
| <input type="checkbox"/> Personal Phone | <input type="checkbox"/> Internet Protocol (IP) | <input type="checkbox"/> (list below) |
| <input type="checkbox"/> Number(s) | <input type="checkbox"/> Address Numbers | |
| <input type="checkbox"/> Personal Fax Number | <input checked="" type="checkbox"/> Medications | |
| <input checked="" type="checkbox"/> Personal Email | <input checked="" type="checkbox"/> Medical Records | |
| <input type="checkbox"/> Address | <input checked="" type="checkbox"/> Race/Ethnicity | |
| <input type="checkbox"/> Emergency Contact | <input checked="" type="checkbox"/> Tax Identification | |
| <input type="checkbox"/> Information (Name, Phone | <input type="checkbox"/> Number | |
| <input type="checkbox"/> Number, etc. of a different | <input type="checkbox"/> Medical Record | |
| <input type="checkbox"/> individual) | <input type="checkbox"/> Number | |
| <input checked="" type="checkbox"/> Financial Information | <input checked="" type="checkbox"/> Gender | |

Other PII/PHI data elements:

Claims/Appeals, System Log Files, Benefit Information

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

PII Mapping of Components (Servers/Database)

VBMS Core consists of **four** key components (databases). Each component has been analyzed to determine if any elements of that component collect PII. The type of PII collected by **VBMS Core** 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 |
|--|---|---|---|---|--|
| Database names are not identified in the VBMS application interconnection. Receiving systems manage internal information delivery as part of their receiving application | Yes | Yes | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother’s Maiden Name • Personal Mailing Address • Personal Email Address • Financial Information • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection • Benefit Information • Medical Records • Claims/Appeals • System Log Files | Veteran data is required to process claims and pay benefits | VA Network only which requires VPN access and 2-Factor Authentication thru the Trusted Internet Connection (TIC) Gateway |

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?

VBMS Core system receives information directly from the application's user interface (UI) and electronically, via web services. VBMS Core receives information from Benefit Gateway Services (BGS), Caseflow, Centralized Printing Service (CPS), Master Veteran's Index (MVI), Clinical User Interface (CUI), Digits to Digits (D2D), Enterprise Veteran Self Service (EVSS), Veterans Claims Intake Program (VCIP), Performance Analysis & integrity (PA&I), VBA through Compensation & Pension Record Interchange (CAPRI), Exam Management, Health Artifact & Image Management Solution (HAIMS).

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.

The VBMS Core interface assists end-users with veteran claim data (filed by Veteran Service Organization (VSO), veterans, or other sources), veteran exam results, and additional evidence in relation to filed claims. This is to modernize to processing of Veteran claims.

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

VBMS Core does create information for claims from Benefit Gateway Services (BGS), Caseflow, Centralized Printing Service (CPS), Master Veteran's Index (MVI), Clinical User Interface (CUI), Digits to Digits (D2D), Enterprise Veteran Self Service (EVSS), Veterans Claims Intake Program (VCIP), Performance Analysis & integrity (PA&I), VBA through Compensation & Pension Record Interchange (CAPRI), Exam Management, Health Artifact & Image Management Solution (HAIMS).

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?

Information is collected from VBA claims processors in the Region Offices (RO) as input through the web UI. Scanning vendors, collectively referred to as the VCIP, scan in paper documents that exist for veterans remotely via web services into the VBMS Core document repository. VBMS Core receives claims information electronically via web services from VA hospitals and health care providers.

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?

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.

As information is imported from VA healthcare providers, the accuracy is verified by MVI. The Master Veteran Index (MVI) is the authoritative source for VBMS Core claimant information. Initial implementation includes functionality for the VBMS UI Search and Advanced Search. If there is no data at MVI for an individual, the system will revert to calling CorpDB (legacy) as the legacy application did before.

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?

VBMS Core 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

- 5 U.S.C. § 552a, Freedom of Information Act of 1996, As Amended By Public Law No. 104--- 231, 110 Stat. 3048
- 5 U.S.C. § 552a, Privacy Act of 1974, As Amended
- Public Law 100---503, Computer Matching and Privacy Act of 1988
- Privacy Act of 1974; U.S Code title 5 USC section 301 title 38 section 1705, 1717, 2306-2308 & Title38, US Code section 7301 (a) and Executive Order 9397
- OMB Circular A---130, Management of Federal Information Resources, 1996
- OMB Memo M---03---22, OMB Guidance for Implementing the Privacy Provisions
- OMB Memo M---07---16, Safeguarding Against and Responding to the Breach of PII
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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: VBMS Core collects Personally Identifiable Information (PII) and other highly delicate Personal Health Information (PHI). This information is specifically collected for the purpose of VBMS Core as a system. It is an absolute requirement for the efficacy of VBMS Core. If this information were to be breached or accidentally released to inappropriate parties or the public, it could result in financial, personal, and/or emotional harm to the individuals whose information is contained in the system.

Mitigation: VBMS Core utilizes the Benefits Security Services (BSS) Single-Sign On (SSO) services, to provide a central login for VBA applications on the BIP (Benefits Integration Platform) Platform. The SSO services were created in response to the VA Mandate, that all applications utilize Identity and Access Management (IAM) to log in, and the subsequent retirement of Benefits Enterprise Platform (BEP) SiteMinder. This SSO provides the ability for VBA users to log in via Personal Identity Verification (PIV) card, and select their current station then continue to utilize other BIP services without logging in to each individual application.

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 | Used to identify Veteran | Not used |
| Social Security Number | Used to verify the identity of the Veteran | Not used |
| Date of Birth | Used to identify the Veteran | Not used |
| Mother's Maiden Name | Used to verify the identity of the Veteran | Not used |
| Personal Mailing Address | Used to correspond with the Veteran | Not used |
| Personal Email Address | Used to correspond with the Veteran | Not used |
| Financial Information | Used as a reference for the Veteran's account | Not used |
| Medications | Used to track medical information | Not used |
| Race / Ethnicity | Used to verify the identity of the Veteran | Not used |
| Tax Identification Number | Used as a file number for Veteran | Not used |
| Gender | Used to verify the identity of the Veteran | Not used |
| Military History / Service Connection | Used to determine benefits eligibility | Not used |
| Claims/Appeals | Used to verify the processed information of the Veteran | Not used |
| System Log Files | Used to document metadata | Not used |
| Benefit Information | Used to determine benefit eligibility | Not used |
| Medical Records | Used to track medical information | Not used |

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?

The analysis that VBMS Core conducts is presented as a Scorecard which is created from active claim statistics.

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.

Scorecard is an analytics tool that provides statistical insight into the current state of the VBMS Core. The Analytics Scorecard, NWQ Dashboard, Group Scorecard and National Inventory Snapshot provide visuals for VBMS Core users with differing roles to statistical data showing various aspects of the claim management process. There are a variety of statistics available showing the status of a claim as well as statistics representing workflow indicators to help supervisors identify languishing claims. Statistics are collected by the analytics Extract Transform Load (ETL) which processes in 'near real-time' and is refreshed at appropriate intervals throughout the day.

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?

All sensitive and confidential data is encrypted using Federal Information Processing Standards (FIPS) 140-2 compliant encryption algorithms in transit and at rest.

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

VBMSCORE is an internally hosted application on BIP meaning that only the authorized user can access VBMSCORE, and those users must be on the VA network which insulates VBMSCORE from any outside/public access. VBMSCORE employ a variety of security measures that satisfy controls dictated within the VA 6500 Rev 4 Directive. SSN are encrypted while in use, in transit and at rest.

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

Data is stored in a secure enclave within Amazon Web Service (AWS) GovCloud. Access to information is protected by industry standard authentication and authorization protocols. Data is encrypted both in transit and at rest using FIPS 140-2 compliant encryption algorithms.

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?

Personnel that will be accessing information systems must read and acknowledge their receipt and acceptance of the VA National Rules of Behavior (ROB) or VA Contractor's ROB prior to gaining access to any VA information system or sensitive information. The rules are included as part of the security awareness training which all personnel must complete via the VA's Talent Management System (TMS). After the user's initial acceptance of the ROB, the user must reaffirm their acceptance annually as part of the security awareness training. Acceptance is obtained via electronic acknowledgment and is tracked through the TMS system.

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

Yes, criteria, procedures, controls, and responsibilities regarding access to this system are documented in various sites which are but not limited to TMS, GRC tool, and SharePoint sites.

2.4c Does access require manager approval?

Yes

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

Yes, if PII is needlessly accessed or shared, an investigation can track it back to the system user. This is reported to the VA Privacy Office.

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

The Platform Accelerator teams control the security safeguards that are in all applications that use the Benefits Integration Platform (BIP) framework.

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
- Date of Birth
- Mother's Maiden Name
- Personal Mailing Address
- Personal Email Address
- Financial Information
- Medications
- Race / Ethnicity
- Tax Identification Number
- Gender
- Military History / Service Connection
- Benefit Information
- Medical Records
- Claims/Appeals
- System Log Files

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.*

Data is maintained in accordance with VA data retention policies.

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?

Yes

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

VBA Records Management, Records Control Schedule VB-1, Part 1, Section VII as authorized by NARA

https://www.benefits.va.gov/WARMS/docs/regs/RCS_I.doc

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.

Electronic data and files of any type, including PHI, SPI, Human Resources records, and more are destroyed in accordance with the Media Sanitization section of the VA Directive 6500 VA Cybersecurity Program (February 24, 2021) and are compliant with NIST SP 800-88. 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. Digital media is shredded or sent out for destruction.

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.

Test data is used during the design and development process. Access to PII in the production environment is controlled and not used for testing/development.

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 potential risk that sensitive personal data may be compromised if it is retained for a period of time beyond what is necessary to fulfill the mission of this system.

Mitigation: Controlled access to the data is maintained. Only those personnel required by job assignment have access to the data. Each employee with access to the data is required to attend data privacy training.

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

| List the Program Office or IT System information is shared/received with | List the purpose of the information being shared /received with the specified program office or IT system | List the specific PII/PHI data elements that are processed (shared/received/transmitted) with the Program Office or IT system | Describe the method of transmittal |
|---|--|---|---|
| Veterans Benefits Administration (VBA) | Information is shared across VBA to facilitate Veterans benefits claim processing. | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother’s Maiden Name • Personal Mailing Address • Personal Email Address • Financial Account Information • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection | Compensation and Pension Record Interchange (CAPRI) electronic software package. |
| Data Access Services (DAS) | DAS is the common service that exchanges information with other agencies both within VA and external to VA | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother’s Maiden Name • Personal Mailing Address • Personal Email Address | Simple Object Access Protocol (SOAP) over HTTPS using SSL encryption and Certificate Exchange |

| <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> |
|---|--|---|--|
| | | <ul style="list-style-type: none"> • Financial Account Information • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection | |
| Performance Analysis & Integrity (PA&I) | PA&I uses a daily extract of claim and work item data to produce reports and metrics for VBMS Core | <ul style="list-style-type: none"> • System Log Files • Name • Social Security Number • Date of Birth • Mother’s Maiden Name • Personal mailing Address • Personal email Address • Financial Account Information • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection | Secure File Transport Protocol (SFTP) |
| Clinical User Interface (CUI) | CUI provides an interface for clinicians to upload completed exam results in Portable Document Format (PDF) | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother’s Maiden Name • Personal Mailing Address | SOAP over HTTPS using SSL encryption and certificate exchange. |

| <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> |
|---|--|---|--|
| | | <ul style="list-style-type: none"> • Personal Email Address • Financial Account Information • Current Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection | |
| Enterprise Veterans Self-Service (EVSS) | EVSS uses the VBMS-Core Claim Service to establish claims and associated claim contentions | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother's Maiden Name • Personal Mailing Address • Personal Email Address • Financial Account Information • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection | SOAP over HTTPS using SSL encryption and certificate exchange. |
| Digits to Digits (D2D) | The D2D initiative is a data delivery service that allows current claim management systems to prepare claims and submit them to VBMS Core. | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother's Maiden Name | SOAP over HTTPS using SSL encryption and certificate exchange. |

| <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> |
|---|--|---|--|
| | | <ul style="list-style-type: none"> • Personal Mailing Address • Personal Email Address • Financial Account Information • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection | |
| Veterans Claims Intake Program (VCIP) | Uploads scanned images of documents sent as part of the claims processing workflow. | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother’s Maiden Name • Personal Mailing Address • Personal Email Address • Financial Information • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection | Simple object access protocol over HTTPS using SSL encryption and certificate exchange |
| Benefit Gateway Service (BGS) | BGS is the gateway into the Corp DB which was previously the authoritative source for most of the veteran and claim data for VBA | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother’s Maiden Name • Personal Mailing Address • Personal Email Address | SOAP over HTTPS using SSL encryption and Certificate Exchange |

| <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> |
|---|--|---|--|
| | | <ul style="list-style-type: none"> • Financial Account Information • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection • Benefit Information | |
| Caseflow | Used to track and process paperless appeals and maintain appeals information in the Veteran Appeals Control and Locator System (VACOLS). | <ul style="list-style-type: none"> • Claims/Appeals | Simple object access protocol over HTTPS using SSL encryption and certificate exchange |
| Exam Management | Support the automation of exam requests and distribution of exam results. | <ul style="list-style-type: none"> • Medical Records • Claims/Appeals | Simple object access protocol over HTTPS using SSL encryption and certificate exchange |
| Health Artifact and Image Management Solution (HAIMS) | When VBMS users need access to the Veteran Service Treatment Record (STR) documents. | <ul style="list-style-type: none"> • Medical Records | Simple object access protocol over HTTPS using SSL encryption and certificate exchange |
| Centralized Printing Service (CPS) | The VA CPS is designed to centralize outbound correspondence, enable electronic communication, and standardize the letters sent to communicate | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother's Maiden Name • Personal Mailing Address • Personal Email Address • Financial Information | Simple object access protocol over HTTPS using SSL encryption and certificate exchange |

| <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> |
|---|---|---|--|
| | with Veterans and other relevant parties. | <ul style="list-style-type: none"> • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection • Benefit Information • Medical Records • Claims/Appeals | |
| Master Veteran Index (MVI) | Database that is the VA identity service, which provides a unique identifier used to establish, maintain, and synchronize Veteran and beneficiary identity information. | <ul style="list-style-type: none"> • Name • Social Security Number • Date of Birth • Mother’s Maiden Name • Personal Mailing Address • Personal Email Address • Financial Account Information • Medications • Race / Ethnicity • Tax Identification Number • Gender • Military History / Service Connection | Simple object access protocol over HTTPS using SSL encryption and certificate exchange |

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: Personally Identifiable Information (PII), including personal contact, service, and benefits information could be released to unauthorized individuals.

Mitigation: VBMS Core adheres to the access controls established by the VA Office of Information Technology (OIT) and the following security controls: Audit and Accountability, Security Assessment and Authorization, Incident Response, Personnel Security, and Identification and Authentication. All employees with access to Veteran information are required to complete the VA Privacy and Information Security Awareness training and acknowledge the Rules of Behavior annually. Information is shared only in accordance with VA Handbook 6500.

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

| <i>List External Program Office or IT System information is shared/received with</i> | <i>List the purpose of information being shared / received / transmitted 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 or IT system</i> | <i>List the legal authority, binding agreement, SORN routine use, etc. that permit external sharing (can be more than one)</i> | <i>List the method of transmission and the measures in place to secure data</i> |
|--|---|--|--|---|
| N/A | N/A | N/A | N/A | N/A |

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: The is no external sharing.

Mitigation: There is no external sharing.

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.

VA gathers or creates these records in order to enable it to administer statutory benefits programs to Veterans, Service Members, Reservists, and their spouses, surviving spouses, and dependents, who file claims for a wide variety of Federal Veteran's benefits administered by VA. See the statutory provisions cited in "Authority for maintenance of the system". This notice is provided by the SORN for better understanding to the reader. The System of Record Notice (SORN) as listed in the Federal Register: 58VA21/22/28, *Compensation, Pension, Education, and Rehabilitation Records- VA* <https://www.govinfo.gov/content/pkg/FR-2021-11-08/pdf/2021-24372.pdf>

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

When Veterans apply for benefits, The Notice of Privacy Practice (NOPP) is a document which explains the collection and use of protected information to individuals applying for benefits. A signed statement acknowledging that the individual read and understood the NOPP.

https://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=9946

The System of Record Notice (SORN) as listed in the Federal Register:

58VA21/22/28, *Compensation, Pension, Education, and Rehabilitation Records- VA* <https://www.govinfo.gov/content/pkg/FR-2021-11-08/pdf/2021-24372.pdf>

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.

The Department of Veterans Affairs provides public notice that the system exists in two ways:

1. The System of Record Notice (SORN) as listed in the Federal Register:

58VA21/22/28, *Compensation, Pension, Education, and Rehabilitation Records- VA*

<https://www.govinfo.gov/content/pkg/FR-2021-11-08/pdf/2021-24372.pdf>

2. This Privacy Impact Assessment (PIA) also serves as notice of the Enterprise Data Warehouse (EDW). As required by the eGovernment Act of 2002, Pub.L. 107–347 §208(b)(1)(B)(iii), the Department of Veterans Affairs “after completion of the [PIA] under clause (ii), make the privacy impact assessment publicly available through the website of the agency, publication in the Federal Register, or other means.”

<https://department.va.gov/privacy/privacy-impact-assessments/>

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.

Individuals have the right to decline providing information to VA personnel. However, failure to provide information may result in denial of access to claims for health care benefits, and various other benefits. Veterans and their family or guardian (spouse, children, parents, grandparents, etc.) cannot decline their information from being included to determine eligibility and entitlement for VA compensation and pension benefits, and also designate a guardian to manage the VA compensation and pension benefits.

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.

While individuals may have the ability to consent to various uses of their information at the VA, they are not required to consent to the use of their information to determine eligibility and entitlement for VA compensation and pension benefits. The Privacy Act and VA policy require that PII information only be used for the purpose(s) for which it was collected unless consent (opt-in) is granted. Individuals must be provided an opportunity to provide consent for any secondary use of information such as use of collected information for marketing.

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: In the event that an individual whose SPI is collected by this system received insufficient notice, there is a risk that the individual will be unaware of what PII/PHI information has been collected, and how that information is being used.

Mitigation: The VA mitigates this risk by providing two forms of notice, as identified in Section 6.1, including the System of Record Notice and Privacy Act statement.

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.***

Those wishing to obtain more information about access, redress, and record correction of Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records, should contact the VA Regional Office as directed in the System of Record Notice (SORN) "VA Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records – VA 58VA21/22/28 - Compensation, Pension, Education and Vocational Rehabilitation and Employment Records VA
<https://www.govinfo.gov/content/pkg/FR-2021-11-08/pdf/2021-24372.pdf>

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)?

This system is not exempt.

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?

This system follows Privacy Act procedures and regulations.

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.

Those wishing to obtain more information about access, redress, and record correction of Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records, should contact the VA Regional Office as directed in the System of Record Notice (SORN) “VA Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records – VA 58VA21/22/28 - Compensation, Pension, Education and Vocational Rehabilitation and Employment Records VA

<https://www.govinfo.gov/content/pkg/FR-2021-11-08/pdf/2021-24372.pdf>

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.

Those wishing to obtain more information about access, redress, and record correction of Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records, should contact the VA Regional Office as directed in the System of Record Notice (SORN) “VA Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records – VA 58VA21/22/28 - Compensation, Pension, Education and Vocational Rehabilitation and Employment Records VA

<https://www.govinfo.gov/content/pkg/FR-2021-11-08/pdf/2021-24372.pdf>

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.

Veterans and other beneficiaries may contact their supporting VA regional office or VHA center to learn how to access, correct, or contest their information.

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: Individuals may seek to access or redress their records held by the VA Office and a risk exists that their claim will not be processed correctly.

Mitigation: By publishing this PIA and the applicable SORN, the VA makes the public aware of the unique status of applications and evidence files. Furthermore, this document and the SORN provide the point of contact for members of the public who have questions or concerns about applications and evidence files.

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 is requested per VA 6500 policies utilizing Electronic Permission Access System (ePAS). Users submit access requests based on need to know and job duties. Supervisor, Information System Owner (ISO) and Office of Information and Technology (OIT) approval must be obtained prior to access being granted. These requests are submitted for VA employees, contractors and all outside agency requests and are processed through the appropriate approval processes. Once access is granted, individuals can log into the

system(s) through dual authentication, i.e., a PIV card with a complex password combination (two-factor authentication is enforced). Once inside the system, individuals are authorized to access information on a need-to-know basis.

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?
Only VA Employees and Contractors have 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.

There are End-User, Admin, and Read-Only roles for this system.

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.

Contractors will have access to design and maintenance of applications that utilize the VBMS Core. The contractors are under contract for this work and under non-disclosure agreement as well as other contract specific non-disclosure agreement.

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.

Personnel that will be accessing information systems must read and acknowledge their receipt and acceptance of the VA National Rules of Behavior (ROB) or VA Contractor's ROB prior to gaining access to any VA information system or sensitive information. The rules are included as part of the security awareness training that all personnel must complete via the VA's Talent Management System 2.0 (TMS). After the user's initial acceptance of the Rules, the user must re-affirm their acceptance annually as part of the privacy and security awareness training. Acceptance is obtained via electronic acknowledgment and is tracked through the TMS 2.0 system.

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

8.4a If Yes, provide:

1. *The Security Plan Status:*
2. *The System Security Plan Status Date:*
3. *The Authorization Status:*
4. *The Authorization Date:*
5. *The Authorization Termination Date:*
6. *The Risk Review Completion Date:*
7. *The FIPS 199 classification of the system (LOW/MODERATE/HIGH):*

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.**

12/15/2024

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, the system is hosted on Benefits Integration Platform (BIP) which is hosted in the VA Enterprise Cloud (VAEC).

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.

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.

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.

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).

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 they provided in this Privacy Impact Assessment is true and accurate.

Privacy Officer, Marvis Harvey

Information System Security Officer, Joseph Faccioli

Information System Owner, Christina Lawyer

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).

58VA21/22/28, *Compensation, Pension, Education, and Rehabilitation Records- VA*
<https://www.govinfo.gov/content/pkg/FR-2021-11-08/pdf/2021-24372.pdf>

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):

https://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=9946