Acronyms
ATO - Authorization to Operate
CAC - Common Access Card
FISMA - Federal Information Security Management Act
ISA - Information Sharing Agreement
HHS - Department of Health and Human Services
MOU - Memorandum of Understanding
NARA - National Archives and Record Administration
OMB - Office of Management and Budget
PIA - Privacy Impact Assessment
PII - Personally Identifiable Information
POC - Point of Contact
PTA - Privacy Threshold Assessment
SORN - System of Records Notice
SSN - Social Security Number
URL - Uniform Resource Locator

General Information
PIA ID: 1192356
PIA Name: HRSA - RAPTS - QTR3 - 2020 - HRSA611602
Title: HRSA - Reasonable Accommodation Processing and Tracking System
OpDiv: HRSA

PTA
PTA - 1A: Identify the Enterprise Performance Lifecycle Phase of the system
Operations and Maintenance
PTA - 1B: Is this a FISMA-Reportable system?
Yes
PTA - 2: Does the system include a website or online application?
Yes

URL Details
Type of URL | List Of URL
--- | ---
Other | https://www.hrsa.gov
Other | https://www.hrsa.gov
HHS Intranet (HHS Internal) | https://ra.hrsa.gov

PTA - 3: Is the system or electronic collection, agency or contractor operated?
Agency
PTA - 3A: Is the data contained in the system owned by the agency or contractor?
Agency
PTA - 5: Does the system have or is it covered by a Security Authorization to Operate (ATO)?
Yes
PTA - 5A: If yes, Date of Authorization
10/1/2018
PTA - 5B: If no, Planned Date of ATO
5/27/2016
PTA - 6: Indicate the following reason(s) for this PTA. Choose from the following options.
PIA Validation (PIA Refresh)
PTA - 8: Please give a brief overview and purpose of the system by describing what the functions of the system are and how the system carries out those functions.
Reasonable Accommodation Processing and Tracking System (RAPTS) purpose is to automate Reasonable Accommodation (RA)
request processing, tracking, and reporting for HRSA. Federal agencies are required by law to provide Reasonable Accommodation to qualified employees with disabilities. Reasonable Accommodation requests are wide ranging and include accommodations such as providing interpreters, readers, or other personal assistance; modifying job duties; providing flexible work schedules or work sites (i.e. telework); and providing accessible technology or other workplace adaptive equipment. Reasonable Accommodation cases can be extremely intricate. Disabilities vary widely among individuals and many cases involve medical conditions that improve or worsen over time, changing an individual’s accommodation needs. Cases may span months or years, require extensive personnel and financial resources, and include a vast document repository. Designed to support employees involved in these cases, RAPTS pre-configuration adheres to the many rules and regulations that guide policies and procedures and helps quickly and accurately track all facets of a case, including requests and accommodations provided; supervisor evaluations; medical record requests, receptions and reviews; disability findings; and decision appeals.

PTA - 9:
List and/or describe all the types of information that are collected (into), maintained, and/or shared in the system regardless of whether that information is PII and how long that information is stored.

The system will collect and store information related to the RA process, which may include medical documentation and other personal information. The Reasonable Accommodation Coordinator will make a determination as to whether medical documentation is necessary. If necessary, she/he may request relevant documentation about the disability, functional limitations and/or the need for accommodation. The request should be limited to the job related functions for which the accommodation is requested and may only be used to substantiate that the individual has a disability covered by the Rehabilitation Act. If it is not necessary, the request for accommodation will be returned promptly to the supervisor/manager with an explanation, in specific terms, as to why medical documentation is not necessary and instructions to complete the processing. When requests for medical information are necessary, the only information that should be requested is: 1. A short description of the disability; 2. How the disability or barrier limits or restricts the employees ability to do the job or participate in HRSA activities, or the applicants ability to apply, or interview for the job; and 3. How the requested accommodation is expected to improve the situation.

PTA - 9A: Are user credentials used to access the system? Yes

PTA - 9B: Please identify the type of user credentials used to access the system. HHS User Credentials
HHS/OpDiv PIV Card

PTA - 10: Describe why all types of information is collected (into), maintained, and/or shared with another system. This description should specify what information is collected about each category of individual Reasonable Accommodation Processing and Tracking System tracks all facets of a case, including requests and accommodations.
provided; supervisor evaluations; medical record requests, receptions and reviews; disability findings; and decision appeals. The Request and Confirmation Stage provides an opportunity for the employee (or third party representative) to request reasonable accommodation. The Agency has a responsibility to confirm the request after one has been made by the employee, no matter the format. The clock starts as soon as a request is made. Confirmation is an important step in the Request-to-Decision Time frame identified in HRSAs policy. The Gather Information and Qualify as Persons with Disabilities (PWD) Stage is mainly administered by the Reasonable Accommodation Coordinator (RAC). This is a critical stage as Reasonable Accommodation (RA) is not provided to a requestor unless they are a qualified person with a disability. If the requestor is not a PWD, the RAC issues a Decision letter denying the request. If the requestor has been qualified as a PWD, the RAC (with or without FOH findings) considers the nexus between the disability and the items which have been requested. The Interactive Process (IAP) is the way in which employees, Supervisors, Office of Equal Opportunity, Civil Rights and Diversity Management (OEOCRDM) and where appropriate, OEOCRDM's Partners - move to select a reasonable accommodation. The law requires that employees and employers engage in the IAP. This process truly begins when the request is made and the Agency moves to qualify the requestor as a PWD. However, after the Agency has qualified the PWD and analyzed possible accommodation solutions, it is critical to reengage the employee in the IAP. This engagement is the Agency's best method of avoiding liability for disability discrimination and failure to accommodate. Further, good faith, open-minded efforts at this stage, typically will lead to better outcomes. The ultimate selection of reasonable accommodations to be provided is up to the Agency. While input is taken into consideration, the employee, medical provider, and Federal Occupational Health (FOH) do not choose the accommodation. The employee can refuse to accept accommodation which has been offered. It is important to remember that engaging in the IAP and selecting an effective RA is an on-going process. The Issuing Decision Stage notifies the employee of the Agency's official offer of RA or of the official denial of RA. Written notification must be provided to the employee during this stage, ending the Request-to-Decision Timeframe and moving the process into the Decision-to-Provision Timeframe identified in HRSAs policy. The RAC releases this notification to the employee. The Interactive Process (IAP) can continue during this stage, but efforts should be placed on the IAP before a final decision is released to the employee. The Reconsideration Stage provides an opportunity for the employee to request that his/her management chain review the denial of an RA Request. Reconsideration is an employee right listed in the Decision letter. If at any point during the process the applicable RMO determines that the request for reconsideration will be approved, the interactive process is started with that specific RMO.
However, if the request for reconsideration is denied the employee may request reconsideration from the next person in his/her management chain of command. After the third line RMO has denied a request for reconsideration the RA case will be closed. The Implementation and Monitoring Stage is when an employee receives an accommodation as described in the Decision letter. Often the RAC and OEOCRDM Partners are actively engaged at this stage to ensure timely provision of accommodation. It is only after a Decision letter has been issued that materials will be ordered and accommodation will be provided. Once an accommodation has been appropriately provided to an employee,
| PTA - 10A: | Are records in the system retrieved by one or more PII data elements? | No |
| PTA - 11: | Does the system collect, maintain, use or share PII? | Yes |

### PIA

<p>| PIA - 1: | Indicate the type of PII that the system will collect or maintain | Name, E-Mail Address, Phone numbers, Medical records (PHI), Certificates, Date of Birth, Mailing Address, Medical Records Number, Employment Status |
| PIA - 2: | Indicate the categories of individuals about whom PII is collected, maintained or shared | Employees/HHS Direct Contractors |
| PIA - 3: | Indicate the approximate number of individuals whose PII is maintained in the system | Above 2000 |
| PIA - 4: | For what primary purpose is the PII used? | The medical documentation is used as supporting documentation for a person’s medical condition (i.e. disability) for which they have requested a reasonable accommodation. Gathering of medical documentation is required by Federal law (the Rehabilitation Act of 1973) in order to qualify some employees/applicants as persons with disabilities. Qualification is a necessary step before consideration of an RA. |
| PIA - 5: | Describe any secondary uses for which the PII will be used (e.g. testing, training or research) | There is no intended secondary use for PII data. |
| PIA - 7: | Identify legal authorities, governing information use and disclosure specific to the system and program | The Rehabilitation Act of 1973 allows for the collection of PII data. |
| PIA - 9: | Identify the sources of PII in the system | Directly from an individual about whom the information pertains, In-person, Hard Copy Mail/Fax, Phone, Email, Online, Other |
| PIA - 9A: | Identify the OMB information collection approval number or explain why it is not applicable. | OMB 2900-0767 |
| PIA - 9B: | Identify the OMB information collection expiration date. | 12/31/2021 |
| PIA - 10: | Is the PII shared with other organizations outside the system’s Operating Division? | No |
| PIA - 11: | Describe the process in place to notify individuals that their personal information will be collected. If no prior notice is given, explain the reason | Employees requesting a reasonable accommodation submit medical documentation or sign a release form for Federal Occupational |</p>
<table>
<thead>
<tr>
<th>PIA - 12</th>
<th>Is the submission of PII by individuals voluntary or mandatory?</th>
<th>Voluntary</th>
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<tbody>
<tr>
<td>PIA - 13</td>
<td>Describe the method for individuals to opt-out of the collection or use of their PII. If there is no option to object to the information collection, provide a reason</td>
<td>To opt-out of the collection of PII, an employee could edit the submitted medical documentation not to include any PII, or could ask the provider not to include PII.</td>
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<td>PIA - 14</td>
<td>Describe the process to notify and obtain consent from the individuals whose PII is in the system when major changes occur to the system (e.g., disclosure and/or data uses have changed since the notice at the time of original collection). Alternatively, describe why they cannot be notified or have their consent obtained</td>
<td>Individuals are informed when they submit the information that will be stored in the system that it will be used for legitimate purposes to avoid conflict of interest. No other notification or consent beyond this is required.</td>
</tr>
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<td>PIA - 15</td>
<td>Describe the process in place to resolve an individual's concerns when they believe their PII has been inappropriately obtained, used, or disclosed, or that the PII is inaccurate. If no process exists, explain why not</td>
<td>All PII information in the system is submitted by the individual. If an individual believes their data was used or disclosed incorrectly, Office of Equal Opportunity, Civil Rights and Diversity Management (OEOCRDM) will investigate.</td>
</tr>
<tr>
<td>PIA - 16</td>
<td>Describe the process in place for periodic reviews of PII contained in the system to ensure the data's integrity, availability, accuracy and relevancy. Please address each element in your response. If no processes are in place, explain why not</td>
<td>Annual reviews of the data in the system ensure the data's integrity and accuracy. PII is submitted at the discretion of the HRSA employee in the form of scanned file (PDF or picture file), and cannot be modified. Only the relevant PII (medical documentation) is used to make a determination of a person with a qualified disability. The PII stored in the system is available only to the agency specific information such as: name, phone number and e-mail address that a user provided during the registration process, or collected via government-wide standard application forms submitted by applicants. Users are responsible for ensuring that their registration information is accurate.</td>
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| PIA - 17 | Identify who will have access to the PII in the system and the reason why they require access | Users
Administrators |
| PIA - 17A | Provide the reason of access for each of the groups identified in PIA -17 | Users Reasoning: OEOCRDM Federal employees who access medical documentation for case processing. Administrators Reasoning: OIT administrators of the system will have access to the database which stores the PII to ensure the system is running correctly. Contractors Reasoning: Others Reasoning: |
| PIA - 18 | Describe the administrative procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII | Access to PII is granted by the System Owner who determines which users within an organization should be granted access to PII contained within the application. Only MicroPact employees that have been approved by management and gone through agency background investigations will have access to any systems that contain PII. |
| PIA - 19 | Describe the technical methods in place to allow those with access to PII to only access the minimum amount of information necessary to perform their job | Access to data that exists in the system is only granted to users by the system owner. There are specific roles defined in the system and each role has access only to data that it is granted access to. Users must enter a correct username and password to enter the system. |
| PIA - 20 | Identify training and awareness provided to personnel (system owners, managers, operators, contractors and/or program managers) using the system to make them aware of their | The System owner and Administrator are responsible for protecting privacy rights of PII contained within the system. HRSA provides |
Responsibilities for protecting the information being collected and maintained system security and privacy awareness training to all users before granting access to any HRSA systems. Training is required every 6 months after initial training for all users.

PIA - 21: Describe training system users receive (above and beyond general security and privacy awareness training).

No additional training above and beyond HRSA's general security and privacy awareness training is needed.

PIA - 23: Describe the process and guidelines in place with regard to the retention and destruction of PII. Cite specific NARA records retention schedule(s) and include the retention period(s).

The system follows the National Archives and Records Administration (NARA) General Records Schedule 25 for the retention and destruction of PII. The schedule calls for records to be automatically deleted after 6 years.

PIA - 24: Describe how the PII will be secured in the system using administrative, technical, and physical controls. Please address each element in your response.

The system relies on network security controls provided by the contractor and HRSA managed through GSS. The system implements firewalls, network and host base intrusion detection to secure its facilities. Boundary entry points are controlled by firewall rules and protected by Intrusion Detection Servers to prevent unauthorized access. From the Administrator perspective: There are different levels of access depending on the role of the individual accessing the tracking system. These roles include administrator privileges read-only and authorize capability.

PIA - 25: Describe the purpose of the website, who has access to it, and how users access the website (via public URL, log in, etc.). Please address each element in your response.

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PIA - 26: Does the website have a posted privacy notice?

Yes
<table>
<thead>
<tr>
<th>PIA - 27:</th>
<th>Does the website use web measurement and customization technology?</th>
<th>No</th>
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<tr>
<td>PIA - 28:</td>
<td>Does the website have any information or pages directed at children under the age of thirteen?</td>
<td>No</td>
</tr>
<tr>
<td>PIA - 29:</td>
<td>Does the website contain links to non-federal government websites external to HHS?</td>
<td>No</td>
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