

Copy PIA (Privacy Impact Assessment)

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Please select the user, who would be submitting the copied PIA.

Instructions


Review the following steps to complete this questionnaire:

- 1) Answer questions.** Select the appropriate answer to each question. Question specific help text may be available via the  icon. If your answer dictates an explanation, a required text box will become available for you to add further information.
- 2) Add Comments.** You may add question specific comments or attach supporting evidence for your answers by clicking on the  icon next to each question. Once you have saved the comment, the icon will change to the  icon to show that a comment has been added.
- 3) Change the Status.** You may keep the questionnaire in the "In Process" status until you are ready to submit it for review. When you have completed the assessment, change the Submission Status to "Submitted". This will route the assessment to the proper reviewer. Please note that all values list questions must be answered before submitting the questionnaire.
- 4) Save/Exit the Questionnaire.** You may use any of the four buttons at the top and bottom of the screen to save or exit the questionnaire. The button allows you to complete the questionnaire. The button allows you to save your work and close the questionnaire. The button allows you to save your work and remain in the questionnaire. The button closes the questionnaire without saving your work.

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 Name:	CDC - VPD - QTR1 - 2024 - CDC8049202	PIA ID:	3067402
Name of Component:	CDC - Vaccine Preventable Disease	Name of ATO Boundary:	Vaccine Preventable Disease
Overall Status:		PIA Queue:	
Submitter:		# Days Open:	406
Submission Status:	Re-Submitted	Submit Date:	5/2/2024
Next Assessment Date:	04/29/2028	Expiration Date:	4/29/2028
Office:		OPDIV:	CDC
Security Categorization:		OpDiv PIA ID:	CDC8049202
Legacy PIA ID:		Make PIA available to Public?:	Yes
1:	Identify the Enterprise Performance Lifecycle Phase of the system.	Disposition	
2:	Is this a FISMA-Reportable system?	Yes	
3:	Does the system have or is it covered by a Security Authorization to Operate (ATO)?	Yes	
4:	ATO Date or Planned ATO Date.	4/30/2024	
5:	Is the system or electronic information collection, agency or contractor operated?	Agency	

PTA

PTA		
PTA - 2:	Indicate the following reason(s) for this PTA. Choose from the following options.	PIA Validation (PIA Refresh)
PTA - 2A:	Describe in further detail any changes to the system that have occurred since the last PIA.	None
PTA - 3:	Is the data contained in the system owned by the agency or contractor?	Agency
PTA - 4:	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.	The Vaccine Preventable Disease (VPD) system captures data sent by four public health departments that serve as VPD Reference Centers (RCs) to improve national surveillance coverage of 8 Viral & Bacterial pathogens. The data are Electronic Laboratory Results (ELR) produced from surveillance and outbreak testing of specimens submitted from state jurisdictions to the RCs. Data are transmitted to CDC for analysis in an effort to link laboratory data and epidemiological data in support of national surveillance and outbreak response.

PTA - 5:	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 information captured is Electronic Laboratory Results data which includes test(s) ordered and performed, results and conclusions of tests, specimen information (specimen ID, type of specimen, collection data). Information collected is patient Date of Birth, Patient Identifier Number and Specimen Identifier, (Patient ID, state of residence, Date of Birth is not uniformly collected/received), original submitter and testing laboratory. To de-identify patient information, the Reference Centers generates a unique patient id and specimen id and submit that information as part of the ELR. No address information is captured or stored. Access to the data is limited. Individuals must be approved by the program lead and that approval must be in writing and submitted to the Information Technology (IT) Points of Contact (POC). This system requires Personal Identity Verification (PIV) credentials with Active Directory (AD) to access the data. AD has its own PIA.
PTA - 5A:	Are user credentials used to access the system?	Yes, but the user credentials are maintained in a separate system (e.g., AD, AMS) and not collected or maintained by this system. The system providing credentials is
PTA - 5B:	Please identify the type of user credentials used to access the system.	HHS User Credentials HHS/OpDiv PIV Card
PTA - 6:	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.	The system is an effort to try to link lab and epi data accurately, determine the resolution of and counting of suspect cases of eight VPDs. Data is required to link patient specimens submitted/tested by the RCs with the same individual's specimens submitted/tested by CDC, state, and commercial labs in order to coalesce and reconcile the (possible) multiple ELR records of an individual. VPD tests ordered and performed, results and conclusions of tests, specimen information original submitter and testing laboratory. Data is not shared outside the Program and will be kept for the duration of this project as long as it stays active.
PTA - 7:	Does the system collect, maintain, use or share PII?	
PTA - 7A:	Does this include Sensitive PII as defined by HHS?	No
PTA - 8:	Does the system include a website or online application?	Yes
PTA - 8A:	Are any of the URLs listed accessible by the general public (to include publicly accessible log in and internet websites/online applications)?	No
PTA - 9:	Describe the purpose of the website, who has access to it, and how users access the web site (via public URL, log in, etc.). Please address each element in your response.	https://srsreports2.cdc.gov/Reports/browse/VPD Purpose: Report Surveillance Data of Influenza URL is for internal approved users National Center for Immunization and Respiratory Diseases (NCIRD) users with access to the system. Access: Active Directory (AD)

PTA - 10:	Does the website have a posted privacy notice?	Yes
PTA - 11:	Does the website contain links to non-federal government websites external to HHS?	No
PTA - 11A:	Is a disclaimer notice provided to users that follow external links to websites not owned or operated by HHS?	
PTA - 12:	Does the website use web measurement and customization technology?	No
PTA - 12A:	Select the type(s) of website measurement and customization technologies in use and if it is used to collect PII.	
PTA - 13:	Does the website have any information or pages directed at children under the age of thirteen?	No
PTA - 13A:	Does the website collect PII from children under the age thirteen?	
PTA - 13B:	Is there a unique privacy policy for the website and does the unique privacy policy address the process for obtaining parental consent if any information is collected?	
PTA - 14:	Does the system have a mobile application?	No
PTA - 14A:	Is the mobile application HHS developed and managed or a third-party application?	
PTA - 15:	Describe the purpose of the mobile application, who has access to it, and how users access it. Please address each element in your response.	
PTA - 16:	Does the mobile application/ have a privacy notice?	
PTA - 17:	Does the mobile application contain links to non-federal government websites external to HHS?	
PTA - 17A:	Is a disclaimer notice provided to users that follow external links to resources not owned or operated by HHS?	
PTA - 18:	Does the mobile application use measurement and customization technology?	
PTA - 18A:	Describe the type(s) of measurement and customization technologies or techniques in use and what information is collected.	
PTA - 19:	Does the mobile application have any information or pages directed at children under the age of thirteen?	
PTA - 19A:	Does the mobile application collect PII from children under the age thirteen?	
PTA - 19B:	Is there a unique privacy policy for the mobile application and does the unique privacy policy address the process for obtaining parental consent if any information is collected?	
PTA - 20:	Is there a third-party website or application (TPWA) associated with the system?	No
PTA - 21:	Does this system use artificial intelligence (AI) tools or technologies?	No

PIA

PIA		
PIA - 1:	Indicate the type(s) of personally identifiable information (PII) that the system will collect, maintain, or share.	Date of Birth Patient ID Number
PIA - 2:	Indicate the categories of individuals about whom PII is collected, maintained or shared.	Patients
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 Date of Birth (DOB) is needed to determine age of the patient. We rely on locally assigned patient identifier and specimen identifier by reference center laboratory to uniquely identify records. The unique identifiers are not linked directly to the patients.
PIA - 5:	Describe any secondary uses for which the PII will be used (e.g. testing, training or research).	Age knowing of a patient is necessary for the surveillance and most accurate age comes from the DOB instead of reference lab doing the calculation. This is because age can be calculated based on different base date like date of specimen collection vs specimen received date vs test date. Because of that DOB is preferred over calculated age, however, we provide an option to reference center to provide either one.
PIA - 6:	Describe the function of the SSN, Truncated SSN, and/or Taxpayer ID.	SSN is not collected.
PIA - 6A:	Cite the legal authority to use the SSN, Truncated SSN, and/or Taxpayer ID.	N/A
PIA - 7:	Identify legal authorities governing information use and disclosure specific to the system and program.	Public Health Service Act, Section 301, "Research and Investigation," (42 U.S.C. 241); and Sections 304, 306 and 308(d) which discuss authority to maintain data and provide assurances of confidentiality for health research and related activities (42 U.S.C. 242 b, k, and m(d)).
PIA - 8:	Are records in the system retrieved by one or more PII data elements?	No
PIA - 8A:	Please specify which PII data elements are used to retrieve records.	
PIA - 8B:	Provide the number, title, and URL of the Privacy Act System of Records Notice (SORN) that is being used to cover the system or indicate whether a new or revised SORN is in development.	
PIA - 9:	Identify the sources of PII in the system.	Government Sources State/Local/Tribal
PIA - 10:	Is there an Office of Management and Budget (OMB) information collection approval number?	No
PIA - 10A:	Provide the information collection approval number.	
PIA - 10B:	Identify the OMB information collection approval number expiration date.	
PIA - 10C:	Explain why an OMB information collection approval number is not required.	OMB is not required because information is not collected directly from members of the public
PIA - 11:	Is the PII shared with other organizations outside the system's Operating Division?	No
PIA - 11A:	Identify with whom the PII is shared or disclosed.	
PIA - 11B:	Please provide the purpose(s) for the disclosures described in PIA - 11A.	
PIA - 11C:	List any agreements in place that authorizes the information sharing or disclosure (e.g., Computer Matching Agreement (CMA), Memorandum of Understanding (MOU), or Information Sharing Agreement (ISA)).	
PIA - 11D:	Describe process and procedures for logging/tracking/accounting for the sharing and/or disclosing of PII. If no process or procedures are in place, please explain why not.	
PIA - 12:	Is the submission of PII by individuals voluntary or mandatory?	Voluntary

PIA - 12A:	If PII submission is mandatory, provide the specific legal requirement that requires individuals to provide information or face potential civil or criminal penalties.	
PIA - 13:	Describe the method for notifying individuals that their information will be collected and how they can opt-out of the collection or use of their PII. If there is no option to object to the information collection, provide a reason.	Vaccine preventable disease are required to be reported. Thus individuals will not be able to opt out. It is recommended to provide DOB but because laboratories do not always get this data and for some their local policy prevents sending of DOB. Hence, it is voluntary.
PIA - 14:	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.	CDC received lab data does not have enough information to actually identify a patient. Lab assigns abstract patient id and specimen id which they share with CDC. Hence, CDC is unable to notify individuals.
PIA - 15:	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.	CDC has no way of identifying an individual. Thus, CDC cannot validate individual's claim of their data. Therefore, such claim can only be addressed at the state.
PIA - 16:	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.	As part of annual operation analysis, the technical team review and keep membership current after confirming with the subject matter experts (SME). This is ongoing activity but end of a year we double check. The technical team reviews reports to confirm no PII are present. On a regular basis, the team reminds the members and users verbally and via emails to follow CDC security practice for moderate level system.
PIA - 17:	Identify who will have access to the PII in the system.	Users Administrators Developers
PIA - 17A:	Select the type of contractor.	
PIA - 17B:	Do contracts include Federal Acquisition Regulation (FAR) and other appropriate clauses ensuring adherence to privacy provisions and practices?	
PIA - 18:	Provide the reason why each of the groups identified in PIA - 17 needs access to PII.	Users: Review the cases. Administrators: to ensure performance and security i.e. run vulnerability scans, assign roles, and ensure the system is configured properly. Developers: To support the system when maintenance is needed or required
PIA - 19:	Describe the administrative procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII.	All users must be approved by the Business Steward based on their role, duties and responsibilities prior to gaining access to the data. Role Based Access Control (RBAC) is utilized. The roles are predefined, and the users are assigned those roles as appropriate.

PIA - 20:	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.	<p>All users must be approved by the Business Steward based on their role, duties and responsibilities prior to gaining access to the data. Role Based Access Control (RBAC) is utilized. The roles are predefined and the users are assigned those roles as appropriate.</p> <p>Active Directory group membership is used to control read/write access to data space.</p>
PIA - 21:	Identify the general security and privacy awareness training provided to system users (system owners, managers, operators, contractors and/or program managers) using the system to make them aware of their responsibilities for protecting the information being collected and maintained.	Annual CDC security and privacy awareness training is provided.
PIA - 22:	Describe the training system users receive (above and beyond general security and privacy awareness training).	Regular reminders are sent out to the users about the privacy from system owner.
PIA - 23:	Describe the process and guidelines in place with regard to the retention and destruction of PII. Cite specific National Archives and Records Administration (NARA) records retention schedule(s) and include the retention period(s).	<p>Records are retained and disposed of in accordance with the CDC Records Control Schedule. Record copy of study reports are maintained in agency from two to three years in accordance with retention schedules. Source documents for computer are disposed of when no longer needed by program officials. Personal identifiers may be deleted from records when no longer needed in the study as determined by the system manager, and as provided in the signed consent form, as appropriate. Disposal methods include erasing computer tapes, burning or shredding paper materials or transferring records to the Federal Records Center when no longer needed for evaluation and analysis. Records are retained for 20 years; for longer periods if further study is needed.</p> <p>Records are retained in compliance with CDC Scientific and Research Projects Records Schedule NI-442-09-1, also known as Big Bucket.</p>
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.	<p>Administrative: All users having access to the data will be authorized by the Business Steward (BS)/Data Manager. BS submits formal request to system administrators to grant access to a user. Access are role based.</p> <p>Technical: Active Directory group membership is used to control read/write access to data space.</p> <p>Physical: Server is located behind locked door.</p>

Review & Comments

Privacy Analyst Review

OpDiv Privacy Analyst Review Status:	Approved	Privacy Analyst Review Date:	5/13/2024
Privacy Analyst Comments:	OpDiv Analyst: Joshua Mosios (Contractor)	Privacy Analyst Days Open:	

SOP Review

SOP Review Status:	Approved	SOP Signature:	
SOP Comments:	Approved on behalf of Beverly Walker	SOP Review Date:	5/6/2024
		SOP Days Open:	4

Agency Privacy Analyst Review

Agency Privacy Analyst Review Status:	Approved	Agency Privacy Analyst Review Date:	4/28/2025
Agency Privacy Analyst Review Comments:	Reviewer: Crystal Bland 4/28/2025 This PIA is ready for SAOP review and approval.	Agency Privacy Analyst Days Open:	357

SAOP Review

SAOP Review Status:	Approved	SAOP Signature:	Archer Signature_Bridget Guenther.docx
SAOP Comments:		SAOP Review Date:	4/30/2025
		SAOP Days Open:	2

Supporting Document(s)

Name	Size	Type	Upload Date	Downloads
4-28-2025 EMAIL_Re_CDC - VPD - QTR1 - 2024 - CDC8049202.pdf	414037	.pdf	4/28/2025 8:50 AM	1

Comments

Question Name	Submitter	Date	Comment	Attachment
PIA - 1	Data Feed Service, piafrmcdc	4/8/2024	Selected "patient ID"	
PIA - 4	Data Feed Service, piafrmcdc	5/1/2024	Is the specimen identifier linked to the patients as well?	
PIA - 10C	Data Feed Service, piafrmcdc	5/1/2024	Provide an explanation.	
PIA - 18	Data Feed Service, piafrmcdc	5/1/2024	Provide more detail. For example: How do developers support the system?	
PIA - 1	Data Feed Service, piafrmcdc	10/1/2024	This System has been migrated within the OCIO ISB Infrastructure Services authorization boundary. All future updates should be made via the new Sub- Component application.	
PIA - 1	BLAND, CRYSTAL	4/28/2025	Response for PTA-7 is confirm to be "Yes."	

Admin Section

Is OpDiv Privacy Analyst Approved ?:	1	Is OpDiv Privacy Analyst Return ?:	0
Is Agency Privacy Analyst Approve ?:	1	Is SOP Return ?:	0
Is SAOP Approved?:	1	Is Agency Privacy Analyst Return ?:	0
Total Approved:	4	Is SAOP Return ?:	0
Total Approval Required:	4	Total Return:	0

Miscellaneous Fields

Last Updated:	4/30/2025 8:00 PM	History Log:	View History Log
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