

# US Department of Health and Human Services

## Privacy Impact Assessment

**Date Signed:**

05/20/2016

**OPDIV:**

AHRQ

**Name:**

SQI2

**PIA Unique Identifier:**

P-8892558-706022

**The subject of this PIA is which of the following?**

Major Application

**Identify the Enterprise Performance Lifecycle Phase of the system.**

Operations and Maintenance

**Is this a FISMA-Reportable system?**

Yes

**Does the system include a Website or online application available to and for the use of the general public?**

Yes

**Identify the operator.**

Contractor

**Is this a new or existing system?**

Existing

**Does the system have Security Authorization (SA)?**

No

**Indicate the following reason(s) for updating this PIA.**

PIA Validation

**Describe in further detail any changes to the system that have occurred since the last PIA.**

NA

**Describe the purpose of the system.**

AHRQ Quality Indicators (QIs) are measures of health care quality that make use of readily available hospital inpatient administrative data. The QIs can be used to highlight potential quality concerns, identify areas that need further study and investigation, and track changes over time throughout several of the public healthcare environments. AHRQ develops software and user guides for quality measures that are organized into four modules (Prevention Quality Indicators (PQI), Inpatient Quality Indicators (IQI), Patient Safety Indicators (PSI), Pediatric Quality Indicators (PDI).

PQIs can be used as a "screening tool" to help flag potential health care quality problem areas that need further investigation; provide a quick check on primary care access or outpatient services in a community by using patient data found in a typical hospital discharge abstract; and, help public health agencies, State data organizations, health care systems, and others interested in improving health care quality in their communities.

IQIs are a set of measures that provide a perspective on hospital quality of care using hospital administrative data. These indicators reflect quality of care inside hospitals and include inpatient mortality for certain procedures and medical conditions; utilization of procedures for which there are questions of overuse, underuse, and misuse; and volume of procedures for which there is some evidence that a higher volume of procedures is associated with lower mortality.

PSIs can be used to help hospitals identify potential adverse events that might need further study; provide the opportunity to assess the incidence of adverse events and in hospital complications using administrative data found in the typical discharge record; include indicators for complications occurring in hospital that may represent patient safety events; and, indicators also have area level analogs designed to detect patient safety events on a regional level.

PDIs apply to the special characteristics of the pediatric population; screen for problems that pediatric patients experience as a result of exposure to the healthcare system and that may be amenable to prevention by changes at the provider level or area level; and, help to evaluate preventive care for children in an outpatient setting, and most children are rarely hospitalized.

### **Describe the type of information the system will collect, maintain (store), or share.**

AHRQ QI collects information from hospital and hospital associations, state healthcare agencies, and AHRQ Healthcare Cost and Utilization Project (HCUP) reports on hospitals. The data is shared through the QI website for general consumption, and generally used by researchers, quality improvement officers, hospital administrators, national hospitals and hospital systems, insurers and business groups to compare hospital performance rates and assess relative safety, quality and affordability.

The system has a public website, and the public can submit an email address to sign up to receive QI email updates. The public can also email system support by sending an email to [QIsupport@ahrq.hhs.gov](mailto:QIsupport@ahrq.hhs.gov) or call the AHRQ Quality Indicators support team at 301-427-1949 to make general inquiries. During phone calls, an email is collected if the individual would like to receive email updates, and a name and phone number are collected if a member of the system support team needs to return the individual's phone call. The name and phone number of the individual is not collected by the system itself, however the email is entered into the system to provide the individual with the QI update.

Users of the system are defined as select members of the AHRQ QI and AHRQ system maintenance teams that are AHRQ employees or AHRQ contractors. These users can submit technical and product-related questions to the AHRQ QI Technical Support mailbox. The system administration team has access to the AHRQ QI technical support mailbox. The system administration team internally uses JIRA, a widely-used issue tracking software application, to log service inquiries, define complete dates for resolving and responding to an inquiry for service level agreement (SLA) management purposes and to generate performance reports for internal system management. Inquiry information submitted by system users, internal to AHRQ, is submitted to the JIRA application. The JIRA application is accessible only to the system administration team members and collects limited PII from AHRQ QI and AHRQ system maintenance teams that are AHRQ employees or AHRQ contractors.

The attributes collected in JIRA include first name and last name (if available); email address; AHRQ organization name (if available); date received; question submitted; and, responses provided by system administrators.

AHRQ employees and AHRQ contractors serve as system administrators and system developers for the system. Information in the form of a name and AHRQ email address is collected and used by the system owner to provision accounts for system access.

**Provide an overview of the system and describe the information it will collect, maintain (store), or share, either permanently or temporarily.**

The system collects QI information from hospital and hospital associations, state healthcare agencies, and AHRQ Healthcare Cost and Utilization Project (HCUP) reports on hospitals for the purpose of providing this anonymous data to AHRQ researchers to create QIs for public consumption. This information is critical to members of the public who are researchers and analyst in the healthcare field to improve methods of healthcare treatment. The QI data sets are maintained as a standardized, evidence-based health care quality measure that can be used with readily available hospital inpatient administrative data. For example, QIs provide insight into the community health care systems or services outside the hospital setting. Anonymous data about type of treatment, duration of treatment, and outcome of treatment is collected to identify trends, to include adverse outcomes of care, so that this data can be used to develop screening techniques for future patients to reduce the level of adverse outcomes. There is no PII collected within the QI data, and QI data is provided via the website for public consumption.

The system collects system user information for the purpose of resolving any technical issues with the system, or with the QI data. The collected data include first name and last name (if available); email address; AHRQ organization name (if available); date received; question submitted; and, responses provided by system administrators. This information is used to provide a customer support function for users.

Information collected from members of the public are to provide a method for interaction, and to share QI research and program updates with the public. Individuals can provide an email to receive periodic updates about QI research, and they may also email the QI Support Team or call the QI Support Team for questions or concerns related to the program. The system collects an email address to provide the QI updates, but the Support Team does not record name or phone number from calls received by the Support Team in the system itself.

AHRQ employees and AHRQ contractors provide information in the form of a name and AHRQ email. These individuals serve on the QI Support Team, and provide system administration and development support for the system and the website.

**Does the system collect, maintain, use or share PII?**

Yes

**Indicate the type of PII that the system will collect or maintain.**

Name

E-Mail Address

Phone Numbers

AHRQ email, username, password

**Indicate the categories of individuals about whom PII is collected, maintained or shared.**

Employees

Public Citizens

Vendor/Suppliers/Contractors

**How many individuals' PII is in the system?**

100-499

**For what primary purpose is the PII used?**

PII is collected from members of the public to provide QI program updates via email. PII collected from AHRQ QI system users is used to allow the system administration team to perform technical support. User credentials, in the form of a username and password, are used to provision system user accounts.

**Describe the secondary uses for which the PII will be used.**

There are no secondary uses of the PII.

**Identify legal authorities governing information use and disclosure specific to the system and program.**

Section 913 and 306 of the Public Health Service (PHS) Act (42 U.S.C. § 299b-2 and 242k(b)).

Sections 924(c) and 308(d) of the PHS Act (42 U.S.C. 299c-3(c) and 242m(d))

**Are records on the system retrieved by one or more PII data elements?**

No

**Identify the sources of PII in the system.**

Email

Online

**Government Sources**

Within OpDiv

**Non-Governmental Sources**

Public

Private Sector

**Identify the OMB information collection approval number and expiration date**

N/A

**Is the PII shared with other organizations?**

No

**Describe the process in place to notify individuals that their personal information will be collected. If no prior notice is given, explain the reason.**

The website provides an option for members of the public to submit their email address in order to receive program updates. A message at the point of this collection states "To sign up for updates or to access your subscriber preferences, please enter your E-mail address." This collection of information serves the single purpose of providing updates via email to the individual, and there are no other notices provided for this collection of information.

AHRQ users who require technical support choose to submit their AHRQ information in order for the issue to be addressed. There is no notification provided for these users as this function exists only to resolve technical concerns.

AHRQ employees and AHRQ contractors submit information for the system owner to provision user accounts. No notice is provided to AHRQ employees or AHRQ contractors, as the use of this information is implicit to validate the identity of the individual for an account can be provisioned.

**Is the submission of PII by individuals voluntary or mandatory?**

Voluntary

**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.**

Members of the public are not required to submit an email address to receive AHRQ QI program updates. The system website also provides program updates and information. The option to receive email updates is provided as a convenience to the individual. As a result, individuals can choose not to provide an email address and visit the website to receive program information.

AHRQ QI users must provide their information in order to receive technical support. AHRQ QI users may choose not to provide their information, but failure to provide information limits the amount of technical support users may receive from system administrators. AHRQ QI users may opt to call the AHRQ QI support team if they do not want to submit their information electronically.

**Process to notify and obtain consent from individuals whose PII is in the system when major changes occur to the system.**

Members of the public who submit an email to receive QI program updates are notified of program and system changes as part of the periodic email updates. Users monitor these program updates which describe planned or implemented changes to the system functionality.

There is no process to notify and obtain consent from AHRQ QI users when major changes occur to the system. The purpose of collecting the information from AHRQ QI users is to provide technical support. Once the technical issue is resolved there is no other use of this information. This single purpose is not anticipated to change over the course of the system lifecycle, and should any change occur to the system, the technical support mechanism would not use the AHRQ QI information in any way. However, should any change occur in the use of information, as a result of changes in system functionality that provides technical support to the AHRQ QI user, system administrators can and will contact the AHRQ QI users by email to alert them of the change. At this time, AHRQ QI users may choose to remove their information from the system.

**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.**

AHRQ QI users have the ability to contact the the system administrator to address a concern posed by the inappropriate use of information collected for the purpose of providing technical support. AHRQ QI data may then be deleted or corrected if AHRQ QI users no longer have a technical support need, or if users need to update their information to continue receiving technical support.

**Describe the process in place for periodic reviews of PII contained in the system to ensure the data's integrity, availability, accuracy and relevancy.**

There are no processes in place to periodically review the AHRQ QI information. The information is collected only for the purpose of supporting these users with technical issues. The information provided during this technical support is used help address the technical issue with system access. The information is not used for any other purpose after the technical issue is resolved.

**Identify who will have access to the PII in the system and the reason why they require access.**

**Administrators:**

Designated AHRQ system administrators act as administrators of the help desk software and review the support requests submitted by AHRQ QI users to assign them to the appropriate subject matter expert on the administrator support team.

**Developers:**

Issues are assigned to the administrator support team member with expertise in the topic area. Developers respond to technical issues with the software. The AHRQ QI user is contacted only to resolve the support need and verify resolution and support system needs.

**Contractors:**

Contractors act as system administrators and developers in supporting AHRQ IQ user with technical system issues.

**Describe the procedures in place to determine which system users (administrators, developers, contractors, etc.) may access PII.**

System administrators and developers have access to the system to service the system and to address AHRQ QI user technical issues. The limited PII collected is used by the administrators and developers to support the AHRQ QI users. System administrators are assigned to a particular technical issue. The system administrator may then access the AHRQ QI users information to resolve the technical issue. If the technical issue requires some type of technical adjustment, the system administrator will request support from a system developer to resolve the technical issue. Prospective system administrators and developers must sign an account request form. The account request form must also be filled indicating the minimal access required to perform one's tasks. Prior to granting access, review and approval is required by the system owner.

**Describe the methods in place to allow those with access to PII to only access the minimum amount of information necessary to perform their job.**

Permissions are limited through the use of system roles that were identified during the requirements gathering phase of the project. As a method, the system was designed with these roles to only allow access to a minimum amount of information necessary for system administrators and developers to adequately perform their job. AHRQ QI user information is purposefully limited to the collection of name and email address to ensure that the minimum amount of information is used to perform technical issue resolution tasks. In order to perform system administration and system development activities, these roles must be granted to the individuals performing these tasks as authorized by the system owner.

**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 responsibilities for protecting the information being collected and maintained.**

All system administrators and system developers that work within the system must complete the AHRQ Information Security and Privacy Awareness Training.

The training addresses a description of PII, requirements for the protection of PII according to federal law, and training around the HHS procedures for a breach of information that includes PII.

**Describe training system users receive (above and beyond general security and privacy awareness training).**

Not applicable.

**Do contracts include Federal Acquisition Regulation and other appropriate clauses ensuring adherence to privacy provisions and practices?**

Yes

**Describe the process and guidelines in place with regard to the retention and destruction of PII.**

Process and guidelines are established at the department level and documented in HHS Information Security Program Policy, Section 4.4 ("Media Control"), August 2014. The National Archives and Records Administration (NARA) Retention Schedules for SQL data are being determined. PII will be protected by AHRQ and its contractors based on the security control requirements listed in NIST SP800-53 Rev 4.

**Describe, briefly but with specificity, how the PII will be secured in the system using administrative, technical, and physical controls.**

Administrative, technical, and physical security controls required for the system are defined in National Institute of Standards and Technology (NIST) Special Publication (SP) 800-53 Rev 4, "Security and Privacy Controls for Federal Information Systems and Organizations." These controls strengthen the information systems and the environment in which it operates, and are reviewed on an annual basis.

The technical controls used on the system include a protected network that is only accessible for system administration and development. Administrative controls include access to the system requiring the use of two-factor authentication via a PIV card. Physical controls include, but are not limited to the use of locked cabinets to store server hardware, which are housed in an access-controlled, secure data center. All controls are documented fully in the Security Assessment Report (SAR) For Amazon Web Services (AWS) Enclave General Support System (GSS), dated August 13, 2015.

**Identify the publicly-available URL:**

<http://www.qualityindicators.ahrq.gov>

Note: web address is a hyperlink.

**Does the website have a posted privacy notice?**

Yes

**Is the privacy policy available in a machine-readable format?**

Yes

**Does the website use web measurement and customization technology?**

Yes

**Select the type of website measurement and customization technologies is in use and if it is used to collect PII.**

Session Cookies that collect PII.

Persistent Cookies that collect PII.

**Does the website have any information or pages directed at children under the age of thirteen?**

No

**Does the website contain links to non- federal government websites external to HHS?**

Yes

**Is a disclaimer notice provided to users that follow external links to websites not owned or operated by HHS?**

No