

US Department of Health and Human Services

Privacy Impact Assessment

Date Signed:

06/30/2017

OPDIV:

SAMHSA

Name:

Behavioral Health Services Information System

PIA Unique Identifier:

P-8865103-241900

The subject of this PIA is which of the following?

General Support System (GSS)

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)?

Yes

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

Significant System Management Change

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

The indirect contractor responsible for operations and maintenance of the BHSIS system has changed. BHSIS now consists of five components, instead of the previous three components. The increase resulted from splitting one of the previous three components into two separate components, National Survey of Substance Abuse Treatment Services and National Mental Health Services Survey, and adding a new component, the combination of Mental Health-Treatment Episode Data Set (MH-TEDS) and the Mental Health-Client Level Data (MH-CLD).

Describe the purpose of the system.

The purpose of Behavioral Health Services Information System (BHSIS) is the operation of an integrated statistical data system that provides information at National, State, and Local levels on the facilities and services available for Substance Abuse treatment and Mental Health treatment in the United States, and on the characteristics of clients admitted to such treatment facilities.

BHSIS is comprised of five inter-related core components: the Inventory of Behavioral Health Services (I-BHS); facility surveys, including the National Survey of Substance Abuse Treatment Services (N-SSATS) and the National Mental Health Services Survey (N-MHSS); the Treatment Episode Data Set (TEDS), a collection of substance abuse treatment admissions and discharges to state-funded substance abuse treatment facilities; and the Mental Health-Treatment Episode Data Set (MH-TEDS) and the Mental Health-Client Level Data (MH-CLD), collections of mental health client level data from state-funded mental health treatment service facilities; as well as the Uniform Reporting System (URS) Tables required for Mental Health Block Grant application procedures. This last component represents data collection efforts in coordination with CMHS Mental Health Block Grant program data needs as authorized by section 1911 of title XIX., Part B, Sub part I and III of the Public Health Service Act.

BHSIS is contractor operated and the indirect contractors oversee all functions of the BHSIS database maintained by SAMHSA.

The collection and reporting of service and program data depends upon the capability of providers and State agencies to collect and report such data, and on the uniformity and standardization of data content within and across data reports. BHSIS is a major source of service and program data within the United States. BHSIS uses data in a comprehensive and integrative way that will lead and influence Behavioral Health policy throughout the United States.

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

BHSIS consists of five (5) inter-related components: (1) the Inventory of Behavioral Health Services (I-BHS); (2) the substance abuse treatment facility survey called the National Survey of Substance Abuse Treatment Services (N-SSATS); (3) the mental health treatment facility survey called the National Mental Health Services Survey (N-MHSS); (4) the Treatment Episode Data Set (TEDS), a collection of substance abuse treatment admissions and discharges to state-funded substance abuse treatment facilities, and (5) the Mental Health-Treatment Episode Data Set (MH-TEDS) and the Mental Health-Client Level Data (MH-CLD), collections of mental health client level data from state-funded mental health treatment service facilities, as well as the Uniform Reporting System (URS) Tables required for Mental Health Block Grant application procedures.

BHSIS data collection includes the following: The number and variety of public and private nonprofit treatment programs, including measures of supply of treatment available. The number of individuals seeking treatment through such programs, the number and demographic characteristics of individuals receiving such treatment, the percentage of individuals who complete such programs, and the length of time between an individual's request for treatment and the commencement of treatment. The number of such individuals who return for treatment after the completion of a prior treatment in such programs, and the method of treatment utilized during the prior treatment. The number of individuals receiving public assistance for such treatment programs. The costs of the different types of treatment modalities for drug and alcohol abuse and mental disorders and the aggregate relative costs of each such treatment modality provided within a State in each fiscal year. The number of individuals receiving treatment for alcohol and other drug abuse and mental disorders who have private insurance coverage for the costs of such treatment. The number of alcohol and other drug abuse counselors, mental health providers, and other substances abuse treatment personnel employed in public and private treatment facilities. The individuals receiving treatment do not submit data into the BHSIS system. The state substance abuse and mental health agencies upload files containing the data into the system.

TEDS and Mental Health TEDS admission and discharge record contain a date of birth. It is used to calculate the age of the client - at admission, at update (Mental Health (MH) records only), and at discharge. The age validation is used for the following variables: Age of 1st Use, Education, Serious Emotional Disorder (SED)/Serious Mental Illness (SMI) (MH) and School Attendance (MH).

It is not used as credentials in any way, and is meant to not be traceable to identify the client. Date of Birth is not stored on the BHSIS system.

The users of the system are the BHSIS Project staff, consisting of indirect contractors who collect the data, process the data and produce reports as directed by SAMHSA; employees of state substance abuse and mental health agencies who submit data to the system, and federal (SAMHSA) employees who use the system to fulfill their project oversight and mission responsibilities.

No HHS badging user credentials are collected or used to access this system by our indirect contractors or federal employees. All users, administrators, and developers login to the system with system-specific username and password. Administrators are considered privileged users who must use two-factor authentication to login. All contractors are indirect contractors.

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

BHSIS is comprised of five inter-related core components: I-BHS includes a master list of all organized substance abuse treatment and mental health treatment programs known to CBHSQ (Center for Behavioral Health Statistics and Quality.) The providers in the inventory that are licensed, certified or otherwise recognized by the individual State substance abuse and/or mental health agencies are flagged as “State approved” in the I-BHS file. Other facilities are coded as “non-State approved.” Only “State-approved” facilities may be listed in SAMHSA’s National Directory of Drug and Alcohol Abuse Treatment Programs, National Directory of Mental Health Treatment Programs, and on-line Behavioral Health Treatment Services Locator, www.findtreatment.samhsa.gov. The I-BHS is used by SAMHSA and many States as the principal means of identifying providers within the substance abuse and mental health service system. The on-line Behavioral Health Treatment Services Locator (www.findtreatment.samhsa.gov) is considered part of the BHSIS system, but it is available as a public web site with no login required and does not interact with other parts of the BHSIS system. The Locator allows the public to view or download treatment facility information and collects no data from users.

N-SSATS is an annual census of all active drug and alcohol abuse treatment facilities listed on the I-BHS inventory. (There are some exclusions, such as treatment units within jails, prisons and other correctional settings.) The N-SSATS collects information on the location, organization, structure, services and utilization of substance abuse treatment. Data are used for program administration and policy analysis.

N-MHSS is a census of all known mental health treatment facilities within the U.S. and territories. N-MHSS collects facility-specific characteristics, such as: location; organizational structure and ownership; types of services and specially-designed programs/services offered; and payment/funding sources. The survey also collects facility caseload data, such as: one day census counts of residents; and aggregated counts of clients by age, gender, race, and ethnicity. Facilities include public and private psychiatric hospitals; non-federal general hospitals with separate psychiatric services; U.S. Department of Veterans Affairs medical centers; residential treatment centers for children; residential treatment centers for adults; freestanding outpatient clinics and partial care programs; and multi-service (non-hospital) mental health facilities. Data from the N-MHSS are used for publication in SAMHSA reports, for program administration, planning, and policy analysis.

TEDS and Mental Health TEDS is a repository of national data on substance abuse treatment admissions and discharges to state-funded substance abuse and mental health treatment facilities. The mental health Uniform Reporting System (URS) is comprised of a set of tables that are part of the Mental Health Block Grant Annual Implementation Report due to SAMHSA by December 1 each year. The URS tables provide aggregate data on demographic and characteristics of persons served by the state mental health agency in the reporting year.

TEDS and Mental Health TEDS admission and discharge record contain a date of birth. The date of birth is used to calculate the age of the client at admission, at update, (MH records only), and at discharge.

The age validation is used for the following variables: Age of 1st Use, Education, Serious Emotional Disorder (SED)/Serious Mental Illness (SMI) (MH) and School Attendance (MH). It is not used as credentials in any way, and is meant to not be traceable to identify the client.

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

Yes

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

Date of Birth

Name

E-Mail Address

Mailing Address

Phone Numbers

Medical Notes

Employment Status

System-specific User Credentials

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

Employees

Business Partner/Contacts (Federal/state/local agencies)

Vendor/Suppliers/Contractors

Patients

How many individuals' PII is in the system?

1,000,000 or more

For what primary purpose is the PII used?

TEDS and MH-TEDS admission and discharge record contain a date of birth. It is used to calculate the age of the client - at admission, at update (Mental Health (MH)records only), and at discharge. The age validation is used for the following variables: Age of 1st Use, Education, Serious Emotional Disorder (SED)/Serious Mental Illness(SMI)(MH) and School Attendance (MH). It is meant to not be traceable to identify the client. Date of Birth is not stored on the system.

Other than client date of birth, all other types of PII collected and maintained in this system are used for user account registration, including confirmation of user organizational (state agency) affiliation, and user maintenance. System-specific user credentials for system users and administrators are used to control access to the BHSIS system and for account management.

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

There are no secondary uses for which the PII will be used.

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

Section 501(n) of the Public Health Service Act (42 USC 290aa(n))

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

No

N/A

N/A

N/A

Identify the sources of PII in the system.

Government Sources

Within OpDiv

State/Local/Tribal

Non-Governmental Sources

Private Sector

Identify the OMB information collection approval number and expiration date

Treatment Episode Data Set: OMB:0930-0335

Expiration Date: 03/31/2019

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.

Data are collected from the administrative databases of the state agencies responsible for providing and/or funding state substance abuse and mental health services. Prior notification to individuals would have been done at the service provider level and/or the state-operated facilities at the time of data collection. Notification is provided to SAMHSA system users, administrators, or contractors via email and/or telephone that user account contact information will be collected to grant them system access.

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.

The method for individuals to opt-out of the collection is prescribed by each participating state. No opt-out system exists for SAMHSA users, administrators or contractors.

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

The BHSIS Project has no immediate access to each individual for whom states submit client-level data. Data are provided by the state/local/tribal agencies responsible in the delivery of substance abuse and mental health services. Notification and obtaining consent from individuals are handled at the state level. Users, administrators and contractors with user credentials are notified via email when major changes occur to 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.

PII issues are handled at the state level. Each state has their respective processes in place and may differ from one another. The raw data that is maintained by the BHSIS project is not released to the public. The only data released to the public will be deidentified to include disclosure analysis done on the data to ensure no identifying information is released. The only PII collected is date of birth and that information is stripped from the dataset that is released as a public use file.

BHSIS call center (1-877-250-4665) contractors maintain frequent contact with system users as part of the normal business process, which offers users the opportunity to inform the BHSIS project team of inaccurate contact information or user credentials in the system. Updates to inaccurate or outdated information are typically completed within one business day of receiving the request. User credentials are necessary to permit user access to the system. However, if requested by a user, those credentials will be removed from the system, along with removal of the user's ability to access the system.

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

Data collected under the BHSIS Project are periodically reviewed by SAMHSA, the states, and the Project staff throughout the year as data is available to ensure data's integrity, availability, accuracy, and relevancy. Data are reviewed when updates from respondents are received, when survey in field has ended and at the time reports and files are needed. There is not a set scheduled for review of data, as it is ongoing. The process to review data may include automatic system checks, running skip patterns that may cause an error flag, and having project staff manually review data to check on outliers. The review process may also include comparing substance abuse facility data to mental health facility data, to ensure there are duplicates facilities in the system. Monthly and quarterly reports on data submission and quality are provided by the Project staff to SAMHSA and the state representatives for review.

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

Users:

BHSIS Project staff who are processing the data and producing annual reports and data files .

Administrators:

System Administrators oversee all functions of the BHSIS database. This includes, but is not limited to; installation/configuration, operation, maintenance of BHSIS systems hardware and software and related infrastructure. This person ensures that all system hardware, operating systems, software systems, and related procedures adhere to BHSIS contract SOW (Statement of Work.) This includes updating user passwords and login information, fixing errors in reporting database and making sure system is user friendly.

Developers:

Developers manage BHSIS database. Their responsibilities include, but are not limited to; manage and perform BHSIS system design and developments. Develop, maintain, and enhance complexities of our BHSIS system based upon documented requirements. Developers design and implement algorithms requiring adherence to strict timing, system resource, or interface constraints; perform quality control on team products using code reviews and testing. Test, debug, and refine the BHSIS database to produce the required product. Enhance software to reduce operating time or improve efficiency. Participate in testing, bugs fixes, and BHSIS system upgrades.

Contractors:

The contractors are in fact the BHSIS project staff contracted by SAMHSA who maintains the BHSIS system. The contractors are the Users, Administrators, Developers. The contractors (Eagle Technologies, Inc.) will maintain and manage the BHSIS.

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

By virtue of their responsibilities, the system Administrators, Developers, Project staff involved in data processing, and SAMHSA Project staff are provided full access to the database that may access PII. All data users execute the SAMHSA/CBHSQ Data Security Agreement and are mandated to take an annual training on data security and privacy.

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 and privileges are granted on a per individual basis according to their assigned project responsibilities.

BHSIS project staff are given permissions to access I-BHS Inventory to make sure Locator stays up to date and processes information from facilities and states. This staff would also have access to data for purposes of creating reports and running data analysis. It is unlikely that project staff will access PII data during these routine activities, as the DOB variable isn't linked to any client.

IT staff is given permissions to ensure that they have access to data systems for support purposes. IT staff has permissions in order to make design and code changes and monitor Locator. IT staff permissions are also used to run internal testing and development and production fixes on databases.

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.

HHS role-based training is provided to BHSIS administrators and management staff, in addition to the annual general awareness training for security and privacy that includes modules for both regular and privileged users.

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

This is no training systems users receive above and beyond general security and privacy awareness.

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.

BHSIS uses the PII retention schedule as instructed by SAMHSA. Currently the BHSIS GRS (General Records Schedule) schedule is being updated. Once we receive the approved GRS we will amend the PIA and provide the full citation for the BHSIS GRS.

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

BHSIS data is housed at a physically secure location with access to the databases and servers strictly limited to system administrators. All BHSIS databases are also protected by a firewall and are only accessible by workstations in the Eagle LAN with proper password authentication. Websites log all access, and these logs are reviewed regularly. To ensure data integrity and availability, all BHSIS databases are backed up nightly and transmitted to an off-site COOP (Continuity of Operations.) For confidentiality purposes, state-level employees have minimal access to the system based on administrative roles, allowing data entry and basic user configuration only, and cannot upload any PII.

Identify the publicly-available URL:

<http://www.dasis.samhsa.gov/dasis2/index.htm>

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.

Web Beacons that do not collect PII.

Session Cookies that do not 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?

Yes