Department of Veterans Affairs (VA) Response to Questions for the Record House Oversight and Government Reform, Subcommittee on Information Technology Hearing: Protecting Americans' Identities: Examining Efforts to Limit the Use of Social Security Numbers

May 23, 2017

1. How does the Department of Veterans Affairs (VA) define necessary Social Security number (SSN) use?

VA Response: The SSN is used to identify employees for employment-related record keeping. It is used for Veterans and their dependents to ensure accurate identification for VA healthcare and benefits. Positive identification of Veterans is necessary in order to avoid mistaken identity, which can be catastrophic in healthcare delivery.

2. Please provide examples when it would be necessary to include a full SSN in correspondence.

VA Response: The full SSN is used for Veterans Benefits Administration (VBA) correspondence since a large amount of mail is returned due to incorrect addresses. The full SSN is needed so that VBA staff can accurately look up and positively identify the Veteran in their system. It is not possible to establish identity using only name and date of birth (DOB) since there are many Veterans with similar names and matching DOBs.

3. Does the VA maintain an inventory of its SSN use?

VA Response: Veterans Health Administration (VHA) maintains an inventory of its SSN use. The Veterans Administration Systems Inventory (VASI) office also maintains an inventory of Personally Identifiable Information (PII) which includes SSN use.

4. In your written testimony, you noted that IT solutions to eliminate SSN use can only occur after conducting an "integrated and comprehensive review of SSN use." Has the VA undertaken such a review? If not, why not?

VA Response: VHA already collects and maintains an SSN use inventory database. VA is developing a new SSN Reduction tool to inventory SSN use and full deployment is expected throughout VA by September 2017.

5. The VA has developed the Integrated Control Number (ICN) as a unique identifier for patients. In what ways can the ICN be used as an SSN replacement?

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VA Response: The VA's Master Veteran Index Integration Control Number (ICN) is an enterprise level unique person identifier assigned to every person of interest to the VA and was developed in accordance with the ASTM 1714 standard for Unique Healthcare IDs (UHIDs). As such, the ICN can be used within VA electronic systems, as well as externally, such as on correspondence, to uniquely identify a patient. The ICN is, on rare occasion, changed for a person, in the event that a duplicate or other anomaly is found. Thus, it is generally not recommended that the ICN is used externally on more permanent formats, such as ID cards. However, although the ICN is not used directly on cards for this reason, it is correlated to other unique identifiers (such as the ID card number) used within VA and external agencies to ensure appropriate linkage and patient identification.

The Master Veteran Index (MVI) Technical team recommends that the ICN not be used on more permanent formats including ID cards as there is a small chance the ICN can change over time under certain conditions. For example, if duplicate identity records are found for a person, one of those records will be deprecated and all information on that identity combined into the retained ICN, leaving references to the "old" deprecated ICN invalid. The Card ID is used to manage the issuance and tracking of the cards themselves, and is unique to the specific card, not unique to the patient identity.

6. Why does the VA use the SSN for patient identification purposes? In what instances does the VA use a full SSN and how does the VA ensure that these SSNs are protected?

VA Response: According to The Joint Commission (TJC), two patient identifiers are required to reliably identify individuals for whom services and treatment are intended, and to reliably ensure the services and treatment match the person for which they are intended. In addition, patient medical records must have a unique medical record number for identification of the patient within the record system. Historically, VHA policies have required the SSN as part of the patient's identifying traits as well as the medical record number. For example, in October of 2013, the National Center for Patient Safety published guidance on information required on VA wristbands: 1) Patient's Full Name, 2) Full SSN, and 3) Bar Code of SSN. Also, VHA Chief Business Office (now Office of Community Care) policy change dated November 2013 required full name, SSN, and a bar code of the SSN be printed on the patient wristband to ensure appropriate patient identification in a human readable format. However, VHA SSN Reduction and

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Elimination Initiative seeks to reduce or eliminate the use of SSNs as the forward-facing unique identifier in VHA systems, processes, and forms as part of the government-wide effort to reduce the exposure of PII.

Below are examples (not exhaustive) of how VHA uses the full SSN:

- a. Enrollment for healthcare
- b. Positive patient identification
- c. Computer matching agreements with other federal agencies (e.g., IRS and SSA)
- d. Health information exchange with community partners (e.g., Virtual Lifetime Electronic Health Record)
- e. Collection of co-pay claims

All VA workforce members are required to take annual privacy and security training. Staff is reminded to safeguard protected health information and personally-identifiable information (e.g., the SSN).

7. When the Veterans Health Administration (VHA) uses SSNs, for instance on patient wristbands and IV bag labels, how does the VA track these instances to ensure that the SSNs are properly disposed of following use?

VA Response: VHA does not have a tracking system to know when patient wristbands and IV bags labels are destroyed. Each respective VA Medical Center (VAMC) is responsible for developing a local policy for destruction of sensitive material to include paper and biohazardous waste materials. The common practice at VAMCs is for the IV bag labels and patient wristbands, unless kept by the patient, to be placed in the incinerator or biohazardous bags and autoclaved.