

# Privacy Impact Assessment Form

v 1.21

Status Form Number 

Form Date

Question

Answer

1 OPDIV:

2 PIA Unique Identifier:

2a Name:

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

- General Support System (GSS)  
 Major Application  
 Minor Application (stand-alone)  
 Minor Application (child)  
 Electronic Information Collection  
 Unknown

3a Identify the Enterprise Performance Lifecycle Phase of the system.

3b Is this a FISMA-Reportable system?

- Yes  
 No

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

- Yes  
 No

5 Identify the operator.

- Agency  
 Contractor

6 Point of Contact (POC):

POC Title   
 POC Name   
 POC Organization   
 POC Email   
 POC Phone

7 Is this a new or existing system?

- New  
 Existing

8 Does the system have Security Authorization (SA)?

- Yes  
 No

8b Planned Date of Security Authorization

 Not Applicable

8c	Briefly explain why security authorization is not required	Vendor will be collecting information.
10	Describe in further detail any changes to the system that have occurred since the last PIA.	
11	Describe the purpose of the system.	The purpose of this information collection (IC) is to respond to the US opioid epidemic and ensure that labs have the test materials they need to detect various opioids. CDC, through a vendor, will assure that the Traceable Opioid Material Kits (TOM Kits) are being distributed to different types of laboratories in public, private, and non-profit sectors.
12	Describe the type of information the system will collect, maintain (store), or share. (Subsequent questions will identify if this information is PII and ask about the specific data elements.)	<p>The types of information the study will collect and maintain will be:</p> <p>Lab Contact Information (address, phone number, email); lab contact information would be for the lab itself and not specific to any individual working for that lab.</p> <p>Lab Survey (capacity, analysis techniques, size, testing type, DEA number, monthly sample volume)</p> <p>The information collected will be used to determine which laboratories will receive kits and the number of kits needed.</p> <p>This information will not be shared outside of CDC. Laboratories will not be authenticated when submitting information. The vendor will authenticate all of its internal users.</p>
13	Provide an overview of the system and describe the information it will collect, maintain (store), or share, either permanently or temporarily.	<p>Manufacturers of the TOM Kits will use their established client relationship management systems to manage laboratory requests for kits and their responses to study questions. The types of information the study will collect and maintain will be:</p> <p>Lab Contact Information (address, phone number, email); lab contact information would be for the lab itself and not specific to any individual working for that lab.</p> <p>Lab Survey (capacity, analysis techniques, size, testing type, DEA number, monthly sample volume)</p> <p>The information collected will allow CDC to prioritize the distribution of TOM Kits by (1) the recipient DEA number, (2) which laboratories requested kits and the number of kits requested, and (3) then mail kits to the selected laboratories.</p> <p>Information in the study will be submitted by various academic, public, private, and commercial laboratories. This information will not be shared outside of CDC. Laboratories will not be authenticated when submitting information. The vendor will authenticate all of its internal users.</p>
14	Does the system collect, maintain, use or share PII?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Reviewer Questions	Answer
<b>REVIEWER QUESTIONS:</b> The following section contains Reviewer Questions which are not to be filled out unless the user is an OPDIV Senior Officer for Privacy.	
Reviewer Questions	Answer
1 Are the questions on the PIA answered correctly, accurately, and completely?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes <input type="text"/>	
2 Does the PIA appropriately communicate the purpose of PII in the system and is the purpose justified by appropriate legal authorities?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes <input type="text"/>	
3 Do system owners demonstrate appropriate understanding of the impact of the PII in the system and provide sufficient oversight to employees and contractors?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes <input type="text"/>	
4 Does the PIA appropriately describe the PII quality and integrity of the data?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes <input type="text"/>	
5 Is this a candidate for PII minimization?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes <input type="text"/>	
6 Does the PIA accurately identify data retention procedures and records retention schedules?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes <input type="text"/>	
7 Are the individuals whose PII is in the system provided appropriate participation?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes <input type="text"/>	
8 Does the PIA raise any concerns about the security of the PII?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes <input type="text"/>	
9 Is applicability of the Privacy Act captured correctly and is a SORN published or does it need to be?	<input type="radio"/> Yes <input type="radio"/> No
Reviewer Notes <input type="text"/>	
10 Is the PII appropriately limited for use internally and with third parties?	<input type="radio"/> Yes <input type="radio"/> No

Reviewer Questions		Answer
<i>Reviewer Notes</i>	<input type="text"/>	
11	Does the PIA demonstrate compliance with all Web privacy requirements?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
12	Were any changes made to the system because of the completion of this PIA?	<input type="radio"/> Yes <input type="radio"/> No
<i>Reviewer Notes</i>	<input type="text"/>	
General Comments	<input type="text"/>	
OPDIV Senior Official for Privacy Signature	<input type="text"/>	HHS Senior Agency Official for Privacy <input type="text"/>