Attachment 9. 2017 Final AoC NHM\&E

# Memorandum 

August 28, 2017
Deputy Associate Director for Science, CDC
Office of the Associate Director for Science

Authorization to Extend 308(d) Assurance of Confidentiality Protection for the "National HIV Prevention
Subject
Program Monitoring and Evaluation (NHM\&E)."

Dr. Jonathan Mermin
Director for National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)

This memo is to provide formal approval of NCHHSTP's request to extend the authorization to assure continued confidentiality under Section 308(d) of the Public Health Service Act for the "National HIV Prevention Program Monitoring and Evaluation (NHM\&E)."

This project has had an Assurance of Confidentiality since September 2012. For ongoing projects, CDC practice is that every five years, the program must apply for a formal extension of the 308 (d) authority. Please apply for the extension at least six months prior to September 30, 2022.

Please use 42 USC $242(k)$, and 42 USC $242(\mathrm{~m})$ as the legal references for information collection and protection.

If you have any questions, please contact Joseph Rush Jr. Confidentiality Administrator, at (404) 6394772.

cc:
Janet Heitgerd PhD, NCHHSTP
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## Request for Authorization To Give Assurance of Confidentiality

## Under Section 308(d) of the Public Health Service Act

NOTE: Do not obtain signature on this form until OCSO and the Project Officer have agreed on final versions of the 308(d) Justification, Assurance, and Security Statement.
(See "Assurance of Confidentiality Application Procedure" for instructions on completing this form.)


Date: July 24, 2017
To: Joseph Rush Jr., Confidentiality Administor
From: Janet Heitgerd and Carolyn Wright
Subject: The National HIV Prevention Program Monitoring and Evaluation (NHM\&E) Assurance of Confidentiality (formerly named Program Evaluation and Monitoring System (PEMS))

This is an official request for extension of Assurance of Confidentiality under Public Health Services Act Section 308(d) for the National HIV Prevention Program Monitoring and Evaluation (NHM\&E) (formerly named Program Evaluation and Monitoring System (PEMS).
I. Extent of Changes to Protocol: (Includes basic information, a statement that no substantive changes have occurred, and summary of non-substantive changes):

In September 2012, the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention received approval of its request for assurance of confidentiality protection under Section 308(d) of the Public Health Service (PHS) Act for the "National HIV Prevention Program Monitoring and Evaluation (NHM\&E)"data collection. Since the original Assurance of Confidentiality was issued, there have been several changes that are detailed below. The level of security has not been impacted.

Data Submission Method. CDC directly-funded Community-based Organizations (CBO) are required to key enter their data into the approved CDC Data System (currently EvaluationWeb ${ }^{\circledR}$ ). The number of CBO recipients vary by funding announcement.

Project Personnel. Carolyn Wright replaces David Davis as the project officer/principal investigator for the Program Evaluation Branch.

Clarified language on unique identifier. Individual records will be identified by a unique key that is linked to a particular agency and state. However, that unique key may not be randomly generated.

EvaluationWeb. Users from contracted entities (CDC) must now complete Electronic Authentication Assurance Level 2 : dentity proofing requirements established by CDC and the completed authorization is transmitted to Luther Consulting via the Secure Access Management System (SAN S).

EvaluationWeb system now prohibits the use of Secure Socket Layer (SSL) $2 \& 3$, as required by NIST, and uses Transport Layer Security (TLS) 1.1 and 1.2 as required
by CDC to encrypt the browser to browser connection between EvaluationWeb and the jurisdictions when they upload data to the system. All encryption used by the EvaluationWeb system meets Federal Information Processing Standards (FIPS) 140-2 requirements and are certified by NIST.

Updated information on user responsibilities. User responsibilities information (Rules of Behavior for CDC staff and Contractors; Non-Disclosure Agreement for Federal Personnel; Contractor's Pledge of 308 (d) Confidentiality) was updated to align with current DHAP/PEB processes and points of contact.

## Privacy and Confidentiality Unit (PCU) initiated changes to the AoC

In 2017, PCU required the following language be added to the Assurance Statement and Confidentiality Security Statement for active AoCs:
"CDC is in compliance with applicable federal law requiring the protection of federal computer networks from cybersecurity risks like hacking, internet attacks, and other security weakness; computer network experts working for, or on behalf, of the government, may intercept and review information sent through government networks for cyber threats if the information is sent through the government network triggers a cyber threat indicator."

The Assurance Statement and Confidentiality Security Statement have been updated to reflect this change.
II. Utilization of Confidentiality Protection:

The $308(\mathrm{~d})$ has not been used by any funded agency to prevent disclosure of private data.
III. Why Confidentiality Protection is still needed:

While the Assurance of Confidentiality has not been utilized by any funded sites, it is still needed due to the sensitive nature of NHM\&E data collected by health jurisdictions and CBOs.

NHM\&E data submitted to CDC through EvaluationWeb ${ }^{\circledR}$ will not contain individually identifiable variables (e.g., individual's names or locating information) but will include select demographic and personal characteristics (gender, race, ethnicity, year of birth, pregnancy status, and HIV status) in addition to intervention and behavioral characteristics. Although data submitted to CDC will not include individuals' names, there remains a possibility that persons may be indirectly identified as being HIV-infected or as h.ving specific behavioral risks for contracting or transmitting HIV. This may pose a theat to confidentiality if unauthorized persons obtain access to this information. All CDC personnel with access to NHM\&E data
will be required to adhere to a strict security and confidentiality protocol, participate in annual security and confidentiality training, and sign a 308(d) Nondisclosure Agreement and an NHM\&E data Rules of Behavior agreement.

NHM\&E involves the collection of highly sensitive data. much of it concerning socially stigmatizing conditions or behaviors. The cooperation of health departments, CBOs, and individuals will be very difficult to obtain if concerns about privacy and confidentiality are not addressed. The request for an Assurance of Confidentiality represents an attempt to safeguard data collected in HIV prevention programmatic activities. The Assurance of Confidentiality will be provided on request from the state health department or CBO .

