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DEFENSE  
HEALTH AGENCY

November 4, 2019

**MEMORANDUM FOR THE DEFENSE PRIVACY, CIVIL LIBERTIES, AND  
TRANSPARENCY DIVISION**

**SUBJECT: Justification for the Continued Use of the Social Security Number (SSN) on DD Form 2569, "Third Party Collection Program/Medical Services Account/Other Health Insurance."**

1. System / Form

This memorandum is written to satisfy the requirements of the *Department of Defense Instruction DoDI 1000.30, Reduction of Social Security Number (SSN) Use Within DoD*, dated August 1, 2012, which requires justification of the collection and use of the SSN on the DD Form 2569, "Third Party Collection Program/Medical Services Account/Other Health Insurance," used for coordination of benefits. The DoD is authorized to collect "reasonable charges" from third party payers for the cost of inpatient and outpatient services rendered at military treatment facilities (MTFs) to military retirees, all dependents, and other eligible beneficiaries who have private health insurance. The DoD may also collect from civilians (or their insurers) the cost of trauma or other medical care provided to them and from other federal agencies the average cost of health care provided to their beneficiaries at DoD MTFs. In order for DoD to perform such collections, eligible beneficiaries may elect to provide DoD with other health insurance (OHI) information. For civilian non-beneficiary and interagency patients, DD Form 2569 is necessary and serves as an assignment of benefits, approval to submit claims to payers on behalf of the patient, and authorization to release medical information. This form is available to third-party payers upon request.

This information will be collected by military treatment facility (MTF) administrative support staff including but not limited to, admissions clerks, patient registration and scheduling clerks, and clinic staff -- from beneficiaries and non-beneficiaries at the time of admission and/or outpatient visit to the MTF (i.e., at point of service) or as soon as practical thereafter. The patient fills out the DD Form 2569 manually or electronically, certifying whether they are eligible for VA benefits and/or have OHI. This is the main entry point for the information, which is then also stored in DEERS, and can be updated by the patient there. The form will help the local MTF determine the proper third party payer to bill for medical care provided to beneficiaries, and facilitates the collection of reasonable charges from third party and other payers.

2. Documentation

As authorized by Title 10 U.S.C. § 1095, "Health Care Services Incurred on Behalf of Covered Beneficiaries: Collection from Third-Party Payers" Title 32 C.F.R. §220, "Collection From Third Party Payers of Reasonable Charges for Healthcare Services," Title 10 USC § 1079b(a), "Procedures for Charging Fees for Care Provided to Civilians; Retention and Use of Fees Collected," and Title 10 USC § 1085, "Medical and Dental Care from Another Executive Department: Reimbursement," the DD Form 2569 is used to collect personal information from individuals of the public for use in medical services

### 3. Authorized Uses

According to DoDI 1000.30, continued collection of SSNs on the DD Form 2569 must be justified by one or more of the Acceptable Use Cases set forth in DoDI 1000.30, Enclosure 2. The Acceptable Use Case applicable to the DD Form 2569 is:

*2.c (13) Other Cases.* The previous categories may not include all uses of the SSN delineated by law. Should an application owner be able to show sufficient grounds that a use case not specified in subparagraphs 2.c.(1) through 2.c.(12) of this enclosure is required by law, then that use case may continue to use the SSN. Any application that seeks to use this clause as justification must provide specific documentation in order to continue use under this provision.

Here, for the Coordination of Benefits (using DD Form-2569 and primarily authorized by 10 United States Code, Chapter 55, at Section 1095, and further by 32 Code of Federal Regulations 220.2 (d)), the continued collection and use of SSNs is justified under the authority of "Other Cases" because where DoD is authorized to recover from third-party payers, the cost of inpatient and outpatient services rendered to military retirees, all dependents, and others who have private health insurance SSNs, among other beneficiary data, are required to ensure the accurate identification of patients and the billable services and insurance claims related to them. While other data elements including patient's name, address, date of birth, identity of other health insurance carrier (third-party payer), and policy number, can all be used to identify individuals, *the SSN is the identifier that best identifies an individual uniquely across DoD, third-party-payer, and industry systems.* The SSN is used initially to unambiguously identify the individual in DoD's standard system for recording other health insurance (OHI) information so the correct insurance information can be recorded.

Secondly, it is used when contacting the insurance carriers to unambiguously identify the individual to verify the information reported on the DD Form 2569. DHA also conducts OHI identification projects through a contractor specializing in OHI discovery. The SSN is the most critical data element for uniquely identifying an individual so that his or her OHI status can be researched. The primary data elements needed for OHI discovery are SSN, name, and data of birth. Of these, SSN is the most critical because it is the most effective at uniquely identifying an individual. There is significantly more duplication for names and dates of birth. Other data elements including spouse's name and address are sometimes helpful but are much less reliable as a means of uniquely identifying an individual. The SSN must therefore remain as the primary identifier and cannot otherwise be truncated without the risk of misidentifying the patient and cannot be masked since the DD Form 2569 is a paper form used to directly collect information from beneficiaries.

### 4. Point of Contact

For questions related to this memorandum contact Ms. DeLisa Prater, DHA UBO Program Manager. Ms. Prater may be reached at 703-275-6380 or [delisa.e.prater.civ@mail.mil](mailto:delisa.e.prater.civ@mail.mil).

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