| Department of Veterans Affairs Assignment of Functional Categories | | | | | | | | |
|---|---|--|---|---|--|--|--|--|
| Em | nployee's Name: | | Job Title: | | | | | |
| De | partment/Service Assigned: | | | | | | | |
| | mployee falls into more than or trictive category to meet the r | | below, access should | d be granted based on the less | | | | |
| the | ir own System of Records in o | order to complete their job fun | actions. | does not show if a user needs access to ain signatures, and maintain copy in the | | | | |
| | - | CS 10-1, 05-3) for the individu | | an oignatares, and maintain sopy in the | | | | |
| | Access or use of Protected H Employee, etc.) | lealth Information (PHI) not re | quired (EMS, Vetera | ns Canteen Service, Mailroom | | | | |
| | Functional Categories (Class of Persons) | Type of Protected Health Information Accessible | Allowable Systems of Records for Limited Access | Conditions for Access to Information | | | | |
| | Direct Care Providers | Entire Medical Record | | Treatment of Individuals | | | | |
| | Department of Veterans Affairs (VA) Researchers | Entire Medical Record including research records | | Activities as approved by an Institutional Review Board or Privacy Board; reparatory to research | | | | |
| | Indirect Care Providers | Entire Medical Record | | In support of treatment of individuals | | | | |
| | Business Office Administrative | Entire Medical Record | | In support of payment of Individuals care | | | | |
| | Health Information Support Services | Entire Medical Record | | Assign diagnostic codes to transcribe, file, release information, and provide or input registry data | | | | |
| | Quality, Oversight and Investigations | Entire Medical Record including research records | | Medical Inspections, investigations, complaint review and resolution, quality reviews and compliance, congressional response | | | | |
| | Mail Room | No Need for access to PHI | | Mail Room Staff | | | | |
| | Chief of Police | Limited Health Record | 79VA19, 24VA19 | Chief of Police looking up patients information in Patient Inquiry | | | | |
| | Police and Security Service | No Need for access to PHI | | Security Police, and Police Staff | | | | |
| | Safety | No Need for access to PHI | | Patient safety, radiation safety, environmental safety and biomedical safety | | | | |
| | Information Security, Privacy, Compliance, VISN Staff, Patient Advocate | Entire Health Record including research records | | Monitoring and tracking of security privacy and compliance issues | | | | |
| | Operations Support and Environmental Services | No need for access to PHI | | Contracting, Human Resources, Acquisitions, Environmental, Engineering, Employee Education Service, Forms, Publications, and Library | | | | |

| | Functional Categories (Class of Persons) | Type of Protected Health Information Accessible | Allowable Systems of Records for Limited Access | Conditions | for Access to Information | | | | |
|---|--|---|---|--|---------------------------|--|--|--|--|
| | Leadership and Management | Limited access, where necessary to complete assignment | 24VA19, 79VA19, 121VA19 and any other system of records with national data. | Operation and management, executive decisions for health care operations | | | | | |
| | Non Health Information Administrative Support | Limited Health Record, where necessary to complete assignment | 79VA19 | Administrative Support, medical media, public affairs, mail room, telecommunications, and information desk | | | | | |
| | Eligibility and Enrollment Staff | Entire Health Record | | For enrollment, eligibility, income and insurance verification | | | | | |
| | Information Technology | Limited Health Record, where necessary to complete assignment | 79VA19, 24VA19, 121VA19 and any other system of records for an IT system. | Computer Systems Maintenance and Support | | | | | |
| | Veterans Canteen Service | No need for access to PHI | | Cafeteria, Retail Store | | | | | |
| | Volunteer Services | Limited Health Record | 79VA19, 24VA19 | Transportation and other services | | | | | |
| By signing this document I acknowledge and understand that I have been assigned the functional categories listed above and given computer access and VistA menu options to access and use Protected Health Information only in the performance of my official job duties and assigned task. | | | | | | | | | |
| Em | ployee's Signature: | | Date: | | | | | | |
| Su | pervisor's Signature: | | Date: | | | | | | |
| | Interim Review for Position | or Job Assi | nment Change | | | | | | |
| Th | e following changes have be | een made to employees' fund | ctional category: | | | | | | |
| ☐ No changes made, functional category and menu options to remain the same | | | | | | | | | |
| Em | ployee's Signature: | | Date: | | | | | | |
| Su | pervisor's Signature: | Date: | | | | | | | |