

MANDATED UTILIZATION OF RELEASE OF INFORMATION (ROI) PLUS SOFTWARE

1. REASON FOR ISSUE: This Veterans Health Administration (VHA) directive states policy regarding the roles, responsibilities and utilization of the Release of Information (ROI) Plus software package.

2. SUMMARY OF MAJOR CHANGES: This directive updates content related to using the ROI Plus software as the single solution for entering ROI requests and accounting for disclosures. Major changes include:

a. Updates definitions in paragraph 3.

b. Updates responsibilities in paragraph 5 to include the Under Secretary for Health; Deputy Under Secretary for Health; Assistant Under Secretary for Health for Operations; Director, Information Access and Privacy (IAP) Office; VHA Privacy Compliance Assurance Officer; Veterans Integrated Services Network (VISN) Director; VISN Privacy Officers; and Department of Veterans Affairs (VA) medical facility ROI staff.

3. RELATED ISSUES: VHA Directive 1605.01, Privacy and Release of Information, dated August 31, 2016; and VHA Directive 1907.01, Health Information Management and Health Records, dated April 5, 2021.

4. RESPONSIBLE OFFICE: The Office of Health Informatics, Health Information Governance, IAP Office (105HIG) is responsible for the content of this directive. Questions may be addressed to the VHA IAP Office at VHAPrivIssues@va.gov.

5. RESCISSIONS: VHA Directive 1615, Mandated Utilization of Release of Information (ROI) Plus Software, dated July 20, 2016, is rescinded.

6. RECERTIFICATION: This VHA directive is scheduled for recertification on or before the last working day of March 2027. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

March 23, 2022

VHA DIRECTIVE 1615

**BY DIRECTION OF THE OFFICE OF THE
UNDER SECRETARY FOR HEALTH:**

/s/ Mark Upton, M.D.
Deputy to the Assistant Under Secretary
for Health for Community Care,
Performing the Delegable Duties of the
Deputy Under Secretary for Health

NOTE: All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.

DISTRIBUTION: Emailed to the VHA Publications Distribution List on March 24, 2022.

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MANDATED UTILIZATION OF RELEASE OF INFORMATION (ROI) PLUS SOFTWARE

1. PURPOSE

This Veterans Health Administration (VHA) directive updates policy regarding the roles, responsibilities and utilization of the Release of Information (ROI) Plus software package. **AUTHORITY:** 5 U.S.C. § 552a; 38 U.S.C. § 7301(b); 45 C.F.R. § 164.528.

2. BACKGROUND

a. Under the Privacy Act of 1974, 5 U.S.C. § 552a(c), “Each agency, with respect to each system of records under its control, shall keep an accounting of the date, nature and purpose of each disclosure of a record to any person or to another agency.” Paragraph (2)(c) requires agencies to make the accounting available to the individual named in the record at that person’s request except for certain law enforcement activities.

b. The Standards for Privacy of Individually Identifiable Health Information, commonly referred to as the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule, requires covered entities to maintain an accounting of disclosures similar to the Privacy Act of 1974 and to provide the accounting to an individual upon their request (see 45 C.F.R. § 164.528). **NOTE:** *For further information about time frames for accounting of disclosures and exceptions, see VHA Directive 1605.01, Privacy and Release of Information, dated August 31, 2016.*

c. VHA must maintain an accounting of the disclosures of health information made from Veterans’ records and must have the capability to provide Veterans with a summary of the accounting. VHA has deployed the Document Storage Systems (DSS) ROI Plus software to standardize the process for processing ROI requests and maintaining an accounting of disclosures for ROI requests processed. This software allows for the management, processing and tracking of all requests for information under the HIPAA Privacy Rule and the Privacy Act of 1974. The VHA Privacy Office is the business owner for the ROI Plus software. **NOTE:** *For detailed procedures for using the ROI Plus Software, see the ROI Plus User and Administrative Manuals at <https://dvagov.sharepoint.com/sites/vacovetsprivacy/vhapo/Pages/roi.aspx>. This is an internal Department of Veterans Affairs (VA) website that is not available to the public.*

3. DEFINITIONS

a. **Accounting of Disclosure.** An accounting of disclosure is a list of all disclosures made to entities outside VA. This is not the same as the Sensitive Patient Access Report or an audit log.

b. **Disclosure.** For the purpose of this directive, disclosure is the release, transfer, provision of access to, or divulging in any other manner, including verbally, information to an entity or individual outside VHA. Once information is disclosed, VHA may choose to retain ownership of the data, such as per an agreement, or may be required to retain

ownership, such as when to a Business Associate or contractor. In most cases VHA relinquishes ownership of the information upon disclosure. The exception to this definition is when the term is used in the phrase “accounting of disclosures.”

c. **Electronic Health Record.** Electronic health record (EHR) is the digital collection of patient health information resulting from clinical patient care, medical testing and other care-related activities. Authorized VA health care providers may access EHR to facilitate and document medical care. EHR comprises existing and forthcoming VA software including Computerized Patient Record System (CPRS), Veterans Information Systems and Technology Architecture (VistA) and Cerner platforms. **NOTE:** *The purpose of this definition is to adopt a short, general term (EHR) to use in VHA national policy in place of software-specific terms while VA transitions platforms.*

d. **Health Information.** Health information is any information created or received by a health care provider or health plan that relates to: the past, present, or future physical or mental health condition of an individual; the provision of health care to an individual; or payment for the provision of health care to an individual. Health Information includes information pertaining to examination, medical history, diagnosis, findings or treatment, including such information as: laboratory examinations, X-rays, microscopic slides, photographs and prescriptions.

e. **Protected Health Information.** Protected health information (PHI) is defined by the HIPAA Privacy Rule as individually identifiable health information (IIHI) transmitted or maintained in any form or medium by a covered entity, such as VHA. **NOTE:** *VHA uses this term to define information that is covered by HIPAA but, unlike IIHI, may or may not be covered by the Privacy Act or title 38 confidentiality statutes. In addition, PHI excludes employment records held by VHA in its role as an employer.*

f. **Release of Information.** ROI is the act of providing copies of personally identifiable information to Veterans or to third-party requestors who have legal authority to obtain the information.

g. **ROI Plus Software.** ROI Plus software is a tool which works with the EHR to enable VA medical facilities to track, process and manage requests for copies of information contained in VHA Privacy Act System of Records and HIPAA-designated record sets.

4. POLICY

It is VHA policy that each VA medical facility must utilize the ROI Plus software as the single solution to maintain the accounting of disclosures for health records and to track and manage non-VA or external requests for health records when performing in-house or outsourcing ROI activities. The ROI Plus software must also be utilized to pull copies of electronic health records maintained in the VistA in order to process non-VA or external requests. **NOTE:** *As a matter of discretion, VA medical facilities may utilize the ROI Plus software to maintain the accounting of disclosures for VA-initiated releases and disclosures of other VHA records.*

5. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for ensuring overall VHA compliance with this directive.

b. **Deputy Under Secretary for Health.** The Deputy Under Secretary for Health is responsible for supporting the Information Access and Privacy (IAP) Office with implementation and oversight of this directive.

c. **Assistant Under Secretary for Health for Operations.** Assistant Under Secretary for Health for Operations is responsible for:

(1) Communicating the contents of this directive to each of the Veterans Integrated Services Networks (VISNs).

(2) Assisting VISN Directors to resolve implementation and compliance challenges in all VA medical facilities within that VISN.

(3) Providing oversight of VISNs to ensure compliance with this directive and its effectiveness.

d. **Director, Information Access and Privacy Office/VHA Chief Privacy Officer.** The Director, IAP Office/VHA Chief Privacy Officer is responsible for:

(1) Developing, issuing, reviewing and coordinating privacy policy for VHA.

(2) Communicating deficiencies by VA medical facilities to VISN Privacy Officers through conference calls or reports from the VHA Privacy Compliance Assurance Officer.

(3) Ensuring compliance with this directive through appropriate VHA Privacy Compliance Assurance Officer monitoring activities.

e. **VHA Privacy Operations Officer.** The VHA Privacy Operations Officer is responsible for:

(1) Providing all policy guidance on the use of ROI Plus to VA medical facility and VISN Privacy Officers.

(2) Coordinating with VHA Health Information Management (HIM) program office and ROI Plus Vendor on training needs, software maintenance and enhancement requests related to the functionality of the ROI Plus software.

(3) Offering training opportunities for VA medical facility Privacy Officers, ROI staff members and VA medical facility Chiefs, Health Information Management (CHIM) when a new ROI Plus software patch is released.

f. **VHA Privacy Compliance Assurance Officer.** The VHA Privacy Compliance

Assurance Officer is responsible for:

(1) Monitoring VHA compliance with all Federal privacy laws, regulations and guidance.

(2) Monitoring the use and compliance with the ROI Plus Software by using tools such as the Turn-Around Time Report.

(3) Communicating deficiencies provided by the VA medical facility Privacy Officer to the VHA Director, IAP Office/VHA Chief Privacy Officer.

g. **Veterans Integrated Services Network Director.** The VISN Director is responsible for:

(1) Ensuring that all VA medical facilities within the VISN comply with this directive and informing leadership when barriers to compliance are identified.

(2) Ensuring that procedures are consistent with this directive, established within their respective programs and distributed to all appropriate personnel.

h. **Veterans Integrated Services Network Privacy Officers.** VISN Privacy Officers are responsible for:

(1) Ensuring VA medical facility Privacy Officers are trained on the ROI Plus software and using it in accordance with VHA Directive 1605.01.

(2) Ensuring the VA medical facility Privacy Officers address any deficiencies communicated by the Director, IAP Office/VHA Chief Privacy Officer related to ROI.

i. **VA Medical Facility Director.** Each VA medical facility Director is responsible for:

(1) Providing oversight to ensure that VA medical facility staff comply with this directive.

(2) Ensuring that the VA Office of Information and Technology installs the ROI Plus software for any new and existing VA medical facility and installs all subsequent patches and version updates within 60 business days of release to VA medical facilities.

(3) Ensuring that the VA medical facility's ROI staff responsible for disclosing or releasing health information to organizations or individuals outside of VA is utilizing the ROI Plus software for purposes of accounting of disclosures (see paragraph 5.l.).

(4) Ensuring that the ROI Plus software is utilized when ROI is outsourced to a VA contractor or business associate for maintenance of accounting of disclosures and other reporting purposes except for when the Department of Defense (DoD) provides copies of VA health records directly to Veterans or VA patients on behalf of VHA. **NOTE:** *In these instances, DoD maintains a separate accounting of disclosures.*

(5) Ensuring that if the VA medical facility outsources ROI activities to third parties, the accounting of disclosure information is still maintained by VHA. **NOTE:** *The data associated with the request and the information disclosed by the contractor must be uploaded by the CHIM or HIM Supervisor of ROI staff into the designated VistA files in order for the accounting of disclosures to be available through the ROI Plus software. For more information, see the VHA HIM ROI Procedure Guide at <https://dvagov.sharepoint.com/sites/vhahealth-information-management/SitePages/HIM-Handbook-and-Guides.aspx>. This is an internal VA website that is not available to the public.*

j. **VA Medical Facility Chief, Health Information Management.** The VA medical facility CHIM or HIM Supervisor over ROI staff, depending on staffing at the VA medical facility, is responsible for:

(1) Overseeing the day-to-day activities of releasing health records.

(2) Approving users for access to the ROI Plus software.

(3) Ensuring that all ROI-approved users who disclose or release health records are proficient in the proper utilization of the ROI Plus software.

(4) Verifying installation of ROI Plus software updates.

k. **VA Medical Facility Privacy Officer.** The VA medical facility Privacy Officer is responsible for:

(1) Providing ROI staff guidance on the aspects of this directive and access to the ROI Manuals.

(2) Monitoring entries by ROI staff into the ROI Plus software for:

(a) Ensuring compliance with the accounting of disclosures requirement;

(b) Reviewing legal authority to disclose PHI;

(c) Verifying that only minimal necessary information is being disclosed;

(d) Ensuring requests are responded to within the required time frames, as outlined in VHA Directive 1605.01; and

(e) Ensuring individual's rights of access (in-person) were not violated.

(3) Providing guidance on disclosure of PHI from health records to the VA medical facility CHIM or HIM Supervisor over ROI staff for ROI requests not addressed in VHA Directive 1605.01.

(4) Ensuring that when a request for an accounting of disclosures is received, it is processed by ROI staff in accordance with VHA Directive 1605.01 using the ROI Plus

software to generate the comprehensive accounting summary.

(5) Working with the VA medical facility CHIM or HIM Supervisor over ROI staff to resolve any discrepancies discovered during the monitoring of the ROI Plus software entries.

(6) Documenting ROI Plus monitoring activities and remediation actions as part of the VA medical facility self-assessment process and providing this documentation to the VHA Privacy Compliance Assurance Officer upon request.

(7) Generating reports, such as the Turn-Around Time Report, to ensure requests for ROI are being completed timely and in accordance with VHA Directive 1605.03(1), Privacy Compliance Assurance Program and Privacy/Freedom of Information Act (FOIA) Continuous Readiness Review and Remediation, dated September 19, 2019.

I. **Release of Information Staff Members.** ROI staff members at the VA medical facility are responsible for:

(1) Utilizing the ROI Plus software for purposes of tracking and managing non-VA or external ROI requests for health information and accounting of disclosures, including:

(a) Entering the request into the ROI Plus software.

(b) Entering a description of the manually entered health records that were printed from the VA EHR.

(c) Receiving and processing written requests from the individual to whom the records pertain.

(d) Receiving and processing signed written authorizations from non-VA entities for copies of PHI.

(e) Reviewing and processing requests based on a permissible condition under each privacy statute including:

1. Ensuring authorization forms comply with VHA Directive 1605.01; and

2. Ensuring health records based on 38 U.S.C. § 7332-protected health conditions are not disclosed for non-treatment or nonpayment purposes without a specific signed, written authorization covering 38 U.S.C. § 7332 from the individual. **NOTE:** For detailed procedures for using the ROI Plus Software, see the ROI Plus User and Administrative Manuals at <https://dva.gov.sharepoint.com/sites/vacovetsprivacy/vhapo/Pages/roi.aspx>. This is an internal VA website that is not available to the public.

(2) Utilizing the ROI Plus software for purposes of tracking and managing VA requests (e.g., Veterans Benefits Administration, VA Chief Counsel, VA Office of Inspector General and other intra-organizational units) for copies of health records or health information when directed by the CHIM.

6. TRAINING

There are no formal training requirements associated with this directive; however, the VA medical facility Privacy Officer provides ROI staff members with guidance on the aspects of this directive and access to the ROI Manuals.

7. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive must be managed as required by the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Officer.

8. REFERENCES

- a. 5 U.S.C. § 552a(c).
- b. 38 U.S.C. §§ 7301(b); 7332.
- c. 45 C.F.R. § 164.528.
- d. VHA Directive 1605.01, Privacy and Release of Information, dated August 31, 2016.
- e. VHA Directive 1605.03(1), Privacy Compliance Assurance Program and Privacy/Freedom of Information Act (FOIA) Continuous Readiness Review and Remediation, dated September 19, 2019.
- f. VHA ROI Plus Administrative Manual.
<https://dvagov.sharepoint.com/sites/vacovetsprivacy/vhapo/Pages/roi.aspx>. **NOTE:** This is an internal VA website that is not available to the public.
- g. VHA ROI Plus User Manual.
<https://dvagov.sharepoint.com/sites/vacovetsprivacy/vhapo/Pages/roi.aspx>. **NOTE:** This is an internal VA website that is not available to the public.
- h. VHA HIM ROI Procedure Guide. <https://dvagov.sharepoint.com/sites/vhahealth-information-management/SitePages/HIM-Handbook-and-Guides.aspx>. **NOTE:** This is an internal VA website that is not available to the public.