

**APPENDIX B: IDENTITY ASSURANCE LEVEL (IAL) ASSESSMENT WORKSHEET**

Identity Assurance Level (IAL) Assessment Worksheet

<b>General Information</b>	
<p><b>System Name:</b> <i>Enter the name of the system for which the IAL Assessment is being completed.</i></p>	<p>ACME Partner Portal.</p>
<p><b>System Description:</b> <i>Enter a brief but adequate description of the system. The description should provide a summary of what the system is, its purpose, whom it serves, etc.</i></p>	<p>ACME Partner Portal provides access to Medicaid treatment records for patients (PHI) that can be sorted by age, resident geographic area and treatment codes. Users are able to perform queries, view results, and save results in PDF format as well as CSV. Results can be saved by screen shot or downloaded to a personal computer.</p>
<p><b>Government Interaction Supported:</b> <i>Check the appropriate box(es) that best indicate(s) the type of government interaction the system supports:</i></p> <ul style="list-style-type: none"> <li>• <i>Government-to-Citizen – Interaction between state government and its citizens.</i></li> <li>• <i>Government-to-Business – Interaction between state government and the private business sector.</i></li> <li>• <i>Government-to Government – Interaction across all levels of government (federal, state, local, tribal).</i></li> </ul>	<p><input type="checkbox"/> Government-to-Citizen</p> <p>X Government-to-Business</p> <p><input type="checkbox"/> Government-to-Government</p>
<p><b>Date Assessment Completed:</b> <i>Enter the date on which the IAL Assessment was completed.</i></p>	<p>3/28/15</p>
<p><b>Information Owner:</b> <i>Enter the name and the functional title of the Information Owner for the information associated with this system, along with his or her contact information. The Information Owner is the person in the State Entity responsible and accountable for the security of the information. Information owners are typically at the manager or executive level. <b>Note:</b> Information owners are typically not IT personnel. IT personnel only implement the security controls set forth by the information owner to protect the confidentiality, integrity, and availability of the information asset.</i></p>	<p>Name: William Smith Functional Title / Job Title: CIO ACME Hospital Association Phone #: Email:</p>

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<p><b>IAL Assessment Team Members:</b></p> <p><i>Enter the names of the IAL Assessment Team, their functional job title, and their contact information, starting with the IAL Assessment Team chair or leader.</i></p>	<p><b>IAL Assessment Team Chair/Team Leader</b></p> <p>Name: Jane Doe1          Functional Title: Assistant CIO          Phone #:          Email:</p> <p><b>IAL Assessment Team Members</b></p> <p>Name: John Doe2          Functional Title: CISO, ACME Hospital Association          Phone #:          Email:</p> <p>Name: John Doe3          Functional Title: Deputy COO          Phone #:          Email:</p> <p>Name: Mary Williams          Functional Title: Business Analyst          Phone #:          Email:</p> <p>Name:          Functional Title:          Phone #:          Email:</p>
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<b>IDENTIFY USER TYPES</b>																														
<i>In this section, identify the set of users that will have authenticated access to the system.</i>																														
<p><b>User Role:</b></p> <p><i>Identify the user types (e.g., citizen, vendor, NYS employee) that will be accessing the system.</i></p> <p><b>User Role Description:</b></p> <p><i>Provide a brief description of the user role.</i></p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> </table>											<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:5%;"></th> <th style="width:45%; text-align: left; padding: 5px;"><b>User Role</b></th> <th style="width:50%; text-align: left; padding: 5px;"><b>User Role Description</b></th> </tr> </thead> <tbody> <tr> <td style="text-align: center; vertical-align: top;">1</td> <td style="padding: 5px;"><i>Provider Analyst 1</i></td> <td style="padding: 5px;"><i>Ability to see patient counts, treatment counts, frequency. No access to ePH, only summary data</i></td> </tr> <tr> <td style="text-align: center; vertical-align: top;">2</td> <td style="padding: 5px;"><i>Provider Analyst 2</i></td> <td style="padding: 5px;"><i>Ability to see patient records, treatments, medications and diagnosis codes for individual patients. Access to ePHI.</i></td> </tr> <tr> <td style="text-align: center; vertical-align: top;">3</td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> <tr> <td style="text-align: center; vertical-align: top;">4</td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> <tr> <td style="text-align: center; vertical-align: top;">5</td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> </tbody> </table>		<b>User Role</b>	<b>User Role Description</b>	1	<i>Provider Analyst 1</i>	<i>Ability to see patient counts, treatment counts, frequency. No access to ePH, only summary data</i>	2	<i>Provider Analyst 2</i>	<i>Ability to see patient records, treatments, medications and diagnosis codes for individual patients. Access to ePHI.</i>	3			4			5		
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Determine Risk and Impact								
<p><b>User Role:</b> Analyst 1</p> <p><b>User Role Description:</b> Ability to see patient counts, treatment counts, frequency. No access to ePHI</p> <p>Enter one user role, and its associated description listed above, for which this table will be completed.</p>			<p align="center"><b>DETERMINE CONSEQUENCES</b></p> <p><b>Consequence Statements:</b> For each identified transaction, write a consequence statement for each of the six (6) questions, indicating the potential consequences to the State Entity or to the user (enter N/A for a question if not applicable) in the event (of an authentication error) a non-authorized individual were to conduct the transaction.</p> <p>There is no need to provide a consequence statement if a question does not apply. Conversely, it is possible to identify many consequences in response to a single question that is particularly relevant to the transaction.</p>					
TRANSACTIONS SUPPORTED			1. What inconveniences, distress, or damages would occur to the standing or reputation of any involved party?	2. What potential financial losses would be incurred by any involved party?	3. What effect(s) would result from an unauthorized release of sensitive information?	4. To what civil or criminal violations would the agency be subject? (Out of compliance with regulatory rules.)	5. What harm to agency programs or public interest would be realized?	6. How would personal safety be impacted?
Transaction Name	Transaction Description	Data Sensitivity						
Provide the transaction's name.	Provide a description of the transaction. Describe the actions the user can perform using the following action words: inquire, create, modify, delete, approve, or cancel.	Identify the data used in the transaction/system, and specifically note whether the data is restricted to certain actors or groups of actors as it contains sensitive information. Indicate the law or regulation governing the data.						
Inquire	Allows the user to access authorized data or information. The user makes a request for information and receives it. This information may be related to the user in some way (i.e., private) or can be general information (i.e., public).	Data does not contain ePHI as no data is associated with individual identifying information.	Even though no sensitive data is involved, reputation of ACME could be impacted, if a breach made it to the press.	A breach would not be expected to result in a meaningful loss of funding or business.	None, as the data involved is not sensitive.	None anticipated.	Public may not trust ACME as much if their program or application or website was compromised, even though the data was not sensitive.	Not applicable.

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<p style="text-align: center;"><b>DETERMINE IMPACT LEVELS</b></p> <p><i>Using the Table titled Identity Assurance Level Required for guidance, assign an impact value (1, 2, 3, 4) to each of the six (6) questions, based on the consequence statements associated with each. If there is more than one transaction for the user, then consider the consequence statement that poses the greatest risk and thus the greatest potential impact to the agency.</i></p>	<input type="checkbox"/> 1 None <input checked="" type="checkbox"/> 2 Little <input type="checkbox"/> 3 Serious/limited <input type="checkbox"/> 4 Serious/severe	<input checked="" type="checkbox"/> 1 None/ insignificant <input type="checkbox"/> 2 Minor <input type="checkbox"/> 3 Serious <input type="checkbox"/> 4 Severe/catastrophic	<input checked="" type="checkbox"/> 1 None <input type="checkbox"/> 2 Limited <input type="checkbox"/> 3 Serious <input type="checkbox"/> 4 Catastrophic	<input checked="" type="checkbox"/> 1 None <input type="checkbox"/> 2 No enforcement <input type="checkbox"/> 3 Possible enforcement <input type="checkbox"/> 4 Enforcement	<input type="checkbox"/> 1 None <input checked="" type="checkbox"/> 2 Limited <input type="checkbox"/> 3 Serious <input type="checkbox"/> 4 Severe or higher	<input checked="" type="checkbox"/> 1 None <input type="checkbox"/> 2 Minor <input type="checkbox"/> 3 Non-serious <input type="checkbox"/> 4 Serious/Death
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**Identity Assurance Level Required**

For each of the six (6) category questions, check the corresponding impact level in the matrix below, using the highest impacted user role per each consequence statement as identified in the Determine Risk and Impact table above. (Note: A box can be checked by double-clicking on the appropriate box and selecting “Checked” and “OK” from the pop-up.)

Category of Harm	Identity Assurance Impact Levels			
<p><b>1. What inconveniences, distress, or damages would occur to the standing or reputation of any involved party?</b></p>	<p><input type="checkbox"/> <b>1</b> <b>No</b> inconvenience, distress or damage to the standing or reputation of any party</p>	<p><input checked="" type="checkbox"/> <b>2</b> <b>Little</b> inconvenience, distress or damage to the standing or reputation of any party</p>	<p><input type="checkbox"/> <b>3</b> <b>A serious short-term or a limited long-term</b> inconvenience, distress or damage to the standing or reputation of any party</p>	<p><input type="checkbox"/> <b>4</b> <b>A serious or severe long-term</b> inconvenience, distress or damage to the standing or reputation of any party</p>
<p><b>2. What potential financial losses would be incurred by any involved party?</b></p> <p><b>Note:</b> The severity of the loss depends on the impact of the loss on the affected party</p>	<p><input checked="" type="checkbox"/> <b>1</b> <b>No or insignificant/inconsequential</b> unrecoverable financial loss to any party or an insignificant/inconsequential agency liability</p>	<p><input type="checkbox"/> <b>2</b> <b>A minor</b> unrecoverable financial loss to any party or a minor agency liability</p>	<p><input type="checkbox"/> <b>3</b> <b>A serious</b> unrecoverable financial loss to any party or a serious agency liability</p>	<p><input type="checkbox"/> <b>4</b> <b>A severe or catastrophic</b> unrecoverable financial loss to any party or a server or catastrophic agency liability</p>
<p><b>3. What effect(s) would result from an unauthorized release of sensitive information?</b></p> <p><b>NOTE:</b> The severity of the effect is due to the loss of confidentiality or breach of privacy resulting from unauthorized release or improper disclosure of sensitive personal, government or commercial information</p>	<p><input checked="" type="checkbox"/> <b>1</b> <b>No loss or adverse effect</b> on an individual or agency</p>	<p><input type="checkbox"/> <b>2</b> <b>A limited adverse effect</b> on an individual or agency</p>	<p><input type="checkbox"/> <b>3</b> <b>A serious adverse effect</b> on an individual or agency</p>	<p><input type="checkbox"/> <b>4</b> <b>A catastrophic effect</b> on an individual or agency</p>

Category of Harm	Identity Assurance Impact Levels			
<b>4. To what civil or criminal violations would the agency be subject (e.g., out of compliance with regulatory rules)?</b>	<input checked="" type="checkbox"/> <b>1</b> <b>No</b> risk of civil or criminal violations	<input type="checkbox"/> <b>2</b> Risk of civil or criminal <b>violations</b> that <b>would not</b> ordinarily be subject to enforcement efforts	<input type="checkbox"/> <b>3</b> Risk of civil or criminal <b>violations</b> that <b>may be</b> subject to enforcement efforts	<input type="checkbox"/> <b>4</b> Risk of civil or criminal <b>violations</b> that is of special importance to enforcement programs and may have <b>exceptionally grave consequences</b>
<b>5. What harm to agency programs or public interest would be realized?</b>	<input type="checkbox"/> <b>1</b> <b>No adverse effect</b> on any agency program, asset or the public interest	<input checked="" type="checkbox"/> <b>2</b> <b>A limited adverse effect</b> on any agency program, asset or the public interest	<input type="checkbox"/> <b>3</b> <b>A serious adverse effect</b> on any agency program, asset or the public interest	<input type="checkbox"/> <b>4</b> <b>A severe or catastrophic effect</b> on any agency program, asset or the public interest
<b>6. How would personal safety be impacted?</b>	<input checked="" type="checkbox"/> <b>1</b> <b>No</b> risk of injury	<input type="checkbox"/> <b>2</b> A risk of injury <b>not requiring medical attention</b>	<input type="checkbox"/> <b>3</b> A risk of non-serious injury <b>requiring medical attention</b>	<input type="checkbox"/> <b>4</b> A risk of <b>serious</b> injury or <b>death</b>

The system's identity assurance level will be based on the selections in the table above. The right-most checked impact level should be the overall identity assurance level assigned to the system.

<b>Identity Assurance Level Required</b>	<input type="checkbox"/> <b>1</b> Low or no confidence in the asserted <b>identity's</b> validity	<input checked="" type="checkbox"/> <b>2</b> Confidence in the asserted <b>identity's</b> validity	<input type="checkbox"/> <b>3</b> High confidence in the asserted <b>identity's</b> validity	<input type="checkbox"/> <b>4</b> Very high confidence in the asserted <b>identity's</b> validity
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Information Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
EISO Representative

\_\_\_\_\_  
Date