

TRICARE Management Activity Privacy Board Standard Operating Procedures

Effective Date: December 11, 2012



I. Background

The Health Insurance Portability and Accountability Act (HIPAA) generally requires specific compliance reviews and documentation by an Institutional Review Board (IRB) or Privacy Board, set up in accordance with the HIPAA regulations, when protected health information (PHI) managed by TMA is used and/or disclosed for research purposes. TMA does not have an IRB; therefore, the TMA Privacy and Civil Liberties Office, also known as the “TMA Privacy Office”, sought and obtained approval for the establishment of a HIPAA Privacy Board, otherwise known as the TMA Privacy Board. The TMA Privacy Board is critical for TMA’s compliance with the HIPAA Privacy Rule (45 CFR 160 & 164) and Department of Defense (DoD) Health Information Privacy Regulation (DoD 6025.18-R).

Submissions to the TMA Privacy Board are processed through expedited HIPAA Privacy Rule review procedures. Expedited review is permitted for research projects that are determined to involve no more than minimal risk to the privacy of the individuals who are the subject of the PHI for which use or disclosure is sought. A submission undergoes expedited review by the Chair or by a designated member of the TMA Privacy Board, hereinafter referred to as “Board Member”.

II. Definitions

A. Altered HIPPA Authorization

A HIPAA Authorization, also known as an “Authorization”, in which some required elements are modified or removed and an IRB or HIPAA Privacy Board determines that specific criteria within the HIPAA Privacy Rule have been met. For example, an alteration of the Authorization might be requested to remove the element that describes each purpose of the requested use or disclosure where the identification of the specific research project would affect the results of the project.

B. Application for a Waiver of Authorization or an Altered Authorization

A template used to apply for review by the TMA Privacy Board for a waiver of Authorization(s) or an altered Authorization. The answers provided in the application assist the TMA Privacy Board in determining if a full or partial waiver or an altered Authorization is appropriate under the HIPAA Privacy Rule and DoD 6025.18-R for the particular research study.

C. Authorization

An Authorization is an individual's signed permission to use or disclose the individual's PHI that is described in the Authorization for the purpose(s) and to the recipient(s) stated in the Authorization. In order to be valid, an Authorization must contain all of the required

elements and core statements outlined in the HIPAA Privacy Rule at 45 CFR 164.508(c) and DoD 6025.18-R at C5.3.

D. Data Sharing Agreement Application (DSAA)

A template used for requesting Military Health System data managed by TMA that is used by the TMA Privacy Office in conducting reviews for compliance with applicable federal and DoD regulatory requirements.

E. Waiver of Authorization

A waiver granted by an IRB or HIPAA Privacy Board when certain criteria as set forth in the HIPAA Privacy Rule at 45 CFR 164.512(i)(2) and DoD 6025.18-R at C.7.9.2 are met. Either of the following two types of waivers may be approved:

Full Waiver: Enables a research project to obtain PHI about research participants without obtaining signed Authorizations from research participants at any point during the project.

Partial Waiver: Enables a research project to obtain PHI about research participants without obtaining signed Authorizations from the participants for part of the research project, but not the entire research project. Examples of when Partial Waivers are appropriate include when PHI is necessary for recruitment/screening of potential research participants, after which PHI is no longer necessary or until a point at which Authorizations can be obtained from all research participants.

F. Internal Review Checklist

A template used by the TMA Privacy Board to ensure uniform, consistent, and thorough reviews of a completed Application for a Waiver of Authorization or an Altered Authorization in determining compliance with the HIPAA Privacy Rule and DoD 6025.18-R.

G. Principal Investigator (PI) Certification

A template used by the TMA Privacy Board that must be signed by the PI upon approval of a Research Authorization Review and blank Authorization(s) for a research study. Among other requirements, the certification ensures that the PI will maintain, electronically and/or in hard copy, the signed Authorization for each research participant whose PHI is used or disclosed in the project and will provide any and/or all of the signed Authorizations to TMA immediately upon request.

H. Required Representations for Research on Decedent's Information

A template used by the TMA Privacy Board when the researcher intends to conduct research that is *solely* on the PHI of decedents. The PI must initial and sign this template to document compliance with the representations required by the HIPAA Privacy Rule at 45 CFR 164.512(i)(1)(iii) and DoD 6025.18-R at C7.9.1.3.

I. Required Representations for Review Preparatory to Research

A template used by the TMA Privacy Board when the researcher intends to conduct a review of PHI to prepare for a research protocol or for similar purposes preparatory to research (*e.g.*, where PHI is needed to determine whether the proposed research project is feasible or to design the research study) and *agrees not to remove the PHI from TMA in the course of the review*. The PI must initial and sign this template to document compliance with the representations required by the HIPAA Privacy Rule at 45 CFR 164.512(i)(1)(ii) and DoD 6025.18-R at C7.9.1.2.

J. Research Authorization Review

A template used by the TMA Privacy Board when the researcher has the ability to obtain written and signed Authorizations from all research participants to comply with the HIPAA Privacy Rule. The PI must submit a copy of the blank Authorization(s) to be used in the project and the completed Research Authorization Review template. The TMA Privacy Board will conduct a review to determine that all core elements and required statements are provided in the blank Authorization(s) as required by the HIPAA Privacy Rule at 45 CFR 164.508(c) and DoD 6025.18-R at C5.3.

III. Roles and Responsibilities

A. Data Evaluation Workgroup (DEW)

The DEW includes data and regulatory experts who routinely meet to review all incoming research-related data requests. The DEW makes a determination of the type of data being requested for a research study in order to determine the applicable regulatory requirements for review.

B. Data Sharing Agreement (DSA) Team

Formerly known as the Data Use Agreement (DUA) team, the DSA team assists data requestors in completing a DSAA and reviews requests for data managed by TMA for compliance with applicable federal and DoD regulatory requirements. The DSA team participates in the DEW and collaborates with the TMA Privacy Board Support Staff when the request for data is for research that involves PHI. Once the DSAA is approved, the DSA team works with data requestors to execute an appropriate DSA and to renew, extend, or modify DSAs, as necessary.

C. TMA Privacy Board

The TMA Privacy Board reviews research related data requests to use and/or disclose PHI of individual research participants that is managed by TMA for compliance with the HIPAA Privacy Rule and DoD 6025.18-R. The TMA Privacy Board is not an IRB and is not authorized to review and/or approve human subject's research regulated under the Federal

Policy for the Protection of Human Subjects (45 CFR 46), also known as the “Common Rule.”

Board Members have been selected based on their demonstrated knowledge and understanding of research, the HIPAA Privacy Rule, and DoD 6025.18-R. As required by the HIPAA Privacy Rule and DoD 6025.18-R, the TMA Privacy Board:

1. Has members with varying backgrounds and appropriate professional competency as necessary to review the effect of the research protocol on the individual’s privacy rights and related interests;
2. Includes at least one member who is not affiliated with TMA, not affiliated with any entity conducting or sponsoring the research, and not related to any person who is affiliated with any of such entities; *and*
3. Does not have any member participating in a review of any project in which the member has a conflict of interest.

Board Members’ responsibilities include:

1. Attending TMA Privacy Board meetings on a quarterly and ad hoc basis;
2. Conducting expedited reviews of completed Applications for a Waiver of Authorization or an Altered Authorization;
3. Following-up with the researchers, as necessary, in the course of a review;
4. Collaborating on the HIPAA Privacy Rule, DoD 6025.18-R, and research-related issues of interest to the TMA Privacy Board; and
5. Recusing themselves from TMA Privacy Board reviews where they have or may appear to have a conflict of interest.

D. TMA Privacy Board Support Staff

The TMA Privacy Office assigns staff to support the TMA Privacy Board, hereinafter referred to as “Support Staff.” Support Staff provide administrative assistance on behalf of the TMA Privacy Board by attending the DEW to assist in determining the type of data requested by the research project; drafting email communications to the researchers and Board Members; maintaining files for all submissions to the TMA Privacy Board; updating trackers used to monitor submissions and pending requests for submissions; preparing the agenda and materials for quarterly and ad hoc TMA Privacy Board meetings; and, assisting in the facilitation of board meetings.

Support Staff also assist in reviews of waiver applications when requested by Board Members and conduct compliance reviews for submissions of Required Representations for Research on Decedent's Information; Required Representations for Review Preparatory to Research; Research Authorization Reviews and their corresponding blank Authorization(s); and IRB and HIPAA Privacy Board approved Waivers of Authorization or Altered Authorization. Finally, Support Staff update the TMA Privacy Board templates, as needed, and assist the TMA Privacy Board in projects deemed necessary by the Board Members.

E. Principal Investigator (PI) and Government Sponsor

Support Staff contacts PI and Government Sponsor when the research project requires a compliance review under HIPAA Privacy Rule and DoD 6025.18-R. At that point, the PI and Government Sponsor must submit all requested documents and/or completed templates.

IV. Templates

The TMA Privacy Board designed the following templates to assist in obtaining information necessary for its HIPAA Privacy Rule compliance reviews:

1. Application for a Waiver of Authorization or an Altered Authorization
2. Research Authorization Review
3. PI Certification
4. Required Representations for Research on Decedent's Information
5. Required Representations for Review Preparatory to Research

One additional template, the Internal Review Checklist, is used internally by the Board Members in their review and is not otherwise provided to the PI for completion. These templates are provided for viewing at <http://www.tricare.mil/tma/privacy/privacyboard.aspx>, and are maintained and updated, as needed, by Support Staff with the approval of the Chair.

V. Tracking TMA Privacy Board Submissions

Support Staff maintain the following two spreadsheets, also known as "Trackers": (1) TMA Privacy Board Submissions Received; and, (2) Log of TMA Privacy Board Templates Sent but Not Yet Received.

The Trackers are used to document the progress of responses from the PI and Government Sponsor and the progress of TMA Privacy Board reviews.

VI. Procedures

A. Data Evaluation Workgroup (DEW)

When the stated purpose of a request for data is for research, the DSA team will forward the DSAA to the DEW to determine the type of data requested. The DEW considers the type of

information needed by the research project and categorizes the informational needs into one of the following four types for compliance review: (1) de-identified data; (2) Personally Identifiable Information (PII) excluding PHI; (3) Limited Data Set (LDS); or, (4) PHI greater than an LDS. The DEW further considers the type and amount of data requested in the DSAA in light of the stated purpose of the research project, and, when necessary, a member of the DEW contacts the PI to confirm that the amount and nature of the data requested are the “minimum necessary” in order to carry out the research project. When the PI needs to adjust the data elements or sources requested, the DSA Team works with the PI to revise the data requested in the DSAA and resubmits the updated DSAA to the DEW for final consideration. If the DEW determines that the DSAA is for PHI greater than an LDS, the request is sent to the TMA Privacy Board for HIPAA Privacy Rule review and documentation. Research requests for de-identified data, LDS and PII excluding PHI are not reviewed by the TMA Privacy Board.

B. Receipt of Research-Related PHI Request from the DEW

Upon receipt of a research-related DSAA from the DEW, Support Staff send an email to the PI and Government Sponsor requesting them to submit an appropriate template or any approved Waiver of Authorization or Altered Authorization received from an IRB or another HIPAA Privacy Board for compliance review with the HIPAA Privacy Rule and DoD 6025.18-R. Support Staff assist the PI and Government Sponsor in understanding the template/documents needed for review and address any questions pertaining to completion of templates or the TMA Privacy Board process.

Support Staff use a government email address for all Government Sponsors and PIs that work within the government (*e.g.*, an email address ending in “.gov” or “.mil”).

If a PI working for the government or Government Sponsor only provides a personal email address (*e.g.*, an email address ending in “.net”, “.com”, or “.org”), the Support Staff send an email to the personal email address indicating that all TMA Privacy Board email communications must be sent to a government email address, whenever possible, and asking for their government email address for all further correspondence.

If a PI does not work for the government, Support Staff use available professional business email addresses (*e.g.*, “.edu”), whenever possible, as opposed to email addresses provided through commercial vendors such as AOL, Yahoo, or Google.

C. Receipt of TMA Privacy Board Submissions

Submissions by PIs and Government Sponsors to the TMA Privacy Board can be made in one of two ways:

1. The PI and Government Sponsor may make submissions to the TMA Privacy Office to the following designated email account: tmaprivacyboard@tma.osd.mil. This

email account is only used for receipt of TMA Privacy Board submissions and/or questions directed to the TMA Privacy Board. Support Staff routinely monitor the TMA Privacy Board's email inbox for submissions and inquiries.

2. The PI or Government Sponsor may email submissions directly to the Support Staff, whose email addresses are provided in the initial email to the PI and Government Sponsor indicating that review is required by the TMA Privacy Board.

Upon receipt of a submission, Support Staff promptly assign a number to each submission for tracking purposes, also known as the "tracking number" within the TMA Privacy Board. Support Staff log the tracking number with the related DSAA number assigned by the TMA Privacy Office.

Support Staff provide preliminary review of the submission for completeness, looking to see if pertinent documents have been received and/or that templates have been signed, dated, and otherwise initialed or completed. If Support Staff receive an incomplete submission, they send an email to the PI and Government Sponsor on behalf of the TMA Privacy Board and track and follow-up until the submission is complete.

Once the submission is deemed complete, Support Staff assign a completed Application for Waiver of Authorization or an Altered Authorization to a Board Member for review. Other types of submissions are reviewed directly by Support Staff. Review procedures for each type of submission are set forth below.

D. Review of TMA Privacy Board Submissions

1. Review of Required Representations for Research on Decedent's Information

Support Staff review information about the research project in the DSAA for consistency with the representation that the research is solely on the PHI of decedents, and follow-up with the PI, as needed, in order to confirm that the template is appropriate with respect to the research conducted in the project. Once the review is complete, Support Staff prepare an email that is sent by the Chair or Co-Chair to the PI and Government Sponsor acknowledging acceptance and approval of the Required Representations for Research on Decedent's Information template. Support Staff also notify the DSA team of the approval.

2. Review of Required Representations for Review Preparatory to Research

Support Staff review information about the research project in the DSAA for consistency with the representations that the use or disclosure of PHI is sought solely for purposes preparatory to research and that the PHI will not be removed from TMA. As needed, Support staff follow-up with the PI in order to confirm that the template is appropriate.

Support Staff prepare an email that is sent by the Chair or Co-Chair to the PI and Government Sponsor acknowledging acceptance and approval of the Required Representations for Review Preparatory to Research template. Support Staff also notify the DSA team of the approval.

3. Review of the Research Authorization Review Template and Blank Authorization(s)

Support Staff review a Research Authorization Review template submitted to the TMA Privacy Board, along with the blank Authorization(s) that will be used in the research project. The review determines whether all core elements and required statements set forth in the HIPAA Privacy Rule at 45 CFR 164.508(c) and DoD 6025.18-R at C5.3 are included in any Authorization used in the project. The template is designed to help the PI address these needs prior to submission. Where an Authorization for use in a research project is deficient, Support Staff email the PI and Government Sponsor listing any deficiencies and help provide an explanation so that appropriate revisions can be made and the Research Authorization Review template and blank Authorization(s) can be resubmitted to the TMA Privacy Board for approval. When blank Authorizations meet the regulatory requirements, Support Staff prepare an email that is sent by the Chair or Co-Chair to the PI and Government Sponsor indicating that the blank Authorization(s) submitted for use in the project will be approved once the PI certification, attached to the email, is properly initialed and signed and returned to the TMA Privacy Board. Upon receipt of an appropriately initialed/signed PI Certification, Support Staff prepare another email sent by the Chair or Co-Chair acknowledging receipt of the PI Certification and indicating approval of the blank Authorization(s). The PI and Government Sponsor are further advised that if the blank Authorization(s) is(are) modified or if any new Authorizations are used in the course of the project, such Authorizations must be submitted to the TMA Privacy Board for review/approval prior to use in the research project. Support Staff will notify the DSA team once the Research Authorization Review and blank Authorization(s) are approved.

4. Review of an Application for a Waiver of Authorization or an Altered Authorization

Support Staff evenly distribute completed applications between Board Members for review and work with any Board Member that expresses a conflict of interest related to a particular research project in order to make other arrangements. Generally, Support Staff assign one completed application at a time to each Board Member; however, in order to ensure consistent reviews, when a PI or Government Sponsor submits more than one completed application at the same time that are similar in nature, all related applications are assigned to the same Board Member for review.

When a Board Member is known to be out of town or otherwise unable to conduct a review, Support Staff contact another Board Member to conduct the review. Support Staff send a complete package that includes the following documents: Completed Application for a Waiver of an Authorization or an Altered Authorization; research-related DSAA and data request templates; internal review checklist; system security verification, if applicable; the research protocol; and, any other supporting documents (if applicable) submitted to the TMA Privacy Office.

a. Confirmation of Acceptance

The Board Member confirms receipt of the package for review *no later than the next business day*. If confirmation is not received *by the end of the next business day*, Support Staff contact another Board Member to conduct the review.

b. Acknowledgement of Receipt

After a Board Member confirms receipt of the package for review, Support Staff send an email to the PI and Government Sponsor on behalf of the TMA Privacy Board acknowledging receipt of the completed application, and advising them that a Board Member has been assigned for review. The Board Member contacts the PI and Government Sponsor *within 5 business days* by phone or email with a status update.

c. Review of Application

The Board Member reviews the completed application and utilizes the Internal Review Checklist to help guide the review. If further information or clarification is needed in the course of the review, the Board Member will directly contact the PI and/or Government Sponsor. The Board Member will instruct the PI to update the previously completed application if any verbal or other information is obtained during the review that is not otherwise captured in the completed application and is necessary to the Board Member in approving the application.

d. Secondary Reviews

A Board Member may request that Support Staff facilitate a secondary review. Upon request, Support Staff will ask a second Board Member, who was not involved in the initial review, to review the completed application. The second Board Member will share his/her analysis with the initial Board Member who reviewed the completed application. The initial Board Member will make a final decision to approve or deny.

e. Approvals

When approving a completed application, the Board Member will:

- (1) Electronically sign and date the application if the Board Member has a Common Access Card (CAC). If the Board Member does not have a CAC, the Board

Member will sign and print their name and date the submission in the signature box on the last page;

- (2) Mark the submission number, as provided in email by Support Staff with the package for review, on both the first page of the submission and the last page;
- (3) Check the “APPROVED” box on the last page;
- (4) Check the box indicating whether a Full Waiver, Partial Waiver, or Alteration has been approved;
- (5) If a Partial Waiver is approved, provide the date or event terminating the waiver and check-off whether a Partial Waiver is all that is required for the project or whether the Research Authorization Review and PI Certification are also required; and
- (6) Provide the approved application to the Support Staff electronically and/or in hard copy together with the completed Internal Review Checklist.

Once Support Staff receive an approved application and Internal Review Checklist from a Board Member, Support Staff will review in order to identify whether a partial or full waiver was approved. This information is documented on the last page of the application along with the Board Member’s signature, and in the Internal Review Checklist used in conducting the review.

If a Full Waiver is approved, Support Staff prepare an email that is sent by the Chair or Co-Chair to the PI and Government Sponsor with a scanned copy of the approved application attached. Support Staff then notify the DSA team of the TMA Privacy Board’s approval.

If a Partial Waiver is approved, Support Staff will double check the Board Member’s approval to determine if the Partial Waiver is all that is needed for the project, or whether an Authorization Review and PI Certification will also be required. If the Partial Waiver is all that is needed for the project, Support Staff prepare an email that is sent by the Chair or Co-Chair to the PI and Government Sponsor with a scanned copy of the approved application attached, indicating the period or event upon which the partial waiver ends and the project is no longer permitted to use the participant’s PHI. Support Staff then notify the DSA team of the TMA Privacy Board’s approval and the duration of the partial waiver.

If, however, an Authorization Review and PI Certification will also be required for the project, Support Staff will send an email to the PI and Government Sponsor requesting completion of a Research Authorization Review template and a blank copy of any Authorization(s) that the PI intends to use for the project. Upon receipt of a completed Research Authorization Review template and blank Authorization(s) for use in the project, Support Staff will conduct a review in this regard as set forth

above. Once the Research Authorization Review and blank Authorization(s) are approved, Support Staff will prepare an email for the Chair or Co-Chair to send to the PI and Government Sponsor indicating that a partial waiver has been granted and will be valid for only the initial phase of the research project (i.e., screening, recruitment, and/or eligibility) at which time Authorizations from research participants will be required in order to continue to use the PHI. Support Staff will attach a scanned copy of the signed approval to the email. Support Staff will also notify the DSA team of the TMA Privacy Board's approval of a partial waiver and the time at which the approved Authorizations will be required.

In the event that an Alteration to an Authorization is approved, Support Staff will work with the Board Member to confirm the permitted alteration. Support Staff will then prepare an email that is sent by the Chair or Co-Chair to the PI and Government Sponsor with a scanned copy of the approved application attached and clearly indicating the approved alteration. Support Staff notify the DSA team of the TMA Privacy Board's approval in this regard.

f. Denials

In the event that a Board Member denies a waiver/alteration application, a secondary review is required. Support Staff will forward the submission to a second Board Member who was not involved in the initial review. If the second Board Member agrees with the initial decision to deny the submission, the submission is denied by the TMA Privacy Board. If the second Board Member disagrees with the initial denial, a TMA Privacy Board meeting is convened to review and discuss the application, highlight issues of concern, and come to a consensus on the final determination.

Support Staff promptly notify the DSA Team in the event of a denial of a waiver/alteration application. Support Staff also prepare an email that is sent by the Chair or Co-Chair to the PI and Government Sponsor with a scanned copy of the denied application attached, and require that a Research Authorization Review and the blank Authorization(s) to be used in the project be submitted to the TMA Privacy Board for review/approval before obtaining data managed by TMA for the research study.

F. Review of an Approved Waiver of Authorization or Altered Authorization from an IRB or HIPAA Privacy Board

When a PI has obtained an approved Waiver of Authorization or Altered Authorization from an IRB or HIPAA Privacy Board, Support Staff conduct a review to ensure all required regulatory elements are included in the approved waiver/alteration documentation. These reviews are limited in nature in that the TMA Privacy Board, as permitted by the regulations,

will agree to rely on approved waiver/alteration documents from an IRB or HIPAA Privacy Board as long as they contain all required provisions set forth in the HIPAA Privacy Rule at 45 CFR 164.512(i)(2) and DoD 6025.18-R at C.7.9.2.

When the IRB or HIPAA Privacy Board documentation contains all of the required elements, Support Staff prepare an email that is sent by the Chair or Co-Chair to the PI and Government Sponsor acknowledging the acceptance and reliance upon the IRB or HIPAA Privacy Board approved waiver.

When the IRB or HIPAA Privacy Board documentation lacks any of the elements, Support Staff send an email on behalf of the TMA Privacy Board, outlining the document deficiency(ies) and asking the PI to follow-up with the IRB or HIPAA Privacy Board to address this matter. Support Staff track the communications related to the submission until the deficiency(ies) contained in the approved waiver documentation has (have) been resolved. At that point, Support Staff prepare an email for the Chair or Co-Chair to the PI and Government Sponsor acknowledging the acceptance and reliance upon the IRB or HIPAA Privacy Board approved waiver. Support Staff then notify the DSA team of the TMA Privacy Board's approval in this regard.

G. Extensions, Renewals, and Modifications

TMA Privacy Board approvals document HIPAA compliance in support of a specific research-related DSA. The duration of any approval by the TMA Privacy Board is linked to the related DSA. When there is a request to extend, renew, or modify a research-related DSA in which the TMA Privacy Board provided prior approval, the DSA Team will notify the TMA Privacy Board. Where there is a substantial change in the project that may affect any of the TMA Privacy Board's prior approvals, Support Staff will reach out to the PI and Government Sponsor for further information to determine whether further review is required or if prior approved documentation is sufficient to support the extension, renewal and/or modification.

H. Lack of Response from the PI and/or Government Sponsor

During the course of a review, if Support Staff and/or a Board Member are not obtaining responses from the PI and/or Government Sponsor within a reasonable amount of time, Support Staff notify the DSA team to try to resolve the issues. If a **No Action** letter is sent by the DSA Team regarding the DSAA, Support Staff prepare an email that will be sent by the Chair or Co-Chair to the PI and Government Sponsor, informing them that the TMA Privacy Board's file related to the DSAA has been **inactivated**.

If the DSAA is **reactivated** by the TMA Privacy Office, Support Staff will update the tracker and will pick up on the review status where it was left off prior to the inactivation.

VII. Maintenance of Electronic Files

The TMA Privacy Board files are maintained electronically on the **TMA Official Email File Station and the Privacy Office Electronic File Station**. TMA Privacy Board files include completed submission templates, approvals and other supporting documentation and submission related email communications.

VIII. References

HIPAA Privacy Rule, 45 CFR Parts 160 and 164
DoD 6025.18-R, "Health Privacy Information Regulation,"

IX. Flow Chart

A flow chart of the [TMA Privacy Board Review Process for Research Related Data Requests](http://www.tricare.mil/tma/privacy/privacyboard.aspx) is contained on the TMA Privacy Board's webpage at <http://www.tricare.mil/tma/privacy/privacyboard.aspx>.