DEPARTMENT OF VETERANS AFFAIRS
[OMB Control No. 2900–0073]

Agency Information Collection Activity: Enrollment Certification

AGENCY: Veterans Benefits Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995, this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and it includes the actual data collection instrument.

DATE: Comments must be submitted on or before March 14, 2018.

ADDRESSES: Submit written comments on the collection of information through www.Regulations.gov, or to Office of Information and Regulatory Affairs, Office of Management and Budget, Attn: VA Desk Officer; 725 17th St. NW, Washington, DC 20503 or sent through electronic mail to oira_submission@omb.eop.gov. Please refer to “OMB Control No. 2900–00469” in any correspondence.

SUPPLEMENTARY INFORMATION:

Title: Certificate Showing Residence and Heirs of Deceased Veterans or Beneficiary. Form 29–541.

OMB Control Number: 2900–0073.

Type of Review: Revision of a previously approved collection.

Agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The Federal Register Notice with a 60-day comment period soliciting comments on this collection of information was published at 82 FR 233 on 12–06–2017, page 57654.

AFFECTED PUBLIC: Institutions of Higher Learning, households.

Estimated Annual Burden: 851,394 hours.

Estimated Average Burden per Respondent: 15 min.

Frequency of Response: Twice Annually.

Estimated Number of Respondents: 1,702,788.

By direction of the Secretary.

Cynthia Harvey-Pryor,
Department Clearance Officer, Office of Quality, Privacy and Risk, Department of Veterans Affairs.

[FR Doc. 2018–02713 Filed 2–9–18; 8:45 am]
BILLING CODE 8320–01–P
DEPARTMENT OF VETERANS AFFAIRS

Privacy Act of 1974; System of Records

AGENCY: Veterans Health Administration (VHA).

ACTION: Notice of a modified system of records.

SUMMARY: As required by the Privacy Act of 1974, notice is hereby given that the Department of Veterans Affairs (VA) is amending the system of records entitled, “National Patient Databases—VA” (121VA10P2) as set forth in 79 FR 8245. VA is amending the system of records by revising the System Number, Purpose, Routine Uses of Records Maintained in the System, Record Source Category, and Appendix. VA is republishing the system notice in its entirety.

DATES: Comments on the amendment of this system of records must be received no later than March 14, 2018. If no public comment is received during the period allowed for comment or unless otherwise published in the Federal Register by VA, the amended system will become effective March 14, 2018.

ADDRESSES: Written comments may be submitted through www.Regulations.gov; by mail or hand-delivery to Director, Regulation Policy and Management (00REG), Department of Veterans Affairs, 810 Vermont Ave. NW, Room 1064, Washington, DC 20420; or by fax to (202) 273–9026 (not a toll-free number). Comments should indicate that they are submitted in response to “National Patient Databases—VA”. Copies of comments received will be available for public inspection in the Office of Regulation Policy and Management, Room 1063B, between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday (except holidays). Please call (202) 461–4902 for an appointment. (This is not a toll-free number.) In addition, comments may be viewed online at www.Regulations.gov.

FOR FURTHER INFORMATION CONTACT: Veterans Health Administration (VHA) Privacy Officer, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420; telephone (704) 245–2492. (This is not a toll-free number.)

SUPPLEMENTARY INFORMATION: The System Number is being changed from 120VA10P2 to 121VA10A7 to reflect the current organizational alignment.

The Purpose has been amended to replace Healthcare Associated Infections & Influenza Surveillance System (HAIISS) with National Center for Patient Safety Public Health System.

The Routine Uses of Records Maintained in the System has been amended by adding language to Routine Use #21 which states, “a. Effective Response. A federal agency’s ability to respond quickly and effectively in the event of a breach of federal data is critical to its efforts to prevent or minimize any consequent harm. An effective response necessitates disclosure of information regarding the breach to those individuals affected by it, as well as to persons and entities in a position to cooperate, either by assisting in notification to affected individuals or playing a role in preventing or minimizing harms from the breach. b. Disclosure of Information. Often, the information to be disclosed to such persons and entities is maintained by federal agencies and is subject to the Privacy Act (5 U.S.C. 552a). The Privacy Act prohibits the disclosure of any record in a system of records by any means of communication to any person or agency absent the written consent of the subject individual, unless the disclosure falls within one of twelve statutory exceptions. This routine use is required in order to ensure an agency is in the best position to respond in a timely and effective manner, in accordance with 5 U.S.C. 552a(b)(3) of the Privacy Act, agencies should publish a routine use for appropriate systems specifically applying to the disclosure of information in connection with response and remedial efforts in the event of a data breach.”

Adding Routine Use #27 which states, “Disclosure of Veteran identifiers and demographic information (e.g., name, social security number (SSN), address, date of birth) may be made to an organization with whom VA has a documented partnership, arrangement or agreement (e.g., Health Information Exchange (HIE), Health Information Service Provider (HISP) Direct, CommonWell Health Alliance network), for the purpose of identifying and correlating patients.” VA needs this ability to share demographic information for correlation and identification purposes.

Routine use #28 is being added to state, “VA may disclose relevant health care information to the Centers for Disease Control and Prevention (CDC) and/or their designee in response to its request or at the initiation of VA, in connection with disease-tracking, patient outcomes, bio-surveillance, or other health information required for program accountability.” VA needs the ability to conduct disease tracking to impact patient outcomes, respond to public health threats, and to contribute significantly to the CDC’s ability to conduct and monitor public health surveillance.

Routine use #29 is being added to state, “VA may, on its own initiative, disclose information from this system to another Federal agency or Federal entity, when VA determines that information from this system of records is reasonably necessary to assist the recipient agency or entity in (1) responding to a suspected or confirmed breach or (2) preventing, minimizing, or remedying the risk of harm to individuals, the recipient agency or entity (including its information systems, programs, and operations), the Federal Government, or national security, resulting from a suspected or confirmed breach. VA needs this routine use for the data breach response and remedial efforts with another Federal agency.

Routine use #30 is being added to state, “VA may disclose relevant healthcare and demographic information to health and welfare agencies, housing resources, and community providers, consistent with good medical-ethical practices, for Veterans assessed by or engaged in VA homeless programs for purposes of coordinating care, expediting access to housing, providing medical and related services, participating in coordinated entry processes, reducing Veteran homelessness, identifying homeless individuals in need of immediate assistance and ensuring program accountability by assigning and tracking responsibility for urgently required care.” VA needs this routine use to effectively and efficiently collaborate with partner agencies by sharing information documented in the Homeless Operations Management and Evaluation System (HOMES) for the explicit purpose of improving timeliness and access to necessary services for Veterans in the homeless continuum.

The Record Source Category is being amended to replace 89VA16 with