

Department of Defense  
Department of the Navy  
Narrative Statement on an Altered System of Records  
Under the Privacy Act of 1974

1. System identifier and name: N06500-1, entitled "Millennium Cohort Study."
2. Responsible official: Martin White, MPH, Naval Health Research Center, Deployment Health Research, Department 164, 140 Sylvester Road, San Diego, CA 92106-3521; (619) 553-9292.
3. Nature of proposed changes for the system: The Department of the Navy is proposing to alter the existing system of records by updating system location, categories of individuals, authority for maintenance; purpose(s), storage, retrievability, safeguards, retention and disposal, system manager, notification procedure, record access procedures, and record source categories.
4. Authority for \*maintenance (\*maintained, collected, used, or disseminated) of the system: 5 U.S.C. 301, Departmental Regulations; 10 U.S.C. 136, Under Secretary of Defense for Personnel and Readiness; DoD Protocol number 32227; Sec.743 National Defense Authorization Act of fiscal year 1999; Sec.735, National Defense Appropriations Act for fiscal year 2001; Defense Technology Objective MD.25 Deployed Force Health Protection: Prediction Warfighter Resilience; DoD 6025.18-R, DoD Health Information Privacy Regulation; and E.O. 9397 (SSN) as amended.
5. Provide the agencies evaluation on the probable or potential effects on the privacy of individuals: None.
6. Is the system, in whole or in part, being maintained(maintained, collected, used or disseminated) by a contractor? Yes, FAR clauses are included in the contract.
7. Steps taken to minimize risk of unauthorized access: Access to areas where records are maintained is limited to authorized personnel. Access control devices protect areas during working hours and intrusion alarm devices during non-duty hours. Access to data is provided on need-to-know basis only. Paper records are kept in lock file cabinets. We use a secure server. All supplied sensitive information is transmitted via encrypted Secure Sockets Layer (SSL) technology. Identification numbers are used instead of names. Electronic records can only be accessed by authorized personnel with Common Access Cards (CAC) in conjunction with a personal identification number.

8. Routine use compatibility: In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act of 1974, as amended, these records contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 522a(b)(3) as follows:

To the Department of Veterans Affairs (DVA) for (1) considering individual claims for benefits for which that DVA is responsible; and (2) for use in scientific, medical and other analysis regarding health outcomes research associated with military service.

To the Department of Health and Human Services (HHS), Centers for Disease Control and Prevention for use in scientific, medical and other analysis regarding health outcome research associated with military service.

Note: All disclosures to the DVA and HHS must have prior approval of the Naval Health Research Center Institutional Review Board and a Memorandum of Understanding must be entered into to ensure the right and obligations of the signatories are clear. Access to data 1) is provided on need-to-know basis only; 2) must adhere to the rule of minimization in that only information necessary to accomplish the purpose for which the disclosure is being made is releasable; and 3) must follow strict guidelines established in the data sharing agreement.

To the Social Security Administration (SSA) for considering individual claims for benefits for which that SSA is responsible.

The DoD Blanket Routine Uses that appear at the beginning of the Navy's compilation of system of records notices may apply to this system.

Note: This system of records contains individually identifiable health information. The DoD Health Information Privacy Regulation (DoD 6025.18-R) issued pursuant to the Health Insurance Portability and Accountability Act of 1996, applies to most such health information. DoD 6025.18-R may place additional procedural requirements on the uses and disclosures of such information beyond those found in the Privacy Act of 1974 or mentioned in this system of records notice.

9. OMB information collection requirements:  
OMB collection required: Yes  
OMB Control Number: 0720-0029

Title of collection: Prospective Studies of US Military  
Forces: The Millennium Cohort Study  
Date Approved or Submitted: November 2012  
Expiration Date: 31 March 2014

10. Name of IT system: None.

DRAFT

N06150-5

System name:

Millennium Cohort Study (June 16, 2003, 68 FR 35664).

Changes:

\* \* \* \* \*

Delete entry and replace with "N06500-1."

\* \* \* \* \*

System location:

Delete entry and replace with "Naval Health Research Center, Deployment Health Research, Department 164, 140 Sylvester Road, San Diego, CA 92106-3521."

Categories of individuals covered by the system:

Delete entry and replace with "An initial probability-based, cross-sectional sample of U.S. Armed Forces personnel (active duty Army, Navy, Marine Corps, Coast Guard and Reserve/National Guard, and veterans), as of October 2000, that will be followed prospectively by postal or web surveys every 3 years over at least a 67-year period. The initial sample was comprised of 77,047 service members including individuals who have been deployed to Southwest Asia, Bosnia, or Kosovo since August 1997. In October 2004 and October 2007, samples of 31,110 and 43,440, respectively, of new Armed Forces personnel were added to the Cohort. In May 2011, a random sample of approximately 50,000 new Armed Forces personnel was added to the Cohort. The individuals will be followed until at least the year 2022, even if they retire or separate. The Millennium Cohort Study will also evaluate families of service members by adding a spouse assessment component to the Cohort, called the Millennium Cohort Family Study, where spouses complete a survey about themselves and their children. Beginning in May 2011, a sample of approximately 10,000 spouses of Armed Forces personnel were added to the Family Cohort and will be followed until at least 2022."

\* \* \* \* \*

Authority for maintenance of the system:

Delete entry and replace with "5 U.S.C. 301, Departmental Regulations; 10 U.S.C. 136, Under Secretary of Defense for Personnel and Readiness; DoD Protocol number 32227; Sec.743 National Defense Authorization Act of fiscal year 1999; Sec.735,

National Defense Appropriations Act for fiscal year 2001; Defense Technology Objective MD.25 Deployed Force Health Protection: Prediction Warfighter Resilience; DoD 6025.18-R, DoD Health Information Privacy Regulation; and E.O. 9397 (SSN), as amended."

Purpose(s):

Delete entry and replace with "To create a probability-based database of service members and veterans who have, or have not, deployed overseas so that various longitudinal health and research studies may be conducted over a 21+ year period. The database will be used:

a. To systematically collect population-based demographic and health data to evaluate the health of Armed Forces personnel throughout their careers and after leaving service.

b. To evaluate the impact of operational deployments on various measures of health over time including medically unexplained symptoms and chronic diseases such as cancer, heart disease and diabetes.

c. To serve as a foundation upon which other routinely captured medical and deployment data may be added to answer future questions regarding the health risks of operational deployment, occupations, and general service in the Armed Forces.

d. To examine characteristics of service in the Armed Forces associated with common clinician-diagnosed diseases and with scores on several standardized self-reported health inventories for physical and psychological functional status.

e. To provide a data repository and available representative Armed Forces cohort that future investigators and policy makers might use to study important aspects of service in the Armed Forces including disease outcomes among an Armed Forces cohort.

In addition to revealing changes in veterans' health status over time, the Millennium Cohort Study will serve as a data repository, providing a solid foundation upon which additional epidemiological studies may be constructed.

f. To access the associations of military service on the health and well-being of military families, and to compare the adjusted probabilities of new onset diseases and conditions among military spouses."

\* \* \* \* \*

Storage:

Delete entry and replace with "Paper and electronic storage media."

Retrievability:

Delete entry and replace with "Records are retrieved by individual's name and SSN."

Safeguards:

Delete entry and replace with: Access to areas where records are maintained is limited to authorized personnel. Access control devices protect areas during working hours and intrusion alarm devices during non-duty hours. Access to data is provided on need-to-know basis only. Paper records are kept in lock file cabinets. We use a secure server. All supplied sensitive information is transmitted via encrypted Secure Sockets Layer (SSL) technology. Identification numbers are used instead of names. Electronic records can only be accessed by authorized personnel with Common Access Cards (CAC) in conjunction with a personal identification number.

Retention and disposal:

Delete entry and replace with "Records are permanent and transferred to the nearest Federal Records Center (FRC) when 5 years old and then transferred to the National Archive and Records Administration (NARA) when 20 years old. Temporary supporting records are transferred to nearest FRC when 5 years old and destroyed when 10 years old. Temporary non-record files will be destroyed when 5 years old or on completion/termination of project. "

System manager(s) and address:

Delete entry and replace with "Policy Official: Commanding Officer, Naval Health Research Center, 140 Sylvester Rd, San Diego, CA 92106-3521.

Record Holder: Senior Investigator, The Millennium Cohort Study, Naval Health Research Center, Deployment Health Research Department, 140 Sylvester Rd, San Diego, CA 92186-5122."

Notification procedure:

Delete entry and replace with "Individuals seeking to determine whether information about themselves is contained in this system should address written inquiries to the Senior Investigator, The Millennium Cohort Study, Naval Health Research Center, Deployment

Health Research Department, 140 Sylvester Rd, San Diego, CA  
92186-5122.

The request should contain the individual's name and SSN and must be signed by the individual requesting the information.

The system manager may require an original signature or a notarized signature as a means of proving the identity of the individual."

Record access procedures:

Delete entry and replace with "Individuals seeking access to information about themselves contained in this system should address written inquiries to the Senior Investigator, The Millennium Cohort Study, Naval Health Research Center, Deployment Health Research Department, 140 Sylvester Rd, San Diego, CA 92186-5122.

The request should contain the individual's name and SSN and must be signed by the individual requesting the information.

The system manager may require an original signature or a notarized signature as a means of proving the identity of the individual requesting access to the records."

\* \* \* \* \*

Record source categories:

Delete entry and replace with "Individual participant survey instruments; Composite Health Care System (CHCS); Corporate Executive Information Systems; Defense Manpower Data Center (DMDC); Defense Enrollment Eligibility Reporting System (DEERS); Civilian Health and Medical Program of the Uniformed Services; MHS Data Repository (MDR); Armed Forces Health Longitudinal Technology Application (AHLTA); Armed Forces Medical Examiner System (AFMES); National Data Index (NDI); Army Medical Surveillance Activity (AMSA); Joint Theater Trauma Registry (JTTR), survey research instruments and health research records at Naval Medical Center, San Diego; and individual physical exams and biological specimens."

\* \* \* \* \*

System name:  
Millennium Cohort Study.

System location:  
Naval Health Research Center, Deployment Health Research,  
Department 164, 140 Sylvester Road, San Diego, CA 92106-3521.

Categories of individuals covered by the system:  
An initial probability-based, cross-sectional sample of U.S. Armed Forces personnel (active duty Army, Navy, Marine Corps, Coast Guard and Reserve/National Guard, and veterans), as of October 2000, that will be followed prospectively by postal or web surveys every 3 years over at least a 67-year period. The initial sample was comprised of 77,047 service members including individuals who have been deployed to Southwest Asia, Bosnia, or Kosovo since August 1997. In October 2004 and October 2007, samples of 31,110 and 43,440, respectively, of new Armed Forces personnel were added to the Cohort. In May 2011, a random sample of approximately 50,000 new Armed Forces personnel was added to the Cohort. The individuals will be followed until at least the year 2022, even if they retire or separate. The Millennium Cohort Study will also evaluate families of service members by adding a spouse assessment component to the Cohort, called the Millennium Cohort Family Study, where spouses complete a survey about themselves and their children. Beginning in May 2011, a sample of approximately 10,000 spouses of Armed Forces personnel were added to the Family Cohort and will be followed until at least 2022.

Categories of records in the system:  
Demographic data: name, Social Security Number (SSN), rank, grade, gender, military occupational specialty, health data, self-reported medical conditions and symptoms, smoking and drinking behaviors. Validated instruments are incorporated to capture self-assessed physical and mental functional status (Short Form-36 Veterans), psychosocial assessment (Patient Health Questionnaire), and posttraumatic stress disorder (Patient Checklist-17).

Information obtained from the survey responses will be supplemented with deployment, occupational, vaccination, and healthcare utilization data related to individual health status.

Authority for maintenance of the system:  
5 U.S.C. 301, Departmental Regulations; 10 U.S.C. 136, Under Secretary of Defense for Personnel and Readiness; DoD Protocol



number 32227; Sec.743 National Defense Authorization Act of fiscal year 1999; Sec.735, National Defense Appropriations Act for fiscal year 2001; Defense Technology Objective MD.25 Deployed Force Health Protection: Prediction Warfighter Resilience; DoD 6025.18-R, DoD Health Information Privacy Regulation; and E.O. 9397 (SSN), as amended.

Purpose(s):

To create a probability-based database of service members and veterans who have, or have not, deployed overseas so that various longitudinal health and research studies may be conducted over a 21+ year period. The database will be used:

- a. To systematically collect population-based demographic and health data to evaluate the health of Armed Forces personnel throughout their careers and after leaving service.
- b. To evaluate the impact of operational deployments on various measures of health over time including medically unexplained symptoms and chronic diseases such as cancer, heart disease and diabetes.
- c. To serve as a foundation upon which other routinely captured medical and deployment data may be added to answer future questions regarding the health risks of operational deployment, occupations, and general service in the Armed Forces.
- d. To examine characteristics of service in the Armed Forces associated with common clinician-diagnosed diseases and with scores on several standardized self-reported health inventories for physical and psychological functional status.
- e. To provide a data repository and available representative Armed Forces cohort that future investigators and policy makers might use to study important aspects of service in the Armed Forces including disease outcomes among an Armed Forces cohort.

In addition to revealing changes in veterans' health status over time, the Millennium Cohort Study will serve as a data repository, providing a solid foundation upon which additional epidemiological studies may be constructed.

- f. To access the associations of military service on the health and well-being of military families, and to compare the adjusted probabilities of new onset diseases and conditions among military spouses.

Routine uses of records maintained in the system, including categories of users and the purposes of such uses:  
In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act of 1974, as amended these records contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 522a(b)(3) as follows:

To the Department of Veterans Affairs (DVA) for (1) considering individual claims for benefits for which that DVA is responsible; and (2) for use in scientific, medical and other analysis regarding health outcomes research associated with military service.

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Note: This system of records contains individually identifiable health information. The DoD Health Information Privacy Regulation (DoD 6025.18-R) issued pursuant to the Health Insurance Portability and Accountability Act of 1996, applies to most such health information. DoD 6025.18-R may place additional procedural requirements on the uses and disclosures of such information beyond those found in the Privacy Act of 1974 or mentioned in this system of records notice.

Policies and practices for storing, retrieving, accessing, retaining, and disposing of records in the system:

Storage:

Paper and electronic storage media.

Retrievability:

Records are retrieved by individual's name and SSN.

Safeguards:

Access to areas where records are maintained is limited to authorized personnel. Access control devices protect areas during working hours and intrusion alarm devices during non-duty hours. Access to data is provided on need-to-know basis only. Paper records are kept in lock file cabinets. We use a secure server. All supplied sensitive information is transmitted via encrypted Secure Sockets Layer (SSL) technology. Identification numbers are used instead of names. Electronic records can only be accessed by authorized personnel with Common Access Cards (CAC) in conjunction with a personal identification number.

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The request should contain the individual's name and SSN and must be signed by the individual requesting the information.

The system manager may require an original signature or a notarized signature as a means of proving the identity of the individual.

**Record access procedures:**

Individuals seeking access to information about themselves contained in this system should address written inquiries to the Senior Investigator, The Millennium Cohort Study, Naval Health Research Center, Deployment Health Research Department, 140 Sylvester Rd, San Diego, CA 92186-5122.

The request should contain the individual's name and SSN and must be signed by the individual requesting the information.

The system manager may require an original signature or a notarized signature as a means of proving the identity of the individual requesting access to the records.

**Contesting record procedures:**

The Navy's rules for accessing records, and for contesting contents and appealing initial agency determinations are published in Secretary of the Navy Instruction 5211.5; 32 CFR part 701; or may be obtained from the system manager.

**Record source categories:**

Individual participant survey instruments; Composite Health Care System (CHCS); Corporate Executive Information Systems; Defense Manpower Data Center (DMDC); Defense Enrollment Eligibility Reporting System (DEERS); Civilian Health and Medical Program of the Uniformed Services; MHS Data Repository (MDR); Armed Forces Health Longitudinal Technology Application (AHLTA); Armed Forces Medical Examiner System (AFMES); National Data Index (NDI); Army Medical Surveillance Activity (AMSA); Joint Theater Trauma Registry (JTTR), survey research instruments and health research records at Naval Medical Center, San Diego; and individual physical exams and biological specimens.

**Exemptions claimed for the system:**

None.