

SUPPORTING STATEMENT - PART A

DoD Active Duty/Reserve Forces Dental Examination – 0720-0022

Summary of Changes from Previously Approved Collection

- The estimated costs to the Federal Government since this ICR's submission in 2016, have increased.

1. Need for the Information Collection

The DD Form 2813, "Department of Defense Active Duty/Reserve/Guard/Civilian Forces Dental Examination" is used by members of the Active and Reserve Components of the Armed Forces and certain DoD civilians to enable civilian dentists to document and report their dental health status. It is very difficult for Reserve component members to receive their routine dental care from active duty dentists, but they are required to document the fact that they have undergone an annual dental examination. Therefore, this form is used as a method for civilian dentists to confirm that an exam was completed and convey the dental health status of members of the Reserve Components and active duty members in remote locations to the Department of Defense. Authority to collect this information is found in 10 U.S.C. Section 10206, "Armed Forces Members: Physical Examinations", which states that each member of the Selected Reserve who is not on active duty shall have a comprehensive dental assessment on an annual basis. Additional prescribing authorities are 10 USC 1074f, "Medical tracking system for members deployed overseas", DTM-17-004, "Department of Defense Expeditionary Civilian Workforce", DoDI 6025.09 "Individual Medical Readiness (IMR)" and Executive Order 9397 (SSN).

2. Use of the Information

The collection of this information is required to verify the health status of members of the Reserve Components, active duty members in remote locations and DoD civilians who deploy by the Department of Defense. Each Military Service provides the DD-2813 electronically to Service Members and civilian dentists. In addition, Service Members may be provided the form by their Commander. The form is available at the following websites: tricare.mil, www.esd.whs.mil/Directives/forms, health.mil, including the Services' respective websites.

When members of the Active or Reserve Components receive their annual examinations from civilian dentists, the dentists record the dental health status on the DD- 2813 according to dental health status definitions on the form. The dentist notes whether the individual has any conditions that are expected to require treatment within the next 12 months, as well as the dentist's name, contact information, and signature/license number. Service members return the completed form to their parent military organization via email, fax or in person to their Commander, and their dental health status is entered into the

service's electronic database, which tracks the deployments readiness of the members. Members who do not have capability for electronic transfer of data, will return a hardcopy of the DD- 2813 to Service component records department to include in the corresponding records until it is possible to electronic scan the form to the electronic health record. The instances include service members who are forward deployed or on ships without immediate electronic means to transfer the data. At the soonest availability, the appropriate Service component will upload the form into the Service specific information system.

Once completed, information from the form is uploaded into Army, Navy, and Air Force specific information systems, as well as the DoD wide Defense Medical Surveillance System (DMSS). Military members must maintain an acceptable level of dental health because dental emergencies in military operations place an undue strain on the health care and medical evacuation systems in the area of military operations.

3. Use of Information Technology

The DD Form 2813 is available in several electronic formats to include PDF (Portable Document Format). Civilian dentists can access the form and submit it electronically to the member's unit, although most are completing the form as part of the exam. Approximately 70% of responses are collected electronically. Fewer Service Members use a hardcopy of the DD Form 2813, as they rely more on electronic means. Service Members are encouraged to use electronic means.

4. Non-duplication

The information obtained through this collection is unique and is not already available for use or adaptation from another cleared source.

5. Burden on Small Businesses

This information collection does not impose a significant economic impact on a substantial number of small businesses or entities.

6. Less Frequent Collection

A member's dental health status can quickly deteriorate to an unacceptable level and must be evaluated annually. An annual dental evaluation is a readiness requirement.

7. Paperwork Reduction Act Guidelines

This collection of information does not require collection to be conducted in a manner inconsistent with the guidelines delineated in 5 CFR 1320.5(d)(2).

8. Consultation and Public Comments

Part A: PUBLIC NOTICE

A 60-Day Federal Register Notice (FRN) for the collection published on Friday, August 23, 2019. The 60-Day FRN citation is 84 FRN 44291.

No comments were received during the 60-Day Comment Period.

A 30-Day Federal Register Notice for the collection published on Thursday, December 19, 2019. The 30-Day FRN citation is 84 FRN 69728.

Part B: CONSULTATION

No additional consultation apart from soliciting public comments through the Federal Register was conducted for this submission.

9. Gifts or Payment

No payments or gifts are being offered to respondents as an incentive to participate in the collection. Individual dentists will decide if they require an additional fee for completing the form, or whether they will factor it into their cost of doing business. For active duty members who receive their care from civilian dentists through the Active Duty Dental Program, there is no fee associated with completion of this form.

10. Confidentiality

A Privacy Act Statement is required for this collection and is provided at the top of the DD-2813.

The applicable SORN(s) are listed below along with links to the full text.

- Army: A0040-66b DASG, Health Care and Medical Treatment Record System (April 04, 2003, 68 FR 16484), <http://dpclد.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/569974/a0040-66b-dasg/>
- Navy: N06150-2, Health Care Record System (June 16, 2003, 68 FR 35657), <http://dpclد.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570394/n06150-2/>
- Air Force: F044 AF SG E, Medical Record System (December 13, 2011, 76 FR 77498), <http://dpclد.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/569877/f044-f-sg-e/>

The applicable Privacy Impact Assessments (PIAs) are listed below: The PIAs can be accessed at the following URLs:

- Army & Air Force: Corporate Dental System, http://armymedicine.mil/Documents/Corporate_Dental_System-CDS-Renewal.pdf
- Navy: Dental Common Access System (DENCAS), http://www.doncio.navy.mil/uploads/Summary_BUMED_DENCAS_PIA_05_24_2013.pdf & Dental Digital Imaging (DDI) System, http://www.doncio.navy.mil/uploads/Summary_BUMED_DDI_PIA_08-23-2012.pdf

The applicable Records Retention and Disposition Schedule(s) are as follows:

- Army: Military health/dental and procurement/separation x-ray records are permanent. Clinical (inpatient), outpatient, dental and consultation record files for military members are destroyed after 50-75 years. All records (except the Military Health/Dental records) which are active while individual is on active duty, then retired with individual's Military Personnel Records Jacket and the procurement/separation x-ray records which are forwarded to the National Personnel Records Center on an accumulation basis) are retained in an active file while treatment is provided and subsequently held for a period of 1 to 5 years following treatment before being retired to the National Personnel Records Center. Subsidiary medical records, of a temporary nature, are normally not retained long beyond termination of treatment; however, supporting documents determined to have significant documentation value to patient care and treatment are incorporated into the appropriate permanent record file. Until the National Archives and Records Administration approves the disposition of Psychological Assessment and Selection Case records, treat as permanent.
- Navy: Health care records are retained, retired, and disposed of in accordance with Secretary of the Navy Instruction 5215.5 (Disposal of Navy Marine Corps Records) and Bureau of Medicine and Surgery Instruction 6150.1 (Health Care Treatment Records). Specifics are provided below.
 - Military health (medical and dental) records, are transferred with the member upon permanent change of duty station to his/her new duty station. These records are retired to the National Personnel Records Center, (Military Personnel Records), 9700 Page Avenue, St. Louis, MO 63132-5100; Naval Reserve Personnel Center, 4400 Dauphine Street, New Orleans, LA 70149-7800; and, Marine Corps Reserve Support Center, 10950 El Monte, Overland Park, KS 66211-1408.
 - Inpatient health records are transferred to the National Personnel Records Center, (Military Personnel Records), 9700 Page Avenue, St. Louis, MO 63132-5100 or to the National Personnel Records Center, (Civilian Personnel Records), 111 Winnebago Street, St. Louis, MO 63118-4199, two years after the calendar year of the last date of treatment. Outpatient health records of civilians are transferred to the National Personnel Records Center, (Military Personnel Records), 9700 Page Avenue, St. Louis, MO 63132-5100 or to the National Personnel Records Center, (Civilian Personnel Records), 111 Winnebago Street, St. Louis, MO 63118-4199, two years after the calendar year of the last date of treatment. X-ray files are retained on-site and destroyed three years after the last x-ray in the file. Asbestos x-rays are retained on site indefinitely. Secondary health record may be retained separate from the health record. A notation is made in the health record that these records exist and where they are being kept. When the health record is retired or the patient transfers, these records should be entered in the health record. Aviation medical records are retained at the activity and destroyed when 30 years old. Marine Security Guard Battalion

psychological examination, evaluation, and treatment case files containing medical records documenting fitness for assignment as Embassy Guards are retained at the activity and destroyed after 50 years. Clinical psychology case files documenting suitability for special assignment will be retained at the originating medical treatment facility and destroyed when 50 years old. Radiation exposure records for personnel are maintained indefinitely in the health record, and in a centralized exposure registry held by the Navy Environmental Health Center Detachment, Naval Dosimetry Center, Bethesda, MD 20889-5614.

- Air Force: Files retention is based on medical need. The current limitation is ten years. After use is determined to be no longer required, electronic records are archived and then deleted from server for active use.

11. Sensitive Questions

Social Security Number is collected. A Social Security Number Justification Memo has been provided with this ICR separately.

12. Respondent Burden and its Labor Costs

Part A: ESTIMATION OF RESPONDENT BURDEN

- 1) DD-2813
 - a) Number of Respondents: 150,000
 - b) Number of Responses Per Respondent: 5
 - c) Number of Total Annual Responses: 750,000
 - d) Response Time: 3 minutes
 - e) Respondent Burden Hours: 37,500 hours
- 2) Total Submission Burden
 - a) Total Number of Respondents: 150,000
 - b) Total Number of Annual Responses: 750,000
 - c) Total Respondent Burden Hours: 37,500 hours

Part B: LABOR COST OF RESPONDENT BURDEN

- 1) DD-2813
 - a) Number of Total Annual Responses: 750,000
 - b) Response Time: 3 minutes
 - c) Respondent Hourly Wage: \$85.74
 - d) Labor Burden per Response: \$4.287
 - e) Total Labor Burden: \$3,215,250.00
- 2) Overall Labor Burden
 - a) Total Number of Annual Responses: 750,000

b) Total Labor Burden: \$3,215,250.00

The Respondent hourly wage was determined by using the Department of Labor employment statistics for Dentists (<http://www.bls.gov/oes/current/oes291021.htm>).

13. Respondent Costs Other Than Burden Hour Costs

There are no annualized costs to respondents other than the labor burden costs addressed in Section 12 of this document to complete this collection.

14. Cost to the Federal Government

Part A: LABOR COST TO THE FEDERAL GOVERNMENT

1) DD-2813

- a) Number of Total Annual Responses: 750,000
- b) Processing Time per Response: 0.996 minutes
- c) Hourly Wage of Worker(s) Processing Responses : \$18.69
- d) Cost to Process Each Response: \$ 0.310254
- e) Total Cost to Process Responses: \$232,690.50

2) Overall Labor Burden to the Federal Government

- a) Total Number of Annual Responses: 750,000
- b) Total Labor Burden: \$232,690.50

The Federal Government will be recording one response, final DRC (Dental Readiness Class) based on the respondents evaluation. Utilizing Service personnel equivalent to administrative assistants, the hourly wage provided is according to the Bureau of Labor Statistics "Secretaries and Administrative Assistants, 2018" median pay. The wage figure can be found at: <http://www.bls.gov/ooh/office-and-administrative-support/secretaries-and-administrative-assistants.htm>.

Part B: OPERATIONAL AND MAINTENANCE COSTS

1) Cost Categories

- a) Equipment: \$0.00
- b) Printing: \$0.00
- c) Postage: \$0.00
- d) Software Purchases: \$0.00
- e) Licensing Costs: \$0.00
- f) Other: \$0.00

2) Total Operational and Maintenance Cost: \$0.00

Part C: TOTAL COST TO THE FEDERAL GOVERNMENT

1) Total Labor Cost to the Federal Government: \$232,690.50

2) Total Operational and Maintenance Costs: \$0.00

3) Total Cost to the Federal Government: \$232,690.50

15. Reasons for Change in Burden

The burden has increased since the previous approval due to a miscalculation of burden in 2016 at this ICR's last submission and an increase in the average median pay for dentists.

16. Publication of Results

The results of this information collection will not be published.

17. Non-Display of OMB Expiration Date

We are not seeking approval to omit the display of the expiration date of the OMB approval on the collection instrument.

18. Exceptions to "Certification for Paperwork Reduction Submissions"

We are not requesting any exemptions to the provisions stated in 5 CFR 1320.9.