

**Airline and Vessel Traveler Information Collection**  
**(42 CFR Part 71)**  
**(OMB Control No. 0920-1180)**  
**Request for New Information Collection**  
**1/14/2021**

**B. Collections of Information Employing Statistical Methods**

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## **B. Collections of Information Employing Statistical Methods**

**No statistical methods are used in this data collection.**

### **1. Respondent Universe and Sampling Methods**

The collection of accurate, timely, and complete contact information from airlines and maritime vessels and travelers, via manifest orders, enables Quarantine Officers in CDC's Division of Global Migration and Quarantine (DGMQ) to notify state and local health departments in order for them to make contact with individuals who may have been exposed to a communicable disease during travel and identify appropriate next steps.

Regulatory provisions at 42 CFR 71.4 and 42 CFR 71.5 clarify that CDC, as the federal public health authority, has explicit authority to require that airlines and ships provide to CDC, within 24 hours, specific PII and contact information on travelers to prevent the introduction and spread of disease into the United States and between the states and possessions.

The description of the information collection following below is aligned with current practices and is primarily concerned with airlines and arriving international travelers.

### **2. Procedures for the Collection of Information**

In the event that a communicable disease risk is identified in a traveler aboard an airline or maritime vessel, and the disease presents a risk to co-passengers or crew, a CDC Quarantine Station staff member prepares the manifest order and cover letter templates and receives official approval to email or fax the order and cover letter to the appropriate airline or maritime vessel company point of contact.

If advanced notice to the airline or maritime vessel operator is needed in extremely pressing cases of infectious diseases, an informal manifest request template is sent, which is followed as soon as possible by the formal order. If the airline or maritime vessel operator responds to the informal request prior to the formal order, CDC will follow up with a formal receipt of manifest letter for the airline's or maritime operator's records.

The list of specific data elements provided in the Final Rule is:

- Full name (last, first, and, if available, middle or others);
- Date of birth;
- Sex;
- Country of residence;
- If a passport is required; passport number, passport country of issuance, and passport expiration date;
- If a travel document, other than a passport is required, travel document type, travel document number, travel document country of issuance and travel document expiration date;

- Address while in the United States (number and street, city, state, and zip code), except that U.S. citizens and lawful permanent residents will provide address of permanent residence in the U.S. (number and street, city, state, and zip code; as applicable);
- Primary contact phone number to include country code;
- Secondary contact phone number to include country code;
- Email address;
- Airline name;
- Flight number;
- City of departure;
- Departure date and time;
- City of arrival;
- Arrival date and time; and
- Seat number for all passengers

CDC also requests seat configuration for the requested contact area (example: AB/aisle/CDE/aisle/FG, bulkhead in front of row 9), identification on the manifest of the crew and what zone crew were assigned to, as well as the identification of any babes-in-arms.

Each order contains the specific pieces of data CDC requires for each passenger at risk given the risk posed by the communicable disease. For airlines, CDC has developed standard operating procedures (SOPs) for several infectious diseases, such as tuberculosis and meningococcal disease. These SOPs detail in which seats with respect to the ill traveler passengers were at greatest risk for infection. Some SOPs for highly communicable or highly concerning diseases specify that a larger portion of the airplane, or even all passengers and crew, should be included in the manifest submission to CDC. In the case of measles and rubella, the entire manifest is requested if the airplane is less than 50 seats. For infectious tuberculosis on flights lasting more than 8 hours, it is two rows in front of the index case, the same row, and the two rows being. Manifest requests for maritime conveyance manifest requests also depend on the communicable disease in question as well as dynamics of contact between travelers, e.g. did the ill traveler have a cabin mate, dine with the same people, or if it was a child, stay in daycare. CDC rarely conducts contact tracing associated with maritime vessels as the vast majority of the time, the sick or exposed people are still onboard and the vessel medical staff has procedures in place to limit additional exposure.

Once CDC receives the manifest information, CDC works with the Department of Homeland Security to cross check passenger information with federal databases in order to ensure the most accurate contact and locating data is available. The information is compiled into a clean data set for distribution to state health department for their action.

### **3. Methods to Maximize Response Rates and Deal with No Response**

Response to this data collection is required. However, the information requested has been kept to the minimum in order to minimize the public burden. CDC has also worked

with airline and maritime conveyance partners to ensure the reporting burden is limited to only that necessary to locate and notify potentially exposed passengers or crew.

#### **4. Tests of Procedures or Methods to be Undertaken**

The manifest order process are parts of the core public health activities of DGMQ, and the division works closely with the airlines and maritime vessels to ensure that traveler contact information is submitted when ordered.

The protocols and processes used for this data collection are continually updated and improved for quality of data collection and ease of use for both the public, industry and CDC program administrators.

#### **5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data**

Not Applicable