

SUPPORTING STATEMENT - PART A

Medical Screening of Military Personnel - 0704-0413

1. Need for the Information Collection

Titles 10 U.S.C. 504, Persons not qualified; 10 U.S.C. 505, Regular components: qualifications, term, grade; 10 U.S.C. 507, Extension of enlistment for members needing medical care or hospitalization; 10 U.S.C. 532, Qualifications for original appointment as a commissioned officer; 10 U.S.C. 978, Drug and alcohol abuse and dependency: testing of new entrants; 10 U.S.C. 1201, Regulars and members on active duty for more than 30 days: retirement; 10 U.S.C. 1202, Regulars and members on active duty for more than 30 days: temporary disability retired list; 10 U.S.C. 4346, Cadets: requirements for admission; and EO 9397 require applicants to meet medical accession standards for enlistment, induction, and appointment to the Armed Forces. DD Form 2807-1, "Report of Medical History" and the DD Form 2807-2, "Accessions Medical History Report" are designed to appropriately collect this information. Data are needed from applicants to elicit a more accurate picture of their well-being and medical history.

This information collected is the basis for determining medical eligibility of applicants for entry in the Armed Forces. This information is needed to determine the medical qualifications of applicants based upon their current and past medical history.

2. Use of the Information

Applicants for initial entry into the Armed Forces and Service members requiring mandatory medical examinations, medical boards and other physical examination shall complete the DD Form 2807-1. All initial entry applicants required to complete a Chapter 2 physical examination will complete the DD Form 2807-2 prior to the medical examination. The purpose of this information is to gather the necessary initial data for determining the applicants' medical eligibility and qualification for the Armed Forces and to establish the initial medical record.

The information obtained on the DD Form 2807-2 ensures the recruiter that an applicant have identified any medical disqualifying condition(s) prior to application process and meets the Congressional requirements to obtain both the applicants Health Care provider and Insurance provider. Additionally, it allows the military examining physician to obtain medical records critical to evaluating the applicant's medical condition(s) prior to their medical examination. The DD Form 2807-1 is needed as part of the required medical examination to assist physicians in making determinations as to acceptability of applicants for military service and verifies disqualifying medical condition(s) noted on the accession medical history report form. Approximately 100,000 applicants will not meet the medical entry standards and will not require medical examination after completing the DD Form 2807-2 due to pre-existing medical conditions.

The DD Form 2807-1 may also be used by all Service members for retention and medical boards and other essential medical examinations as required by the Services.

The Military Services and the Coast Guard will use these data to evaluate applicants' medical status in determining eligibility for enlistment, appointment or induction and to evaluate the entry standards for the Armed Forces. Data are also used to decrease premature medical discharges categorized as "Existing Prior to Service." The DD Form 2807-2 will be completed by the recruiter, the applicant, and possibly a family member. It will be used to determine any disqualifying medical condition prior to physical examination and will be used to assist the physician in collecting medical information essential for completing the medical examination and determining the applicants' qualification or disqualification. The DD Form 2807-1 is completed at the Military Entrance Processing Station by applicants and medical personnel, if required to clarify reporting on DD Form 2807-2. This information is collected and reviewed by physicians performing the entrance medical examination to determine the applicants' eligibility. The information collected becomes part of the applicants' medical records.

3. Use of Information Technology

95% of the DD Forms 2807-1 and 2807-2 are collected and submitted electronically. The forms are available on the DoD Electronic Forms Website in Fillable Adobe PDF files and used by the Military Entrance Processing Command (MEPCOM) Integrated Resource System (MIRS) at the Military Entrance Processing Stations (MEPS), the Department of Defense Medical Examination Review Board (DODMERB), and by the medical practitioners performing physical examinations.

MEPCOM is responsible for loading the DD Form 2807-1 and DD Form 2807-2 into the MEPCOM Integrated Resource System (MIRS) to enable respondents to electronically complete the form.

4. Non-duplication

The medical accession history will identify medical conditions which are permanently disqualifying for applicants, stopping the recruiting process and decreasing medical cost and recruiter's time. The duplication of data between the medical accession history and the medical history form will allow MEPCOM to validate the data obtained from an applicant thus decreasing the incidence of conditions listed as existing prior to Service, only will be completed when an applicant reports a different answer from the accession medical history report provided. It will allow the applicants to obtain medical records, prior to their medical examination, based upon their answers and their consent to release the medical records to the examining facility. This data will assist the practitioner in determining their qualification or disqualification for the Armed Services.

Data collected on the DD Form 2807-1 and DD Form 2807-2, provide a wide range of medical data needed to establish eligibility for enlistment, commissioning or appointment in the Armed Forces. No culmination of data from other sources would provide the necessary information for entrance.

5. Burden on Small Businesses

Small businesses and other small entities will not be affected by this collection.

6. Less Frequent Collection

Information is collected only once per applicant. If collection was stopped, ability to make determinations for enlistment, appointment or commissioning into the military would be hampered and the present and past medical status of the applicant could not be ascertained. Additionally, force readiness and health postures would be affected.

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 16, 2024. The 60-Day FRN citation is 89 FRN 66703.

31 total comments were received during the 60-Day Comment Period. They are included below as well as our Agency's response to the comment.

26 comments related to adding USPHS to the forms.

Response: We have modified the forms to include USPHS to block 6a.

2 comment (DOD-2024-OS-0094-0030 and DOD-2024-OS-0094-0028) related to adding NOAA to the forms.

Response: We have modified the forms to include NOAA to block 6a.

1 comment related to adding all eight of the Uniformed Services to the forms.

Response: We have modified the forms to include all eight of the Uniformed Services to block 6a.

1 comment (DOD-2024-OS-0094-0026) related to adding Long-Acting Reversible Contraception (LARC) to item 18 on DD2708-1.

Response: The inclusion of Long-Acting Reversible Contraception (LARC) on DD2807-1 at block 18 was not incorporated as it is an individual treatment option. Block 29 on the same form allows the service member to elaborate and provide treatment given and current medical status, if desired.

1 comment (DOD-2024-OS-0094-0008) related to adding USPHS to the form DD2808.

Response: We have added USPHS to section 15a.

A 30-Day Federal Register Notice for the collection published on Friday, October 18, 2024. The 30-Day FRN citation is 89 FRN 83860.

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.

10. Confidentiality

Respondents are advised that statements will be held in strictest confidence and procedures are in place to protect the confidentiality of the information. The forms are maintained in personal records and are seen only by individuals who have a need to verify information contained on the form. The data will be secured to protect Personally Identifiable Information (PII) in accordance to DoD regulations. Records are maintained in secure, limited access, or monitored areas. Physical entry by unauthorized persons is restricted through the use of locks, passwords, or other administrative procedures. Access to personal information is limited to those individuals who require the records to perform their official assigned duties. The Privacy Act statement is contained on DD Forms 2807-1 and 2807-2.

System of Records Notice SORNS: The following System of Records Notice (SORNs) oversees the collection of the PII for the DD Form 2807-1 and DD Form 2807-2. Completed form data is stored and maintained by USMEPCOM. Hardcopies are furnished to the Services. The DoD Blanket Routine Uses found at <http://dpcl.d.defense.gov/Privacy/SORNSIndex/Blanket-Routine-Uses/>, apply to this collection. Applicable SORNs:

USMEPCOM: <http://dpcl.d.defense.gov/Privacy/SORNSIndex/DOD-wide-SORN-Article-View/Article/570661/a0601-270-usmepcom-dod/>, U.S. Military Processing Command Integrated Resources System (USMIRS), (November 03, 2010, 75 FR 67700)

A draft copy of the PIA, USMEPCOM Integrated Resource System (USMIRS), has been provided with this package for OMB's review.

Each MEPS retains a copy of reporting system source documents for each enlistee for 90 days after shipment. For all other applicants, each MEPS retains, if applicable, a copy of the Report of Medical Examination with supporting documentation, the Report of Medical History, and any other reporting source documents, for a period not to exceed 2 years. For qualification records, enlistment, commission, and induction quotas upon completion of initial military service obligation, for a period of 7 years (Keep in CFA until no longer needed for conducting business, then retire to RHA/AEA. The RHA/AEA will destroy record when the record is 7 years old). Medical and conduct disqualification records are

maintained for 25 years or up to the individual's age of 42, whichever occurs first, after which they are destroyed. For acceptable applicants, originals or copies of documents are filed permanently in their official personnel file; the file is then transferred to the gaining Armed Forces. During medical examination written information prepared by the examining physician relating to the individual who becomes seriously ill or injured while at a MEPS, or were found disqualified for a condition considered dangerous to the individual's health if left untreated are kept for 2 years.

11. Sensitive Questions

The DD Form 2807-1 and DD Form 2807-2 include questions which may be considered sensitive in nature. These forms are the genesis for the personnel record, the medical record, and the security records. The Social Security Number (SSN) is obtained and stored into the initial record (personnel, finance, medical, and security) for proofing, vetting, and maintaining unambiguous person identity for U.S. persons, as outlined in the SSN justification memorandum attached to this collection package. With the SSN being used for person identification in major DoD human resource systems (personnel, finance, and medical); it remains the only unique identifier that ensures accuracy across all the systems to ensure proper data retrieval. The Social Security Number is used to correctly identify the applicant through the accession process and to ensure the proper information is obtained from medical authorities and outside government agencies for verification of employment eligibility. Questioning applicants solicits information which may not readily be divulged by applicants. Certain questions help reveal if there are congenital anomalies which are disqualifying for entrance into the military. Questions concerning family history may reveal a history of active disease(s) which would require additional reporting and precautionary procedures (i.e., drug and alcohol abuse, psychiatric treatment, or other medical conditions that would require additional evaluation). Any positive history of specific medical conditions may disqualify the applicant for entrance into the military service.

12. Respondent Burden and its Labor Costs

Part A: ESTIMATION OF RESPONDENT BURDEN

1) Collection Instrument(s)

[DD2807-2]

- a) Number of Respondents: 423,000
- b) Number of Responses Per Respondent: 1
- c) Number of Total Annual Responses: 423,000
- d) Response Time: 10 minutes
- e) Respondent Burden Hours: 70,500 hours

[DD2807-1]

- a) Number of Respondents: 350,000
- b) Number of Responses Per Respondent: 1
- c) Number of Total Annual Responses: 350,000
- d) Response Time: 10 minutes

- e) Respondent Burden Hours: 58,333 hours
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- 2) Total Submission Burden (Summation or average based on collection)
 - a) Total Number of Respondents: 773,003
 - b) Total Number of Annual Responses: 773,003
 - c) Total Respondent Burden Hours: 128,834 hours

Part B: LABOR COST OF RESPONDENT BURDEN

- 1) Collection Instrument(s)
 - [DD2807-2]
 - a) Number of Total Annual Responses: 423,000
 - b) Response Time: 10 minutes
 - c) Respondent Hourly Wage: \$7.25
 - d) Labor Burden per Response: \$1.21
 - e) Total Labor Burden: \$511,125

- [DD2807-1]
 - a) Number of Total Annual Responses: 350,000
 - b) Response Time: 10 minutes
 - c) Respondent Hourly Wage: \$7.25
 - d) Labor Burden per Response: \$1.21
 - e) Total Labor Burden: \$422,917

- 2) Overall Labor Burden
 - a) Total Number of Annual Responses: 773,000
 - b) Total Labor Burden: \$934,043

The Respondent hourly wage was determined by using the Federal minimum wage as of 2018 from the Department of Labor Wage Website (<https://www.dol.gov/WHD/minimumwage.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) Collection Instrument(s)
 - [DD2807-2]
 - a) Number of Total Annual Responses: 423,000
 - b) Processing Time per Response: .12 hours

- c) Hourly Wage of Worker(s) Processing Responses: \$34.37
- d) Cost to Process Each Response: \$4.12
- e) Total Cost to Process Responses: \$1,744,621

[DD2807-1]

- a) Number of Total Annual Responses: 350,000
- b) Processing Time per Response: .12 hours
- c) Hourly Wage of Worker(s) Processing Responses: \$34.37
- d) Cost to Process Each Response: \$4.12
- e) Total Cost to Process Responses: \$1,443,540

- 2) Overall Labor Burden to the Federal Government
 - a) Total Number of Annual Responses: 773,000
 - b) Total Labor Burden: \$3,188,161

Part B: OPERATIONAL AND MAINTENANCE COSTS

- 1) Cost Categories
 - a) Equipment: \$0
 - b) Printing: \$0
 - c) Postage: \$0
 - d) Software Purchases: \$0
 - e) Licensing Costs: \$0
 - f) Other: \$0
- 2) Total Operational and Maintenance Cost: \$0

Part C: TOTAL COST TO THE FEDERAL GOVERNMENT

- 1) Total Labor Cost to the Federal Government: \$3,188,161
- 2) Total Operational and Maintenance Costs: \$0
- 3) Total Cost to the Federal Government: \$3,188,161

15. Reasons for Change in Burden

There has been no change in burden since the last approval.

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.