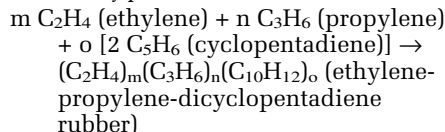


(7) *Stoichiometric material consumption equation, based on process identified as predominant method of production:*



(8) *Tax rate calculated by Petitioner, based on Petitioner's conversion factors for taxable chemicals used in production of substance:*

- (i) *Tax rate:* \$9.64 per ton.
- (ii) *Conversion factors:* 0.64 for ethylene, 0.35 for propylene.
- (9) *Public docket number:* IRS–2025–0136.

**Michael Beker,**

*Senior Counsel (Energy, Credits, and Excise Tax), IRS Office of Chief Counsel.*

[FR Doc. 2025–15563 Filed 8–14–25; 8:45 am]

**BILLING CODE 4830–01–P**

## DEPARTMENT OF VETERANS AFFAIRS

### Privacy Act of 1974; System of Records

**AGENCY:** Veterans Health Administration (VHA), Department of Veterans Affairs (VA).

**ACTION:** Notice of a modified system of records.

**SUMMARY:** Pursuant to the Privacy Act of 1974, notice is hereby given that VA is modifying the system of records titled, “National Patient Databases-VA” (121VA10). VA provides health care services to many Veterans through VHA. During the course of providing health care, VHA collects medical and health information about Veterans under their care. This system is used for planning, distribution, and utilization of resources; monitoring the performance of VHA programs and Veteran population health; and statistical analysis of clinical and administrative support provided within VHA.

**DATES:** Comments on this modified system of records must be received no later than 30 days after date of publication in the **Federal Register**. If no public comment is received during the period allowed for comment or unless otherwise published in the **Federal Register** by VA, the modified system of records will become effective a minimum of 30 days after date of publication in the **Federal Register**. If VA receives public comments, VA shall review the comments to determine whether any changes to the notice are necessary.

**ADDRESSES:** Comments may be submitted through [www.Regulations.gov](http://www.Regulations.gov) or mailed to VA Privacy Service, 810 Vermont Avenue NW, (005X6F), Washington, DC 20420. Comments should indicate that they are submitted in response to “National Patient Databases-VA,” (121VA10). Comments received will be available at [www.regulations.gov](http://www.regulations.gov) for public viewing, inspection or copies.

#### FOR FURTHER INFORMATION CONTACT:

Stephania Griffin, VHA Chief Privacy Officer, 810 Vermont Avenue NW, (10DH03A), Washington, DC 20420, [Stephania.Griffin@va.gov](mailto:Stephania.Griffin@va.gov), or at telephone number 704–245–2492. (Note: This is not a toll-free number.)

**SUPPLEMENTARY INFORMATION:** VA is modifying the system of records by revising the Categories of Individuals Covered by the System; Categories of Records in the System; Records Source Categories; Routine Uses of Records Maintained in the System, including Categories of Users and the Purposes of such Uses; Policies and Practices for Retention and Disposal of Records; Notification Procedure; and Appendix 4. VA is republishing the system of records notice in its entirety.

The Categories of Individuals Covered by the System is being updated to include Veterans and their household members, who are receiving services through the U.S. Department of Housing and Urban Development (HUD) as well as beneficiaries and caregivers. Records are being collected on Veterans and their household members, who are receiving services through HUD in order to meet the requirements of the Consolidated Appropriations Act of 2023, Public Law 117–328, Cleland-Dole Act, Section 309, which requires a system for sharing and reporting data between Homeless Operational Management & Evaluation System and Homeless Management Information System (HMIS).

The Categories of Records in the System is being updated to include, “(9) disease registries including Veteran demographics (e.g., name, age), military information, and screening responses.”

The Records Source Categories is being updated to include beneficiaries, patients, HMIS, Program of Comprehensive Assistance for Family Caregivers and Program of General Caregiver Support Services caregivers.

The Routine Uses of Records Maintained in the System, including Categories of Users and the Purposes of such Uses is amended to add two Routine Uses. Routine Use number 32 is added to state, “To Federal health care providers, such as DoD, for the purpose

of performing quality improvement activities or other health care operations of the recipient Federal health care provider.”

Routine Use number 33 is added to state, “To non-VA entities for the purpose of performing outreach to Veterans regarding VA health care benefits to which the Veterans may be eligible as required by the Promise to Address Comprehensive Toxics Act.”

Policies and Practices for Retention and Disposal of Records is being updated to include the General Records Schedule 3.1 items 050–051.

The Notification Procedures Section is being updated to state “Individuals who wish to be notified if a record in this system of records pertains to them should submit the request following the procedures described in “Record Access Procedures,” above.”

Appendix 4 is being updated to include the following: Clinical Case Registries, Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772; Decision Support System Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772; Status Query and Response Exchange System 44521 Hastings Drive, Ashburn, VA 20147; Veterans Equitable Resource Allocation, Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772. The following is being removed, “Master Person Index- VHA, Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.” National Center for Patient Safety Public Health System name has changed to Public Health National Program Office.

#### Signing Authority

The Senior Agency Official for Privacy, or designee, approved this document and authorized the undersigned to sign and submit the document to the Office of the Federal Register for publication electronically as an official document of the Department of Veterans Affairs. Eddie Pool, Deputy Chief Information Officer, Connectivity and Collaboration Services, Performing the Delegable Duties of the Assistant Secretary for Information and Technology and Chief Information Officer, approved this document on June 13, 2025 for publication.

Dated: 8/13/2025.

**Saurav Devkota,**

*Government Information Specialist, VA Privacy Service, Office of Compliance, Risk and Remediation, Office of Information and Technology, Department of Veterans Affairs.*

#### SYSTEM NAME AND NUMBER:

“National Patient Databases-VA” (121VA10)

**SECURITY CLASSIFICATION:**

Unclassified.

**SYSTEM LOCATION:**

Records are maintained at the Department of Veterans Affairs (VA) medical centers, VA data processing centers, Veterans Integrated Service Networks (VISN), and Office of Information Technology Field Offices. The address for each VA national patient database is listed in VA Appendix 4 at the end of this document. In addition, information from these records or copies of these records may be maintained at VA Enterprise Cloud Data Centers/Amazon Web Services, 1915 Terry Avenue, Seattle, WA 98101.

**SYSTEM MANAGER(S):**

Officials responsible for policies and procedures: Veterans Health Administration (VHA) Chief Informatics Officer, 810 Vermont Avenue NW, (10DH03), Washington, DC 20420. Officials maintaining this system of records: Director, National Data Systems, Austin Information Technology Center, 1615 Woodward Street, Austin, Texas 78772. Telephone number 512-326-6780. (This is not a toll-free number.)

**AUTHORITY FOR MAINTENANCE OF THE SYSTEM:**

38 U.S.C 501.

**PURPOSE(S) OF THE SYSTEM:**

Records in this system are used for statistical analysis to produce various management, workload tracking, and follow-up reports; to track and evaluate the ordering and delivery of equipment, services, and patient care; for the planning, distribution, and utilization of resources; to monitor the performance of VISNs and/or outside VA as relevant; to allocate clinical and administrative support to patient medical care; to study, monitor, and report epidemiological trends and disease incidence; for VA's extensive research programs in accordance with VA policy; to assist in workload allocation for patient treatment services including provider panel management, nursing care, clinic appointments, surgery, prescription processing, diagnostic, and therapeutic procedures; to plan and schedule training activities for employees; for audits, reviews, and investigations conducted by the network directors office and VA Central Office; for quality assurance audits, reviews, and investigations; for law enforcement investigations; and for personnel management, evaluation, employee ratings, and performance evaluations. Pursuant to Executive Order 12862 and VHA Customer Service Standards

Directive, survey data in this system will be used to measure and monitor national, VISN, and facility-level performance on the VHA Veteran Health Care Service Standards (VHSS). The VHSS are designed to measure levels of patient satisfaction in areas that patients have defined as important in receiving quality, patient-centered, health care. Results of the survey data analysis are shared throughout the VHA system. External Peer Review Program (EPRP) data in this system will be used to provide medical centers and outpatient clinics with diagnosis and procedure-specific quality of care information. EPRP is a contracted review of care, specifically designated to collect data to be used to improve the quality of care. The Veteran homeless records and information will be used for case management in addition to statistical analysis to produce various management, workload tracking, and follow-up reports; and to track and evaluate the goal of ending Veteran homelessness. The Public Health National Program Office System data will be available to VA personnel, Federal agencies, and state and local health departments for the monitoring of infections, emerging pathogens, and environmental issues of interest that might reasonably affect the health of the public.

**CATEGORIES OF INDIVIDUALS COVERED BY THE SYSTEM:**

Records include information for all individuals that are: (1) receiving health care from VHA; (2) providing health care to individuals for VHA; (3) whose data is provided to VA clinical registries, including but not limited to the VA Central Cancer Registry; or (4) Veterans and their household members, who are receiving services through the Department of Housing and Urban Development (HUD) in order to meet the requirements of the Consolidated Appropriations Act of 2023, Public Law 117-328, Cleland-Dole Act, Section 309, which requires a system for sharing and reporting data between Homeless Operational Management & Evaluation System and Homeless Management Information System (HMIS). Individuals encompass Veterans and their beneficiaries, caregivers and immediate family members; members of the Armed Services; current and former employees, trainees, contractors, subcontractors, consultants, and volunteers; and other individuals working collaboratively with VA.

**CATEGORIES OF RECORDS IN THE SYSTEM:**

Records include information and health information related to: (1) patient

medical record abstract information including, but not limited to, information from "Patient Medical Record-VA" (24VA10A7); (2) identifying information (*e.g.*, name, birth date, death date, admission date, discharge date, gender, Social Security Number, or taxpayer identification number), address information (*e.g.*, home and/or mailing address(s), home telephone number, emergency contact information such as name, address, telephone number and relationship), prosthetic and sensory aid serial numbers, medical record numbers, integration control numbers, information related to medical examination or treatment (*e.g.*, location of VA medical facility providing examination or treatment, treatment dates or medical conditions treated or noted on examination), information related to military service and status; (3) medical benefit and eligibility information; (4) patient workload data such as admissions, discharges and outpatient visits, and resource utilization such as laboratory tests and x-rays; (5) Patient Satisfaction Survey Data which include questions and responses; (6) EPRP data capture; (7) homelessness and prevention services provided to Veteran and household members which includes electronic information from all Veteran homeless programs and external sources; (8) clinically oriented information associated with MyHealtheVet such as secure messages; and (9) disease registries including Veteran demographics (*e.g.*, name, age), military information, and screening responses.

**RECORD SOURCE CATEGORIES:**

Records in this system are provided by Veterans and their beneficiaries; patients; VA employees; VA computer systems; Veterans Health Information Systems and Technology Architecture; VA medical centers; VA Health Eligibility Center; VA program offices; VISNs; Austin Information Technology Center; the Food and Drug Administration (FDA); Department of Defense (DoD); HUD (*i.e.*, Homeless Management Information System); Program of Comprehensive Assistance for Family Caregivers and Program of General Caregiver Support Services caregivers; Survey of Healthcare Experiences of Patients; EPRP; National Cancer Institute (NCI) and/or their designee; a state cancer or tumor registry; "Patient Medical Records-VA" (24VA10A7); "National Prosthetics Patient Database-VA" (33VA10); "Income Verification Records-VA" (89VA10); VA Veterans Benefits Administration automated record

systems (including the "Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA" (58VA21/22/28)); and subsequent iterations of those systems of records.

**ROUTINE USES OF RECORDS MAINTAINED IN THE SYSTEM, INCLUDING CATEGORIES OF USERS AND THE PURPOSES OF SUCH USES:**

*Note:* To the extent that records contained in the system include information protected by the HIPAA Privacy Rule and 38 U.S.C. 7332, that information cannot be disclosed under a routine use unless there is also specific disclosure authority in both provisions.

1. To a Federal, state, local, territorial, tribal, or foreign law enforcement authority or other appropriate entity charged with the responsibility of investigating or prosecuting a violation or potential violation of law, whether civil, criminal, or regulatory in nature, or charged with enforcing or implementing such law, provided that the disclosure is limited to information that, either alone or in conjunction with other information, indicates such a violation or potential violation. A disclosure of information about Veterans or their dependents from VA claims files under this routine use must also comply with the requirements of 38 U.S.C. 5701(f).

2. To any source from which additional information is requested (to the extent necessary to identify the individual, inform the source of the purpose(s) of the request and identify the type of information requested), when necessary to obtain or provide information relevant to an individual's eligibility, care history or other benefits across different Federal, state or local, public health, health care or program benefit agencies that improve the quality and safety of health care for Veterans.

3. To a Federal agency in the executive, legislative, or judicial branch; state and local government; or the Washington, DC Government, in response to its request or at the initiation of VA, in connection with disease tracking, patient outcomes, or other health information required for program accountability.

4. To the National Archives and Records Administration (NARA) in records management inspections conducted under 44 U.S.C. 2904 and 2906, or other functions authorized by laws and policies governing NARA operations and VA records management responsibilities.

5. To the Department of Justice (DoJ), or in a proceeding before a court, adjudicative body, or other

administrative body before which VA is authorized to appear, when any of the following is a party to such proceedings or has an interest in such proceedings, and VA determines that use of such records is relevant and necessary to the proceedings:

- (a) VA or any component thereof;
- (b) A VA employee in their official capacity;
- (c) A VA employee in their individual capacity where DoJ has agreed to represent the employee; or
- (d) The United States, where VA determines that litigation is likely to affect the agency or any of its components.

6. To a Federal agency, a state or local government licensing board, the Federation of State Medical Boards, or a similar non-governmental entity that maintains records concerning individuals' employment histories or concerning the issuance, retention or revocation of licenses, certifications or registration necessary to practice an occupation, profession, or specialty, to inform such non-governmental entities about the health care practices of a terminated, resigned, or retired health care employee whose professional health care activity so significantly failed to conform to generally accepted standards of professional medical practice as to raise reasonable concern for the health and safety of patients in the private sector or from another Federal agency. These records may also be disclosed as part of an ongoing computer matching program to accomplish these purposes.

7. To a former VA employee or contractor, as well as the authorized representative of a current or former employee or contractor of VA, in connection with or in consideration of reporting that the individual's professional health care activity so significantly failed to conform to generally accepted standards of professional medical practice as to raise reasonable concern for the health and safety of patients, to a Federal agency, a State or local government licensing board, or the Federation of State Medical Boards or a similar non-governmental entity that maintains records concerning individuals' employment histories or concerning the issuance, retention, or revocation of licenses, certifications, or registration necessary to practice an occupation, profession or specialty.

8. To survey teams of the Joint Commission on Accreditation of Healthcare Organizations, College of American Pathologists, American Association of Blood Banks, and similar national accreditation agencies or

boards with which VA has a contract or agreement to conduct such reviews, as relevant and necessary for the purpose of program review or the seeking of accreditation or certification.

9. To a national certifying body that has the authority to make decisions concerning the issuance, retention or revocation of licenses, certifications or registrations required to practice a health care profession, when requested in writing by an investigator or supervisory official of the national certifying body for the purpose of making a decision concerning the issuance, retention or revocation of the license, certification or registration of a named health care professional.

10. To officials of labor organizations recognized under 5 U.S.C. Ch. 71 provided that the disclosure is limited to information identified in 5 U.S.C. 7114(b)(4) that is relevant and necessary to their duties of exclusive representation concerning personnel policies, practices, and matters affecting working conditions.

11. To the representative of an employee of all notices, determinations, decisions or other written communications issued to the employee in connection with an examination ordered by VA under medical evaluation (formerly fitness-for duty) examination procedures or Department-filed disability retirement procedures.

12. To the Merit Systems Protection Board in connection with appeals, special studies of the civil service and other merit systems, review of rules and regulations, investigation of alleged or possible prohibited personnel practices, and such other functions promulgated in 5 U.S.C. 1205 and 1206, or as authorized by law.

13. To the Equal Employment Opportunity Commission in connection with investigations of alleged or possible discriminatory practices, examination of Federal affirmative employment programs, or other functions of the Commission as authorized by law.

14. To the Federal Labor Relations Authority in connection with the investigation and resolution of allegations of unfair labor practices, the resolution of exceptions to arbitration awards when a question of material fact is raised, matters before the Federal Service Impasses Panel, and the investigation of representation petitions and the conduct or supervision of representation elections.

15. To non-Federal research facilities for research purposes determined to be necessary and proper when approved in accordance with VA policy; disclosure of medical record data, excluding name

and address, unless name and address are furnished by the requester.

16. To: (1) a Federal department or agency, at the written request of the head or designee of that agency; or (2) directly to a contractor or subcontractor of a Federal department or agency, for the purpose of conducting Federal research necessary to accomplish a statutory purpose of an agency, provided that the disclosure is limited to the names and addresses of present or former members of the Armed Services or their beneficiaries, the records will not be used for any purpose other than that stated in the request, and the organization is aware of the penalty provision of 38 U.S.C. 5701(f). When disclosure of this information is made directly to a contractor, VA may impose applicable conditions on the department, agency and/or contractor to insure the appropriateness of the disclosure to the contractor.

17. To contractors, grantees, experts, consultants, students, and others performing or working on a contract, service, grant, cooperative agreement, or other assignment for VA, when reasonably necessary to accomplish an agency function related to the records.

18. To a Member of Congress or staff acting upon the Member's behalf when the Member or staff requests the information on behalf of, and at the request of, the individual who is the subject of the record.

19. To a Federal agency for the purpose of conducting research and data analysis to perform a statutory purpose of that Federal agency upon the prior written request of that agency.

20. To another Federal agency for the purpose of matching and acquiring information held by that agency for VHA for the purposes stated for this system of records, provided that disclosure is of limited individual identification information.

21. To appropriate agencies, entities and persons when (a) VA suspects or has confirmed that there has been a breach of the system of records; (b) VA has determined that as a result of the suspected or confirmed breach there is a risk of harm to individuals, VA (including its information systems, programs and operations), the Federal Government or national security; and (c) the disclosure made to such agencies, entities, and persons is reasonably necessary to assist in connection with VA's efforts to respond to the suspected or confirmed breach or to prevent, minimize or remedy such harm.

22. To the general public, on VA's own initiative, via an internet website, Primary Care Management Module information, including the names of its

providers, provider panel sizes, and reports on provider performance measures of quality when approved in accordance with VA policy.

23. To other Federal agencies to assist such agencies in preventing and detecting possible fraud or abuse by individuals in their operations and programs.

24. To a nonprofit organization if the release is directly connected with the conduct of programs and the utilization of benefits under title 38, provided that the disclosure is limited to the names and addresses of present or former members of the Armed Services or their beneficiaries, the records will not be used for any purpose other than that stated in the request, and the organization is aware of the penalty provision of 38 U.S.C. 5701(f).

25. To HUD, including demographic information, for the purpose of reducing homelessness among Veterans by implementing the Federal Strategic Plan to Prevent and End Homelessness and by evaluating and monitoring the HUD-VA Supported Housing program.

26. To the FDA, Department of Health and Human Services concerning an adverse drug reaction of a patient, for the purpose of quality of care management, including detection, treatment, monitoring, reporting, analysis and follow-up actions relating to adverse drug reactions.

27. To an organization with whom VA has a documented partnership, arrangement or agreement (e.g., Health Information Exchange, Healthcare internet Service Provider, Direct and CommonWell Health Alliance Network), for the purpose of identifying and correlating patients. This information may include Veteran identifiers and demographic information (e.g., name, Social Security Number, address, date of birth).

28. To the Centers for Disease Control and Prevention and/or their designee or other Federal or state public health authorities 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.

29. 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 (a) responding to a suspected or confirmed breach; or (b) 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.

30. 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.

31. To the NCI and/or their designee and/or a state cancer or tumor registry in response to its request or at the initiation of VA for the purpose of population-based activities to improve health and disease management.

32. To Federal health care providers, such as DoD, for the purpose of performing quality improvement activities or other health care operations of the recipient Federal health care provider.

33. To non-VA entities for the purpose of performing outreach to Veterans regarding VA health care benefits to which the Veterans may be eligible as required by the Promise to Address Comprehensive Toxics Act.

#### **POLICIES AND PRACTICES FOR STORAGE OF RECORDS:**

Records are maintained in electronic storage media including magnetic tape, disk, laser optical media, and the VA Enterprise Cloud.

#### **POLICIES AND PRACTICES FOR RETRIEVAL OF RECORDS:**

Records are retrieved by name, Social Security Number, or other assigned identifiers of the individuals on whom they are maintained.

#### **POLICIES AND PRACTICES FOR RETENTION AND DISPOSAL OF RECORDS:**

Records in this system are retained and disposed of in accordance with the schedule approved by the Archivist of the United States, General Records Schedule (GRS) 3.1 items 050-051 and GRS 5.2, item 020.

#### **ADMINISTRATIVE, TECHNICAL AND PHYSICAL SAFEGUARDS:**

1. Access to and use of national patient databases are limited to those persons whose official duties require such access, and VA has established security procedures to ensure that access is appropriately limited. Information security officers and system data stewards review and authorize data access requests. VA regulates data

access with security software that authenticates users and requires individually unique codes and passwords. VA provides information security training to all staff and instructs staff on the responsibility each person has for safeguarding data confidentiality.

2. VA maintains Business Associate Agreements and Non-Disclosure Agreements with contracted resources in order to maintain the confidentiality of the information.

3. Physical access to computer rooms housing national patient databases are restricted to authorized staff and protected by a variety of security devices. Unauthorized employees, contractors, and other staff are not allowed in computer rooms. The Federal Protective Service or other security personnel provide physical security for the buildings housing computer rooms and data centers.

4. Data transmissions between operational systems and national patient databases maintained by this system of record are protected by state-of-the-art telecommunication software and hardware. This may include firewalls, encryption and other security measures necessary to safeguard data as it travels across the VA Wide Area Network. Data may be transmitted via a password

protected spreadsheet and placed on the secured SharePoint Web portal by the user that has been provided access to their secure file. Data can only be accessed by authorized personnel from each facility within the Polytrauma System of Care and the Physical Medicine and Rehabilitation Program Office.

5. In most cases, copies of backup computer files are maintained at off-site locations.

6. VA Enterprise Cloud data storage conforms to security protocols as stipulated in VA Directives 6500 and 6517. Access control standards are stipulated in specific agreements with Cloud vendors to restrict and monitor access.

#### RECORD ACCESS PROCEDURE:

Individuals seeking information on the existence and content of records in this system pertaining to them should contact the system manager in writing as indicated above, or may write or visit the VA facility location where they normally receive their care. A request for access to records must contain the requester's full name, address and telephone number, be signed by the requester and describe the records sought in sufficient detail to enable VA personnel to locate them with a reasonable amount of effort.

#### CONTESTING RECORD PROCEDURES:

Individuals seeking to contest or amend records in this system pertaining to them should contact the system manager in writing as indicated above, or may write or visit the VA facility location where they normally receive their care. A request to contest or amend records must state clearly and concisely what record is being contested, the reasons for contesting it, and the proposed amendment to the record.

#### NOTIFICATION PROCEDURE:

Individuals who wish to be notified if a record in this system of records pertains to them should submit the request following the procedures described in "Record Access Procedures," above.

#### EXEMPTIONS PROMULGATED FOR THE SYSTEM:

None.

#### HISTORY:

69 FR 18436 (April 7, 2004); 73 FR 16103 (March 26, 2008); 75 FR 72873 (November 26, 2010); 77 FR 27863 (May 11, 2012); 79 FR 8245 (February 11, 2014); 83 FR 6094 (February 12, 2018); 88 FR 22112 (April 12, 2023).

#### VA Appendix 4

Database name	Location
Addiction Severity Index (ASI) .....	VA Medical Center, 7180 Highland Drive, Pittsburgh, PA 15206.
Bidirectional Health Information Exchange (BHIE).	SunGard, 1500 Spring Garden Street, Philadelphia, PA 19130.
Breast Care Registry .....	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
VA Clinical Assessment, Reporting and Tracking (CART) Program.	Digital Realty, 350 E Cermak Road, Main Building 7th Transport RM, Chicago, IL 60616, Evoque Data Centers, 11830 Webb Chapel Road, Suite 200, Dallas, TX 75234.
Clinical Case Registries .....	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Consolidated Mail Outpatient Pharmacy (CMOP) Centralized Database System.	Southwest CMOP, 3675 East Britannia Drive, Tucson, AZ 85706.
Converged Registries Solution (CRS).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Cruetzfelet-Jakob Disease Lookback Dataset (CJDL).	Cincinnati VA Medical Center, 3200 Vine Street, Cincinnati, OH 45220.
Decision Support System (DSS) ....	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Defense and Veterans Eye Injury Registry (DVEIR).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Dental Encounter System (DES) ....	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Eastern Pacemaker Surveillance Center Database.	Washington, DC VA Medical Center, 50 Irving Street NW, Washington, DC 20422.
Emerging Pathogens Initiative (EPI)	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Federal Health Information Exchange (FHIE).	SunGard, 1500 Spring Garden Street, Philadelphia, PA 19130.
Financial Clinical Data Mart (FCDM).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Former Prisoner of War Statistical Tracking System.	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Functional Status and Outcome Database (FSOD).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Home Based Primary Care (HBC) ..	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Homeless Operational, Management and Evaluation System (HOMES).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Homeless Veterans Registry .....	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Implant Tracking Registry .....	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.

Database name	Location
Inpatient Evaluation Centers (IPEC) Legionella Case Report Module.	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Mammography Quality Standards (MQS) VA.	Durham VA Medical Center, 508 Fulton Street, Durham, NC 27705.
Medical Software as a Service (SAS) File Medical District Plan- ning (MDP) (Medical District Initia- ted Peer Review Organization (MEDIPRO)).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Multiple Sclerosis Surveillance Reg- istry (MSSR).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Public Health National Program Of- fice (PHNPO).	Palo Alto VA Medical Center, 3801 Miranda Avenue, Palo Alto, CA 94304.
National Mental Health Database System (NMHDS).	VA Medical Center, 7180 Highland Drive, Pittsburgh, PA 15206.
National Medical Information Sys- tem (NMIS).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
National Survey of Veterans (NSV)	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Patient Assessment File (PAF) .....	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Pharmacy Benefits Management (PBM).	Edward Hines Junior Hospital VA Medical Center, 5000 Avenue, Hines, IL 60141.
Remote Order Entry System (ROES).	VA Denver Regional Office, 155 Van Gordon Street, Lakewood, CO 80228–1709.
Resident Assessment Instrument/ Minimum Data Set (RAI/MDS).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Status Query and Response Ex- change System (SQUARES).	Salesforce, 44521 Hastings Drive, Ashburn, VA 20147.
Traumatic Brain Injury (TBI) Reg- istry.	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
VA National Clozapine Coordinating Center (NCCC) Registry.	Dallas VA Medical Center, 4500 South Lancaster Road, Dallas, TX 75216.
VA Surgical Quality Improvement Program (VASQIP).	VA Central Office (VACO), National Surgery Office (11SURG), 810 Vermont Avenue NW, Washington, DC 20420.
VA Vital Status File (VSF) .....	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Veterans Administration Central Cancer Registry (VACCR).	Washington, DC VA Medical Center, 50 Irving Street NW, Washington, DC 20422.
Veterans Equitable Resource Allo- cation (VERA).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Veterans Health Administration Support Service Center (VSSC).	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
Veterans Integrated Registry Plat- form.	Austin Information Technology Center, 1615 Woodward Street, Austin, TX 78772.
War Related Illness and Injury Study Center (WRIISC) Database.	Palo Alto VA Medical Center, 3801 Miranda Avenue, Mail Code 151Y, Palo Alto, CA 94304.

[FR Doc. 2025–15587 Filed 8–14–25; 8:45 am]

BILLING CODE 8320–01–P

**DEPARTMENT OF VETERANS  
AFFAIRS****Privacy Act of 1974; System of  
Records**

**AGENCY:** Veterans Health Administration (VHA), Department of Veterans Affairs (VA).

**ACTION:** Notice of a modified system of records.

**SUMMARY:** Pursuant to the Privacy Act of 1974, notice is hereby given that the VA is modifying the system of records titled, “Veteran, Patient, Employee, and Volunteer Research and Development Project Records-VA” (34VA10). This system of records is used to determine eligibility for research funding, to determine handling of intellectual

properties, to manage proposed and/or approved research endeavors, and to evaluate the research and development program. This system may also be used for data analysis to address specific questions and gain generalizable knowledge and deepen understanding of a topic or issue.

**DATES:** Comments on this modified system of records must be received no later than 30 days after date of publication in the **Federal Register**. If no public comment is received during the period allowed for comment or unless otherwise published in the **Federal Register** by VA, the new system of records will become effective a minimum of 30 days after date of publication in the **Federal Register**. If VA receives public comments, VA shall review the comments to determine whether any changes to the notice are necessary.

**ADDRESSES:** Comments may be submitted through [www.Regulations.gov](http://www.Regulations.gov) or mailed to VA Privacy Service, 810 Vermont Avenue NW, (005X6F), Washington, DC 20420. Comments should indicate that they are submitted in response to “Veteran, Patient, Employee, and Volunteer Research and Development Project Records-VA” (34VA10). Comments received will be available at [regulations.gov](http://regulations.gov) for public viewing, inspection or copies.

**FOR FURTHER INFORMATION CONTACT:** Stephanie Griffin, VHA Chief Privacy Officer, 810 Vermont Avenue NW, (10DH03A), Washington, DC 20420, [stephania.griffin@va.gov](mailto:stephania.griffin@va.gov), telephone number 704–245–2492. (Note: This is not a toll-free number).

**SUPPLEMENTARY INFORMATION:** VA is modifying this system of records by revising the System Location; System Manager; Records Source Categories; Routine Uses of Records Maintained in