

agencies, entities, and persons is reasonably necessary to assist in connection with GSA's efforts to respond to the suspected or confirmed breach or to prevent, minimize, or remedy such harm.

i. To another Federal agency or Federal entity, when GSA determines that information from this system of records is reasonably necessary to assist the recipient agency or entity in (1) responding to a suspected or confirmed breach or (2) 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.

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

All records are stored electronically in a database. User account information is encrypted in transit and at rest.

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

The user's email address and phone number, which are part of LOA1 account information, can be retrieved using *Login.gov* developed software with system access. When the user provides their password or recovery code, the system retrieves that user's LOA1 account information (email, password, and phone number) or LOA3 account information (full name, date of birth, home address and Social Security Number) using a search of the email addresses in the system. However, each user's LOA3 account information is encrypted such that neither the system nor system operators can retrieve it without the user providing their password or recovery code.

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

System records will be retained and disposed of in accordance with NARA's General Records Schedule (GRS) Transmittal 26, section 3.2 "System access records" covering user profiles, log-in files, password files, audit trail files and extracts, system usage files, and cost-back files used to assess charges for system use. The guidance instructs, "Destroy 6 years after password is altered or user account is terminated, but longer retention is authorized if required for business use."

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

Records in the system are protected from unauthorized access and misuse through various administrative, technical and physical security

measures. Technical security measures within GSA include restrictions on computer access to authorized individuals, required use of strong passwords that are frequently changed and regular review of security procedures and best practices to enhance security. Access to the *Login.gov* database is maintained behind an industry-standard firewall and information in the database is encrypted. As noted above, neither the system nor the system operators can retrieve the user's LOA3 account information without the user supplying a password or recovery code.

**RECORD ACCESS PROCEDURES:**

Individuals or users wishing to access their own records may do so by providing their email address, password, and a multi-factor authentication token (e.g. a one-time password or code sent to the user's phone) to *Login.gov*, or by contacting the system administrator at the above address.

**CONTESTING RECORD PROCEDURES:**

Users can modify, or amend, any of their user account information by accessing it in their account. Users that want access to partner agency records, or to contest the contents of those records, need to make a request with that agency.

**NOTIFICATION PROCEDURE:**

Users create their account information and, thereafter, access it by providing their email address, password, and a multi-factor authentication token (e.g. a one-time password or code sent to the user's phone). Inquiries can be made via the Web site at <https://Login.gov/> or at the above address under 'System Manager and Address'.

**EXEMPTIONS PROMULGATED FOR THE SYSTEM:**

None.

**HISTORY:**

This notice replaces the previously published notice at 81 FR 57912, on August 24, 2016.

[FR Doc. 2017-01174 Filed 1-18-17; 8:45 am]

**BILLING CODE 6820-34-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[60Day-17-0739; Docket No. CDC-2016-0114]

**Proposed Data Collection Submitted for Public Comment and Recommendations**

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

**ACTION:** Notice with comment period.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC), as part of its continuing efforts to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuous information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comments on the CDC Chronic Disease Management Information System (CDMIS). The Management Information System is a central repository for the work plans of state oral health programs. This includes their goals, objectives, performance milestones, indicators, oral health program performance activities and budget information.

**DATES:** Written comments must be received on or before March 20, 2017.

**ADDRESSES:** You may submit comments, identified by Docket No. CDC-2016-0114 by any of the following methods:

- *Federal eRulemaking Portal: Regulations.gov.* Follow the instructions for submitting comments.
- *Mail:* Leroy A. Richardson, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE., MS-D74, Atlanta, Georgia 30329.

*Instructions:* All submissions received must include the agency name and Docket Number. All relevant comments received will be posted without change to *Regulations.gov*, including any personal information provided. For access to the docket to read background documents or comments received, go to *Regulations.gov*.

*Please note:* All public comments should be submitted through the Federal eRulemaking portal (*Regulations.gov*) or by U.S. mail to the address listed above.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of

the information collection plan and instruments, contact the Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE., MS-D74, Atlanta, Georgia 30329; phone: 404-639-7570; Email: omb@cdc.gov.

**SUPPLEMENTARY INFORMATION:** Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

*Comments are invited on:* (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; to develop, acquire, install and utilize technology

and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information; and to transmit or otherwise disclose the information.

**Proposed Project**

CDC Oral Health Management Information System (OMB Control Number 0920-0739, expires 5/31/2017)—Revision—Division of Oral Health (DOH), National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

The CDC Division of Oral Health (DOH) works with state health departments to improve the oral health of the nation. Targeted efforts include building and/or maintaining effective public health capacity for the implementation, evaluation, and dissemination of evidence-based practices in oral disease prevention and advancement of oral health. Through a cooperative agreement program (Program Announcement DP13-1307), DOH has provided funding to 21 states over a five-year period, in which 3 are basic level awardees and 18 are enhanced level. The current cooperative agreement went into effect in September 2013 and builds on previously funded collaborations involving DOH and state programs.

DOH is currently approved to collect annual progress and activity reports from state-based oral health programs. Historically, an electronic reporting system has been in place since 2007 and was enhanced in 2008 to capture information about grantees' success stories. This system, formerly known as the Management Overview for Logistics, Analysis, and Reporting (MOLAR)

system was retired in 2013-14. The new cooperative agreement, DP13-1307, was transitioned to the enhanced CDMIS platform in Fiscal Year (FY) 2013 to align with the CDC Funding Opportunity Announcement (FOA) redesign required for all domestic, non-research FOAs. The redesign emphasized evaluation, performance measurement, and outcomes. The information collected in CDMIS improved CDC's ability to disseminate information about successful public health approaches that can be replicated or adapted for use in other states.

The initial data for DP13-1307 was entered into CDMIS when the cooperative agreement began. Subsequently, only annual progress reports are required for basic and enhanced level awardees. This has resulted in no changes in how the information is collected as well as a reduction in the burden of information required by awardees. The estimated burden for system maintenance and annual reporting is three hours for basic level awardees and nine hours for enhanced level.

The revised method provides a more accurate depiction of burden per respondent in comparison to the method presented in previous OMB requests for approval, which were based on a long-term average burden per response. Even though reports will be submitted to CDC annually, states may enter updates into the MIS at any time. CDC uses all information collected to monitor awardee activities and to provide any technical assistance or follow-up support that may be needed.

OMB approval is requested for three years. Participation in the progress reporting system is a condition of the award for all funded state oral health programs.

All information will be collected electronically and there are no costs to respondents other than their time. The total estimated annualized burden hours are 171.

**ESTIMATED ANNUALIZED BURDEN OF HOURS**

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)	Total burden (in hrs.)
Program Awardees Basic Level .....	Annual Progress Report .....	3	1	3	9
Program Awardees Enhanced Level	Annual Progress Report .....	18	1	9	162
<b>Total .....</b>	.....	.....	.....	.....	<b>171</b>

**Leroy A. Richardson,**  
Chief, Information Collection Review, Office  
Office of Scientific Integrity, Office of the  
Associate Director for Science Office of the  
Director, Centers for Disease Control and  
Prevention.

[FR Doc. 2017-01185 Filed 1-18-17; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Designation of a Class of Employees for Addition to the Special Exposure Cohort

**AGENCY:** National Institute for  
Occupational Safety and Health  
(NIOSH), Centers for Disease Control  
and Prevention, Department of Health  
and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** HHS gives notice of a  
decision to designate a class of  
employees from the Pantex Plant in  
Amarillo, Texas, as an addition to the  
Special Exposure Cohort (SEC) under  
the Energy Employees Occupational  
Illness Compensation Program Act of  
2000.

**FOR FURTHER INFORMATION CONTACT:**

Stuart L. Hinnefeld, Director, Division  
of Compensation Analysis and Support,  
NIOSH, 1090 Tusculum Avenue,  
MS C-46, Cincinnati, OH 45226-1938,  
Telephone 1-877-222-7570.  
Information requests can also be  
submitted by email to [DCAS@CDC.GOV](mailto:DCAS@CDC.GOV).

**SUPPLEMENTARY INFORMATION:**

**Authority:** 42 U.S.C. 7384q(b). 42 U.S.C.  
7384l(14)(C).

On January 4, 2017, as provided for  
under 42 U.S.C. 7384l(14)(C), the  
Secretary of HHS designated the  
following class of employees as an  
addition to the SEC:

All employees of the Department of  
Energy, its predecessor agencies, and their  
contractors and subcontractors who worked  
at the Pantex Plant in Amarillo, Texas,  
during the period from January 1, 1951,  
through December 31, 1957, for a number of  
work days aggregating at least 250 work days,  
occurring either solely under this  
employment or in combination with work  
days within the parameters established for  
one or more other classes of employees in the  
Special Exposure Cohort.

This designation will become  
effective on February 3, 2017, unless  
Congress provides otherwise prior to the  
effective date. After this effective date,  
HHS will publish a notice in the  
**Federal Register** reporting the addition  
of this class to the SEC or the result of  
any provision by Congress regarding the

decision by HHS to add the class to the  
SEC.

**Frank Hearl**

Chief of Staff, National Institute for  
Occupational Safety and Health.

[FR Doc. 2017-01109 Filed 1-18-17; 8:45 am]

BILLING CODE 4163-19-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### National Center for Health Statistics (NCHS) Confidentiality Pledge Revision Notice

**AGENCY:** Centers for Disease Control and  
Prevention (CDC), Department of Health  
and Human Services (HHS).

**ACTION:** General notice—notice of  
revision of confidentiality pledges  
under the Confidential Information  
Protection and Statistical Efficiency Act.

**SUMMARY:** Under 44 U.S.C. 3506(e) and  
44 U.S.C. 3501, CDC's National Center  
for Health Statistics (NCHS) is  
announcing revisions to the  
confidentiality pledge(s) it provides to  
its respondents under the Confidential  
Information Protection and Statistical  
Efficiency Act (44 U.S.C. 3501)  
(CIPSEA). These revisions are required  
by the passage and implementation of  
provisions of the Federal Cybersecurity  
Enhancement Act of 2015 (H.R. 2029,  
Division N, Title II, Subtitle B, Sec.  
223), which permit and require the  
Secretary of the Department of  
Homeland Security (DHS) to provide  
Federal civilian agencies' information  
technology systems with cybersecurity  
protection for their Internet traffic. More  
details on this announcement are  
presented in the **SUPPLEMENTARY  
INFORMATION** section below.

**DATES:** These revisions become effective  
January 19, 2017.

**ADDRESSES:** Questions about this notice  
should be addressed to the Information  
Collection Review Office, Centers for  
Disease Control and Prevention, 1600  
Clifton Road NE., MS-D74, Atlanta,  
Georgia 30329.

**FOR FURTHER INFORMATION CONTACT:**

Leroy A. Richardson by telephone at  
404-639-7570 (this is not a toll-free  
number); by email [omb@cdc.gov](mailto:omb@cdc.gov), or by  
mail Information Collection Review  
Office, Centers for Disease Control and  
Prevention, 1600 Clifton Road NE., MS-  
D74, Atlanta, Georgia 30329. Because of  
delays in the receipt of regular mail  
related to security screening,  
respondents are encouraged to use  
electronic communications.

**SUPPLEMENTARY INFORMATION:** Federal  
statistics provide key information that  
the Nation uses to measure its  
performance and make informed  
choices about budgets, employment,  
health, investments, taxes, and a host of  
other significant topics. The  
overwhelming majority of Federal  
surveys are conducted on a voluntary  
basis. Respondents, ranging from  
businesses to households to institutions,  
may choose whether or not to provide  
the requested information. Many of the  
most valuable Federal statistics come  
from surveys that ask for highly  
sensitive information such as  
proprietary business data from  
companies or particularly personal  
information or practices from  
individuals. The CDC's National Center  
for Health Statistics (NCHS) protects all  
data collected under its authority under  
the confidentiality provisions of section  
308(d) of the Public Health Service Act  
(42 U.S.C. 242m). Strong and trusted  
confidentiality and exclusively  
statistical use pledges under the  
Confidential Information Protection and  
Statistical Efficiency Act (CIPSEA) and  
similar statistical confidentiality  
pledges are effective and necessary in  
honoring the trust that businesses,  
individuals, and institutions, by their  
responses, place in statistical agencies.

Under CIPSEA and similar statistical  
confidentiality protection statutes, many  
Federal statistical agencies make  
statutory pledges that the information  
respondents provide will be seen only  
by statistical agency personnel or their  
sworn agents, and will be used only for  
statistical purposes. CIPSEA and similar  
statutes protect the confidentiality of  
information that agencies collect solely  
for statistical purposes and under a  
pledge of confidentiality. These acts  
protect such statistical information from  
administrative, law enforcement,  
taxation, regulatory, or any other non-  
statistical use and immunize the  
information submitted to statistical  
agencies from legal process. Moreover,  
many of these statutes carry criminal  
penalties of a Class E felony (fines up to  
\$250,000, or up to five years in prison,  
or both) for conviction of a knowing and  
willful unauthorized disclosure of  
covered information.

As part of the Consolidated  
Appropriations Act for Fiscal Year 2016  
signed on December 17, 2015, the  
Congress included the Federal  
Cybersecurity Enhancement Act of 2015  
(H.R. 2029, Division N, Title II, Subtitle  
B, Sec. 223). This Act, among other  
provisions, permits and requires the  
Secretary of the Department of  
Homeland Security (DHS) to provide  
Federal civilian agencies' information