

and Special Veterans Benefits, (60–0103)

B. State agencies expected to participate using non-federal systems of records are:

1. Alabama Department of Human Resources
2. Alabama Medicaid Agency
3. Alaska Department of Health & Social Services
4. Arizona Department of Economic Security
5. Arkansas Department of Human Services
6. California Department of Social Services
7. Colorado Department of Human Services
8. Connecticut Department of Social Services
9. Delaware Department of Health & Social Services
10. D.C. Department of Human Services
11. Florida Department of Children & Families
12. Georgia Department of Human Resources
13. Hawaii Department of Human Services
14. Idaho Department of Health/Welfare
15. Illinois Department of Human Services
16. Indiana Family & Social Services Administration
17. Iowa Department of Human Services
18. Kansas Department of Social/Rehab Services
19. Kentucky Cabinet for Health and Family Services
20. Louisiana Department of Health & Hospitals
21. Louisiana Department of Children and Family Services
22. Maine Department of Human Services
23. Maryland Department of Human Services
24. Massachusetts Department of Transitional Assistance
25. Michigan Department of Human Services
26. Minnesota Department of Human Services
27. Mississippi Department of Human Services
28. Mississippi Division of Medicaid
29. Missouri Department of Social Services
30. Montana Department of Public Health & Human Services
31. Nebraska Department of Health & Human Services
32. Nevada Department of Health and Human Services
33. New Hampshire Department of Health & Human Services
34. New Jersey Department of Human Services
35. New Mexico Human Services Department
36. New York Office of Temporary & Disability Assistance
37. North Carolina Department of Health & Human Services
38. North Dakota Department of Human Services
39. Ohio Department of Job and Family Services
40. Oklahoma Department of Human Services
41. Oregon Department of Human Resources
42. Pennsylvania Department of Public Welfare
43. Rhode Island Department of Human Services
44. South Carolina Department of Social Services
45. South Dakota Department of Social Services
46. Tennessee Department of Human Services
47. Texas Health and Human Services Commission
48. Utah Department of Workforce Services
49. Vermont Department for Children and Families
50. Virginia Department of Social Services
51. Washington Department of Social & Health Services
52. West Virginia Department of Health and Human Services
53. Wisconsin Department of Health Services
54. Wyoming Department of Family Services

*Beginning and completion dates:* The matches are conducted on an ongoing basis in accordance with the terms of the computer matching agreement in effect with each participant as approved by the applicable Data Integrity Board(s). The term of these agreements is expected to cover the 18-month period, July 1, 2013, through December 31, 2014. Ninety days prior to expiration of the agreement, the parties to the agreement may request a 12-month extension in accordance with 5 U.S.C. 552a(o).

Dated: May 1, 2013.

**Veronica Marco,**

*Acting Deputy Assistant Secretary for Privacy, Transparency, and Records.*

[FR Doc. 2013–10709 Filed 5–6–13; 8:45 am]

**BILLING CODE 4830–01–P**

## **U.S.-CHINA ECONOMIC AND SECURITY REVIEW COMMISSION**

### **Notice of Open Public Hearing**

**AGENCY:** U.S.-China Economic and Security Review Commission.

**ACTION:** Notice of open public hearing—May 9, 2013, Washington, DC.

**SUMMARY:** Notice is hereby given of the following hearing of the U.S.-China Economic and Security Review Commission.

*Name:* William A. Reinsch, Chairman of the U.S.-China Economic and Security Review Commission. The Commission is mandated by Congress to investigate, assess, and report to Congress annually on “the national security implications of the economic relationship between the United States and the People’s Republic of China.” Pursuant to this mandate, the Commission will hold a public hearing in Washington, DC on May 9, 2013, “Trends and Implications of Chinese Investment in the United States.”

*Background:* This is the fifth public hearing the Commission will hold during its 2013 report cycle to collect input from academic, industry, and government experts on national security implications of the U.S. bilateral trade and economic relationship with China. This hearing will explore patterns of Chinese investment in the U.S. and the implications of that investment for U.S. policymakers.

The hearing will be co-chaired by Commissioners Carolyn Bartholomew and Larry Wortzel. Any interested party may file a written statement by May 9, 2013, by mailing to the contact below. A portion of each panel will include a question and answer period between the Commissioners and the witnesses.

*Location, Date and Time:* Room H–309 The U.S. Capitol. Thursday, May 9, 2013, 9:00 a.m.–12:30 p.m. Eastern Time. A detailed agenda for the hearing is posted to the Commission’s Web site at [www.uscc.gov](http://www.uscc.gov). Also, please check our Web site for possible changes to the hearing schedule. Reservations are not required to attend the hearing.

**FOR FURTHER INFORMATION CONTACT:** Any member of the public seeking further information concerning the hearing should contact Reed Eckhold, 444 North Capitol Street NW., Suite 602, Washington DC 20001; phone: 202–624–1496, or via email at [reckhold@uscc.gov](mailto:reckhold@uscc.gov). Reservations are not required to attend the hearing.

*Authority:* Congress created the U.S.-China Economic and Security Review Commission in 2000 in the National Defense Authorization Act (Pub. L. 106–398), as amended by Division P of the Consolidated Appropriations Resolution, 2003 (Pub. L. 108–7), as amended by Public Law 109–108 (November 22, 2005).

Dated: April 30, 2013.

**Michael Danis,**

*Executive Director, U.S.-China Economic and Security Review Commission.*

[FR Doc. 2013-10701 Filed 5-6-13; 8:45 am]

BILLING CODE 1137-00-P

## DEPARTMENT OF VETERANS AFFAIRS

### Report: Strategies for Serving Our Women Veterans

**AGENCY:** Department of Veterans Affairs.

**ACTION:** Final notice.

**SUMMARY:** On May 14, 2012, the Department of Veterans Affairs (VA) published a notice in the **Federal Register** inviting public comment on the Draft Strategy Report (DSR) titled, *Strategies for Serving Our Women Veterans*. This document responds to the public comments received and affirms as final, with two identified changes, to the DSR.

**FOR FURTHER INFORMATION CONTACT:**

Irene Trowell-Harris, RN, Ed.D., Director, Center for Women Veterans, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420.

**SUPPLEMENTARY INFORMATION:** In a notice published on May 14, 2012 [FR Vol. 77, No. 93], VA presented its DSR, *Strategies for Serving Our Women Veterans*. VA is committed to transformation, with the aim of becoming an increasingly Veteran-centric, results-driven, and forward-looking organization. In line with this commitment, Secretary Shinseki called for the formation of a Women Veterans Task Force (WVTF) in July 2011, to be charged with developing a comprehensive VA action plan for resolving gaps in how our organization serves women Veterans. As an interim deliverable, WVTF developed this DSR to solicit stakeholder feedback on its initial findings and recommendations. Following public comments to this draft, WVTF will develop a detailed operating plan for implementation.

We received 32 comments on the DSR through the **Federal Register**. The majority of comments involved one or more of the following topics: Veterans Benefits Administration (VBA) disability ratings policies; recommendations for collaboration between Department of Defense (DoD) and VA in outreach to women Veterans, including outreach prior to separation from service; need for DoD to enhance its efforts in military sexual trauma (MST) prevention; privacy in regard to MST treatment and other issues related

to MST treatment, including recommended change in questions asked during National Security Clearance process; need for full-time women Veterans coordinators; need for expanded child-care; need for specific treatment for homeless women Veterans; importance of culture change across VA with regard to women Veterans; disparities in care for women Veterans; need for specific goals, metrics, and accountability to ensure successful implementation of the recommendations in the draft report; need for more research and data; concerns about how the Task Force was constituted; and opportunities for collaboration with non-governmental organizations (NGO) and other Federal and state agencies.

Other comments related to gaps and recommendations laid out in the strategy report, editorial corrections, and citations. One included a report of alleged criminal activity (identity theft) at a specific VA facility. Based on subject matter, most of the comments can be grouped into several categories: VA claims and benefits; collaboration for proactive outreach to women Veterans; MST; access to VA services (access to VA health care); homeless women Veterans; culture change; data; and WVTF integrity and accountability. We have organized our discussion of the comments accordingly.

### Comments Concerning VA Claims and Benefits

There were a number of comments regarding VA's disability ratings policies and procedures and the length of time it takes to decide a case. One commenter expressed concern that her claim was not properly rated because she suffered from a difficult-to-diagnose disease. Others expressed that VA's disability rating system is still largely intact despite not having been updated in 50 years, and that major renovations are needed for today's medical evaluations. These comments are beyond the scope of this particular report. We, therefore, make no changes to the DSR based on those comments.

The majority of commenters believed that VA should more closely collaborate with DoD in providing transition services to women Veterans. One commenter believed that DoD and VA need to collaborate consistently and more comprehensively to achieve outreach and education goals as described in the DSR.

Multiple commenters believed that Servicemembers need to be provided with information regarding VA services and benefits for which they may be entitled or eligible at the time of their

discharge or release from active duty or service. One commenter believed it essential that VA fully recognizes and reaches out to nonprofits that are conducting important work in helping women Veterans not only to secure employment but also to have fulfilling long-term careers in civilian life, and the commenter recommended that VA conduct an external mapping of the services being provided by nonprofit and community organizations for women Veterans. Other comments concerned opportunities for collaboration with NGOs, local community organizations, and other Federal agencies to provide training, services, outreach, research, and opportunities for women Veterans. These comments are outside the scope of this strategy report; we, therefore, do not make any changes to the DSR based on those comments.

### Military Sexual Trauma

One commenter expressed concern regarding question #21 of the National Security Clearance Questionnaire that asks about mental health treatment. The commenter suggested that treatment for sexual assault counseling be excluded from disclosure and that VA advocate changing the question across the Federal Government. No changes to the DSR are made based on this comment, which is beyond the scope of the report.

Many commenters recounted personal experiences regarding sexual assault and MST they experienced. They also commented on DoD and VA's processes for treatment and benefits for those who experienced MST, the lack of VBA Women Veteran Coordinators' contact information at Veteran outreach events, and a lack of interest—both in DoD and VA—in minimizing the re-traumatization of women Veterans reporting or filing claims for MST.

These comments are beyond the scope of this report. As such, we do not make any changes to the DSR.

### Access to VA

One commenter commended VA's efforts pertaining to delivery of services and benefits to women Veterans through the Center for Women Veterans, Women Veterans Health Strategic Health Care Group, Office of Mental Health Services, and women Veterans coordinators. The commenter expressed that proposed efforts need to be monitored and tracked in a comprehensive way to ensure that, together, they are succeeding in meeting the goals and outcomes set by VA. The commenter further suggested that VA ensure that there is no duplication of effort and that all programs and offices work together. The final suggestion of