

claimant, attorney, non-attorney representative, or representative payee who is the subject of an outstanding arrest warrant for having committed, or having attempted to commit, a violent crime for the purposes of determining whether SSA should include an individual's information in this system or remove an individual's information from the system because they no longer meet the criteria (e.g., the individual is in custody of law enforcement, is no longer a suspect, has been exonerated, or is deceased).

9. To another Federal agency or Federal entity, when we determine 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.

10. To appropriate agencies, entities, and persons when:

(a) SSA suspects or has confirmed that there has been a breach of the system of records;

(b) SSA has determined that, as a result of the suspected or confirmed breach, there is a risk of harm to individuals, SSA (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 SSA's efforts to respond to the suspected or confirmed breach or to prevent, minimize, or remedy such harm.

11. To third parties when an individual involved with a request needs assistance to communicate because of a hearing impairment or a language barrier (e.g., to interpreters, telecommunications relay system operators).

12. To contractors, cooperative agreement awardees, State agencies, Federal agencies, and Federal congressional support agencies for research and statistical activities that are designed to increase knowledge about present or alternative Social Security programs; are of importance to the Social Security program or beneficiaries; or are for an epidemiological project that relates to the Social Security program or beneficiaries. We will disclose information under this routine use pursuant only to a written

agreement between the organization or agency and SSA.

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

We maintain records in this system in electronic form.

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

We will retrieve records by SSN, name, date of birth, and internal agency processing reference numbers.

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

In accordance with NARA rules codified at 36 CFR 1225.16, we maintain records in accordance with approved NARA General Records Schedule (GRS) 3.1, item 011 and GRS 6.5, item 010.

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

We retain electronic files containing personal identifiers in secure storage areas accessible only by our authorized employees and contractors who have a need for the information when performing their official duties. Security measures include, but are not limited to, the use of codes and profiles, personal identification numbers and passwords, and personal identification verification cards. We restrict access to specific correspondence within the system based on assigned roles and authorized users. We use audit mechanisms to record sensitive transactions as an additional measure to protect information from unauthorized disclosure or modification.

We annually provide our employees and contractors with appropriate security awareness training that includes reminders about the need to protect PII and the criminal penalties that apply to unauthorized access to, or disclosure of, PII (5 U.S.C. 552a(i)(1)). Furthermore, employees and contractors with access to databases maintaining PII must annually sign a sanctions document that acknowledges their accountability for inappropriately accessing or disclosing such information.

#### **RECORD ACCESS PROCEDURES:**

Individuals may submit requests for information about whether this system contains a record about them by submitting a written request to the system manager at the above address, which includes their name, SSN, or other information that may be in this system of records that will identify them. Individuals requesting notification of, or access to, a record by mail must include: (1) a notarized statement to us to verify their identity;

or (2) must certify in the request that they are the individual they claim to be and that they understand that the knowing and willful request for, or acquisition of, a record pertaining to another individual under false pretenses is a criminal offense.

Individuals requesting notification of, or access to, records in person must provide their name, SSN, or other information that may be in this system of records that will identify them, as well as provide an identity document, preferably with a photograph, such as a driver's license. Individuals lacking identification documents sufficient to establish their identity must certify in writing that they are the individual they claim to be and that they understand that the knowing and willful request for, or acquisition of, a record pertaining to another individual under false pretenses is a criminal offense.

These procedures are in accordance with our regulations at 20 CFR 401.40 and 401.45.

#### **CONTESTING RECORD PROCEDURES:**

Same as record access procedures. Individuals should also reasonably identify the record, specify the information they are contesting, and state the corrective action sought and the reasons for the correction with supporting justification showing how the record is incomplete, untimely, inaccurate, or irrelevant. These procedures are in accordance with our regulations at 20 CFR 401.65(a).

#### **NOTIFICATION PROCEDURES:**

Same as records access procedures. These procedures are in accordance with our regulations at 20 CFR 401.40 and 401.45.

#### **EXEMPTIONS PROMULGATED FOR THE SYSTEM:**

None.

#### **HISTORY:**

72 FR 71470, Visitor Intake Process—Customer Service Record System.

83 FR 54969, Visitor Intake Process—Customer Service Record System.

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## **DEPARTMENT OF STATE**

[Public Notice 11916]

### **60-Day Notice of Proposed Information Collection: Medical Clearance Update**

**ACTION:** Notice of request for public comment.

**SUMMARY:** The Department of State is seeking Office of Management and

Budget (OMB) approval for the information collection described below. In accordance with the Paperwork Reduction Act of 1995, we are requesting comments on this collection from all interested individuals and organizations. The purpose of this notice is to allow 60 days for public comment preceding submission of the collection to OMB.

**DATES:** The Department will accept comments from the public up to *January 6, 2023*.

**ADDRESSES:** You may submit comments by any of the following methods:

- **Web:** Persons with access to the internet may comment on this notice by going to [www.Regulations.gov](http://www.Regulations.gov). You can search for the document by entering "Docket Number: DOS-2022-0044" in the Search field. Then click the "Comment Now" button and complete the comment form.

- **Email:** [Yellandmj@state.gov](mailto:Yellandmj@state.gov).

- **Regular Mail:** Send written comments to: Medical Director, Office of Medical Clearances, Bureau of Medical Services, 2401 E Street NW, SA-1, Room H-242, Washington, DC 20522-0101.

- **Fax:** 202-647-0292, Attention: Medical Clearance Director.

You must include the DS form number (if applicable), information collection title, and the OMB control number in any correspondence.

**SUPPLEMENTARY INFORMATION:**

- **Title of Information Collection:** Medical Clearance Update.

- **OMB Control Number:** 1405-0131.

- **Type of Request:** Revision of a Currently Approved Collection.

- **Originating Office:** Bureau of Medical Services: MED/CP/CL.

- **Form Number:** DS-3057.

- **Respondents:** Contractors and eligible family members.

- **Estimated Number of Respondents:** 7,205.

- **Estimated Number of Responses:** 7,205.

- **Average Time Per Response:** 30 minutes.

- **Total Estimated Burden Time:** 3,603 hours.

- **Frequency:** As needed.

- **Obligation to Respond:** Mandatory.

We are soliciting public comments to permit the Department to:

- Evaluate whether the proposed information collection is necessary for the proper functions of the Department.

- Evaluate the accuracy of our estimate of the time and cost burden for this proposed collection, including the validity of the methodology and assumptions used.

- Enhance the quality, utility, and clarity of the information to be collected.

- Minimize the reporting burden on those who are to respond, including the use of automated collection techniques or other forms of information technology.

Please note that comments submitted in response to this Notice are public record. Before including any detailed personal information, you should be aware that your comments as submitted, including your personal information, will be available for public review.

**Abstract of Proposed Collection**

Form DS-3057 is designed to collect medical information to provide medical providers with current and adequate information to base decisions on whether contractors and eligible family members will have sufficient medical resources at a diplomatic mission abroad to maintain the health and fitness of the individual and family members.

**Methodology**

The respondent will obtain the DS-3057 form from their human resources representative or download the form from a department website. The respondent will complete and submit the form offline.

**Michelle Yelland,**

*Director of Medical Clearances, Bureau of Medical Clearances, Department of State.*

[FR Doc. 2022-24222 Filed 11-4-22; 8:45 am]

**BILLING CODE 4710-36-P**

**DEPARTMENT OF STATE**

**[Public Notice: 11836]**

**30-Day Notice of Proposed Information Collection: Request for Department of State Personal Identification Card**

**ACTION:** Notice of request for public comment and submission to OMB of proposed collection of information.

**SUMMARY:** The Department of State has submitted the information collection described below to the Office of Management and Budget (OMB) for approval. In accordance with the Paperwork Reduction Act of 1995 we are requesting comments on this collection from all interested individuals and organizations. The purpose of this Notice is to allow 30 days for public comment.

**DATES:** Submit comments directly to the Office of Management and Budget (OMB) up to December 7, 2022.

**ADDRESSES:** Direct comments to the Department of State Desk Officer in the Office of Information and Regulatory Affairs at the Office of Management and Budget (OMB). You may submit comments by the following methods:

- **Email:** [oira\\_submission@omb.eop.gov](mailto:oira_submission@omb.eop.gov). You must include the DS form number, information collection title, and the OMB control number in the subject line of your message.

- **Fax:** 202-395-5806. Attention: Desk Officer for Department of State.

**FOR FURTHER INFORMATION CONTACT:**

Direct requests for additional information regarding the collection listed in this notice, including requests for copies of the proposed collection instrument, and supporting documents, to John Ferguson, who may be reached on 202-647-0511 or at [fergusonjm3@state.gov](mailto:fergusonjm3@state.gov).

**SUPPLEMENTARY INFORMATION:**

- **Title of Information Collection:**

Request for Department of State Personal Identification Card.

- **OMB Control Number:** 1405-0232.

- **Type of Request:** Extension of a currently approved collection.

- **Originating Office:** Office of Domestic Facilities Protection (DS/DO/DFP).

- **Form Number:** DS-1838 and DS-7783.

- **Respondents:** Department employees and contractors.

- **Estimated Number of Respondents:** 30,000.

- **Estimated Number of Responses:** 30,000.

- **Average Time per Response:** 5 minutes.

- **Total Estimated Burden Time:** 2,500 hours per year.

- **Frequency:** On occasion (when new badge is required or badge expires).

- **Obligation to Respond:** Mandatory.

We are soliciting public comments to permit the Department to:

- Evaluate whether the proposed information collection is necessary for the proper functions of the Department.

- Evaluate the accuracy of our estimate of the time and cost burden for this proposed collection, including the validity of the methodology and assumptions used.

- Enhance the quality, utility, and clarity of the information to be collected.

- Minimize the reporting burden on those who are to respond, including the use of automated collection techniques or other forms of information technology.

Please note that comments submitted in response to this Notice are public record. Before including any detailed