



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
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IN REPLY REFER TO

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27 December 2024

From: Chief, Bureau of Medicine and Surgery
To: Chief, DoD Privacy, Civil Liberties Directorate
Via: Director, SECNAV/CNO FOIA & Privacy Program Office

Ref: (a) DoDI 1000.30, 'Reduction of Social Security Number (SSN) Use Within DoD', dated August 1, 2012

Encl: (1) Draft Privacy Impact Assessment Submission to Defense Health Agency (DHA)

SUBJECT: JUSTIFICATION FOR THE USE OF THE SOCIAL SECURITY NUMBER (SSN)
IN DEPARTMENT OF DEFENSE (DOD) MILLENNIUM COHORT PROGRAM
(MCP)(SORN N06500-1; eMASS # 3171)

1. This memorandum is to satisfy the requirements of reference (a), with respect to the Millennium Cohort Program (MCP) and the necessity for the continued collection and use of the SSN. The FY1999 National Defense Authorization Act directed the Secretary of Defense "to establish a center devoted to a longitudinal study to evaluate data on the health conditions of members of the Armed Forces upon their return from deployment on military operations for purposes of ensuring the rapid identification of any trends in diseases, illnesses, or injuries among such members because of such operations." In response, the Naval Health Research Center (NHRC) was designated as the DoD Center for Deployment Health Research and the Millennium Cohort Study was established.

2. The purpose of the MCP information collection is to assist US policy makers with understanding how military service and experiences can impact the long-term health and well-being of service members and Veterans. MCP is composed of the Millennium Cohort Study and the Millennium Cohort Family Study. Specifically, the Millennium Cohort Program seeks to track the physical and psychological health of service members and Veterans, identify exposures and behaviors that increase the risk of disease, and evaluate the impact of military life on the health and well-being of military families.

3. The System of Records Notice N06500-1, Millennium Cohort Study (November 14, 2014 79 FR 68225), Report Control Symbol # DD-NAVY-2678 and Office of Management and Budget Approval # 0703-0064 outline the authorities for the Department of Defense (DoD) Millennium Cohort Program to include the capture of SSNs. MCP is utilized to collect information from over 261,000 US service members and 28,095 military spouses for the purpose of computer matching of records. All MCP data, including survey data, data extracted or received from DoD sources, and data from non-DoD agencies or institutions, are stored and analyzed on access-controlled folders located on the Naval Health Research Center's servers, SQL database, restricted SharePoint environment and an authorized commercially owned and

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operated web based electronic collection. Naval Health Research Center has appropriate administrative, technical, and physical safeguards to protect the privacy of personally identifiable information (PII) and protected health information (PHI) and to mitigate any intentional or unintentional use or disclosure that is in violation of the approved research protocol, federal statute, and DoD regulations.

4. The justification(s) for the use and collection of SSNs for the Millennium Cohort Program (MCP) is based on compliancy with DoDI 1000.30, Enclosure 2, Paragraphs 2.c.(8) Computer Matching; 2.c.(11) Legacy Systems Interface; and 2.c.(13) Other Cases. Per reference (a), the “Acceptable Use Cases” most applicable are:

a. Acceptable use 2.c.(8), Computer Matching, applies because the MCP matches existing spouse and service member records or specimens to those contained in electronic data sources maintained by the DoD and other agencies such as the Department of Veterans Affairs (VA); The use of SSN as a unique identifier is needed for this database where there is potential for duplicate registration and no other means of unique identification exists. Furthermore, because the enrollment of service members into the Millennium Cohort Study preceded the widespread adoption of the 10-digit DoD Identification Number (DoD ID) derived from the DoD Electronic Data Interchange-Personal Identifier (EDIPI), the SSN is the only unique identifier available for all study participants.

b. Acceptable use 2.c.(11), Legacy Systems Interface, applies because the EDIPI does not transfer or serve as a personal identifier across the information systems and collections deployed across the Services or within the Military Health System. The service member and spouse SSN must be collected until all systems that are sources for data input to the MCP are integrated and able to utilize DoD ID Numbers for patient identification purposes.

c. Acceptable use 2.c.(13), Other Cases, applies because SSNs are the only unique identifier consistently used by all databases maintained by the DoD, VA, and non-DoD databases that are linked with MCP databases. While current files from MCP use the DoD ID, the historical records and non-DoD databases only contain the SSN, therefore, there is no way to link the data with confidence. Using the SSN to link the data records from different sources is required to ensure continuity, quality, and integrity of the data system over time.

5. The service member and spouse SSN must be collected until all systems that are sources for data input to the MCP are integrated and able to utilize DoD ID Numbers for patient identification purposes. To reduce the vulnerability of SSNs, records are maintained in a secure, access-controlled facility. Physical entry is restricted to use of locks and guards and is accessible only to authorized personnel. Access to PHI, including SSNs, is restricted to onsite investigators who are staff on an Institutional Review Board (IRB) approved protocol and who have signed the Investigator Compliance Attestation to abide by all privacy protection regulations. No identifiable data will be disclosed to other entities without the authorization of

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the record holder. Further, access to electronic data requires a Common Access Card used in conjunction with a personal identification number. After data matching is finalized for a particular project, SSNs are stripped from the final analytic file. Senior project statisticians and analysts perform the tasks associated with linking and de-identifying working files. Source files used to provide sensitive data are deleted, erased and/or overwritten after linkage procedures are completed. The network environment security controls are reflected in the Naval Health Research Command (NHRC) Medical Community of Interest Enclave and Local Area Network (MedCOI/LAN)(eMASS ID # 3171) and is appropriate for the types of sensitive data maintained in the network environment. All contractors, military, and civilian personnel with access to the data have appropriate privacy and cybersecurity training. Justification for the use of the SSN does not constitute blanket permission to use.

6. MCP is subject to the safeguards imposed by the HIPAA Privacy, Security and Breach Notification Rules as implemented in DoDM 6025. 18, dated 13 March 2019 and the Privacy Act of 1974 as amended and implemented by DoDI 5400.11, dated 29 January 2019. BUMED has made a thorough effort to evaluate the risk associated with the electronic collection and every reasonable step is being taken to reduce the use of the SSN and protect it where the use is still required. The MCP Program Manager is requesting continued use consistent with the source systems for computer matching, interface purposes and other case uses.

7. For questions related to this memorandum, you may contact Dr. Rudy Rull, Principal Investigator, Millennium Cohort Study at (619) 553-9267 or email rudolph.p.rull2.civ@health.mil or contact Brian K. Martin, BUMED Privacy Officer (N61) at (904) 542-3559 or email at brian.k.martin4.civ@health.mil.

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Attachments:
As Stated