



**Billing Code: 5001-06**

**DEPARTMENT OF DEFENSE**

Office of the Secretary

[Docket ID DoD-2019-HA-0074]

Submission for OMB Review; Comment Request

**AGENCY:** Office of the Assistant Secretary of Defense for Health Affairs, DoD.

**ACTION:** 30-day information collection notice.

**SUMMARY:** The Department of Defense has submitted to OMB for clearance the following proposal for collection of information under the provisions of the Paperwork Reduction Act.

**DATES:** Consideration will be given to all comments received by [insert 30 days from publication in the Federal Register].

**ADDRESSES:** Comments and recommendations on the proposed information collection should be emailed to Mr. Josh Brammer, DoD Desk Officer, at [aira\\_submission@omb.eop.gov](mailto:aira_submission@omb.eop.gov). Please identify the proposed information collection by DoD Desk Officer, Docket ID number, and title of the information collection.

**FOR FURTHER INFORMATION CONTACT:** Angela James, 571-372-7574, or

[whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil](mailto:whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil).

**SUPPLEMENTARY INFORMATION:**

**TITLE; ASSOCIATED FORM; AND OMB NUMBER:** Third Party Collection Program

(Insurance Information); DD Form 2569; OMB Control Number 0720-0055.

**TYPE OF REQUEST:** Extension

**NUMBER OF RESPONDENTS:** 3,940,000.

**RESPONSES PER RESPONDENT:** 1.5.

**ANNUAL RESPONSES:** 5,910,000.

**AVERAGE BURDEN PER RESPONSE:** 4 minutes.

**ANNUAL BURDEN HOURS:** 394,000.

**NEEDS AND USES:** The information collection requirement is necessary to obtain health insurance policy information used for coordination of health care benefits and billing third party payers and other federal agencies for health care provided to their beneficiaries and also to civilian non-Uniformed Service beneficiaries for health care provided to them. DoD is authorized to collect from third-party payers the cost of inpatient and outpatient services rendered to DoD beneficiaries who have other health insurance. Military treatment facilities (MTFs) are required to make this form available to third-party payers upon request. A third-party payer may not request any other assignment of benefits form from the subscriber. Also, for civilian non-Uniformed Services beneficiary and interagency patients, DD Form 2569 is necessary and serves as an assignment of benefits approval to submit claims to payers on behalf of the patient and authorization to release medical information.

**AFFECTED PUBLIC:** Individuals or households.

**FREQUENCY:** On occasion.

**RESPONDENT'S OBLIGATION:** Voluntary.

**OMB DESK OFFICER:** Mr. Josh Brammer.

You may also submit comments and recommendations, identified by Docket ID number and title, by the following method:

- Federal eRulemaking Portal: <http://www.regulations.gov>. Follow the instructions for submitting comments.

Instructions: All submissions received must include the agency name, Docket ID number, and title for this Federal Register document. The general policy for comments and other submissions from members of the public is to make these submissions available for public viewing on the Internet at <http://www.regulations.gov> as they are received without change, including any personal identifiers or contact information.

**DOD CLEARANCE OFFICER:** Ms. Angela James.

Requests for copies of the information collection proposal should be sent to Ms. James at [whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil](mailto:whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil).

Dated: August 23, 2019.

Aaron T. Siegel,

Alternate OSD Federal Register

Liaison Officer, Department of Defense.

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