

U.S. Department of Transportation

Privacy Impact Assessment

Federal Aviation Administration (FAA) Office of Aviation Safety (AVS)/Office of Aerospace Medicine (AAM)

Medical Support Systems (MSS)

Responsible Official

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Executive Summary

<u>Title 49 U.S.C. Section 44703</u> requires the Federal Aviation Administration (FAA) to medically certify all airmen initially and periodically thereafter to ensure that they are qualified and physically able to operate safely in the national airspace system. <u>FAA Order</u> <u>3930.3C</u> requires that FAA workforce members with safety-related duties, such as Air Traffic Control Specialists (ATCSs) and applicants for ATCS positions, receive medical clearance before and while performing their duties. The FAA's Office of Aerospace Medicine (AAM), located within the Office of Aviation Safety (AVS), owns and operates the Medical Support Systems (MSS). The MSS consists of a suite of subsystems that enable AVS to meet its statutory obligation to certify the health of both airmen, ATCS and ATCS applicants, referred to collectively as "applicants." In addition, MSS manages the medical examination of those applicants performed by FAA Aviation Medical Examiners (AMEs) and FAA Flight Surgeons. "Medical certification" of airmen results in a certification of their medical readiness to operate safely in the national airspace. "Medical clearance" results in a designation of medical readiness to perform FAA safety duties.

MSS consists of the following subsystems:

- MedXPress a web-based system supporting applications for medical certification and clearances;
- Aerospace Medical Certification Subsystem (AMCS) a system supporting the medical examinations of applicants and medical certification/clearance decisions made by the AMEs and FAA Flight Surgeons;
- Covered Position Decision Support Subsystem (CPDSS) a system supporting the medical clearance decisions for ATCSs and applicants for ATCS positions;
- Document Imaging Workflow System (DIWS) an electronic archive containing documents and files supporting the medical decision-making process for each applicant;
- Clinic Health Awareness Program Subsystem (CHAPS) a system supporting occupational health visits made by FAA employees, FAA contractors, and visitors to the FAA; and
- Decision Support Subsystem (DSS) a historical archive of medical examinations and decisions (with Personally Identifiable Information (PII) removed) that supports medical research over time.

The FAA previously published the <u>MSS Privacy Impact Assessment (PIA</u>) on June 15, 2023. The FAA is updating the MSS PIA in accordance with the <u>E-Government Act of 2002</u> to include CHAPS. CHAPS was scheduled to be decommissioned but remains operational in read-only mode to allow authorized clinic staff access to historical information that was not imported into the <u>Electronic Medical Records System (EMRS</u>). MSS collects PII from members of the public and FAA personnel as part of the medical certification and medical



clearance process. This PIA covers MedXPress, AMCS, CPDSS, DIWS and CHAPS subsystems because they are used to process applications for medical certifications and medical clearances. No PIA is necessary for the DSS as it does not contain PII.

What is a Privacy Impact Assessment?

The Privacy Act of 1974 articulates concepts for how the federal government should treat individuals and their information and imposes duties upon federal agencies regarding the collection, use, dissemination, and maintenance of personally identifiable information (PII). The E-Government Act of 2002, Section 208, establishes the requirement for agencies to conduct privacy impact assessments (PIAs) for electronic information systems and collections. The assessment is a practical method for evaluating privacy in information systems and collections, and documented assurance that privacy issues have been identified and adequately addressed. The PIA is an analysis of how information is handled to—i) ensure handling conforms to applicable legal, regulatory, and policy requirements regarding privacy; ii) determine the risks and effects of collecting, maintaining and disseminating information in identifiable form in an electronic information system; and iii) examine and evaluate protections and alternative processes for handling information to mitigate potential privacy risks.¹

Conducting a PIA ensures compliance with laws and regulations governing privacy and demonstrates the DOT's commitment to protect the privacy of any personal information we collect, store, retrieve, use and share. It is a comprehensive analysis of how the DOT's electronic information systems and collections handle personally identifiable information (PII). The goals accomplished in completing a PIA include:

- Making informed policy and system design or procurement decisions. These decisions must be based on an understanding of privacy risk, and of options available for mitigating that risk;
- Accountability for privacy issues;
- Analyzing both technical and legal compliance with applicable privacy law and regulations, as well as accepted privacy policy; and
- Providing documentation on the flow of personal information and information requirements within DOT systems.

Upon reviewing the PIA, you should have a broad understanding of the risks and potential effects associated with the Department activities, processes, and systems described and approaches taken to mitigate any potential privacy risks.

¹Office of Management and Budget's (OMB) definition of the PIA taken from guidance on implementing the privacy provisions of the E-Government Act of 2002 (see OMB memo of M-03-22 dated September 26, 2003).



Introduction & Business/Systems Overview

AVS's AAM uses MSS subsystems MedXPress, AMCS, CPDSS, DIWS and CHAPS to manage the medical certification or medical clearance application and review process. All applicants initiate the process with an online application in MedXPress, described below.

MedXPress

MedXPress is an external web-based application, accessible at <u>https://medxpress.faa.gov/medxpress/</u>, that allows applicants requesting an FAA medical clearance or medical certificate to electronically complete and submit items 1-20 of the FAA Form 8500-8 *Application for Airmen Medical Certificate or Airman Medical and Student Pilot Certificate*² in preparation for an FAA medical exam.

MedXPress User Access:

New users are required to create an account. To do so, they must enter their name and email address, confirm their email address, select three security questions from a drop-down menu and manually insert the answers to the security questions which may include PII. Existing users enter their email address and password for access. Users may change their account information at any time by using the account function in MedXPress.

MedXPress Typical Transaction:

Upon logging in, MedXPress poses three questions designed to direct users to receive required legal notices and provide additional consent to those notices, as required, based upon the needs of their position.

After acceptance of these legal notices, applicants provide the following information about themselves to complete their part of the FAA Form 8500-8 application:

- <u>General</u>: class of medical certificate applied for or Applicant ID in the case of an FAA ATCS.
- <u>Personal information</u>: name, date of birth (DOB), social security number (SSN) or pseudo-SSN³, mailing address, phone numbers, citizenship, color of hair and eyes, and sex (personal information is retained and prepopulates subsequently in the AMCS application; prepopulated information may be edited as needed in AMCS during the next phase).

² The Office of Management and Budget (OMB) Control Number for this collection is 2120-0034.

³ In the event of a foreign applicant (without a SSN) or an applicant declining to provide their SSN, MedXPress creates a pseudo-SSN. Pseudo-SSNs are nine-digit numeric identifiers that, while not named "SSN," allow for the provision or use of an SSN as the identifier or, if not an actual SSN, the nine-digit identifier provides a direct link back to an individual and presents the same privacy risks to the individual (such as heightened potential for identity theft or financial harm as a result of unauthorized disclosure.



- <u>Prior certification</u>: type of airman certificate held, occupation, employer, prior denial/suspension/revocation of an FAA airman medical certificate, total pilot time to date and in the past six months, and the date of their last FAA medical application.
- <u>Physical, mental and other health information</u>: use of medication, use of contact lenses while flying, medical history (consisting of a list of checkboxes describing different physical and mental diseases, medical conditions, and medical disability benefits), and last visits to any health professional (date of visit, name, street, city, zip code, state, country, type of professional and reason for the visit). There is also a free text field that the applicant can use to add medical notes or comments; and
- <u>Arrest history</u>: arrest or conviction and/or administrative action history.

The applicant submits their application and MedXPress generates a confirmation number that is associated with the application. The confirmation number displays on the screen and is also sent electronically to the email address provided. MedXPress includes instructions that the application expires in 60 days and directs the applicant to provide their confirmation number to their AME at the time of exam so the AME can retrieve the application. MedXPress provides the applicant with the option to download the electronic copy of the FAA Form 8500-8 to their computer/device. Once submitted, there are no further opportunities for medical certification applicants to make any edits or additions to the application. However, FAA ATCSs and ATCSs applicants have the option to recall their application and make updates if: 1) it is within 30 days of the day they started the application, and 2) their AME has not yet imported their application into AMCS (discussed below).

The following three other identifiers, in addition to the confirmation number, are generated or collected by MedXPress and attached to the applicant's instance of application: Applicant ID⁴, IP address⁵, and Medical ID (MID)⁶.

⁴ The Applicant ID is a read-only field that automatically populates with a system-generated number. The number provides a means of uniquely identifying an airman and is assigned the first time an airman's MedXPress application is imported into AMCS. The number remains with the airman for life and is eventually stored in the DIWS.

⁵ The IP address is collected as part of the applicant's electronic signature and is used to combat instances of application fraud by establishing the exact time and location where the application was made. The IP address is eventually stored in the DIWS.

⁶ The MID number is a system-generated number assigned at the creation of an application in MedXPress. It is ultimately stored in DIWS in the official system of record. The MID provides a means of uniquely identifying an exam performed on an airman and a different MID number is assigned to each exam submitted for an airman.



Both medical certifications and clearances must be renewed periodically based on the applicant's age and class of medical certificate. Once an application is submitted, only the account and personal information cited above are retained in MedXPress. In the future, applicants must complete the remaining application data at the time of each subsequent application.

Aerospace Medical Certification Subsystem (AMCS)

The medical certification/clearance process continues in the next subsystem called Aerospace Medical Certification Subsystem (AMCS). AMCS is an external web application accessible by authorized AMEs and FAA Flight Surgeons at https://amcs.faa.gov. AMEs are private physicians trained and authorized by the FAA to perform medical examinations and to issue medical certificates or clearances. FAA Flight Surgeons are medical doctors who also use AMCS in performing medical examinations and issuing medical certificates or clearances.

AMCS User Access:

New AMCS users must provide their name, DOB and AME Serial Number (in the case of an AME), to the AMCS Support Desk for access to AMCS. Their login information is emailed to them, and they must change their password when first logging in. Only AMCS Support Desk personnel can change an AME's or FAA Flight Surgeon's AMCS account information.

AMCS Typical Transaction:

AMEs or FAA Flight Surgeons log into the system with their username and password and then enter the applicant's confirmation number. MedXPress electronically submits the application to AMCS. AMCS imports and displays questions 1-20 of the FAA Form 8500-8. AMEs or FAA Flight Surgeons conduct and certify a medical history and physical examination by manually entering their examination results to complete the remainder of the FAA Form 8500-8 regarding the following:

- Height and weight
- Statement of Demonstrated Ability (SODA); SODA Serial Number
- Head, face, neck, and scalp
- Nose, sinuses, mouth, and throat
- Ear and ear drums
- Eyes, ophthalmoscopic exam, pupils, and ocular motility
- Lungs and chest
- Heart and vascular system
- Abdomen, viscera, and anus
- Skin



- G-U system
- Upper and lower extremities
- Spine and musculoskeletal system
- Identifying body marks, scars, and tattoos
- Lymphatic system
- Neurologic system
- Psychiatric conditions
- General systemic condition
- Hearing
- Vision distant, near, intermediate, color sense, field of vision, and heterophoria
- Blood pressure and pulse
- Urine test
- Electrocardiogram (ECG) results if test administered

If an applicant requires an ECG to be medically certified or cleared, AMEs or FAA Flight Surgeons conduct the ECG during the exam and attach a PDF copy of the ECG into the exam record in AMCS. An applicant may bring additional medical documentation to the exam with them (for example, x-rays or lab results) for the AME or FAA Flight Surgeon to review during the exam. After the exam is completed, the applicant, AME or FAA Flight Surgeon later mails or faxes that additional medical documentation to the FAA where it will be scanned and uploaded into the DIWS subsystem (discussed below).

During the examination, the AME or FAA Flight Surgeon can make corrections to an applicant's information in AMCS. DIWS maintains the original MedXPress version of the application as well as the AMCS-transmitted version to account for any changes made by the AME or FAA Flight Surgeon at the time of exam. Those corrections would not transfer back to MedXPress, but the applicant can access MedXPress later to make those updates to their account information or personal information in subsequent applications.

At the conclusion of the exam, the AME or FAA Flight Surgeon may request (and record in AMCS) that additional findings, supplemental exams, or prior medical records are necessary from the applicant for the FAA to make a final medical certification/clearance decision. This scenario results in a deferral of the AME's or FAA Flight Surgeon's decision to grant or deny the medical certification or clearance. The applicant is expected to subsequently mail those requested records to the FAA for later scanning and uploading into the DIWS. To complete the medical history and physical examination, the AME or FAA Flight Surgeon makes comments on the applicant's medical history and their findings, noting all disqualifying facts in the case of a denial or deferral. The AME or FAA Flight Surgeon then makes a decision from the three choices below:



1.) Yes, a medical certification/clearance can be approved and issued. The AME or FAA Flight Surgeon prints a medical certification form, which they and the applicant sign.

2.) No, a medical certification/clearance must be denied. The AME or FAA Flight Surgeon issues a letter of denial.

3.) The decision must be deferred pending further evaluation of additional medical records, as mentioned above. The AME or FAA Flight Surgeon informs the applicant of what additional actions must be taken to remedy the deferral.

Finally, the AME or the FAA Flight Surgeon certifies the exam results and transmits the completed FAA Form 8500-8 electronically to the DIWS (discussed below).

Document Imaging Workflow System (DIWS)

The Document Imaging Workflow System (DIWS) is an internal FAA application that stores electronic medical images and data concerning the applicant to allow real-time sharing of applicant medical records throughout AAM to further support the medical decision-making process for applicants. The information within DIWS comes from the AMCS transmissions in addition to the manual process noted above when supplemental medical documentation is scanned into DIWS. Tier 1 and 2 psychological testing documentation for ATCSs and ATCS applicants is also retained in DIWS. Supplemental documents might contain PII such as name, DOB, address, and medical diagnoses. Supplemental medical documentation may include outpatient medical charts, physician specialty consultations, operative reports and/or emergency room and hospital records. Supplemental medical documentation may also be diagnostic in nature including diagnostic imaging, pathology reports and/or laboratory studies. An additional personal identifier, known as the PI Number⁷, might be created for certain applicants and stored in the DIWS.

DIWS User Access:

FAA employees and FAA contractors supply their name and DOB to the MSS Support Desk for account creation and log in using their Personal Identification Verification (PIV) card. If a DIWS user needs to update their user account PII, they must contact the MSS Support Desk.

Typical DIWS Transactions:

The DIWS has multiple workflows for further processing of certification approvals, denials, and deferrals. For medical certification deferrals and denials, the DIWS moves the

⁷ The PI number is only assigned to an applicant found to have a specific pathology. The PI number remains with the airman for life.



application to a specific workflow queue where FAA medical personnel located in the Civil Aerospace Medical Institute (CAMI), FAA Regional Flight Surgeon offices, or FAA Headquarters may review and act on the application, ultimately making or confirming a certification decision. For certification approvals made previously in AMCS, DIWS scans the application for anomalies, which if detected, places the application in a workflow for further quality analysis.

Covered Position Decision Support Subsystem (CPDSS)

CPDSS is an internal interface to the DIWS, accessible within the FAA network by FAA Flight Surgeons and authorized AAM employees only. CPDSS supports the medical clearance decisions for individuals currently holding or applying for FAA-covered positions⁸, such as ATCSs or applicants for ATCS positions. **CPDSS User Access:**

CPDSS access is only granted to FAA Flight Surgeons and other AAM employees with defined job responsibilities requiring access. Users log in using their PIV cards. If a CPDSS user needs to update their user account PII, they must contact the MSS Support Desk.

CPDSS Typical Transactions:

For Current ATCSs:

For individuals who are currently ATCS, a medical examination is scheduled periodically based on the ATCS's age and ECG scheduled frequency in the month of the employee's birth. FAA management initiates the examination cycle by filling out the employee's name, facility, and examining physician's name on FAA Form 3900-7 "ATCS Health Program Report by Examining Physician" and then scheduling the exam. The employee presents this form to the AME at the time of the medical examination. After the medical examination, the AME completes and signs the bottom portion of the FAA Form 3900-7. The AME returns the form to the ATCS, who then gives it back to his/her manager or Supervisor. The Manager or Supervisor faxes the completed form to their FAA Medical Office upon receipt. Once there, the regional FAA Flight Surgeon completes their own review of the existing exam documentation, making an independent and final decision on each ATCS to qualify them, disqualify them, or qualify them with special consideration. At the same time, the

⁸ FAA covered positions may include air traffic control duties, aviation screening duties, ground security coordinator duties, aircraft maintenance duties, flight instruction duties, aircraft dispatcher duties, flight attendant duties, and flight crew member duties.



regional FAA Flight Surgeon also renders a decision for Medical Restriction⁹ or Incapacitation¹⁰ if required.

The CPDSS subsystem is updated with the results of the activities above and all applicable documents are included in the ATCS's medical record. For ATCSs, a clearance memo is generated and sent to the Facility Manager and the ATCS employee via internal email. There is no medical information provided to the Facility Manager, only the Clearance Disposition Type. The ATCS does not receive any additional medical condition information pertaining to them.

For Applicant ATCSs:

All qualifying applicant ATCSs receive a letter from the FAA directing them to schedule specific tests associated with their medical clearance: a drug screen, psychological testing, and a medical exam with an AME. Once the drug screen, psychological testing, and the medical exam are completed and the results transmitted to the FAA, a regional FAA Flight Surgeon reviews the applicant ATCS's existing medical documentation, making an independent decision on each ATCS applicant to qualify them, disqualify them, or qualify them with special consideration.

The CPDSS subsystem is updated with the results of the activities above and all applicable documents are included in the applicant ATCS's medical record. The ATCS applicant is notified both via email and letter if they are disqualified or qualified with special consideration. In the case of disqualification, the ATCS applicant is informed of the appeal process information.

Clinic Health Awareness Program Subsystem (CHAPS)

The FAA clinic staff previously used CHAPS to check in patients¹¹ who visit the Oklahoma City FAA facilities or a clinic in FAA Headquarters in Washington, DC for a medical appointment. CHAPS was replaced by the EMRS on May 15, 2024, and was scheduled to sunset. For patients who previously visited an FAA clinic, their historical records that were eleven or more years old were integrated into EMRS via a one-time migration of data from CHAPS and an ingestion of supporting medical documentation. However, historical records that were less than eleven years old were not ingested into EMRS. Subsequently, the clinic

⁹ Medical restriction is used when a medical diagnosis is pending but the FAA has reason to believe there is a safety risk due to a medical problem.

¹⁰ Incapacitation is used when there is a medical diagnosis that is not compatible with working safety-related duties.

¹¹ A patient can be an FAA employee or an applicant seeking an FAA position requiring a medical clearance. In rare instances, a patient can be an FAA contractor or a member of the public who visits the clinic due to a medical emergency or need for first aid.



staff accessed CHAPS using their PIV card to read-only historical information that was not imported.

CHAPS no longer collects any PII, and records in CHAPS cannot be modified. CHAPS does maintain the following PII that is read-only: name, suffix, DOB, SSN, pseudo-SSN, the federal employee number, an ID Number¹², home address, personal telephone number, medical/family history, sex, employee information including: employee type, region, facility, organization, routing symbol, occupation, company, work phone, class ending, allergies, medications, medical alerts, immunizations, treatments, and results of screening programs, including lab tests, x-rays and medications.

Fair Information Practice Principles (FIPPs) Analysis

The DOT PIA template is based on the fair information practice principles (FIPPs). The FIPPs, rooted in the tenets of the Privacy Act, are mirrored in the laws of many U.S. states, as well as many foreign nations and international organizations. The FIPPs provide a framework that will support DOT efforts to appropriately identify and mitigate privacy risk. The FIPPs-based analysis conducted by DOT is predicated on the privacy control families articulated in the Federal Enterprise Architecture Security and Privacy Profile (FEA-SPP) v3,¹³ sponsored by the National Institute of Standards and Technology (NIST), the Office of Management and Budget (OMB), and the Federal Chief Information Officers Council and the Privacy Controls articulated in Appendix J of the NIST Special Publication 800-53 Security and Privacy Controls for Federal Information Systems and Organizations.¹⁴

Transparency

Sections 522a(e)(3) and (e)(4) of the Privacy Act and Section 208 of the E-Government Act require public notice of an organization's information practices and the privacy impact of government programs and activities. Accordingly, DOT is open and transparent about policies, procedures, and technologies that directly affect individuals and/or their personally identifiable information (PII). Additionally, the Department should not maintain any system of records the existence of which is not known to the public.

The FAA collects the information directly from applicants using FAA Form 8500-8 in MedXPress. A Privacy Act Statement (PAS) is available on the MedXPress website that provides the applicant notice of the legal authority, purpose, use and disclosure of their information. The FAA also collects additional information about applicants for medical clearances using FAA Form 3900-7. However, a Privacy Act Statement is not provided to these individuals because the information is provided by FAA Supervisors or Managers and is not collected directly from the individuals. CHAP no longer collects information from an

¹² This is a patient ID number that is internal to CHAPS.

¹³ <u>http://www.cio.gov/documents/FEA-Security-Privacy-Profile-v3-09-30-2010.pdf</u>

¹⁴ http://csrc.nist.gov/publications/drafts/800-53-Appdendix-J/IPDraft_800-53-privacy-appendix-J.pdf



individual and only maintains historical records that were not integrated into EMRS. However, notice was provided at the time of collection via a Privacy Act Statement. In these MSS subsystems, the records are retrieved by name, Applicant ID, Medical ID (MID), PI number, or confirmation number. Therefore, FAA has determined the records in these systems are Privacy Act records, and the FAA protects these records in accordance with the following DOT and OPM published System of Records Notices (SORN):

- DOT/FAA 856, "*Airmen Medical Records*", 788 FR 37301 (June 7, 2023), which covers airmen requesting an FAA Medical Clearance or Medical Certificate utilizing the MedXPress, AMCS, and DIWS subsystems.
- DOT/FAA 811, "FAA Health Information Record Systems", 87 FR 54751 (September 7, 2022), which covers FAA employees who visit the clinic for nonoccupational reasons, and contractors and members of the public who visit the CAMI Occupational Health Clinic and the FAA Health Unit at Headquarters in Washington D.C
- <u>OPM/GOVT-10</u>, *"Employee Medical File System Records"*, 75 FR 35099 (June 21, 2010), which covers ATCSs and ATCS applicants requesting an FAA Medical Clearance utilizing the MedXPress, AMCS, DIWS, and CPDSS subsystems.
- <u>OPM/GOVT-5, "*Recruiting, Examining, and Placement Records*", 79 FR 16834 (March 26, 2014), which covers Tier 1 and 2 psychological testing documentation for ATCSs and ATCS applicants maintained in DIWS.</u>

For account creation, the FAA collects information directly from applicants, AMEs, FAA employees and FAA contractors. In these four MSS subsystems, records created for the purposes of account creation, logging, and auditing are retrieved by username and therefore FAA protects these records in accordance with the following DOT published SORN:

DOT/ALL 13, "Internet/Intranet Activity and Access Records," 67 FR 30758 (May 7, 2002), which covers the FAA's retrieval of user account records in these four MSS subsystems.

The publication of this PIA further demonstrates DOT's commitment to provide appropriate transparency regarding MSS and its subsystems.

Individual Participation and Redress

DOT provides a reasonable opportunity and capability for individuals to make informed decisions about the collection, use, and disclosure of their PII. As required by the Privacy Act, individuals should be active participants in the decision-making process regarding the collection and use of their PII and they are provided reasonable access to their PII and the opportunity to have their PII corrected, amended, or deleted, as appropriate.



Applicants voluntarily submit their PII in MedXPress for account creation. They can update their MedXPress account information as needed.

Using MedXPress, applicants submit their applications to the FAA to apply for medical certificates or medical clearances using FAA Form 8500-8. Applicants voluntarily submit answers to questions in FAA Form 8500-8 as part of the medical certification or clearance process, so they are active, consenting participants in the decision-making process regarding the collection of their PII.

Applicants for medical certifications cannot change their answers themselves in MedXPress once submitted. Applicants for medical clearances do have the capability to recall their application and make corrections if: 1) an AME or FAA Flight Surgeon has not imported the application into AMCS or 2) they are still within 30 days of initiating their application. AMEs or FAA Flight Surgeons can correct information in AMCS that the applicant had previously input into MedXPress, after first advising the applicant that they are making a change and certifying that change in AMCS. DIWS maintains the original MedXPress version of the application as well as the AMCS-transmitted version to account for any changes made by the AME or FAA Flight Surgeon during the exam. Applicants can change their personal information previously input into MedXPress during subsequent applications. CHAPS records are in read-only format.

AMEs voluntarily submit their full name, DOB, and AME Serial Number to the AMCS Support Desk for account creation for AMCS, so they are active, consenting participants in the decision-making process regarding the collection of their PII as well. AMEs and other FAA employees and FAA contractors must request support from the MSS Support Desk staff for changes to their DIWS and CPDSS accounts.

Under the provisions of the Privacy Act, individuals may request searches to determine if any records in MSS subsystems pertain to them. Individuals wishing to know if their records appear may inquire in person or in writing, as follows:

Notification Procedure (for access to records):

Manager Aerospace Medical Certification Division, AAM-300 P.O. Box 25082 6500 South MacArthur Blvd. Oklahoma City, Oklahoma 73125

The request must include the following information:

- Name
- Mailing address



- Phone number and/or email address
- A description of the records sought, and if possible, the location of the records
- A statement under penalty of perjury that the requester is the individual who he or she claims to be

Contesting Record Procedures (for redress/amendment of records):

Individuals wanting to contest information about themselves that is contained in any of the MSS and its subsystems should make their request in writing, detailing the reasons for why the records should be corrected and addressing their letter to the following:

Manager Aerospace Medical Certification Division, AAM-300 P.O. Box 25082 6500 South MacArthur Blvd. Oklahoma City, Oklahoma 73125

Purpose Specification

DOT should (i) identify the legal bases that authorize a particular PII collection, activity, or technology that impacts privacy; and (ii) specify the purpose(s) for which it collects, uses, maintains, or disseminates PII.

The MSS and its subsystems enable AVS to meet its statutory obligation to certify the health of both airmen and ATCS and ATCS applicants. In addition, MSS manages the medical examination of those applicants performed by FAA AMEs and FAA Flight Surgeons.

The FAA uses MSS and its subsystems pursuant to the following legal authorities:

The FAA is required to collect and maintain information about airmen to provide medical certificates under <u>49 U.S.C 44703</u>. The statute authorizes the FAA to issue airman certificates, such as medical certificates, to individuals after it has been determined that the individual is qualified for and is physically able to perform the duties related to the position authorized by the certificate.

FAA Order 3930.3C provides the policies and procedures of FAA employees in safetyrelated duties, specifically ATCSs, including the requirement that they seek medical clearance prior to performing their stated official duties.

MSS collects and maintains SSNs, which are voluntarily provided by airmen and FAA employees, for the purpose of proper identification of the individual applicant for medical examination by the AME or Flight Surgeon, as provided by <u>14 Code of Federal Regulations</u> (CFR) § 67.4. Failure to provide the SSN is not grounds for refusal to issue a medical



certificate, as provided by Section 7 of 5 U.S.C. §552a. MSS generates a pseudo-SSN if the airman chooses not to provide an SSN during the application process.

Data in MSS and its subsystems will be used by the FAA consistent with the purposes for which it was collected as described in:

- <u>DOT/FAA 856, "Airmen Medical Records</u>", 88 FR 37301 (June 7, 2023), which covers airmen requesting an FAA Medical Certificate utilizing the MedXPress, AMCS, DIWS, CPDDS, and CHAPS subsystems.
- <u>DOT/FAA 811, "FAA Health Information Record Systems", 87 FR 54751</u> (September 7, 2022), which covers FAA employees who visit the clinic for nonoccupational reasons, and contractors and members of the public who visit the CAMI Occupational Health Clinic and the FAA Health Unit at Headquarters in Washington D.C.
- <u>OPM/GOVT-10</u>, *"Employee Medical File System Records"*, 75 FR 35099 (June 21, 2010), which covers ATCSs and ATCS applicants undergoing FAA Medical Clearance utilizing MSS and its subsystems.
- OPM/GOVT-5, "*Recruiting, Examining, and Placement Records*", 79 FR 16834 (March 26, 2014), which covers Tier 1 and 2 psychological testing documentation for ATCSs and ATCS applicants that is maintained in DIWS.

User account data is used by the FAA consistent with the purposes for which it was collected as described in:

DOT/ALL 13, "Internet/Intranet Activity and Access Records," 67 FR 30758 (May 7, 2002), which covers the FAA's retrieval of system access records in these four MSS subsystems by username.

MedXPress collects and maintains the following PII from applicants in preparation for the FAA medical exam:

- <u>General</u>: class of medical certificate applied for or Applicant ID.
- <u>Personal information</u>: name, DOB, SSN or pseudo-SSN, mailing address, phone numbers, citizenship, color of hair and eyes, and sex.
- <u>Prior certification</u>: type of airman certificate held, occupation, employer, prior denial/suspension/or revocation of FAA airman medical certificate, total pilot time to date and in past 6 months, and date of last FAA medical application.
- <u>Physical, mental, and other health information</u>: use of medication, use of contact lenses while flying, medical history (consisting of a list of checkboxes describing different physical and mental diseases, medical conditions, and medical disability benefits, medical notes or comments and last visits to any health professional (date of visit, name, street, city, zip code, state, country, type of professional).



- <u>Arrest history</u>: arrest or conviction and/or administrative action history.
- Other identifiers: Applicant ID, confirmation number, IP address, MID; and
- <u>MedXPress Account creation</u>: name, email address. The applicant may supply PII in response to three security questions.

AMCS collects and maintains the following PII from AME's and FAA Flight Surgeons during account creation, and from AMEs and FAA Flight Surgeons and applicants during medical examinations and issuance of medical certificates or clearances.

- <u>AMEs/FAA Flight Surgeons Account Creation</u>: Full name, DOB, and AME Serial Number (in case of AME).
- <u>Imported information from MedXPress: see list above.</u>
- Information from medical history and physical exam:
 - Height and weight
 - o Statement of Demonstrated Ability (SODA), SODA Serial Number
 - Head, face, neck, and scalp
 - Nose, sinuses, mouth, and throat
 - o Ear and ear drums
 - Eyes, ophthalmoscopic exam, pupils, and ocular motility
 - Lungs and chest
 - \circ Heart and vascular system
 - Abdomen, viscera, and anus
 - o Skin
 - o G-U system
 - Upper and lower extremities
 - o Spine and musculoskeletal system
 - Identifying body marks, scars, and tattoos
 - Lymphatic system
 - Neurologic system
 - Psychiatric conditions
 - General systemic condition
 - Hearing
 - Vision distant, near, intermediate, color sense, field of vision, and heterophoria
 - Blood pressure and pulse
 - o Urine test
 - ECG results if test administered
 - Comments on applicant's medical history
 - o AME's decision for: issuance, denial, or deferment
 - Disqualifying defects in the case of a denial



o Exam certification by AME or FAA Flight Surgeon

DIWS collects and maintains the following PII from FAA employees and FAA contractors during account creation and from applicants as a result of scanning and uploading supplemental medical documentation into DIWS for the purposes of assisting AAM personnel in making final decisions on medical certification or medical clearances.

- <u>Account Creation</u>: name, DOB, region.
- <u>Imported PII from MedXPress and AMCS</u>: see lists above.
- <u>PII from supplemental medical documents and Tier 1 and 2 psychological testing</u>: name, DOB, address, and medical diagnoses.
- <u>Other Identifiers</u>: PI Number.

CPDSS collects and maintains the following PII from FAA Flight Surgeons and AAM personnel during account creation, and from applicants for medical clearances during their clearance review process.

- <u>Account Creation</u>: name, DOB, region.
- Imported PII from MedXPress and AMCS: see list above from DIWS.
- <u>PII from supplemental medical documents and Tier 1 and 2 psychological testing</u>: see list above from DIWS.
- <u>PII from FAA Form 3900-7</u>: name, AME name and signature, medical clearances granted or denied, corrective lenses information.

CHAPS

- Name and suffix
- DOB
- SSN and pseudo-SSN
- Federal Employee Number
- ID Number
- Home address
- Personal telephone number
- Medical/family history
- Sex
- Employee information including employee type, region, facility, organization; routing symbol, occupation, company, and work phone number
- Allergies, medications, medical alerts, immunizations; and
- Treatments, results of screening programs, including lab tests, x-rays, and medications.

Internal Sharing:



When required, medical application records may be shared with FAA Federal Air Surgeon medical specialty consultants, who are FAA contractors. These FAA-employed consultant physicians are provided with a temporary paper record for their use while composing a medical opinion. The paper documents are watermarked with instructions for destruction after use.

MSS subsystems exchange information internally with different FAA systems as follows to identify, verify, or contact individuals who have applied for medical certifications or medical clearances or AMEs who perform medical exams:

1) DIWS sends and receives data with the AVS Registry Comprehensive Airman Information System (CAIS) for the purpose of ensuring data in both systems are synchronized and updated with airmen's current information. DIWS sends data to AVS Registry CAIS which includes the applicant's name, optional SSN, address, height, weight, hair color, eyes color, sex, citizen code and any data changes regarding applicant. Medical examination information sent includes examination date, MID number, AME number, hearing, vision, electrocardiogram date, pathology codes, medications, medical history, certificate number, blood pressure information, and previous MID numbers. Data received from AVS Registry CAIS includes the applicant's demographic information, name, optional SSN, and address.

2) DIWS transmits an encrypted file containing the name, suffix, SSN, DOB, sex, height, weight, state, and eye color to the Investigation Tracking System for the purpose of comparing recently medically certificated airmen to the National Driving Record (NDR).

3) DIWS provides AME data to the Designee Management System (DMS) for purposes of displaying in the AME performance reports. This data includes total number of exams performed by class, decisions (deferred or denied), length of time to schedule and conduct exams, numbers and types of judgement errors, and length of time to submit exam results. For any exams considered late, MSS provides the exam date, the MID, the applicant's name, and the AME name and number. For exams containing errors, MSS provides the MID, applicant's name, exam date, error code and description, and the AME name and date. In turn, DMS provides MSS with AME profile information for the purposes of medical certification clearance. AME profile information includes the AME's Designee Number, DOB, name, address, phone number, email address, medical specialty, degree, appointment date, clinic name and location, medical license, AME type and region.

4) CPDSS sends the name, suffix, applicant ID, DOB, sex, city, state, zip, and clearance instruction letter date to Aviator for the purposes of tracking onboarding of ATCS applicants.



MSS subsystems receive the FAA email addresses from FAA's Directory Service for the purpose of authenticating all FAA employees and FAA contractors in the MSS systems.

Data Minimization & Retention

DOT should collect, use, and retain only PII that is relevant and necessary for the specified purpose for which it was originally collected.

The FAA minimizes its data collection, maintenance, use, and retention in MSS and its subsystems to the information necessary to certify the health of applicants and manage the medical examination of those applicants performed by FAA AMEs and FAA Flight Surgeons.

MedXPress employs several techniques to minimize data retention. MedXPress automatically deletes applications not completed and submitted within 30 days. If an applicant elects to cancel their application, MedXPress deletes all information. If an applicant does not schedule their exam with an AME within 60 days, all PII in MedXPress associated with an applicant's application will be deleted.

Temporary paper documents used by FAA medical specialty consultants for second opinions are watermarked with destruction instructions.

MSS and its subsystems maintain records for medical certificate and clearance applications in accordance with the following National Archives and Records Administration (NARA) schedules:

- DAA-0237-2024-0003-0001: Aerospace Medical Certification Files superseded NARA schedule N1-237-05-005 covers Aerospace Medical Certification Files. Original records or microfilm of original records that have not been digitally imaged are destroyed 50 years after the case is closed. Original records or microfilm of original records that have been digitally imaged are destroyed after determining the electronic image is an adequate substitute for the original and no longer needed for agency business. DIWS records (or its equivalent) are destroyed 50 years after the case is closed, or when no longer needed for agency business, whichever is later. Outputs of DIWS (or its equivalent) include copies of records in the system and ad hoc reports and are destroyed when no longer needed for agency business.
- 2. <u>NARA General Records Schedule (GRS)</u>, 2.1, *Employee Acquisition Records*, approved April 2020, covers records agencies create in the process of hiring employees for Federal Civilian service. Under item 142 (Pre-appointment files), records concerning prospective employees who do not enter on duty are retained as temporary and destroyed 1 year after prospective employee is no longer a candidate.



- 3. <u>NARA General Records Schedule (GRS), 2.7, *Employee Health Records*, approved April 2020, covers the records of FAA employees with safety-sensitive positions that are collected as a result of the medical clearance application process. Under item 10, Clinic Scheduling Records are retained as temporary and destroyed when three years old, but longer retention is authorized for business use.</u>
- 4. <u>NARA General Records Schedule (GRS) 3.2</u>, *Information Systems Security Records*, approved January 2023 governs system access records. Under item 30, system access records are destroyed when business use ceases.

Use Limitation

DOT shall limit the scope of its PII use to ensure that the Department does not use PII in any manner that is not specified in notices, incompatible with the specified purposes for which the information was collected, or for any purpose not otherwise permitted by law.

Records in MSS and its subsystems are shared outside of DOT only in accordance with approved routine uses.

The sharing of airmen medical certification records is conducted in accordance with DOT/FAA 856, "*Airmen Medical Records*", 88 FR 37301 (June 7, 2023). In addition to other disclosures generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act, all or a portion of the records or information contained in this system may be disclosed outside DOT as a routine use pursuant to 5 U.S.C. § 552a(b)(3) as follows:

- To the National Transportation Safety Board (NTSB), entire records related to the medical suitability of specific airmen for purposes of aircraft investigation responsibilities and regulatory enforcement activities as it relates to medical certification.
- To the general public, upon request, records such as information relating to an individual's physical status or condition used to determine statistically the validity of FAA medical standards; and information relating to an individual's eligibility for medical certification, requests for exemptions from medical requirements, and requests for review of certificate denials.
- To other federal agencies, personally identifiable information about airmen for the purpose of verifying the accuracy and completeness of medical information provided to FAA in connection with applications for airmen medical certification.
- To Aviation Medical Examiners (AMEs), past airmen medical certification history data on a routine basis so that AMEs may render the best medical certification decision.
- To Federal, State, local and Tribal law enforcement agencies, information about airmen when engaged in an official investigation in which an airman is involved.



- To third parties, including employers and prospective employers of such individuals, records of an individual's positive drug test result, alcohol test result of 0.04 or greater breath alcohol concentration, or refusal to submit to testing required under a DOT-required testing program. Such records will also contain the names and titles of individuals who, in their commercial capacity, administer the drug and alcohol testing programs of aviation entities; and
- To Federal, State, local, and Tribal law enforcement, national security or homeland security agencies, information about airmen whenever such agencies are engaged in the performance of threat assessments affecting the safety of transportation or national security.

The sharing of CHAPS patient visit records is conducted in accordance with DOT/FAA 811, "FAA Health Information Record Systems", 87 FR 54751 (September 7, 2022). In addition to other disclosures generally permitted under 5 U.S.C. §552(a)(b) of the Privacy Act, all or a portion of the records or information contained in the system may be disclosed outside DOT as a routine use pursuant to 5 U.S.C § 552a(b)(3) as follows:

- To external medical professionals and independent entities, any patient records required to support their reviews for purposes of determining medical quality assurance and safety of FAA health facilities.
- To private or other government health care providers, portions of patient records required for consultation, referral, and continuity of care or medical contingency support.
- To disclose information to a Federal, state, or local agency to the extent necessary to comply with laws governing reporting of communicable diseases.
- To disclose to a requesting agency, organization, or individual minimal personal and health information concerning those individuals who are reasonably believed to have contracted an illness or been exposed to or suffered from a health hazard while visiting FAA facilities.
- Additional routine uses are listed in the "Departmental Routine Uses" section of SORN DOT/FAA 811. Please visit the SORN to review the full list of circumstances where the FAA may release information covered by the SORN without explicit consent.

The sharing of medical clearance records of FAA employees in covered positions is conducted in accordance with <u>OPM/GOVT-10</u>, *"Employee Medical File System Records"*, <u>75 FR 35099 (June 21, 2010</u>).¹⁵ In addition to other disclosures generally permitted under 5 U.S.C. §552(a)(b) of the Privacy Act, all or a portion of the records or information contained

¹⁵ The applicable routine uses cited in <u>OPM/GOVT-10</u>, "Employee Medical File System Records", 75 FR <u>35099 (June 21, 2010)</u> can be viewed by visiting the link.



in the system may be disclosed outside DOT as a routine use pursuant to 5 U.S.C § 552a(b)(3) as follows:

- To disclose information to the Department of Labor, Department of Veterans Affairs, Social Security Administration, Federal Retirement Thrift Investment Board, or a national, State, or local social security type agency, when necessary to adjudicate a claim (filed by or on behalf of the individual) under a retirement, insurance, or health benefit program.
- To disclose information to a Federal, State, or local agency to the extent necessary to comply with laws governing reporting of communicable disease.
- To disclose information to another Federal agency, to a court, or a party in litigation before a court or in an administrative proceeding being conducted by a federal agency when the Government is a party to the judicial or administrative proceeding.
- To disclose information to the Department of Justice, or in a proceeding before a court, adjudicative body, other administrative body before which the agency is authorized to appear, when:
 - The agency, or any component thereof; or
 - Any employee of the agency in his or her official capacity; or
 - Any employee of the agency in his or her individual capacity where the Department of Justice or the agency has agreed to represent the employee; or
 - The United States, where the agency determines that litigation is likely to affect the agency or any of its components, is a party to litigation or has an interest in such litigation, and the use of such records by the Department of Justice or the agency is deemed by the agency to be relevant and necessary to the litigation, provided, however, that in each case it has been determined that the disclosure is compatible with the purpose for which the records were collected.
- To disclose pertinent information to the appropriate Federal, State, or local agency responsible for investigating, prosecuting, enforcing, or implementing a statute, rule, regulation, or order when the disclosing agency becomes aware of an indication of a violation or potential violation of civil or criminal law or regulation.

The sharing of medical clearance records of FAA employees in covered positions is conducted in accordance with <u>OPM/GOVT-5</u>, *"Recruiting, Examining, and Placement* <u>*Records*", 79 FR 16834 (March 26, 2014)</u>. In addition to other disclosures generally permitted under 5 U.S.C. §552(a)(b) of the Privacy Act, all or a portion of the records or information contained in the system may be disclosed outside DOT as a routine use pursuant to 5 U.S.C § 552a(b)(3) as follows:



- To refer applicants, including current and former Federal employees to Federal agencies for consideration for employment, transfer, reassignment, reinstatement, or promotion.
- To disclose pertinent information to the appropriate Federal, State, or local agency responsible for investigating, prosecuting, enforcing, or implementing a statute, rule, regulation, or order, when the disclosing agency becomes aware of an indication of a violation or potential violation of civil or criminal law or regulation.
- To disclose information to any source from which additional information is requested (to the extent necessary to identify the individual, inform the source of the purposes of the request, and to identify the type of information requested), when necessary to obtain information relevant to an agency decision concerning hiring or retaining an employee, issuing a security clearance, conducting a security or suitability investigation of an individual, classifying positions, letting a contract, or issuing a license, grant or other benefit.

The sharing of user account information is conducted in accordance with <u>SORN DOT/ALL</u> <u>13, "*Internet/Intranet Activity and Access Records*", 67 FR 30758 (May 7, 2002). In addition to other disclosures generally permitted under 5 U.S.C. §552(a)(b) of the Privacy Act, all or a portion of the records or information contained in the system may be disclosed outside DOT as a routine use pursuant to 5 U.S.C § 552a(b)(3) as follows:</u>

- To provide information to any person(s) authorized to assist in an approved investigation of improper access or usage of DOT computer systems.
- To an actual or potential party or his or her authorized representative for the purpose of negotiation or discussion of such matters as settlement of the case or matter, or informal discovery proceedings.
- To contractors, grantees, experts, consultants, detailees, and other non-DOT employees performing or working on a contract, service, grant cooperative agreement, or other assignment from the Federal government, when necessary to accomplish an agency function related to this system of records.
- To other government agencies where required by law.

The Department has also published 15 additional routine uses applicable to all DOT Privacy Act systems of records, including this system. These routine uses are published in the Federal Register at <u>75 FR 82132</u>, <u>December 29</u>, 2010, and <u>77 FR 42796</u>, <u>July 20</u>, 2012, under "Prefatory Statement of General Routine Uses."



Data Quality and Integrity

In accordance with Section 552a(e)(2) of the Privacy Act of 1974, DOT should ensure that any PII collected and maintained by the organization is accurate, relevant, timely, and complete for the purpose for which it is to be used, as specified in the Department's public notice(s).

FAA has taken reasonable steps to confirm the accuracy of PII in MSS and its subsystems by collecting information directly from individuals whenever possible. MedXPress, AMCS, DIWS, and CPDSS also collect information directly from the individual during account creation. CHAPS contains read-only historical records but no longer collects information from individuals. Changes cannot be made to records in CHAPS. The MedXPress and AMCS subsystems have built-in functionality enabling review of FAA Form 8500-8 data for completeness and accuracy, as applicants, AME's, and FAA Flight Surgeons move through application screens and/or tabs, as well as at the time of submitting the application. Completeness and accuracy validation in MSS and its subsystems is enabled via the application fields, such as user selection of drop-down menus, character limitation in open text fields, where applicable, and field validations.

Applicants for medical certifications cannot change their answers themselves in MedXPress once submitted. Applicants for medical clearances do have the capability to recall their application and make corrections if: 1) an AME or FAA Flight Surgeon has not imported the application into AMCS, or 2) they are still within 30 days of initiating their application. AMEs or FAA Flight Surgeons can correct an applicant's information in AMCS, which the applicant had previously inputted in MedXPress, after first advising the applicant that they are making a change. DIWS maintains the original MedXPress version of the application as well as the AMCS-transmitted version to account for any changes made by the AME or FAA Flight Surgeon at the time of the exam. Changes made by the AMEs or FAA Flight Surgeons in this fashion do not export back to MedXPress. However, applicants can correct their personal information in MedXPress later during subsequent applications.

Applicants can change their MedXPress account information themselves. AMEs and FAA Flight Surgeons can request support from the AMCS Support Desk for changes to their AMCS accounts. AMEs, FAA Flight Surgeons, FAA employees, and FAA contractors can request support from the MSS Support Desk staff for changes to their DIWS and CPDSS accounts.

Security

DOT shall implement administrative, technical, and physical measures to protect PII collected or maintained by the Department against loss, unauthorized access, or disclosure, as required by the Privacy Act, and to ensure that organizational planning and responses to privacy incidents comply with OMB policies and guidance.



FAA protects PII with reasonable security safeguards against loss or unauthorized access, destruction, usage, modification, or disclosure. These safeguards incorporate standards and practices required for federal information systems under the Federal Information Security Management Act (FISMA) and are detailed in Federal Information Processing Standards (FIPS) Publication 200, Minimum Security Requirements for Federal Information and Information Systems, dated March 2006, and National Institute of Standards and Technology (NIST) Special Publication (SP) 800-53, Revision 5, Security and Privacy Controls for Federal Information Systems and Organizations, dated September 23, 2020.

MSS and its subsystems employ specific administrative, technical, and physical measures to protect PII against loss, unauthorized access, or disclosure. Access to MSS and its subsystems is granted on a need-to-know basis. Personnel can only access the internal interfaces via FAA's network using their PIV card. All PII is encrypted in transit and at rest. Personnel receive guidance on their duties as they relate to collecting, using, processing, and securing PII. This includes mandatory annual security and privacy awareness training, as well as a review of the FAA Rules of Behavior. AME's certify, at the time of their designation or re-designation, that they shall protect the privacy of medical information. Fax machines at the FAA, which receive supplemental medical documents concerning applicants, are maintained behind locked doors requiring badge access and are monitored by FAA employees or FAA contractors with a need to know.

The FAA has a privacy/security incident response plan which includes procedures for detection of a privacy/security incident, remediation and response if one occurs, and notification where appropriate to protect and inform impacted individuals. In addition, the FAA conducts annual privacy/security incident response exercises to evaluate the effectiveness of this plan.

MSS has a system security plan in place. MSS was issued an Authority to Operate on August 10, 2024, after completing the authorization and accreditation process that reviews security controls and procedures and validates that MSS is compliant with appropriate information security processes and policies. MSS is categorized as a high-risk system in accordance with NIST Federal Information Processing Standards (FIPS) 199.

Accountability and Auditing

DOT shall implement effective governance controls, monitoring controls, risk management, and assessment controls to demonstrate that the Department is complying with all applicable privacy protection requirements and minimizing the privacy risk to individuals.



FAA Order 1370.121B, FAA Information Security and Privacy Program & Policy, implements the various privacy requirements of the Privacy Act of 1974 (the Privacy Act), the E-Government Act of 2002 (Public Law 107-347), DOT privacy regulations, Office of Management and Budget (OMB) mandates, and other applicable DOT and FAA information and information technology management procedures and guidance.

In addition to these practices, the FAA implements additional policies and procedures as they relate to the access, protection, retention, and destruction of PII. Federal employees and contractors who work with MSS and its subsystems are given clear guidance about their duties related to collecting, using, and processing privacy data. Guidance is provided in mandatory annual security and privacy awareness training, as well as FAA Order 1370.121B. The FAA will conduct periodic privacy compliance reviews of the MSS as related to the requirements of OMB Circular A-130, Managing Information as a Strategic Resource.

Responsible Official

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Approval and Signature

Karyn Gorman Chief Privacy Officer, Office of the Chief Information Officer