VA Environmental Health Registry evaluations are free, voluntary medical assessments for Veterans who may have been exposed to certain environmental hazards during military service. Evaluations alert Veterans to possible long-term health problems that may be related to exposure specific to environmental hazards during their military service. The registry data may help VA understand and respond to these health problems more effectively and may be useful for research purposes.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published at 84 FR 42993 on August 19, 2019, page 42993.

Affected Public: Individuals or Households.

Estimated Annual Burden: 20,000. Estimated Average Burden per Respondent: 60 minutes.

Frequency of Response: Once annually.

Estimated Number of Respondents: 20,000.

By direction of the Secretary.

## Danny S. Green,

Interim VA Clearance Officer, Office of Quality, Performance and Risk (OQPR), Department of Veterans Affairs.

[FR Doc. 2019–26419 Filed 12–6–19; 8:45 am]

BILLING CODE 8320-01-P

# DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0568]

Agency Information Collection Activity Under OMB Review: Submission of School Catalog to the State Approving Agency

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before January 8, 2020.

ADDRESSES: Submit written comments on the collection of information through www.Regulations.gov, or to the Office of Information and Regulatory Affairs, Office of Management and Budget, Attn: VA Desk Officer; 725 17th St. NW, Washington, DC 20503 or sent through electronic mail to oira\_submission@omb.eop.gov. Please refer to "OMB Control No. 2900–0568" in any correspondence.

FOR FURTHER INFORMATION CONTACT: Danny S. Green at (202) 421–1354.

#### SUPPLEMENTARY INFORMATION:

Authority: Title 38 CFR, sections 21.4253 and 21.4254, restates this statutory requirement in the Code of Federal Regulations, and Title 38 U.S.C. 3676

*Title:* Submission of School Catalog to the State Approving Agency (VA Form = No Form).

OMB Control Number: 2900–0568. Type of Review: Revision of a currently approved collection.

Abstract: State approving agencies and VA use the catalogs to determine what courses can be approved for VA training. VA receives catalogs when institutions change their education programs. In general, the catalogs are collected approximately once a year. Without this information, VA and the State approving agencies cannot determine what courses could be approved.

Affected Public: Individuals or households.

Estimated Annual Burden: 2,582 hours.

Estimated Average Burden per Respondent: 15 minutes.

Frequency of Response: On occasion. Actual Number of Respondents: 10,330.

By direction of the Secretary.

#### Danny S. Green,

VA Interim Clearance Officer, Office of Quality, Performance and Risk, Department of Veterans Affairs.

[FR Doc. 2019–26391 Filed 12–6–19; 8:45 am]

BILLING CODE 8320-01-P

# DEPARTMENT OF VETERANS AFFAIRS

Annual Pay Ranges for Physicians, Dentists, and Podiatrists of the Veterans Health Administration (VHA)

**AGENCY:** Department of Veterans Affairs **ACTION:** Notice.

**SUMMARY:** VA is hereby giving notice of annual pay ranges, which is the sum of

the base pay rate and market pay for VHA physicians, dentists, and podiatrists as prescribed by the Secretary for Department-wide applicability. These annual pay ranges are intended to enhance the flexibility of the Department to recruit, develop, and retain the most highly qualified providers to serve our Nation's Veterans and maintain a standard of excellence in the VA health care system.

**DATES:** Annual pay ranges are applicable February 16, 2020.

# FOR FURTHER INFORMATION CONTACT:

Leah Brady, HR Specialist, Human Resources Center of Expertise, VHA Workforce Management and Consulting Office (10A2A), Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420, (631) 514–9622. This is not a toll-free number.

SUPPLEMENTARY INFORMATION: Under 38 U.S.C. 7431(e)(1)(A), not less often than once every 2 years, the Secretary must prescribe for Department-wide applicability the minimum and maximum amounts of annual pay that may be paid to VHA physicians, dentists, and podiatrists. 38 U.S.C. 7431(e)(1)(B) allows the Secretary to prescribe separate minimum and maximum amounts of annual pay for a specialty or assignment. Pursuant to 38 U.S.C. 7431(e)(1)(C), amounts prescribed under paragraph 7431(e) shall be published in the Federal Register and shall not take effect until at least 60 days after date of publication.

In addition, under 38 U.S.C. 7431(e)(4), the total amount of compensation paid to a physician, dentist, or podiatrist under title 38 of the United States Code cannot exceed, in any year, the amount of annual compensation (excluding expenses) of the President. For the purposes of subparagraph 7431(e)(4), "the total amount of compensation" includes base pay, market pay, performance pay, recruitment, relocation, and retention incentives, incentive awards for performance and special contributions, and fee basis earnings.

#### Background

The "Department of Veterans Affairs Health Care Personnel Enhancement Act of 2004" (Public Law (Pub. L.) 108–445) was signed by the President on December 3, 2004. The major provisions of the law established a new pay system for VHA physicians and dentists consisting of base pay, market pay, and performance pay. While the base pay component is set by statute, market pay is intended to reflect the recruitment and retention needs for the specialty or assignment of a particular physician or

dentist at a facility. Further, performance pay is intended to recognize the achievement of specific goals and performance objectives prescribed annually. These three components create a system of pay that is driven by both market indicators and employee performance, while recognizing employee tenure in VHA.

On April 8, 2019, the President signed Public Law 116–12, which amended 38 U.S.C. 7431 to include podiatrists within the physician and dentist pay system, authorizing podiatrists to receive base pay, market pay, and performance pay. With the amendment, podiatrists are also subject to the same limitations and requirements as physicians and dentists under 7431.

With regard to the Pay Tables for physicians, dentists, and podiatrists, there have been changes to the minimum and maximum amounts for Pay Tables 1, 2, and 5. However, the maximum amount for Pay Table 4 has remained unchanged since the 2016 publication in the **Federal Register**.

#### Discussion

VA identified and utilized salary survey data sources which most closely represent VA comparability in the areas of practice setting, employment environment, and hospital/health care system. The Association of American Medical Colleges, Hospital and Healthcare Compensation Service, Sullivan, Cotter, and Associates, Medical Group Management Association, and the Survey of Dental Practice published by the American Dental Association were collectively utilized as benchmarks from which to prescribe annual pay ranges across the scope of assignments/specialties within the Department. While aggregating the data, a preponderance of weight was given to those surveys which most directly resembled the environment of the Department.

In constructing annual pay ranges to accommodate the more than 40 specialties that currently exist in the VA system, VA continued the practice of grouping specialties into consolidated pay ranges. This allows VA to use multiple sources that yield a high number of salary data which helps to minimize disparities and aberrations that may surface from data involving smaller numbers for comparison and from sample change from year to year. Thus, by aggregating multiple survey sources into like groupings, greater confidence exists that the average compensation reported is truly

representative. In addition, aggregation of data provides for a large enough sample size and provides pay ranges with maximum flexibility for pay setting for VHA physicians, dentists, and podiatrists.

In developing the annual pay ranges, a few distinctive principles were factored into the compensation analysis of the data. The first principle is to ensure that both the minimum and maximum salary is at a level that accommodates special employment situations, from fellowships and medical research career development awards to Nobel Laureates, high-cost areas, and internationally renowned clinicians. The second principle is to provide ranges large enough to accommodate career progression, geographic differences, subspecialization, and other special factors.

Clinical specialties were reviewed against available, relevant private sector data. The specialties are grouped into four clinical pay ranges that reflect comparable complexity in salary, recruitment, and retention considerations. The Steering Committee recommended realigning Deputy Network Chief Medical Officer from Pay Table 5 Tier 3 to Pay Table 5 Tier 4 to distinguish this assignment as an advanced clinical and leadership role at the Network level.

The Steering Committee also recommended realigning Chief of Staff from Pay Table 5 Tier 4 to Pay Table 5 Tier 3 for complexity level 3 facilities and from Pay Table 5 Tier 3 to Pay Table 5 Tier 2 for complexity level 2 facilities to distinguish this assignment as an advanced clinical and leadership role at the Medical Center level.

Tier level	Minimum	Maximum		
Pay Table 1—Clinical Specialty				
Tier 1	\$104,843 110,000	\$243,000 252.720		
Tier 3	120,000			

Pay Table 1—Covered Clinical Specialties

Endocrinology

Preventive Medicine

Endodontics
General Practice—Dentistry
Geriatrics
Infectious Diseases
Internal Medicine/Primary Care/Family Practice
Palliative Care
Periodontics
Podiatry (General)
Podiatry (Surgery—Forefoot, Rearfoot/Ankle,
Advanced Rearfoot/Ankle)

Prosthodontics Rheumatology

All other specialties or assignments not requiring a specific specialty training or certification

Tier level	Minimum	Maximum		
Pay Table 2—Clinical Specialty				
Tier 1	\$104,843 115.000	\$282,480 306.600		
Tier 3	130,000	336,000		

Pay Table 2—Covered Clinical Specialties

Allergy and Immunology
Hospitalist
Nephrology
Neurology
Pathology
Physical Medicine and Rehabilitation/Spinal
Cord Injury
Psychiatry

Tier level	Minimum	Maximum		
Pay Table 5—Chief of Staff and Network				

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Tier 1	\$150,000	\$350,000		
Tier 2	147,000	325,000		
Tier 3	145,000	300,000		
Tier 4	140,000	285,000		

Chief Medical Officers

Pay Table 5—Covered Assignments

VHA Chiefs of Staff and Network
Chief Medical Officers Tier assignments
for Chiefs of Staff are based on
published facility complexity level. Tier
1—Network Chief Medical Officer and
Chief of Staff—Complexity Levels 1a
and 1b. Tier 2—Chief of Staff—
Complexity Levels 1c and 2. Tier 3—
Chief of Staff—Complexity Level 3 and
facilities with no designation level. Tier
4—Deputy Network Chief Medical
Officer and Deputy Chief of Staff.

## **Signing Authority**

The Secretary of Veterans Affairs, or designee, approved this document and authorized the undersigned to sign and submit the document to the Office of the Federal Register for publication electronically as an official document of the Department of Veterans Affairs. Pamela Powers, Chief of Staff, Department of Veterans Affairs, approved this document on December 2, 2019, for publication.

### Jeffrey M. Martin,

Assistant Director, Office of Regulation Policy & Management, Office of the Secretary, Department of Veterans Affairs.

[FR Doc. 2019–26435 Filed 12–6–19; 8:45 am]

BILLING CODE 8320-01-P