



**BILLING CODE: 4510-CF-P**

**DEPARTMENT OF LABOR**

**Office of Workers' Compensation Programs**

**Agency Information Collection Activities; Comment Request; Request for Examination and/or Treatment**

**ACTION:** Notice.

**AGENCY:** Division of Longshore and Harbor Workers' Compensation, Office of Workers' Compensation Programs.

**SUMMARY:** The Department of Labor (DOL) is soliciting comments concerning a proposed extension for the authority to conduct the information collection request (ICR) titled, "Request for Examination and/or Treatment." This comment request is part of continuing Departmental efforts to reduce paperwork and respondent burden in accordance with the Paperwork Reduction Act of 1995 (PRA).

**DATES:** Consideration will be given to all written comments received by **[INSERT DATE 60 DAYS AFTER THE DATE OF PUBLICATION IN THE FEDERAL REGISTER]**.

**ADDRESSES:** A copy of this ICR with applicable supporting documentation; including a description of the likely respondents, proposed frequency of response, and estimated total burden may be obtained for free by contacting Anjanette Suggs by telephone at 202-354-9660 or by email at [suggs.anjanette@dol.gov](mailto:suggs.anjanette@dol.gov).

Submit written comments about this ICR by mail or courier to the U.S. Department of Labor, Office of Workers' Compensation Programs, Room S3323, 200 Constitution

Avenue, N.W., Washington, DC 20210; or by email at [suggs.anjanette@dol.gov](mailto:suggs.anjanette@dol.gov). Please note that comments submitted after the comment period will not be considered.

**FOR FURTHER INFORMATION CONTACT:** Anjanette Suggs by telephone at 202-354-9660 or by email at [suggs.anjanette@dol.gov](mailto:suggs.anjanette@dol.gov).

**SUPPLEMENTARY INFORMATION:** The DOL, as part of continuing efforts to reduce paperwork and respondent burden, conducts a pre-clearance consultation program to provide the general public and Federal agencies an opportunity to comment on proposed and/or continuing collections of information before submitting them to the OMB for final approval. This program helps to ensure requested data can be provided in the desired format, reporting burden (time and financial resources) is minimized, collection instruments are clearly understood, and the impact of collection requirements can be properly assessed.

The Office of Workers' Compensation Programs administers the Longshore and Harbor Workers' Compensation Act. The Act provides benefits to workers' injured in maritime employment on the navigable waters of the United States or in an adjoining area customarily used by an employer in loading, unloading, repairing, or building a vessel. In addition, several acts extend the Longshore Act's coverage to certain other employees.

Section 33 USC 907 of the Longshore Act and 20 C.F.R. 702.419, the employer/insurance carrier is responsible for furnishing medical care for the injured employee for such period of time as the injury or recovery period may require. Form LS-1 serves two purposes: it authorizes the medical care, and it provides a vehicle for the treating physician to report the findings, treatment given, and anticipated physical condition of the employee.

Legal authority for this information collection is found at 33 USC 907

Regulatory authority is found at 20 C.F.R. 702.419.

This information collection is subject to the PRA. A Federal agency generally cannot conduct or sponsor a collection of information, and the public is generally not required to respond to an information collection, unless the OMB under the PRA approves it and displays a currently valid OMB Control Number. In addition, notwithstanding any other provisions of law, no person shall generally be subject to penalty for failing to comply with a collection of information that does not display a valid Control Number. *See* 5 CFR 1320.5(a) and 1320.6.

Interested parties are encouraged to provide comments to the contact shown in the ADDRESSES section. Written comments will receive consideration, and summarized and included in the request for OMB approval of the final ICR. In order to help ensure appropriate consideration, comments should mention OMB No. 1240-0029.

Submitted comments will also be a matter of public record for this ICR and posted on the Internet, without redaction. The DOL encourages commenters not to include personally identifiable information, confidential business data, or other sensitive statements/information in any comments.

The DOL is particularly interested in comments that:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility.

- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used.
- Enhance the quality, utility, and clarity of the information to be collected; and
- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

*Agency:* DOL-Office of Workers' Compensation Programs, DLHWC.

*Type of Review:* Extension of currently approved collection

*Title of Collection:* Longshore and Harbor Workers' Compensation Act Pre-Hearing Statement

*Form:* LS-1, Request for Examination and/or Treatment

*OMB Control Number:* 1240-0029.

*Affected Public:* Individuals or Households.

*Estimated Number of Respondents:* 3,800

*Frequency:* On occasion.

*Total Estimated Annual Responses:* 60,000

*Estimated Average Time per Response:* 32.5 minutes.

*Estimated Total Annual Burden Hours:* 48,750 hours.

*Total Estimated Annual Other Cost Burden:* \$2,544,300

(Authority: 44 U.S.C. 3506(c)(2)(A))

**Anjanette Suggs,**

*Agency Clearance Officer.*

[FR Doc. 2020-12632 Filed: 6/10/2020 8:45 am; Publication Date: 6/11/2020]