SUPPORTING STATEMENT

REHABILITATION MAINTENANCE CERTIFICATE (FORM OWCP-17) OMB NO. 1215-0161

1. Explain the circumstances that make the collection of information necessary. Identify any legal or administrative requirements that necessitate the collections. Attach a copy of the appropriate section of each statute and of each regulation mandating or authorizing the collection of information

The Office of Workers' Compensation Programs (OWCP) administers the Federal Employees' Compensation Act (FECA) and the Longshore and Harbor Workers' Compensation Act (LHWCA). These acts provide vocational rehabilitation services to eligible workers with disabilities. Section 8111(b) of the FECA and § 908(g) of the LHWCA provide that persons undergoing such vocational rehabilitation shall receive maintenance allowances as additional compensation. Form OWCP-17 is used to collect information necessary to determine the amount of any maintenance allowance to be paid.

2. Indicate how, by whom, and for what purpose the information is to be used. Except for a new collection, indicate the actual use the agency has made of the information received from the current collection.

2. Form OWCP-17 is submitted to OWCP by contractors it hires to provide vocational rehabilitation services. Form OWCP-17 requests payment of an additional rehabilitation maintenance amount to cover incidental costs of obtaining vocational rehabilitation services. For example, when a disabled worker attends a training program, Form OWCP-17 may be used to request reimbursement of the out-of-pocket costs such as travel expenses.

3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g. permitting electronic submission of responses, and the basis for the decision for adopting this means of collection. Also,

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describe any consideration of using information technology to reduce burden.

3. In accordance with the Government Paperwork Elimination Act, the current Form OWCP-17 is electronically interactive and posted on the Internet.

http://www.dol.gov/esa/owcp/dfec/regs/compliance/OWCP-17.pdf.

The rehabilitation counselor may fill out Items 1-9, 11 and 12 of the form on-line and , print out a paper copy, obtain the certifications of the injured worker and the rehabilitation facility official, and mail the form to OWCP for further action. Once the extension of 1215-0161 is approved, the currently posted version of this form will be updated to reflect the most current expiration date.

4. Describe efforts to identify duplication. Show specifically why any similar information already available cannot be used or modified for use for the purposes described in Item 2 above.

4. The information requested in this collection is not a duplicate of any information available elsewhere. The respondents are the only sources of the data that are needed to process the request for payment.

5. If the collection information impacts small businesses or other small entities (Item 5 of 014B Form 83-1), describe any methods used to minimize burden

5. This information collection has been streamlined to obtain the minimum information needed for OWCP to evaluate a proposed rehabilitation plan while imposing the minimum burden on respondents, and does not have a significant economic impact on a substantial number of small entities.

6. Describe the consequence of Federal program or policy activities if the collection is not conducted or is conducted less frequently, as well as any technical or legal obstacles to reducing burden.

6. If this information were not collected, OWCP would be unaware of any variations in a respondent's training schedule and overpayments of maintenance allowances would occur.

7. Explain any special circumstance.

7. There are no applicable special circumstances for this information collection.

8. If applicable, provide a copy and identify the date and page number of publication in the Federal Register of the agency's notice, required by 5 CFR 1320.8 (d), soliciting comments on the information collection prior to submission to OMB. Summarize public comments received in response to that notice and describe actions taken by the agency in response to these comments.

8. No outside consultations have taken place concerning the use of the Form OWCP-17. However, OWCP has been evaluating the rehabilitation maintenance allowances for approximately 30 years and has had sufficient experience with Form OWCP-17 to maximize its utility. OWCP has not received any complaints about the manner in which the form has been used. Should any complaints or suggestions for improvement be received they will be carefully evaluated and appropriate action will be taken.

A Federal Register Notice inviting public comment was published on February 10, 2009. No comments were received.

9. Explain any decision to provide any payment or gift to respondents, other than remuneration of contractors or grantees.

There is no gift or payment to respondents other than remuneration to OWCP's contractors for services and expenses.

10. Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statute, regulations, or agency policy.

10. All OWCP-17s that are submitted are fully protected by the Privacy Act in the following systems of records: DOL/GOVT-1 (FECA); and DOL/ESA-15 (LHWCA). Respondents are informed of this confidentiality by the following statement on the OWCP-17: "The information collected will be handled and stored in compliance with the Freedom of Information Act, Privacy Act of 1974 and OMB Cir. No. 180."

11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly

considered private. This justification should include the reasons why the agency considers the questions necessary; the specific uses to be made of the information, the explanation to be given to persons from whom the information is requested, and any steps to be taken to obtain their consent.

11. There are no questions of a sensitive nature contained on the form.

12. Provide estimates of the hour burden of the collection of information. The statement should:

- Indicate the number of respondents, frequency of • response, annual hour burden, and an explanation of how the burden was estimated. Unless directed to do so, agencies should not make special surveys to obtain information on which to base burden estimates. Consultation with a sample of potential respondents is desirable. If the burden on respondents is expected to vary widely because of differences in activity, size, or complexity, show the range of estimated burden and explain the reason for the variance. Generally, estimates should not include burden hours for customary and usual business practices. If the request for approval is for more than one form, provide separate burden estimates for each form and aggregate the hour burdens in Item 13 of OMB Form 83-1.
- Provide estimates of annualized cost to respondents for the hour burdens for collections of information, identifying and using appropriate wage rate categories. The cost of contracting out or paying outside parties for information collection activities should not be included here. Instead, this cost should be included in Item 14.

12. Based upon experience with this form, it is estimated that 1,300 respondents (rehabilitation counselors) will file 15,600 forms annually, and that it will require 10 minutes for each respondent (rehabilitation counselor) to read instructions, fill in the basic claims information and send the form to OWCP. This estimate is considered to be reasonable since the minimal identifying information requested has been provided to the rehabilitation counselor by OWCP and is thus readily available to them from the case materials they have for the claimant in question.

15,600 forms X 0.167(10 minutes) = 2,605 hours

Because contractors are remunerated for all services and expenses including this information collection, there is no annualized cost of the burden hours to respondents.

13. Annual Costs to Respondents (capital/start-up & operation and maintenance).

13. Because respondents are reimbursed for all services and expenses, there are no operation and maintenance costs connected with this information collection.

14. Provide estimates of annualized cost to the Federal government.

14. The average OWCP rehabilitation specialist who reviews the form is a GS-12, step 6. The average hourly rate using 2009-RUS is \$37.93. It takes an average of ten minutes to review the form. There are approximately 15,600 forms received annually by both FECA and LHWCA. The cost for this review is \$98,280 (37.93 x 0.167 = 6.33) ($6.33 \times 15,600 =$ \$98,748), plus mailing costs of \$6,552 ($0.42 \times 15,600 =$ \$6,552) (15,600 x .03 = \$468.00) and printing costs of \$950.

- FECA: Completed forms are submitted for payment through OWCP's bill processing contractor at a cost of \$1.10 per form. 12,480 forms are paid by the FECA program at a cost of \$13,728.00 (\$1.10 x 12,480 = \$13,728.00)
- LHWCA: Completed forms are submitted for payment in the LHWCA program by rehabilitation payment clerks at the average hourly salary of GS-9, step 4 of \$24.66 using 2009-RUS. 3,120 forms are processed for payment (10 minutes each) by LHWCA at a cost of \$12,848(3,120 x 0.167 per form x \$24.66 = \$12,848).

Total review/processing cost: \$98,748 + \$6,552 + \$468.00 + \$950 + \$13,728.00 + \$12,848.00 = \$133,294.

Reimbursement to contractors is made at \$70 per hour, at 0.167 hours per form x 15,600 = \$182,364.

Total Federal Costs: (133,294 +182,364.00 = \$315,658)

15. Explain the reasons for any program changes or adjustments reported in Items 13 or 14 of the OMB Form 83-I.

15. There are no changes in the burden.

16. For collections of information whose results will be published, outline plans for tabulation and publication. Address any complex analytical techniques that will be used. Provide the time schedule for the entire project, including beginning and ending dates of the collection information, completion of report, publication dates, and other actions.

16. This information will not be published.

17. If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons that display would be inappropriate.

17. The expiration date will be displayed on the form.

18. Collections of Information Employing Statistical Methods:

Explain each exception to the certification statement identified in Item

"Certification for Paperwork Reduction Act Submissions," of OMB Form 83-I.

18. There are no exceptions to the certification.