Note

OSHA is initiating a regulatory review of its existing safety and health standards in response to the President's Executive Order 13563, "Improving Regulations and Regulatory Review" (76 FR 38210). This review, the Standards Improvement Project–Phase IV (SIP-IV), is the fourth in a series of rulemaking actions to improve and streamline OSHA standards. OSHA's Standards Improvement Projects remove or revise individual requirements in safety and health standards that are confusing, outdated, duplicative or inconsistent. The goal of the proposed rulemaking is to reduce regulatory burden while maintaining or enhancing worker safety and health.

As part of the SIP-IV rulemaking OSHA is proposing a series of revisions to requirements addressing employee chest X-rays in the Agency's health standards. First, OSHA is proposing to remove the requirement that employers provide periodic chest X-rays in the following standards: §1910.1029 – Coke Oven Emissions; §1910.1045 - Acrylonitrile, and §1910.1018 – Inorganic Arsenic. This requirement exposes unnecessary radiation to workers as well as reduces the cost to employers to provide chest X-rays annually as part of the medical examinations. By removing the chest X-ray requirement, the medical examinations would be reduced by 15 minutes (.25 hour) since the worker would spend less time away from the job.

Second, the Agency is proposing to update the chest x-ray requirements for several of its standards by adding the option of digital radiography to its existing standards because digital radiography systems are rapidly replacing traditional analog film-based systems in medical facilities. The following standards will be updated to reflect this change; §1910.1029 - Coke Oven Emissions, §1910.1045 - Acrylonitrile, and §1910.1018 - Inorganic Arsenic; Asbestos standards: §1910.1001 Asbestos (General Industry), §1915.1001 Asbestos (Maritime), and §1926.1101 Asbestos (Construction); and two Cadmium standards: §1910.1027 - Cadmium (General Industry), and §1926.1127 - Cadmium (Construction).

Also, OSHA is proposing to remove the provisions in its standards that require employers to collect and record employees' social security numbers. Therefore, the Agency requests to remove the social security number collection requirements from the provisions in this Information

SUPPORTING STATEMENT FOR THE INFORMATION COLLECTION REQUIREMENTS OF THE ACRYLONITRILE STANDARD (29 CFR 1910.1045)¹ OFFICE OF MANAGEMENT AND BUDGET (OMB) CONTROL NO. 1218-0126 (August 2016)

A. JUSTIFICATION

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

The main objective of the Occupational Safety and Health Act ("OSH Act" or "Act") is to "assure so far as possible every working man and woman in the Nation safe and healthful working conditions and to preserve our human resources" (29 U.S.C. 651). To achieve this objective, the OSH Act specifically authorizes "the development and promulgation of occupational safety and health standards" (29 U.S.C. 651). The Act states further that "[t]he Secretary . . . shall prescribe such rules and regulations as [he/she] may deem necessary to carry out [his/her] responsibilities under this Act, including rules and regulations dealing with the inspection of an employer's establishment" (29 U.S.C. 651).

To protect employee health, the OSH Act authorizes the Occupational Safety and Health Administration ("OSHA" or "Agency") to develop standards that provide for "monitoring or measuring employee exposure" to occupational hazards and "prescribe the type and frequency of medical examinations and other tests which shall be made available [by the employer] to employees exposed to such hazards . . . to most effectively determine whether the health of such employees is adversely affected by such exposure" (29 U.S.C. 655). Moreover, the Act directs the Agency to "issue regulations requiring employers to maintain accurate records of employee exposures to potentially toxic materials or other harmful physical agents which are required to be monitored and measured," and further specifies that such regulations provide "for each employee or former employee to have access to such records as will indicate [their] own exposure to toxic materials or harmful physical agents" (29 U.S.C. 657). In addition, the OSH Act mandates that "[e]ach employer shall make, keep and preserve, and make available to the Secretary [of Labor] ... such records regarding [his/her] activities relating this Act as the Secretary ... may prescribe by regulation as necessary or appropriate for the enforcement of this Act or for developing information regarding the causes and prevention of occupational accidents and illnesses" (29 U.S.C. 657).

Under the authority granted by the OSH Act, the Agency published a standard for general industry that regulates Acrylonitrile (AN) exposure of employees (§ 1910.1045; "the Standard"). OSHA based the Standard on a determination that occupational exposure to AN poses a hazard

¹ The purpose of this Supporting Statement is to analyze and describe the burden hours and costs associated with provisions of this Standard that contain paperwork requirements; it does not provide information or guidance on how to comply with, or how to enforce, the Standard.

to employees. In this regard, research demonstrates that AN exposure causes cancer in laboratory animals, and results in a higher-than-expected incidence of cancer in humans. Repeated or prolonged skin exposure to AN may also cause irritation and dermatitis in humans. Items 2 and 12 below describe in detail the specific information collection requirements of the Standard.

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.

A. Exposure monitoring (§1910.1045(e))

Initial monitoring \$1910.1045(e)(2) – Each employer who has a place of employment in which AN is present shall monitor each such workplace and work operation to accurately determine the airborne concentrations of AN to which employees may be exposed.

Purpose: Monitoring allows employers to identify areas and operations that may require additional reduction in airborne AN to meet the permissible exposure limit (PEL). The results of initial exposure monitoring also assist employers in determining the need for engineering controls, instituting or modifying work-practice controls, and in selecting appropriate respiratory protection to prevent workers from overexposure.

Frequency §1910.1045(*e*)(3(*ii*) - If the monitoring required by this section reveals employee exposure to be at or above the action level but at or below the permissible exposure limits, the employer must repeat such monitoring for each such employee at least every 6 months.

Frequency §1910.1045(*e*)(3)(iii) - If the monitoring required by this section reveals employee exposure to be in excess of the permissible exposure limits, the employer must repeat these determinations for each such employee at least quarterly. The employer must continue these quarterly measurements until at least two consecutive measurements, taken at least seven (7) days apart, are at or below the permissible exposure limits, and thereafter the employer must monitor at least every 6 months.

Purpose: Periodic monitoring allows employers to determine if changes in processes, materials, or environmental conditions result in increased concentrations of airborne AN, and to evaluate the effectiveness of control methods selected to decrease these exposures. In addition, periodic exposure monitoring reminds both the employer and workers of the continuing need to protect against the hazards that could result from worker overexposure to AN. The results of exposure monitoring also provide examining physicians with information that may be useful in determining the etiology of an occupationally-related disease.

Additional monitoring \$1910.1045(e)(4) - Whenever there has been a production, process, control, or personnel change which may result in new or additional exposures to AN, or whenever the employer has any other reason to suspect a change which may result in new or

additional exposures to AN, additional monitoring which complies with this paragraph shall be conducted.

Purpose: Additional monitoring ensures that the workplace is safe, or notifies the employer of the need to increase worker protection.

Employee notification §1910.1045(e)(5)

\$1910.1045(e)(5)(i) - The employer must, within 15 working days after the receipt of the results of any monitoring performed under this section, notify each affected employee of these results either individually in writing or by posting the results in an appropriate location that is accessible to employees.

\$1910.1045(e)(5)(ii) - Whenever the results indicate that the representative employee exposure exceeds the permissible exposure limits, the employer shall include in the written notice a statement that the permissible exposure limits were exceeded and a description of the corrective action being taken to reduce exposure to or below the permissible exposure limits.

Purpose: Written notices assure that workers receive accurate exposure data, and; in addition, provides them with information regarding the specific action the employer is taking to lower their exposure and furnish them with a safe and healthful workplace.

B. Compliance program (§1910.1045(g)(2))

\$1910.1045(g)(2)(i) - The employer shall establish and implement a written program to reduce employee exposures to or below the permissible exposure limits solely by means of engineering and work practice controls, as required by paragraph (g)(1) of this section.

\$1910.1045(g)(2)(ii) - Written plans for these compliance programs shall include at least the following:

<u>\$1910.1045(g)(2)(ii)(A)</u> - A description of each operation or process resulting in employee exposure to AN above the permissible exposure limits;</u>

<u>§1910.1045(g)(2)(ii)(B)</u> - An outline of the nature of the engineering controls and work practices to be applied to the operation or process in question;

<u>§1910.1045(g)(2)(ii)(C)</u> - A report of the technology considered in meeting the permissible exposure limits;

<u>§1910.1045(g)(2)(ii)(D)</u> - A schedule for implementation of engineering and work practice controls for the operation or process, which shall project completion no later than November 2, 1980; and

<u>§1910.1045(g)(2)(ii)(E)</u> - Other relevant information.

\$1910.1045(g)(2)(iv) - Written plans shall be submitted upon request to the Assistant Secretary and the Director, and shall be available at the worksite for examination and copying by the Assistant Secretary, the Director, or any affected employee or representative.

Note: OSHA has determined that the requirement for employers to make information available upon request to the Assistant Secretary is not a collection of information; OSHA typically requests access to information during an inspection, and information collected by the Agency during the investigation is not subject to the PRA under 5 CFR 1320.4(a)(2). While NIOSH may use information collected from employers for research purposes, the Agency does not anticipate that NIOSH will request employers to make this information available during the approval period. Therefore, the burden for the employer to make this information available to NIOSH is zero.

\$1910.1045(g)(2)(v) - The plans required by this paragraph must be revised and updated at least annually to reflect the current status of the program.

Purpose: This requirement commits the employer to evaluating worker exposures and establishing an organized and comprehensive program for reducing worker exposures to or below the PEL. Revising and updating the written program serves to remind employers to implement and maintain the exposure-control methods required by the Standard.

C. Respirator program (§1910.1045(h)(2))²

\$1910.1045(h)(2)(i) - (i) The employer must implement a respiratory protection program in accordance with \$1910.134(b) through (d) (except (d)(1)(iii), (d)(3)(iii)(b)(1), and (2)), and (f) through (m), which covers each employee required by this section to use a respirator

Purpose: Developing a respirator program will ensure that employers establish a standardized procedure for selecting, using, and maintaining respirators for each workplace requiring respirator use. Developing written procedures assures that employers implement a respirator program that meets the needs of their workers.

D. Emergency situations (§1910.1045(i))

Written plans \$1910.1045(i)(1)(i) - A written plan for emergency situations shall be developed for each workplace where liquid AN is present. Appropriate portions of the plan shall be implemented in the event of an emergency.

² The Agency accounts for the burden hours and cost resulting from the respiratory protection requirements under the Information Collection Request (ICR) for the Respiratory Protection Standard, OMB Control Number 1218-0099.

*§*1910.1045(*i*)(1)(*ii*) - The plan shall specifically provide that employees engaged in correcting emergency conditions shall be equipped as required in paragraph (h) of this section until the emergency is abated.

§1910.1045(i)(1)(iii) - Employees not engaged in correcting the emergency shall be evacuated from the area and shall not be permitted to return until the emergency is abated.

<u>Purpose</u>: Emergency plans provide workers with information (e.g., evacuation routes, appropriate respirators) for responding appropriately to an unexpected release of AN, thereby minimizing their AN exposures under these conditions.

E. Cleaning and replacement (§1910.1045(j)(2))

Informing laundry personnel \$1910.1045(j)(2)(v) - The employer shall inform any person who launders or cleans protective clothing or equipment of the potentially harmful effects of exposure to AN.

<u>Purpose</u>: This information allows laundry personnel to protect themselves from AN exposure.

F. Medical surveillance (§1910.1045(n))

*General §*1910.1045(*n*)(*1*)(*i*) - The employer shall institute a program of medical surveillance for each employee who is or will be exposed to AN at or above the action level, without regard to the use of respirators. The employer shall provide each such employee with an opportunity for medical examinations and tests in accordance with this paragraph.

\$1910.1045(n)(1)(ii) - The employer shall assure that all medical examinations and procedures are performed by or under the supervision of a licensed physician, and that they shall be provided without cost to the employee.

Initial examinations §1910.1045(*n*)(2) - At the time of initial assignment, or upon institution of the medical surveillance program, the employer shall provide each affected employee an opportunity for a medical examination, including at least the following elements:

\$1910.1045(n)(2)(i) - A work history and medical history with special attention to skin, respiratory, and gastrointestinal systems, and those nonspecific symptoms, such as headache, nausea, vomiting, dizziness, weakness, or other central nervous system dysfunctions that may be associated with acute or with chronic exposure to AN;

\$1910.1045(n)(2)(ii) - A complete physical examination giving particular attention to the peripheral and central nervous system, gastrointestinal system, respiratory system, skin, and thyroid;

\$<u>1910.1045(n)(2)(iii)</u> - A 14- by 17-inch or other reasonably-sized standard film or digital posterior-anterior chest X-ray; and

\$1910.1045(n)(2)(iv) - Further tests of the intestinal tract, including fecal occult blood screening, for all workers 40 years of age or older, and for any other affected employees for whom, in the opinion of the physician, such testing is appropriate.

Periodic examinations §1910.1045(n)(3)(i) - The employer shall provide the examinations specified in paragraphs (n)(2)(i)-(n)(2)(ii) and (n)(2)(iv) of this section at least annually for all employees specified in paragraph (n)(1) of this section.

\$1910.1045(n)(3)(ii) - If an employee has not had the examination specified in paragraph (n)(2) (i)-(n)(2)(ii) and (n)(2)(iv) of this section within 6 months preceding termination of employment, the employer shall make such examination available to the employee prior to such termination.

Additional examinations §1910.1045(*n*)(4) - If the employee for any reason develops signs or symptoms which may be associated with exposure to AN, the employer shall provide an appropriate examination and emergency medical treatment.

Purpose: Documentation and maintenance of the medical-examination results provide a continuous record of worker health. Physicians use these records to determine the extent to which workers, since their last examination, experience health effects related to their AN exposure. Further, if symptoms of organic damage appear, the physician often needs information about a worker's previous medical conditions to make an accurate diagnosis of the new condition, ascertain its apparent cause, and identify a course of treatment.

Information provided to the physician (§1910.1045(n)(5)) - The employer shall provide the following information to the examining physician:

§1910.1045(n)(5)(i) - A copy of this standard and its appendixes;

§1910.1045(n)(5)(ii) - A description of the affected employee's duties as they relate to the employee's exposure;

§1910.1045(n)(5)(iii) - The employee's representative exposure level;

§1910.1045(n)(5)(iv) - The employee's anticipated or estimated exposure level (for preplacement examinations or in cases of exposure due to an emergency);

\$1910.1045(n)(5)(v) - A description of any personal protective equipment used or to be used; and

*§*1910.1045(*n*)(5)(*vi*) - Information from previous medical examinations of the affected employee, which is not otherwise available to the examining physician.

Purpose: Making this information available to the physician assists the physician in evaluating the worker's health and fitness for specific job assignments involving AN exposure. Additionally, if symptoms of an occupationally-related disease appear, the physician often needs information about a worker's previous medical conditions to make an accurate diagnosis of the new condition, its apparent cause, and the course of treatment required. Medical records also ensure that workers can determine whether or not they require treatment, or to evaluate the effectiveness of the employer's exposure-reduction program.

Physician's written opinion §1910.1045(*n*)(6)(*i*) - The employer shall obtain a written opinion from the examining physician which shall include:

<u>§1910.1045(n)(6)(i)(A)</u> - The results of the medical examination and test performed;

 $\underline{\$1910.1045(n)(6)(i)(B)}$ - The physician's opinion as to whether the employee has any detected medical condition(s) which would place the employee at an increased risk of material impairment of the employee's health from exposure to AN;

<u>\$1910.1045(n)(6)(i)(C)</u> - Any recommended limitations upon the employee's exposure to AN or upon the use of protective clothing and equipment such as respirators; and

<u>\$1910.1045(n)(6)(i)(D)</u> - A statement that the employee has been informed by the physician of the results of the medical examination and any medical conditions which require further examination or treatment.

Purpose: Requiring the employer to obtain a physician's written opinion is to provide the employer with medical information to aid in determining the initial placement of workers, and to assess the worker's ability to use protective clothing and equipment. The physician's written opinion also provides information to the employer about whether or not the worker has a condition indicating overexposure to AN. The requirement that the physician's opinion be in writing permits retention of the information for later reference. Providing workers with a copy of the physician's written opinion informs them of the medical-examination results so that they can assist in determining the need for, and evaluate the effectiveness of, treatment or other interventions.

G. Employee information and training (§1910.1045(o))

Upon further consideration, the requirements that employers provide training to workers under paragraph (o)(1)(i),(ii),(iii), (iv) are not considered to be a collection of information. OSHA is not taking burden for this activity under Item 12 of this Supporting Statement.

H. Communication of Hazards (§1910.1045(p))³

Hazard communication—general. **§1910.1045(p)(1)(iii)** The employer shall include AN and AN-based materials in the program established to comply with the Hazard Communication Standard (HCS) (§1910.1200). The employer shall ensure that each employee has access to labels on containers of chemicals and substances associated with coke oven processes and to safety data sheets, and is trained in accordance with the provisions of HCS and paragraph (k) of this section. The employer shall ensure that at least the following hazard is addressed: Cancer.

§1910.1045(p)(2)(i) - The employer shall post signs to clearly indicate all workplaces where AN concentrations exceed the permissible exposure limits. The signs shall bear the following legend:

DANGER ACRYLONITRILE (AN) MAY CAUSE CANCER RESPIRATORS PROTECTION MAY BE REQUIRED IN THIS AREA AUTHORIZED PERSONNEL ONLY

<u>Purpose</u>: These signs serve to warn workers that they are in or near a hazardous area. Warning signs also supplement the training workers receive under the Standard.

\$1910.1045(p)(2)(ii) - The employer shall assure that signs required by this paragraph (p)(2) are illuminated and cleaned as necessary so that the legend is readily visible.

\$1910.1045(p)(2)(iii) - Prior to June 1, 2016, employers may use the following legend in lieu of that specified in paragraph (p)(2)(i) of this section:

DANGER ACRYLONITRILE (AN) CANCER HAZARD AUTHORIZED PERSONNEL ONLY RESIRATORY MAY BE REQUIRED

\$1910.1045(p)(3) - Labels. (i) the employer shall ensure that precautionary labels are in compliance with paragraph (p)(1)(i) of this section and are affixed to all containers of liquid AN and AN-based materials not exempted under paragraph (a)(2) of this section. The employer shall ensure that labels remain affixed when the materials are sold, distributed, or otherwise leave the employer's workplace.

The provisions containing the paperwork requirements associated with signs and labels specify the design, format, and specific language for these materials. Therefore, OSHA is taking no burden for these provisions because it is providing the information needed by employers to meet these requirements. (See "Controlling Paperwork Burden on the Public," 5 CFR 1320.3(c)(2).)

(ii) Prior to June 1, 2015, employers may include the following information on precautionary labels required by this paragraph (p)(3) in lieu of the labeling requirements in paragraph (p)(1) of this section:

DANGER CONTAINS ACRYLONITRILE (AN) CANCER HAZARD

(iii) The employer shall ensure that the precautionary labels required by this paragraph (p)(3) are readily visible and legible.

Purpose: Warning labels inform downstream employers and workers of the hazards associated with AN, and that they may need to implement special practices to ensure against AN exposure. Furthermore, warning labels alert employers who, in the absence of such labels, may not know that AN is present in their workplace and, consequently, that they must comply with the Standard.

I. Recordkeeping (§1910.1045(q))

Objective data for exempted operations \$1910.1045(q)(1)(i) - Where the processing, use, and handling of materials made from or containing AN are exempted pursuant to paragraph (a)(2)(ii) of this section, the employer shall establish and maintain an accurate record of objective data reasonably relied upon in support of the exemption.

§1910.1045(q)(1)(ii) - This record shall include at least the following information:

<u>§1910.1045(q)(1)(ii)(A)</u> - The material qualifying for exemption;

<u>§1910.1045(q)(1)(ii)(B)</u> - The source of the objective data;

 $\underline{\$1910.1045(q)(1)(ii)(C)}$ - The testing protocol, results of testing, and/or analysis of the material for the release of AN;

 $\underline{\$1910.1045(q)(1)(ii)(D)}$ - A description of the operation exempted and how the data supports the exemption; and

<u>\$1910.1045(q)(1)(ii)(E)</u> - Other data relevant to the operations, materials, and processing covered by the exemption.

\$1910.1045(q)(1)(iii) - The employer shall maintain this record for the duration of the employer's reliance upon such objective data.

<u>Purpose</u>: The purpose of this information collection requirement is to discourage abuse of the exemption. Under the recordkeeping provisions of the Standard, notably paragraph (q)(4)(ii), workers and their representatives have access to the information and data used by an employer to

determine whether or not the exemption applies to their workplace. Such access enables workers to assure that the determinations are reasonable and the exemption warranted. Maintaining a record of the information and objective data used in making the determinations permits OSHA to ascertain whether or not the employer complied with the requirements of this provision.

Exposure monitoring \$1910.1045(q)(2) – The employer shall establish and maintain an accurate record of all monitoring required by paragraph (e) of this section.

§1910.1045(q)(2)(ii) - This record shall include:

<u>§1910.1045(q)(2)(ii)(A)</u> - The dates, number, duration, and results of each of the samples taken, including a description of the sampling procedure used to determine representative employee exposure;

<u>§1910.1045(q)(2)(ii)(B)</u> - A description of the sampling and analytical methods used and the data relied upon to establish that the methods used meet the accuracy and precision requirements of paragraph (e)(6) of this section;

<u>§1910.1045(q)(2)(ii)(C)</u> - Type of respiratory protective devices worn, if any; and

<u>\$1910.1045(q)(2)(ii)(D)</u> - Name and job classification of the employee monitored and of all other employees whose exposure the measurement is intended to represent.

\$1910.1045(q)(2)(iii) - The employer shall maintain this record for at least forty (40) years, or for the duration of employment plus twenty (20) years, whichever is longer.

Purpose: Maintaining these records for extended periods is necessary because of the long latency associated with the development of AN-related cancers.

Medical surveillance \$1910.1045(q)(3)(i) - The employer shall establish and maintain an accurate record for each employee subject to medical surveillance as required by paragraph (n) of this section.

§1910.1045(q)(3)(ii) - This record shall include:

<u>§1910.1045(q)(3)(ii)(A)</u> - A copy of the physician's written opinions;

<u>§1910.1045(q)(3)(ii)(B)</u> - Any employee medical complaints related to exposure to AN;

<u>\$1910.1045(q)(3)(ii)(C)</u> - A copy of the information provided to the physician as required by paragraph (n)(5) of this section; and

<u>§1910.1045(q)(3)(ii)(D)</u> - A copy of the employee's medical and work history.

Purpose: Exposure monitoring and medical surveillance provide both employers and workers with access to useful information. The exposure-monitoring and medical-surveillance records required by the Standard assist workers and their physicians in determining the need for treatment or other interventions as a result of the workers' exposure to AN. The information also alerts employers if worker overexposure to AN occurs; thereby, enabling employers to implement controls to reduce AN exposures.

\$1910.1045(q)(3)(iii) - The employer shall assure that this record be maintained for at least forty (40) years, or for the duration of employment plus twenty (20) years, whichever is longer.

Purpose: Maintaining these records for extended periods is necessary because of the long latency associated with the development of AN-related cancers.

Availability \$1910.1045(q)(4(i)) - The employer shall make all records required to be maintained by this section available, upon request, to the Assistant Secretary and the Director for examination and copying.

Note: OSHA has determined that the requirement for employers to make records available upon request to the Assistant Secretary is not a collection of information; OSHA typically requests access to records during an inspection, and information collected by the Agency during the investigation is not subject to the PRA under 5 CFR 1320.4(a)(2). While NIOSH may use records collected from employers for research purposes, the Agency does not anticipate that NIOSH will request employers to make available records during the approval period. Therefore, the burden for the employer to make this information available to NIOSH is zero.

\$1910.1045(q)(4)(ii) - Records required by paragraphs (q)(1) through (q)(3) of this section shall be provided upon request to employees, designated representatives, and the Assistant Secretary in accordance with 29 CFR 1910.1020 (a) through (e) and (q) through (i). Records required by paragraph (q)(1) shall be provided in the same manner as exposure monitoring records.

Purpose: OSHA compliance officer's uses these records to assess employer compliance with the major requirements of the Standard, while NIOSH may compile these records for research purposes. Workers and worker representatives use exposure-monitoring and medical-surveillance records to assess worker medical status over the course of employment, to evaluate the effectiveness of the employer's exposure-reduction program, and for other reasons.

Transfer of Records §1910.1045(q)(5)(i) and (ii)

\$1910.1045(q)(5)(i) - Whenever the employer ceases to do business, the successor employer shall receive and retain all records required to be maintained by this section for the prescribed period.

\$1910.1045(q)(5)(i) (*ii*) - The employer shall comply with the requirements involving transfer of records set forth in 29 CFR 1910.1020(h).

Purpose: Paragraph (h) of § 1910.1020 requires employers who cease to do business to transfer medical and exposure-monitoring records to the successor employer, who then must receive and maintain the records. If no successor employer is available, the employer must, at least three months before ceasing business, notify current workers who have records of their right to access these records⁻

OSHA considers the employer's transfer of records to a successor employer to be usual and customary communications during the transition from one employer to a successor employer. In this regard, the employer would communicate the location of all records, including employee exposure-monitoring and medical records, at the facility to the successor employer during the transfer of business operations, as a matter of usual and customary business practice. In addition, OSHA accounts for the burden hours and costs resulting from the employee notification requirements under the Information Collection Request (ICR) for its Access to Employee Exposure and Medical Records Standard (§1910.1020), OMB Control No. 1218-0065.

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 describe any consideration of using information technology to reduce burden.

Employers may use improved information technology, including electronic recording, when establishing or maintaining records. OSHA wrote the paperwork requirements of the Standard in performance-oriented language, i.e., in terms of <u>what</u> data to collect, not <u>how</u> to collect the data.

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 A.2 above.

The requirements to collect and maintain information are specific to each employer and worker involved, and no other source or agency duplicates these requirements or can make the required information available to OSHA (i.e., the required information is available only from employers).

5. If the collection of information impacts small businesses or other small entities, describe any methods used to minimize burden.

The information collection requirements of the Standard do not have a significant impact on a substantial number of small entities.

6. Describe the consequence to 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.

The Agency believes that the information collection frequencies required by the Standard are the minimum frequencies necessary to effectively monitor the exposure and health status of workers exposed to AN, and; thereby, fulfill its mandate "to assure so far as possible every working man

and woman in the Nation safe and healthful working conditions and to preserve our human resources" as specified by the OSH Act at 29 U.S.C. 651. Accordingly, if employers do not perform the required information collections, or delay in providing this information, workers will have an increased probability of developing cancer, dermatitis, and skin irritation because of their AN exposures.

- 7. Explain any special circumstances that would cause an information collection to be conducted in a manner:
 - Requiring respondents to report information to the agency more often than quarterly.
 - Requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it.
 - Requiring respondents to submit more than an original and two copies of any document.
 - Requiring respondents to retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years.
 - In connection with a statistical survey, that is not designed to produce valid and reliable results that can be generalized to the universe of study.
 - Requiring the use of a statistical data classification that has not been reviewed and approved by OMB.
 - That includes a pledge of confidentiality that is not supported by authority established in statute or regulation, that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use.
 - Requiring respondents to submit proprietary trade secret, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.

As specified in paragraph (e)(5) of the Standard, employers must notify each worker either individually in writing, or by posting the monitoring results within 15 working days after receiving the results. If the results show that a worker's exposure to AN exceeds the PEL, the employer must notify them of this finding, and inform them of the corrective actions they are taking to prevent overexposure.

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. Specifically address comments received on cost and hour burden.

Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported.

Consultation with representatives of those from whom information is to be obtained or those who must compile records should occur at least once every 3 years -- even if the collection of information activity is the same as in prior periods. There may be circumstances that may preclude consultation in a specific situation. These circumstances should be explained.

In accordance with 5 CFR 1320.11, OSHA submitted a revised Acrylonitrile Standard Information Collection Request (ICR) to the Office of Management and Budget (OMB) for the Standards Improvement Project IV proposal. OSHA is seeking comment on its proposal to eliminate the requirement to collect and record social security numbers from the Standard, remove the requirement that employers provide periodic chest X-rays, and update the chest x-ray requirements for several of its standards by adding the option of digital radiography to its existing Standards. As noted in the Section V. of the preamble, "Paperwork Reduction Act," members of the public who wish to provide comments on this ICR must submit written comments to the Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for the Department of Labor, OSHA (RIN-1218 -AC67), Office of Management and Budget, Room 10235, Washington, DC 20503, Fax: 202-395-5806 (this is not a toll-free number), e-mail OIRA_submission@omb.eop.gov. OSHA encourages commenters also to submit their comments on these paperwork requirements to the rulemaking docket, OSHA Docket Office (Docket Number OSHA-2012-0007), U.S. Department of Labor, Room N-2625, 200 Constitution Avenue, NW., Washington, DC 20210, along with their comments on other parts of the proposed rule. Commenters also may submit their comments to OSHA at *http://www.regulations.gov*, the Federal eRulemaking portal. Comments submitted in response to the notice are public records; therefore, OSHA cautions commenters about submitting personal information such as social security numbers and date of birth. These comments also will become part of the rulemaking record, and will be available for public inspection and copying in the OSHA Docket Office and at *http://www.regulations.gov*. The Agency will respond to any comments received in response to this notice.

Recognizing the importance of public participation in the SIP process, the Agency published a Request for Information (RFI) on December 6, 2012 (77 Federal Register 72781) asking the public to identify standards that were in need of revision or removal, and to explain how such action would reduce regulatory burden while maintaining or increasing the protection afforded to employees. The Agency received 26 comments in response to the RFI. Several of the proposed amendments contained in the proposed rule were recommended in the public comments received in response to the RFI. Other proposed SIP amendments were identified by the Agency's own internal review and by the Advisory Committee for Construction Safety and Health (ACCSH).

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

The Agency will provide no payments or gifts to the respondents.

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

To ensure that the personal information contained in medical records remains confidential, OSHA developed 29 CFR 1913.10 to regulate access to these records.

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 reason sons why the agency considers the questions necessary, the specific uses to be made of the information, the explanation to be given to persons form whom the information is requested, and any steps to be taken to obtain their consent.

None of the provisions in the Standard requires sensitive information.

- 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 conduct special surveys to obtain information on which to base hour burden estimates. Consultation with a sample (fewer than 10) of potential respondents is desirable. If the hour burden on respondents is expected to vary widely because of differences in activity, size, or complexity, show the range of estimated hour burden, and explain the reasons for the variance. Generally, estimates should not include burden hours for customary and usual business practices.
 - If this request for approval covers more than one form, provide separate hour burden estimates for each form and aggregate the hour burdens.
 - Provide estimates of annualized cost to respondents for the hour burdens for collections of information, identifying and using appropriate wage-rate categories.

Burden Hour and Cost Determinations

Table 2, *Summary of Annual Burden Hour Changes and Cost Estimates*, provides a summary of burden hour and cost estimates for the information collection requirements specified by the Standard.

The production, use, and exposure profiles in the Supporting Statement for the 2000 ICR (prepared May 31, 2000) used data from the *Chemical Economics Handbook* (CEH) (SRI International, September 1998) and OSHA's Regulatory Impact Analysis (RIA) completed for the final AN Standard. For this ICR update, data regarding the number of plants in each sector has been updated using the IHS Chemical Economics Handbook Marketing Research Report (2011). Table 1 below provides a summary data for plants and workers associated with different sectors that produce AN and AN-based materials.

The Agency adopted the mean hourly wage rates from the *May 2013 National Occupational Employment and Wage Estimate United States, Occupational Employment Statistics,* Bureau of Labor Statistics, U.S. Department of Labor, <u>http://www.bls.gov/oes/current/oes_nat.htm.</u> Total compensation for these occupational categories includes an adjustment of 31.2 percent for fringe benefits (*Employer Costs for Employee Compensation – March 2014, Employer Costs for*

Employee Compensation News Release, June 2014

(http://www.bls.gov/news.release/archives/ecec_06112014.htm)

This figure represents the average level of fringe benefits in the private sector. The costs of labor used in this analysis are, therefore, estimates of total hourly compensation. These hourly wages are:

- Supervisors⁴
 Production workers, excluding supervisors⁵
 Secretarial workers⁶
 \$21.45
- Industrial hygienist technicians⁷ \$31.79

6This mean hourly wage rate corresponds to SOC CODE 43-6014, "Secretaries and Administrative Assistants (Source: May 2013 National Occupational Employment and Wage Estimates, United States, U.S. Department of Labor, Bureau of Labor Statistics) <u>http://www.bls.gov/oes/current/oes_nat.htm</u>

⁴This mean hourly wage rate corresponds to SOC Code 51-1011, "First-Line Supervisors of Production and Operating Workers" (Source: May 2013 National Occupational Employment and Wage Estimates, United States, U.S. Department of Labor, Bureau of Labor Statistics.). <u>http://www.bls.gov/oes/current/oes_nat.htm</u>

⁵This mean hourly wage rate corresponds to SOC Code 51-000, "Production Occupations" (Source: May 2013 National Occupational Employment and Wage Estimates, United States, U.S. Department of Labor, Bureau of Labor Statistics). <u>http://www.bls.gov/oes/current/oes_nat.htm_</u>A Fringe Benefit rate of 30.20% was from Source: Bureau of Labor Statistics. Employer Costs for Employee Compensation – June 2014. (http://www.bls.gov/news.release/archives/ecec_09102014.htm) The multiplier applied to base compensation to determine loaded wages is 1.43 [1/(1-30.20%)]. Applying the multiplier (1.43) to base compensation (\$16.79) results in loaded wages of \$24.05.

⁷The mean hourly wage rate corresponds to SOC Code 29-9012, "Occupational Health and Safety Specialist Technicians (Source: May 2013, National Occupational Employment and Wage Estimates, United States, U. S. Department of Labor, Bureau of Labor Statistics.). <u>http://www.bls.gov/oes/current/oes_nat.htm</u>

Table 1
Summary Data for Plants and Employees Associated with Sectors that Produce AN and
AN-Based Materials ^a

Plants/Employees	AN- Production Sector	Acrylic- Fibers Sector	ABS/SAN Resins Sector ⁹	Nitrile- Rubber Sector	Totals
Total no. of plants in each sector ¹⁰	5	011	6	6	17
Total no. of employees in each sector ¹²	875	0	828	636	2,339
No. of employees per plant in each sector ¹³	175	0	138	106	419
Estimated no. of employees exposed to AN at or above the AL, but at or below the PEL, in each sector ¹⁴	146	0	138	106	390
Estimated no. of employees exposed to AN above the PEL ¹⁵	81	0	77	59	217

Regarding the time estimates for performing the wide variety of information collections required by the Standard, OSHA is using the time estimates from the previous ICR. These estimates appear to be reasonable because the Agency based them on data from the RIA, which was available for public review and comment when it published

8The following designations identify the four production sectors that produce AN or AN-based materials; AN production, Acrylic Fibers, ABS/SAN Resins, and Nitrile Rubber.

9Three of these plants produce both ABS and SAN Resins.

10Source:. IHS Chemical Economics Handbook Marketing Research Report, *Acrylonitrile* (2011), *Styrene-Acrylonitrile* (SAN) *Resins* (2011), and *Acrylonitrile-Butadiene-Styrene Resins* (2011).

11Ibid. The only acrylic fiber plant in the United States closed in April, 2005.

12Because updated information was unavailable, the Agency estimated the total number of workers in each sector by multiplying the updated total number of plants in each sector by the number of workers per plant in each sector as presented in the previous ICR update (with the exception of the acrylic-fibers sector for which there are no existing plants).

13These estimates have been retained from the previous ICR update.

14Based on available sampling data, OSHA estimates that, on average, 16.7% of the total number of workers in each production sector have AN exposures at or above the AL, but at or below the PEL.

15Based on available sampling data, OSHA estimates that, on average, 9.3% of the total number of workers in each production sector have AN exposures above the PEL.

the final AN Standard. In addition, most of the firms engaged in performing the information have many years of experience in doing so; therefore, these times are probably upper-bound estimates.

Existing Burden Hours	Proposed Burden Hours	Change	Cost
0	0	0	\$0
798	826	28	\$26,259
16	17	1	\$540
6	7	1	\$150
8	9	1	\$330
0	0	0	\$0
	0		
0	0	0	\$0
1	1	0	\$21
	0		
891	1,071	180	\$25,758
0	-117(PC)	-117(PC)	-\$2,814
48	57	9	\$1,223
48	57	9	\$1,223
0	0	0	\$0
0	0	0	\$0
0	0	0	\$0
130	130	0	\$2,789
	Hours Ho	Existing Burden Hours Burden Hours 0 0 0 0 798 826 16 17 6 7 8 9 0 0 16 17 6 7 8 9 0 0 1 1	Existing burden Hours Burden Hours Change 0 0 0 0 0 0 798 826 28 16 17 1 6 7 1 8 9 1 0 0 0 1 1 0 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

 Table 2

 Summary of Annual Burden Hour and Cost Estimates

Availability Totals	5 1,999	5 2,120	0	\$107
Medical surveillance	48	57	9	\$1,223

The following sections summarize the methodology used for estimating the number of burden hours and costs resulting from the information collection requirements of the AN Standard.

A. Exposure monitoring (§1910.1045(e))

The Agency used the data from Table 1 to determine the number of workers exposed at or above the AL and above the PEL. In addition, OSHA estimates that an industrial hygiene technician requires 1 hour to collect and analyze each sample and that an employer uses each exposure monitoring sample to represent the exposures of two workers (i.e., the worker from whom the industrial hygiene technician took the sample and another, similarly-situated, workers).

Initial monitoring (§1910.1045(e)(2))

Only new plants incur burden for initial monitoring. The Agency believes that no new plants will begin operations during the period covered by this ICR. Therefore, this paperwork requirement results in no employer burden or cost.

Periodic monitoring (§1910.1045(e)(3))

The Standard requires that employers provide semi-annual exposure monitoring to workers exposed to AN at or above the AL, but below the PEL, while workers exposed above the PEL must receive monitoring at least quarterly.

Burden hours: [(390 workers ÷ 2 workers per sample) × 1 hour × 2 (semi-annually)] + [(217 workers ÷ 2 workers per sample) × 1 hour × 4 (quarterly)] = 826 hours

Cost: 826 hours × \$31.79 = \$26,259

Additional monitoring (§1910.1045(e)(4))

The Agency assumes that each plant takes one additional exposure-monitoring sample (representing two workers) each year to determine if a change in production, process, control, or personnel increases the distribution or concentration of airborne AN. OSHA estimates that the total annual burden hours and cost of this paperwork requirement are:

Burden hours: 17 plants × 1 hour = 17 hours

Cost: 17 hours × \$31.79 = \$540

Employee notification (§1910.1045(e)(5))

Employers may post monitoring results in a readily accessible location. OSHA assumes that each of the facilities have workers exposed above the AL but below the PEL; and, workers exposed above the PEL. Employers will satisfy the semi-annual posting requirements when they quarterly post their workers monitoring results. OSHA also assumes that each of the 16 employers will conduct additional monitoring.

Burden hours: (17 plants x 4 quarterly) + (17 plants x 1 annually) × .08 hour to post = 7 hours
Cost: 7 hours × \$21.45 = \$150

B. Compliance program (§1910.1045(g)(2))

Table 1 indicates that 217 workers have AN exposures above the PEL. However, OSHA cannot determine at which plants these workers work. Therefore, for the purpose of this determination, the Agency assumes that each of the 17 plants have some workers exposed to AN above the PEL, and that each of these plants must update their compliance plans annually. OSHA estimates that a supervisor requires 30 minutes (.50 hour) to update each plan, resulting in the following total annual burden hour and cost estimates:

Burden hours: 17 plants × .50 hour × 1 annually = 9 hours **Cost**: 9 hours × \$36.68 = \$330

C. Respirator program (§1910.1045(h)(2))

The Agency accounts for the burden hours and cost resulting from the respiratory protection requirements under the Information Collection Request (ICR) for the Respiratory Protection Standard, Office of Management and Budget (OMB) Control Number 1218-0099.

D. Emergency situations (§1910.1045(i))

Written plans (§1910.1045(i)(1))

The Agency assumes that the existing plants producing AN or AN-based materials developed their emergency plans during previous clearance periods. Therefore, OSHA is not attributing any burden hours or cost to this provision.

E. Cleaning and replacement (§1910.1045(j)(2)(v))

OSHA believes that employers who produce AN or AN-based materials contract with commercial laundries to clean protective clothing, and that a secretary takes five minutes (.08

hour) to notify a contract laundry once a year of the potentially harmful effects of AN exposure. Accordingly, this provision results in the following total burden hours and cost each year:

Burden hours: 17 plants × .08 hour = 1 hour **Cost**: 1 hour × \$21.45 = \$21

F. Medical surveillance (§1910.1045(n))

OSHA estimates that a worker spends 30 minutes (0.50 hour) traveling to and from an offsite medical facility for each medical examination, and that the examination requires one (1) hour to administer (for a total of 1.50 hours).

Initial, periodic, employment-termination, and additional examinations (§1910.1045(n)(2), (n) (3), and (n)(4))

Based on the information in Table 1, the Agency estimates that 607 workers¹⁶ must receive an initial or periodic examination each year. OSHA determined that the burden for the initial examinations to be 23.1% (140) and the periodic examinations to be 467 (607 minus 140) that the number of workers requiring these examinations once a year remains constant, and that the number of new workers needing initial examinations equals to the number of workers who terminate their employment.

OSHA also estimates that 1% (6) of the 607 workers require examinations annually because they did not receive a medical examination within six months of terminating employment or they report signs or symptoms associated with AN exposure. In addition, the Agency assumes that 16.6% (101) of the workers will require additional medical examination. Therefore, the total annual burden hours and cost of these medical examinations, based on a worker wage rate of \$24.05 (and assuming that the total examination takes 1.50 hours of a worker's on-duty time), are:

Burden hours :	[(140 workers (initial examinations)) + (467 workers (periodic
	examinations)) + (101 workers (additional medical examinations)) + (6
	workers (employment termination examinations)] × 1.50 hours = 1,071
	hours
Cost:	1,071 hours × \$24.05 = \$25,758

Removing X-Rays from Periodic Exams:

Under the Standards Improvement Project Phase IV, the Agency is proposing to remove the requirement for chest x-rays from periodic exams. The time for each periodic medical examination will be reduced by 15 minutes. There are 467 workers receiving examinations

¹⁶Consisting of 390 employees exposed to AN at or above the AL, but below the PEL, and 217 employees exposed to AN at or above the PEL.

annually. This means a worker will only spend 1 hour and 15 minutes away from the job instead of 1 hour and 30 minutes.

Reduction Burden hours:467 workers (x-rays) x 0.25 hours = 117 hoursReduction cost:117 hours x \$24.05 = \$2,814

The total savings would be 117 hours

Information provided to the physician (§1910.1045(n)(5))

The Agency assumes that for each medical examination, a secretary requires five minutes (.08 hour) to compile the required information and deliver it to the physician. With 714 initial, periodic, employment-termination, and additional examinations administered each year, the total annual burden hours and cost of this provision are:

Burden hours: 714 examinations x .08 hour = 57 hours **Cost**: 57 hours × \$21.45 = \$1,223

Physician's written opinion (§1910.1045(n)(6))

OSHA assumes that a secretary takes five minutes (.08 hour) to file each of the 714 opinions in a worker's medical record, as well as deliver a copy of it to the worker, resulting in an annual total burden hour and cost estimate of:

Burden hours: 714 opinions ×.08 hour = 57 hours **Cost**: 57 hours × \$21.45 = \$1,223

G. Employee information and training (§1910.1045(o))

The Agency assumes that employers covered by the Standard developed and updated their training programs during previous clearance periods. Therefore, OSHA is not attributing any burden hours or cost to this activity.

H. Signs and labels (§1910.1045(p))

The provisions containing the paperwork requirements associated with signs and labels specify the design, format, and specific language for these materials. Therefore, OSHA is taking no burden for these provisions because it is providing the information needed by employers to meet these requirements. (See Controlling Paperwork Burden on the Public5 CFR 1320.3(c)(2).)

I. Recordkeeping (§1910.1045(q))

Objective data for exempted operations (§1910.1045(q)(1))

The Agency believes that no employer currently implements this provision. Therefore, OSHA is not attributing any burden hours or cost to it.

Exposure monitoring (§1910.1045(q)(2))

OSHA estimates that a secretary takes five minutes (.08 hour) annually to collect, file, and maintain each of the 1,628 exposure-monitoring records.¹⁷ Thus, the total burden hours and cost of this requirement each year are:

Burden hours: 1,628 records × .08 hour = 130 hours Cost: 130 hours × \$21.45 = \$2,789

Medical surveillance (§1910.1045(q)(3))

The Agency determines that a secretary requires five minutes (.08 hour) annually to collect, file, and maintain each of the 714 medical-surveillance records,¹⁸ resulting in a total yearly estimated hour burden and cost of:

Burden hours: 714 records × .08 hour = 57 hours **Cost:** 57 hours × \$21.45 = \$1,223

Availability (§1910.1045(q)(4))

The Agency assumes that 10% of the workers exposed to AN at or above the AL (i.e., 607 workers \times 10% = 61 workers),¹⁹ request access to medical records, exposure-monitoring records, training materials, or written compliance plans each year. OSHA estimates that a secretary takes five minutes (.08 hour) to make the requested record available to each worker. Therefore, the total yearly burden hours and cost associated with making the required records available to workers is:

Burden hours: 61 worker-related requests × .08 hour = 5 hours **Cost**: 5 hours × \$21.45 (secretarial)) = 107

13. Provide an estimate of the total annual cost burden to respondents or recordkeepers resulting from the collection of information. (Do not include the cost of any hour burden shown in Items 12 and 14).

19See Table 1 above for details; this total includes the employees' designated representatives.

¹⁷See "Employee monitoring (§1910.1045(e)(2)(3)and (4))" above for an explanation of the procedure used to determine the total number of exposure monitoring records (i.e., 1,628).

¹⁸ See "Information Provided to the Physician (§ 1910.1045 (n)(5))" above for an explanation of the procedure used to determine the total number of medical-surveillance records (i.e., 714).

- The cost estimate should be split into two components: (a) a total capital and start-up cost component (annualized over its expected useful life); and (b) a total operation and maintenance and purchase of service component. The estimates should take into account costs associated with generating, maintaining, and disclosing or providing the information. Include descriptions of methods used to estimate major cost factors including system and technology acquisition, expected useful life of capital equipment, the discount rate(s), and the time period over which costs will be incurred. Capital and start-up costs include, among other items, preparations for collecting information such as purchasing computers and software; monitoring, sampling, drilling and testing equipment; and record storage facilities.
- If cost estimates are expected to vary widely, agencies should present ranges of cost burdens and explain the reasons for the variance. The cost of purchasing or contracting out information collection services should be a part of this cost burden estimate. In developing cost burden estimates, agencies may consult with a sample of respondent (fewer than 10), utilize the 60-day pre-OMB submission public comment process and use existing economic or regulatory impact analysis associated with the rulemaking containing the information collection, as appropriate.
- Generally, estimates should not include purchases of equipment or services, or portions thereof, made: (1) prior to October 1, 1995, (2) to achieve regulatory compliance with requirements not associated with the information collection, (3) for reasons other than to provide information or keep records for the government, or (4) as part of customary and usual business or private practices.

Operation and Maintenance Cost

This ICR assumes that the cost of a medical examination required by the Standard is about \$202. This cost includes the medical history and physical examination (\$58), a chest X-ray (\$106), and a pulmonary-function test (\$38).²⁰ Additionally, the cost for an OSHA-accredited laboratory to analyze a sample of airborne is estimated to be about \$31.²¹

From these determinations (described below), the Agency estimates that the total capital cost of these requirements each year is \$169,554. This total consists of \$26,040 for analyzing exposure-monitoring samples, and \$143,514 to administer medical examinations.

Exposure monitoring (§1910.1045(e))

Based on the determination that employers will take 840 monitoring samplers,²² the annual capital cost for analyzing these exposure monitoring samples is:

21The previous ICR estimated that the cost for laboratory analytical services was \$29 (\$27 per sample plus \$2 for the charcoal-embedded sampling tube). Given the 6.7% increase in the Consumer Price Index discussed previously, it was assumed that the cost of laboratory services increased by 6.7% as well.

^{20&}lt;sup>20</sup> The Consumer Price Index (CPI) indicated a 6.7% increase in the price of professional medical services from December 2011 to 2014. Source: *CPI Detailed Report - February 2014* (http://www.bls.gov/cpi/cpid1402.pdf). OSHA applied this percentage to the components of a medical examination. As a result, the price increased for a medical history and physical examination from \$54 to \$58, and the pulmonary-function test increased from \$36 to \$38. However, for the cost of a chest X-ray, this ICR relies on the SIP IV Preliminary Economic Analysis which estimates that a chest x-ray costs \$68.42, the existing ICR estimates a chest x-ray costs \$99. The total cost for a medical examination is \$164.42.

Cost: 840 samples × \$31 = \$26,040

With 714 medical examinations administered annually for workers covered by the Standard,²³ the capital cost of the medical examination burden each year:

Cost: 714 examinations × \$201= \$143,514

Total cost is \$26,040 + \$143,514 = \$169,554

According to the PEA the cost of a chest x-ray is \$68.42. Therefore the current cost of an examination is estimated to be \$164.42.

Cost: 714 examinations x \$164.42 = \$117,396

Total cost is \$26,040 + \$117,396 = 143,436

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Chest x-rays are part of the initial, additional, and employment termination medical examinations:

Cost: 247 workers x \$164.42 = \$40,612

The proposal removes the requirement for annual chest x-rays:

Cost: 467 workers x \$96 = \$44,832 **Total Cost:** \$85,444

Overall total as part of removing periodic exams is \$26,040 + \$85,444 = \$111,484

The proposal would reduce medical examination costs from \$117,396 to \$85,444; a cost savings of \$31,952

14. Provide estimates of annualized cost to the Federal government. Also, provide a description of the method used to estimate cost, which should include quantification of hours, operational expenses (such as equipment, overhead, printing, and support staff), and any other expense that would not have been incurred without this collection of information. Agencies also may aggregate cost estimates from Items 12, 13, and 14 in a single table.

²²According to "Exposure monitoring (§ 1910.1045(q)(2))," employers will take a total of 390 semiannual exposure monitoring samples, another total 434 quarterly monitoring samples and 16 additional monitoring samples for a total of 840 samples

²³See "Information provided to the physician (§ 1910.1045 (n)(5))" for an explanation of the procedure used to determine the total number of employees receiving medical examinations (i.e., 714).

There is no cost to the Federal Government associated with this information collection request.

15. Explain the reasons for any program changes or adjustments.

There is an overall increase in the burden hour total from 1,999 to 2,120 hours, a total increase of 121 hours. The adjustment increase of 238 is due to an increase in the number of workers and plants; and, the program change of -117 hours is due to periodic x-rays being removed.

There was an overall adjustment cost increase from \$144,628 to \$169,554. The cost increase is the result of an increase in workers being covered by this standard, thus leading to an increase in both the number of exposure monitoring samples, 814 to 840, and in the number of worker medical examinations, from 594 to 714. And a program change of \$31,952, the cost reduction is due to the removal of periodic x-rays during the annual exams.

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.

OSHA will not publish the information collected under the Standard.

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

OSHA lists current valid control numbers in §§1910.8, 1915.8, 1917.4, 1918.4, and 1926.5 and publishes the expiration date in the Federal Register notice announcing OMB approval of the information collection requirement. (See 5 CFR 1320.3(f)(3).) OSHA believes that this is the most appropriate and accurate mechanism to inform interested parties of these expiration dates.

18. Explain each exception to the certification statement.

OSHA is not requesting an exception to the certification statement.

B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL MEHTODS

There are no collections of information employing statistical methods.