

**Department of Transportation  
Office of the Chief Information Officer**

**Supporting Statement  
391.41 CMV Driver Medication Form**

**INTRODUCTION**

This is to request the Office of Management and Budget's (OMB) renewed three-year approved clearance for the information collection request (ICR) titled, *391.41 CMV Driver Medication Form* (OMB Control No. 2126-0064), which is currently due to expire on January 31, 2020.

This supporting statement estimates the burden hours and costs for prescribing healthcare professionals to complete the voluntary *391.41 CMV Driver Medication Form, MCSA-5895*, if requested by the certified Medical Examiner (ME) for commercial motor vehicle (CMV) drivers. The current approved information collection (IC) estimated the burden hours and costs based on the number of healthcare professionals able to prescribe the use of certain medications as the baseline for the number of forms that would need to be completed annually. Since the current supporting statement was approved, new information has become available in that the Federal government published data regarding what percentage of Americans use certain prescription drugs. Because new data is now available, this supporting statement estimates the burden hours and costs to complete the form based on the population of CMV drivers that certified MEs determine may need to have the voluntary form completed on an annual basis (responses) and the number of prescribing healthcare professionals (respondents).

**Part A. Justification**

**1. CIRCUMSTANCES THAT MAKE THE COLLECTION OF INFORMATION NECESSARY**

The primary mission of the Federal Motor Carrier Safety Administration (FMCSA) is to reduce CMV crashes, injuries, and fatalities involving large trucks and buses. The Secretary of Transportation has delegated to FMCSA responsibility under 49 U.S.C. §§ 31136 and 31502 to prescribe regulations that ensure that CMVs are operated safely. As part of this mission, the Agency's Medical Programs Division works to ensure that CMV drivers engaged in interstate commerce are physically qualified and able to safely perform their work.

CMVs are by their nature a threat to highway safety if not operated properly by qualified individuals. CMVs (trucks and buses) are longer, heavier, and more difficult to maneuver than automobiles. Not only does it take a skilled driver to operate them safely, it takes a physically and mentally fit driver to do so as well. Information used to determine and certify driver medical fitness must be collected in order for our highways to be safe. FMCSA is the Federal government agency authorized to require the collection of this information. FMCSA is required by statute to establish standards for the physical qualifications of drivers who operate CMVs in interstate commerce for non-excepted industries [49 U.S.C. §§ 31136(a)(3) and 31502(b)]. The

regulations discussing this IC are outlined in the Federal Motor Carrier Safety Regulations (FMCSRs) at 49 CFR parts 390-399. The FMCSRs at 49 CFR 391.41 set forth the physical qualification standards that interstate CMV drivers who are subject to part 391 must meet, with the exception of commercial driver's license/commercial learner's permit (CDL/CLP) drivers transporting migrant workers (who must meet the physical qualification standards set forth in 49 CFR 398.3). The FMCSRs covering driver physical qualification records are found at 49 CFR 391.43, which specifies that a medical examination must be performed on CMV drivers subject to part 391 who operate in interstate commerce. The results of the examination must be recorded in accordance with the requirements set forth in that section.

Section 391.41(b)(12) of title 49 of the CFR provides that a person is medically qualified to operate a CMV if that person “[d]oes not use any drug or substance identified in 21 CFR 1308.11 Schedule I, an amphetamine, a narcotic, or other habit-forming drug;” or does not use any non-Schedule I drug or substance that is identified in the other Schedules in 21 CFR part 1308 except when the use is prescribed by a licensed medical practitioner, as defined in 49 CFR 382.107,<sup>1</sup> who is familiar with the driver's medical history and has advised the driver that the substance will not adversely affect the driver's ability to safely operate a CMV.

Because there is moderate evidence to support the contention that the licit use of opioids increases the risk of motor vehicle crashes and impacts indirect measures of driver performance negatively<sup>2</sup>, FMCSA's Medical Review Board (MRB) and Motor Carrier Safety Advisory Committee (MCSAC) recommended that FMCSA develop a standardized medication report to assist the certified ME when reviewing prescription medications that have been disclosed during the history and physical examination for CMV driver certification. They recommended that the standardized CMV driver medication questionnaire be voluntary and include the following information and questions:

1. Questionnaire should be titled “391.41 CMV Driver Medication Questionnaire.”
2. Questionnaire should request the following information:
  - a. Identifying name and date of birth (DOB) of the CMV driver.
  - b. Introductory paragraph stating purpose of the CMV Driver Medication form.
  - c. Statements of 391.41(b)(12) (*Physical Qualifications of Drivers* relating to driver use of scheduled substances) and The Driver's Role, as found in the Medical Examination Report form found at the end of 49 CFR 391.43 (*Medical Examination; Certificate of Physical Examination*).<sup>3</sup>

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1 A licensed medical practitioner means a person who is licensed, certified, or registered, in accordance with applicable Federal, State, local, or foreign laws and regulations, to prescribe controlled substances and other drugs [49 CFR 382.107].

2 *Schedule II Opioids and Stimulants & CMV Crash Risk and Driver Performance: Evidence Report and Systematic Review, October 18, 2014.*

3 After the recommendations, FMCSA began using a new version of the examination form titled Medical Examination Report Form, MCSA-5875. This version does not include The Driver's Role statement. Therefore, The Driver's Role statement no longer appears in 49 CFR 391.43, but still appears on the 391.41 CMV Driver Medication Form, MCSA-5895.

- d. Name, state of licensure, signature, address, and contact information of the prescribing health care provider, as well as the date the form was completed.
  - e. Name, signature, date, address, and contact information of the certified ME.
3. Questionnaire should include the following questions:
- a. Question 1 – List all medications and dosages that you have prescribed to the above named individual.
  - b. Question 2 – List any other medications and dosages that you are aware have been prescribed to the above named individual by another treating health care provider.
  - c. Question 3 – What medical conditions are being treated with these medications?
  - d. Question 4 – It is my medical opinion that, considering the mental and physical requirements of operating a CMV and with awareness of a CMV driver’s role (consistent with The Driver’s Role statement on page 2 of the form), I believe my patient: (a) has no medication side effects from medication(s) that I prescribe that would adversely affect the ability to operate a CMV safely; and (2) has no medical condition(s) that I am treating with the above medication(s) that would adversely affect the ability to operate a CMV safely.

FMCSA considered the recommendations and developed the 391.41 CMV Driver Medication Form, MCSA-5895.

This ICR supports the U.S. Department of Transportation (DOT) Strategic Goal of Safety by ensuring that CMV drivers are medically qualified to operate trucks and buses on our nation’s highways.

## **2. HOW, BY WHOM, AND FOR WHAT PURPOSE IS THE INFORMATION USED**

The public interest in, and right to have, safe highways requires the assurance that drivers of CMVs can safely perform the increased physical and mental demands of their duties. FMCSA’s physical qualification standards provide this assurance by requiring drivers to be examined and medically certified as physically and mentally qualified to drive.

Information used to determine and certify that a driver meets the physical qualification standards must be collected in order for our highways to be safe. The purpose of the voluntary collection of this information is to enable the certified ME to determine if the driver is physically qualified under 49 CFR 391.41 and if there are disqualifying medical conditions that would adversely affect the driver’s ability to drive safely. Section 391.41(b)(12) states that a person is physically qualified to drive a CMV if that person does not use any drug or substance identified in 21 CFR 1308.11 Schedule I, an amphetamine, a narcotic, or other habit-forming drug; or does not use any non-Schedule I drug or substance that is identified in the other Schedules in 21 CFR part 1308 except when the use is prescribed by a licensed medical practitioner, as defined in 49 CFR 382.107, who is familiar with the driver’s medical history and has advised the driver that the substance will not adversely affect the driver’s ability to safely operate a CMV. Therefore, this voluntary collection allows certified MEs responsible for issuing Medical Examiner’s Certificates (MECs) to CMV drivers to communicate with healthcare professionals responsible

for prescribing the use of certain medications. The information obtained allows certified MEs to fully understand the reasons the medications have been prescribed and to determine whether the use of the medications and the underlying condition being treated preclude the issuance of an MEC. Because there is moderate evidence to support the contention that the licit use of opioids increases the risk of a motor vehicle crashes and impacts indirect measures of driver performance negatively, the collection of this information assists certified MEs in determining whether a CMV driver is physically qualified to drive a CMV.

### **Prescribing Healthcare Professional Population**

Third-party requirements of this ICR are being considered. Certified MEs will be asking the prescribing healthcare professionals to complete the *391.41 CMV Driver Medication Form, MCSA-5895*, for CMV drivers.

### **CMV Driver Population**

In addition to the population of prescribing healthcare professionals, the population of CMV drivers who certified MEs may ask to have the *391.41 CMV Driver Medication Form, MCSA-5895*, completed by a prescribing healthcare professional, has been calculated. This ICR reflects both interstate drivers subject to the FMCSRs and intrastate drivers subject to compatible State regulations. Although Federal regulations do not require States to comply with the medical requirements in the FMCSRs, most States do mirror the Federal requirements. If intrastate CMV drivers are subject to compatible State regulations, the Agency anticipates that it is likely that these drivers use certified MEs on the National Registry of Certified Medical Examiners (National Registry) for their physical qualification examinations, which may result in certified MEs requesting prescribing healthcare professionals to complete the *391.41 CMV Driver Medication Form, MCSA-5895*.

## **3. EXTENT OF AUTOMATED INFORMATION COLLECTION**

The voluntary *391.41 CMV Driver Medication Form, MCSA-5895*, is available for download from the FMCSA website. Prescribing healthcare professionals can fax or scan and email the form to the certified ME. Consistent with OMB's commitment to minimizing respondents' recordkeeping and paperwork burdens and the increased use of secure electronic modes of communication, the Agency believes that approximately 50 percent of the *391.41 CMV Driver Medication Forms, MCSA-5895*, are transmitted electronically.

The FMCSRs covering driver physical qualification records are found at 49 CFR 391.43, which specify that a medical examination be performed on CMV drivers subject to part 391 who operate in interstate commerce. The results of the examination must be recorded in accordance with the requirements set forth in that section. Certified MEs are required to maintain records of the CMV driver medical examinations they conduct. FMCSA does not require certified MEs to maintain these records electronically. However, there is nothing to preclude a certified ME from maintaining electronic records of the medical examinations he/she conducts. FMCSA is continuously evaluating new information technology in an attempt to decrease the burden on respondents, drivers, and certified MEs.

#### **4. EFFORTS TO IDENTIFY DUPLICATION**

FMCSA is the only Federal agency with the authority to regulate the qualifications of CMV drivers operating in interstate commerce. Therefore, there is no Federal agency duplication. The Paperwork Reduction Act allows for public comment that would provide a means of identifying any duplication that exists.

#### **5. EFFORTS TO MINIMIZE THE BURDEN ON SMALL BUSINESSES**

Requiring the treating healthcare professional of the driver to provide the *391.41 CMV Driver Medication Form, MCSA-5895*, to the certified ME does affect medical clinics and practices. As such, there will be some impact on small businesses. However, because this is the driver's treating healthcare professional, it is expected the healthcare professional routinely collects this information. Therefore, it is anticipated that this IC will not have a significant impact on small businesses or require a significant time burden. In addition, the *391.41 CMV Driver Medication Form, MCSA-5895*, is voluntary and has been created to streamline the process and to only capture the data that is absolutely necessary in determining the physical qualification of CMV drivers.

#### **6. IMPACT OF LESS FREQUENT COLLECTION OF INFORMATION**

The use of this ICR is at the discretion of the certified ME to facilitate communication with treating healthcare professionals, who are responsible for prescribing certain medications, to fully understand the reasons the medications have been prescribed. This information assists the certified ME in determining whether the underlying medical condition and the prescribed medication will adversely affect the driver's safe operation of a CMV. Therefore, there is no required collection frequency. Because there is moderate evidence to support the contention that the licit use of opioids increases the risk of motor vehicle crashes and impacts indirect measures of driver performance negatively, the MRB and MCSAC recommended that FMCSA develop a voluntary and standardized medication questionnaire to assist the certified ME when reviewing prescription medications that have been disclosed during the history and physical examination for CMV driver certification.

#### **7. SPECIAL CIRCUMSTANCES**

There are no special circumstances related to this ICR.

#### **8. COMPLIANCE WITH 5 CFR § 1320.8**

FMCSA partnered with Acclaro Research Solutions, Inc. to conduct a systematic review of the literature and to identify relevant studies addressing how the licit use of prescribed Schedule II opioids and stimulants may impact the risk of CMV crashes or indirect measures of CMV driver performance. Acclaro convened a Medical Expert Panel (MEP) to discuss and review the findings. FMCSA's MRB and MCSAC provided recommendations to FMCSA based on presentations on the licit use of Schedule II medications, the *Schedule II Opioids and Stimulants*

& *CMV Crash Risk and Driver Performance: Evidence Report and Systematic Review*, and MEP opinions. In addition, FMCSA consulted the annual National Survey on Drug Use and Health (NSDUH) for the frequency of controlled drug use in the United States.

On July 3, 2019, FMCSA published a notice in the Federal Register with a 60-day public comment period to announce the proposed renewal of this information collection request (84 FR 31980). In response to the Federal Register notice requesting public comment concerning the necessity of the proposed renewal IC, the accuracy of the estimated burden, how the quality of collected information could be enhanced, and ways in which the burden could be minimized without reducing the quality of the collected information, FMCSA received two comments. The commenters were the Owner-Operator Independent Drivers Association (OOIDA) and an individual. A summary of the two comments received in response to the 60-day notice and the Agency's responses are also provided in the 30-day comment request Federal Register notice for this ICR published on November 6, 2019 (84 FR 59903). The comments and responses follow.

### **Is the collection necessary for the performance of FMCSA's functions?**

#### **OOIDA Comment**

OOIDA stated that if this ICR is renewed the number of inconsistencies will continue to grow as certified MEs with no personal relationship with the driver attempt to evaluate years of long-term medication usage. It also stated that the ICR invites second guessing of a primary physician by certified MEs who are empowered by an unreliable medical form and that studies do not show a significant number of CMV operators are crashing due to prescription medication use. OOIDA continued that this ICR will only increase problems its members have already experienced with certified MEs, which have resulted in higher costs and lengthy delays for drivers.

#### **FMCSA Response**

Section 391.41(b)(12)(ii) provides that a certified ME may only certify a driver who uses controlled drugs or substances listed on Schedules II through V in 21 CFR part 1308 if the prescribing healthcare professional provides certain information to the certified ME. Interstate CMV drivers are required to use a certified ME listed on the National Registry for their physical qualification examination and certification. Therefore, in many cases the driver is going to a certified ME from whom he or she does not routinely receive healthcare and who is not a healthcare professional prescribing medications for the driver. The 391.41 CMV Driver Medication Form, MCSA-5895, is an optional tool a certified ME can use to communicate with the prescribing healthcare professional who has a relationship with the driver and understands the driver's medical history. The form provides a standardized and efficient way for the certified ME to obtain the information needed to make a more informed medical certification determination. The decision to certify a driver is discretionary and continues to rest with the certifying ME.

FMCSA believes that use of the form should streamline the certification process and minimize the amount of time needed to obtain the necessary information from the prescribing

healthcare professional. In addition, 49 CFR 391.43(g)(4) provides a “determination pending category” that allows up to 45 days to complete the certification examination if the certified ME determines additional information is needed. The driver may continue to operate a CMV during this period, as long as the driver has an unexpired MEC.

### **Individual Comment**

This individual stated that the 391.41 CMV Driver Medication Form, MCSA-5895, would not be necessary for every examination because not every driver is taking a medication that would require the certified ME to collect this information. The individual noted that when a driver is using a Schedule II drug or any other drug that may have negative side effects, the information collected aids the certified ME in determining whether or not the driver’s prescribing physician has taken the driver’s role into consideration and standardizes the process.

### **FMCSA Response**

The individual is correct that the form would not be necessary for every examination. The comment supports that the form is useful in the certification process.

### **Ways for FMCSA to enhance the quality, usefulness, and clarity of the collected information.**

### **Individual Comment**

This individual provided the following suggestions for enhancing the quality, usefulness, and clarity of the collected information.

- Add the commercial driver’s license number as an identifier near the driver’s date of birth on the form since this is becoming the primary identifier for CMV drivers across Commercial Driver Medical Exams (CDMEs) and drug screening for FMCSA.
- Consider making this form mandatory during the CDME process for drivers currently taking a Schedule II drug.
- Facilitate use by the prescribing provider by putting the CDME information, date it was initiated, and contact information on page 1, just under the introduction (before the 49 CFR 391.41 excerpt).
- Change wording for precision in question 2 to “...prescribed to the above named individual by any other treating health care provider.”, instead of “... by another treating....”
- Add a comments section for the prescribing provider to use if having difficulty answering “yes” or “no” to question 4, or if has qualification or clarification, etc.
- Consider adding wording to “The Driver’s Role” that indicates:
  - Duties may also include overhead activity such as reaching, or forcefully pushing or pulling (adjusting rear-view mirror, tightening/loosening load straps) and squatting (inspection, on the road maintenance).

- o FMCSA does not allow drivers to be cleared medically for specific jobs or duties; a medically qualified driver must be able to do all aspects of “The Driver’s Role.”

## FMCSA Response

Because there is moderate evidence to support the contention that the licit use of opioids increases the risk of motor vehicle crashes and negatively impacts indirect measures of driver performance, FMCSA’s MRB and MCSAC recommended FMCSA develop a standardized medication questionnaire to assist the certified ME when reviewing prescription medications that have been disclosed during the history and physical examination for CMV driver certification. As part of their recommendations, they suggested what should be included on the form to assist the certified ME in making a physical qualification determination. FMCSA considered their recommendations and included the necessary information on the form.

FMCSA has considered the suggestions, but does not believe they would enhance the usefulness of the form or serve the purpose for which the form was intended to be used. Adding the driver’s license number to the form would provide unnecessary personally identifiable information to the prescribing healthcare professional. The certified ME’s contact information is already clearly set forth on page 2 of the form. The use of “by any other,” rather than “another,” is not likely to create confusion. FMCSA declines to add a comments section to question 4 because unqualified medical opinions are sought. The Driver’s Role statement adequately covers the activities suggested. Question 4 states that the medical opinions are to be consistent with The Driver’s Role statement, which is sufficient to indicate the entire statement is to be considered.

The Agency also declines to make the use of the form mandatory for Schedule II drugs, which would require a regulatory change to implement. The form was not intended to address only opioids. Moreover, 49 CFR 391.41(b)(12) provides that a certified ME may only certify a driver who uses controlled drugs or substances listed on Schedules II through V in 21 CFR part 1308 if the prescribing healthcare professional provides certain information to the certified ME. FMCSA has provided the 391.41 CMV Driver Medication Form, MCSA-5895, to be used by certified MEs at their discretion and as a resource in making medical certification determinations of interstate CMV drivers. The use of the form is voluntary. The form is just one way that certified MEs may communicate with prescribing healthcare professionals so that the certified MEs fully understand the reasons the medications have been prescribed. FMCSA encourages certified MEs to use the form as often as they find necessary.

## **9. PAYMENTS OR GIFTS TO RESPONDENTS**

With the possible exception of payments for professional services by healthcare professionals, respondents to this ICR do not receive any payments or gifts.

## **10. ASSURANCE OF CONFIDENTIALITY**

All information that is collected as part of this ICR is information that is retained by the certified ME conducting the CMV driver physical qualification examination. All medical records are kept



confidential by certified MEs listed on the National Registry. Certified MEs are required to maintain and disclose medical information and personally identifiable information in accordance with applicable Federal and State privacy laws.

FMCSA does not routinely request or maintain the *391.41 CMV Driver Medication Form, MCSA-5895*. If FMCSA requests a *391.41 CMV Driver Medication Form, MCSA-5895*, from a certified ME, the form would be kept confidential by FMCSA. The information is retained by FMCSA in accordance with the requirements of the Privacy Act of 1974. All information collected is protected by reasonable security safeguards against loss or unauthorized access, destruction, usage, modification, or disclosure. These safeguards incorporate standards and practices required for Federal information systems under the Federal Information System Management Act and are detailed in Federal Information Processing Standards Publication 200, Minimum Security Requirements for Federal Information and Information Systems, NIST Special Publication 800-53, Rev. 4, Security and Privacy Controls for Federal Information Systems and Organizations, dated April 30, 2013. FMCSA has a comprehensive information security and privacy program that contains management, operational, and technical safeguards that are appropriate for the protection of the information collected.

## **11. JUSTIFICATION FOR COLLECTION OF SENSITIVE INFORMATION**

The medical examination process requires the certified ME to inquire about aspects of driver physical and mental health, including history of frequent alcohol use, and illicit and licit drug use or habit-forming medication use. CMV drivers give consent to the collection of this information by signing the *Medical Examination Report Form, MCSA-5875*, prior to the examination.

## **12. ESTIMATE OF BURDEN HOURS FOR INFORMATION REQUESTED**

The FMCSRs at 49 CFR 391.41 set forth the physical qualification standards that interstate CMV drivers who are subject to part 391 must meet, with the exception of drivers of migrant workers (who must meet the physical qualification standards set forth in 49 CFR 398.3). The FMCSRs covering driver physical qualification records are found at 49 CFR 391.43, which specify that a medical examination be performed on CMV drivers subject to part 391 who operate in interstate commerce, resulting in a required collection of information about the physical qualification of CMV drivers. The information is collected through the physical qualification examination of the CMV driver and supporting physical qualification records. Use of the *391.41 CMV Driver Medication Form, MCSA-5895*, is voluntary and at the discretion of the certified ME.

### *Population of Prescribing Healthcare Professionals*

There are an estimated 1,223,470<sup>4</sup> healthcare professionals who are allowed to prescribe certain medications that may be affected by this IC. This includes those healthcare professionals responsible for prescribing the use of certain medications to up to 6.1 million CMV drivers. The Agency recognizes that using the 1,223,470 as the baseline number of prescribing healthcare

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<sup>4</sup> [https://www.bls.gov/oes/current/oes\\_nat.htm#\(5\)](https://www.bls.gov/oes/current/oes_nat.htm#(5)).

professionals may be a high estimation but is using information obtained from the Bureau of Labor Statistics.

### *Population of CMV Drivers*

In addition to the population of prescribing healthcare professionals, the population of CMV drivers who certified MEs may ask to have the *391.41 CMV Driver Medication Form, MCSA-5895*, completed by a prescribing healthcare professional, has been calculated to determine the estimate of burden hours and costs for this IC. This number includes interstate drivers subject to the FMCSRs and intrastate drivers subject to compatible State regulations. Although Federal regulations do not require States to comply with the medical requirements in the FMCSRs, most States do mirror the Federal requirements. If intrastate CMV drivers are subject to compatible State regulations, the Agency anticipates that it is likely that these drivers will use certified MEs on the National Registry for their physical qualification examinations, which may result in certified MEs requesting prescribing healthcare complete the *391.41 CMV Driver Medication Form, MCSA-5895*, for these drivers.

There are approximately 6.1 million CMV drivers<sup>5</sup> subject to FMCSA's physical qualification standards. Periodic evaluation and certification is required to assess driver physical qualification, due to the potential for onset of new conditions or changes in existing conditions that may adversely affect a driver's ability to drive safely and/or cause incapacitation that could be a risk to public safety. An MEC can be issued for up to 2 years after the date of examination. However, drivers with certain medical conditions must be certified more frequently than every 2 years and certified MEs have discretion to certify for shorter time periods. Halving the number of drivers underestimates the total number of examinations that are conducted annually as various other reasons may mean that drivers need to be examined more frequently. As a result of these exceptions to the biennial medical certification schedule, the Agency estimates that the actual number of physical qualification examinations conducted annually is 40.20 percent greater than would be the case if all drivers were only examined biennially. Therefore, the Agency estimates that approximately 4,276,100 examinations are conducted annually (6.1 million/2 x 40.20%).

According to the 2015 National Survey on Drug Use and Health (NSDUH), an estimated 46 percent of Americans 18 or older used prescription pain relievers (38 percent), tranquilizers (16 percent), sedatives (7 percent), or stimulants (6 percent) in the last year.<sup>6</sup> These drugs are controlled substances listed on Schedules II, III, and IV (see 21 CFR 1308.11-1308.14). Therefore, the Agency utilized this data by multiplying the number of CMV driver examinations conducted annually, 4,276,100, by 46 percent, resulting in 1,967,006 drivers that certified MEs

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5FMCSA. 2018. Pocket Guide to Large Truck and Bus Statistics. Available at <https://www.fmcsa.dot.gov/sites/fmcsa.dot.gov/files/docs/safety/data-and-statistics/413361/fmcsa-pocket-guide-2018-final-508-compliant-1.pdf> .

6 Table B-2 Source: Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015, available at <https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR2-2015/NSDUH-FFR2-2015.htm>.

may ask to have a *391.41 CMV driver Medication Form, MCSA-5895*, completed on an annual basis. The Agency recognizes that using the estimated 46 percent for the number of Americans 18 or older who used controlled substances in the past year is an overestimate because it would include one-time users.

### Population of CMV Drivers

<b>Baseline – Total CMV Drivers to have Form Completed</b>
1,967,006 <sup>7</sup>

### Population of Prescribing Healthcare Professionals

<b>Baseline – Total Prescribing Healthcare Professionals Completing Forms</b>
1,223,470

### Prescribing Healthcare Professionals Task

Task	Time to Complete Task
Complete and provide form to certified ME	8 minutes

FMCSA estimates that it takes the prescribing healthcare professional 8 minutes to complete and provide the *391.41 CMV Driver Medication Form, MCSA-5895*, to the certified ME.

### Prescribing Healthcare Professional Annual Burden Hours and Salary Costs to Complete and Provide Form to the Certified ME

Hourly wage of prescribing healthcare provider	Number of CMV drivers who may need to have form completed	Time for prescribing healthcare professional to complete and provide form to certified ME	Total annual burden hours for prescribing healthcare professional to complete and provide form to certified ME	Total annual salary costs for prescribing healthcare professional to complete and provide form to certified ME
\$104.46 <sup>8</sup>	1,967,006	8 minutes	262,267	\$27,396,411

<sup>7</sup> 4,276,100 annual CMV driver examinations x 46 percent.

<sup>8</sup> [https://www.bls.gov/oes/current/oes\\_nat.htm#\(5\)](https://www.bls.gov/oes/current/oes_nat.htm#(5)).

**Annual Burden Hours: 262,267 hours** (1,967,006 CMV drivers that may need form completed by prescribing healthcare professionals x 8 minutes/60 minutes = 262,267 rounded to the nearest whole hour)

**Annual Number of Respondents: 1,223,470** (1,223,470 prescribing healthcare professionals)

**Annual Number of Responses: 1,967,006** (1,967,006 forms completed)

### **13. ESTIMATE OF TOTAL ANNUAL COSTS TO RESPONDENTS**

There are no additional annual costs to respondents.

### **14. ESTIMATE OF COST TO THE FEDERAL GOVERNMENT**

There is no cost to the Federal government. FMCSA does not receive or process the form and information collected.

### **15. EXPLANATION OF PROGRAM CHANGES OR ADJUSTMENTS**

Program adjustment - due to updated number of respondents and applicable wage data.

Program change – due to new data available and the inclusion of the number of CMV drivers who may need a form completed on an annual basis to determine the annual burden hours and costs.

As a result of the above updates, the annual burden hours have increased by 117,974 hours (144,293 to 262,267) and the annual costs have increased by \$12,268,733 (\$15,127,678 to \$27,396,411).

Current Approved Annual Burden Hours for the IC	144,293
Proposed Annual Burden Hours	262,267
<b>Total Increase in Annual Burden Hours from Current Approved Annual Burden Hours</b>	<b>117,974</b>

### **16. PUBLICATION OF RESULTS OF DATA COLLECTION**

This information is not published.

### **17. APPROVAL FOR NOT DISPLAYING THE EXPIRATION DATE OF OMB APPROVAL**

No such approval is requested.

## **18. EXCEPTIONS TO CERTIFICATION STATEMENT**

There are no exceptions to the certification statement.