

**Request for Approval under the  
“Generic Clearance for the Collection of Routine Customer Feedback”  
OMB Control Number: 1212-0066 (expires 10/31/2023)**

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**TITLE OF INFORMATION COLLECTION: MyPBA Usability Study 2021.**

**PURPOSE:**

*OBA will be rolling out a modernized version of My Pension Benefit Access (MyPBA) this year. MyPBA is an online system where plan participants in PBGC-trusted plans can create an account to provide and modify information to PBGC and access their information. OBA would like to get user/customer feedback on the new login procedures through login.gov, the overall look and feel, and navigation, while also ensuring that basic functions are tested from the customer’s perspective before going live, specifically, retrieving 1099s, submitting calculation requests, and updating an address. Customer feedback will be used to verify that external usability is working properly before making the final decision to roll out the new MyPBA. This feedback will also be used improve navigation and usability for future enhancements to maximize customer satisfaction.*

**DESCRIPTION OF RESPONDENTS:** Plan participants in PBGC-trusted plans

**TYPE OF COLLECTIONS:**

- |   |   |
|---|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form                     | <input type="checkbox"/> Customer Satisfaction Survey |
| <input checked="" type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group       |
| <input type="checkbox"/> Focus Group  | <input type="checkbox"/> Other: email survey          |

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have completed or who are likely to complete PBGC benefit applications.

Name: Stephanie Cibinic

To assist review, please provide answers to the following question:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected?  Yes  No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?  Yes  No
3. If Applicable, has a System or Records Notice been published?  Yes  No

*Any PII collected is covered under PBGC – 6: Plan Participant and Beneficiary Data.*

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?  Yes  No

**BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time	Burden
<i>Plan participants in PBGC-trusted plans who volunteer to participate</i>	15	1.5 hours	22.5 hours
<b>Totals</b>	<b>15</b>	<b>1.5 minutes</b>	<b>22.5 hours</b>

**FEDERAL COST:** Because all the work will be performed by PBGC staff, the annual cost to the government is estimated to be \$0.

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents**

Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?

Yes  No

If the answer is yes, please provide a description of both below (or attach the sampling plan). If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them.

*To solicit voluntary participants in the customer feedback effort, PBGC will send emails to frequent MyPBA users.*

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

Web-based or other forms of Social Media

Telephone

In-person

Mail

Other, Explain

2. Will interviewers or facilitators be used?  Yes  No

*Facilitators will follow the scripts that are attached in the IC section of this submission.*

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**