

Justification for No material/Nonsubstantive Change  
for

EE-1, Worker's Claim for Benefits under the Energy Employees Occupational Illness Compensation Act  
EE-1-SPA, Reclamación de beneficios según la Ley del Programa de Indemnización por Enfermedades

Ocupacionales para Empleados del Sector de la Energía,

EE-2, Survivor's Claim for Benefits Under the Energy Employees Occupational Illness Compensation  
Program Act

EE-2-SPA, Reclamación de beneficios de sobreviviente según la Ley del Programa de Indemnización por  
Enfermedades Ocupacionales para Empleados del Sector de la Energía

EE-8/EN-8: Smoking History

EE-9/EN-9: Racial/Ethnic ID

EE-10/EN-10: Claim for Additional WL and/or IMP

EE-11A/EN-11A: Response Requested for Impairment

EE-11B/EN-11B: Wage Loss Letter & Response Form

EE-12/EN-12: Request for Update - State Workers' Comp

EE-16/EN-16: Compensation Payment Questionnaire

EE-17A, Claim for Home Health Care, Nursing Home, or Assisted Living Benefits Under the Energy  
Employees Occupational Illness Compensation Program Act

EE-17B, Physician's Certification of Medical Necessity Under the Energy Employees Occupational Illness  
Compensation Program Act

The Department of Labor's Office of Workers' Compensation Programs (OWCP) is the agency responsible for administration of the Federal Employees' Compensation Act (FECA), 5 U.S.C. 8101 et. seq., the Black Lung Benefits Act (BLBA), 30 U.S.C. 901 et. seq. and the Energy Employees' Occupational Illness Compensation Program Act of 2000 (EEOICPA), 42 U.S.C. 7384 et. seq. These statutes require OWCP to pay for appropriate medical and vocational rehabilitation services provided to beneficiaries. OWCP is requesting an address change to OWCP billing forms EE-1, *Worker's Claim for Benefits under the Energy Employees Occupational Illness Compensation Act*, EE-1-SPA, *Reclamación de beneficios según la Ley del Programa de Indemnización por Enfermedades Ocupacionales para Empleados del Sector de la Energía*, EE-2, *Survivor's Claim for Benefits Under the Energy Employees Occupational Illness Compensation Program Act*, EE-2-SPA, *Reclamación de beneficios de sobreviviente según la Ley del Programa de Indemnización por Enfermedades Ocupacionales para Empleados del Sector de la Energía*, EE-8/EN-8: *Smoking History*, EE-9/EN-9: *Racial/Ethnic ID*, EE-10/EN-10 *Claim for Additional WL and/or IMP*, EE-11A/EN-11A: *Response Requested for Impairment*, EE-11B/EN-11B: *Wage Loss Letter & Response Form*, EE-12/EN-12: *Request for Update - State Workers' Comp*, EE-16/EN-16: *Compensation Payment Questionnaire*, EE-17A, *Claim for Home Health Care, Nursing Home, or Assisted Living Benefits Under the Energy Employees Occupational Illness Compensation Program Act*, EE-17B, *Physician's Certification of Medical Necessity Under the Energy Employees Occupational Illness Compensation Program Act* in order for the new OWCP medical bill processor to receive and reimburse medical bills to medical providers.

Approval of this request is needed by October 1, 2020 for posting of the form on the medical bill processors web portal. This will allow ample time for the new bill processor's assumption of operations on October 1, 2020. Any approval date beyond would necessitate a delay in operations until the request is approved.