

SUPPORTING STATEMENT

Report of Changes That May Affect Your Black Lung Benefits 1240-0028

A. Justification.

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

The Black Lung Benefits Act, 30 U.S.C. 901 *et seq.*, and its implementing regulations, 20 CFR 725.513(a), 725.533(e), authorize the Division of Coal Mine Workers' Compensation (DCMWC) to collect information regarding compensation payments to coal miners and other beneficiaries.

Once a miner or survivor is found eligible for benefits, the primary beneficiary is required to report certain changes that may affect benefits. 20 CFR 725.533(e). Form CM-929 is sent to all appropriate primary beneficiaries to help the beneficiary comply with the need to report certain changes and to ensure that there is a review and update of all claims paid from the Black Lung Disability Trust Fund, and from Social Security cases transferred to the Department of Labor under the Black Lung Consolidation of Administrative Responsibility Act of 2002, <https://www.dol.gov/owcp/dcmwc/pl107-275.pdf>. The CM-929 is printed by DCMWC's computer system with information specific to each beneficiary, such as name, address, number of dependents on record, state workers' compensation information, and amount of current benefits. The beneficiary reviews the information and certifies that the information is current, or provides updated information. The form includes a warning about potential consequences of failure to report changes.

Form CM-929P is sent to the representative payees of all beneficiaries. Compensation is paid to a representative payee on behalf of the beneficiary when the beneficiary is unable to manage his/her benefits due to incapability, incompetence, or minority. The CM-929P is printed by the DCMWC computer system with information specific to each beneficiary, such as name, address, number of dependents on record, state workers' compensation information, and amount of benefits. Additionally, representative payees are requested to provide information regarding the use of benefits received, where the beneficiary lives, and how the needs of the beneficiary are being met. The representative payee reviews the information specific to the beneficiary, provides their accounting of the funds received, and certifies that all information is current or provides updated information. Collection of this information is authorized by 20 CFR 725.513(a). The form includes a warning about potential consequences of failure to report changes or misusing the beneficiary's benefits.

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.

Forms CM-929 and CM-929P are both used to help determine continuing eligibility of primary beneficiaries receiving black lung benefits from the Black Lung Disability Trust Fund. The CM-929 is completed by the beneficiary to report factors that may affect his or her benefits, including income, marital status, receipt of state workers' compensation, and dependents' status. The CM-929P is completed by representative payees for primary beneficiaries to report the same factors that may affect the beneficiaries' benefits. Representative payees also provide information on the beneficiary's location and certify that benefits are used for the needs of the beneficiary, including an annual accounting when necessary. The claims staff carefully reviews the responses, verifies information in the claim file, and identifies changes, such as income, marital and dependent status, that may need verification. This information reduces the potential for overpayments and for underpayments. The claims staff ensures that the computer system is updated to reflect appropriate changes.

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.

Forms CM-929 and CM-929P are mailed in paper format to beneficiaries and representative payees. The forms that are mailed contain information specific to each beneficiary. Respondents either certify the information is correct or they supply updated information. Respondents typically mail the completed paper form back to DCMWC.

DCMWC is adding an option for respondents to return the completed form electronically by scanning it and uploading it through the COAL Mine Portal at <https://eclaimant.dol-esa.gov/bl>. In addition, if the respondent misplaces the partially completed form that is sent to them, blank forms are available for downloading on the DCMWC home page at <http://www.dol.gov/owcp/dcmwc/regs/compliance/blforms.htm>.

DCMWC has considered requiring respondents to view and submit their information directly through a website. However, this was found to be not practicable or cost-effective. Form CM-929 respondents generally are retired, disabled coal mine workers and elderly spouses, many living in rural areas. Given these demographics, it is likely that a significant proportion would not have ready access to such an online option. Although representative payees completing the CM-929P may not be similarly limited, the number of these filings is comparatively low (CM-929P filings make up 13% of total annual CM-929 and CM-929P filings).

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.

No other agency collects this information. Forms CM-929 and CM-929P are beneficiary- and

program-specific. Even though the application for benefits requests that specific changes be reported, the CM-929 and CM-929P are the only existing methods to systematically update the information listed on the application, which may affect the amount of benefits, and to insure that the beneficiary knows to report those changes.

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

This information collection does not have a significant economic impact on a substantial number of small entities.

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

The information is requested annually. If the information update were done less frequently, there would be a higher risk of overpayments, underpayments, and erroneous payments to payees due to unreported changes in status and lack of knowledge of whether benefits are being appropriately used for beneficiaries.

7. Explain any special circumstance required in the conduct of the information collection:

There are no special circumstances for this information collection.

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

A Federal Register Notice inviting public comment was published on 11/24/2020 (85 FR 75049). No comments were received.

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

No payments or gifts are made to respondents to furnish the information. However, the beneficiary-respondents are entitled to and do receive monthly benefits.

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

Forms CM-929 and CM-929P include a Privacy Act Notice (PAN) explaining that information will be used to determine eligibility for and the amount of benefits payable. The PAN also explains that the information may be used by other agencies or persons in handling matters relating to the subject matter of the claim. This information is included in Systems of Records, DOL/OWCP-2, DOL/OWCP-9, published at 81 Federal Register 25765, 25858, 25866 (April 29, 2016), or as updated and republished.

11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private. This justification should include the reasons why the agency considers the questions necessary; the specific uses to be made of the information, the explanation to be given to persons from whom the information is requested, and any steps to be taken to obtain their consent.

This collection contains no questions of a sensitive nature.

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

Indicate the number of respondents, frequency of response, annual hour burden, and an explanation of how the burden was estimated. Unless directed to do so, agencies should not make special surveys to obtain information on which to base burden estimates. Consultation with a sample of potential respondents is desirable. If the burden on respondents is expected to vary widely because of differences in activity, size, or complexity, show the range of estimated burden and explain the reason for the variance. Generally, estimates should not include burden hours for customary and usual business practices.

Approximately 12,000 computer-generated CM-929 and CM-929P forms are sent to beneficiaries or their representative payees on a yearly basis to certify and/or correct information reflected in DCMWC's files. We estimate that 10,440 CM-929 forms (87% of total) and 1,560 CM-929P forms (13% of total) will be sent each year.

DCMWC experience has been that 90% of all completed Forms CM-929 are essentially certifications. The remaining 10% of completed forms reflect correction of data. DCMWC estimates that the time required of respondents to read the CM-929 and certify that all benefit information is correct and accurate is five minutes. The time required to read the form and report one or more corrections to the benefit information is no more than eight minutes. Therefore, the estimated total burden to the 12,000 beneficiaries in completing this form is 2,810 burden hours, based on the following:

90% of 10,440 = 9,396 x 5 minutes = 783 hours
10% of 10,440 = 1,044 x 8 minutes = 139 hours (139.2 rounded down)
922 hours

The CM-929P form is completed by representative payees who receive benefits on behalf of beneficiaries who are unable to manage their benefits due to incapability, incompetence, or minority. If the beneficiary lives in a nursing home, personal care home, assisted living facility, or any place other than a private residence with the representative payee, the representative payee must answer more detailed questions regarding how the black lung benefits were used during the accounting period. Representative payees who live with the beneficiary in a private residence are instructed to skip most of these questions.

We estimate the burden on respondents who answer the full CM-929P, or about 1,404 (90% of 1,560) payees, to be 80 minutes per form, and we have estimated the burden on 156 (10% of 1,560) respondents who answer the short version to be 6 minutes per form. Therefore, we have calculated the total burden to be 1,888 hours as follows:

$$\begin{aligned} 90\% \text{ of } 1,560 &= 1,404 \times 80 \text{ minutes} = 1,872 \text{ hours} \\ 10\% \text{ of } 1,560 &= 156 \times 6 \text{ minutes} = \underline{16 (15.6 \text{ rounded up})} \text{ hours} \\ &= 1,888 \text{ hours} \end{aligned}$$

$$\begin{aligned} \text{Subtotal Burden Hours for CM-929} &= 922 \text{ hours} \\ \text{Subtotal Burden Hours for CM-929P} &= \underline{1,888 \text{ hours}} \\ \text{Total Burden Hours} &= 2,810 \text{ hours} \end{aligned}$$

We have calculated the average processing time to be 65 minutes for the CM-929P, including the 10% of the forms that take only 6 minutes to complete, and the 90% that take 80 minutes. The total number of burden hours (1,888) has been divided by the total number of forms (1,560) to arrive at an average burden of 65 minutes for each form completed.

There is no monetary cost to the respondent to provide this information; rather, the submission of this information is an intrinsic part of the benefit process. However, we used the Federal minimum wage, <https://www.dol.gov/whd/minimumwage.htm>, as a representative wage rate to calculate the cost of the burden hours.

$$2,810 \times \$7.25 = \$20,372.50.$$

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

There are no technological or system costs associated with the collection of this information. This form is a postage paid self-mailer.

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

The estimated total cost to the Federal Government for development, printing, mailing and processing the CM-929 and CM-929P is approximately \$107,214.96. The cost is computed as follows:

a. Estimated printing cost for 14,040 forms:

This includes printing the initial mailing of 12,000 and follow-up printing to 2,040 (12,000 X 17%) beneficiaries who do not respond to the first mailing.

$$12000 + 2,040 = 14,040$$

$$14,040 \times .22 = \$3,088.00$$

b. Estimated cost for mailing and returning the form:

This includes follow-up mailings to beneficiaries who do not respond to the first mailing. DCMWC mails approximately 2,040 follow-up forms to beneficiaries.

$$14,040 (12,000 + 2,040) \times 55¢ = \$7,722.00 \text{ for outgoing mail.}$$

55¢ + 5¢ + 10¢ = 70¢ includes cost of return postage, envelope and 10¢ postal surcharge

$$14,040 \times 70¢ = \$9,828.00 \text{ for responses.}$$

$$\$7,722.00 + \$9,828.00 = \$17,550$$

c. Estimated processing cost \$86,576.96

A GS-12/5 spends an average of 6 minutes evaluating each CM-929 form, 6 minutes evaluating each partially completed CM-929P, and 30 minutes evaluating each fully completed CM-929P. A GS-6/4 spends an average of 3 minutes on clerical duties associated with each response. The FY 2021 Salary Table for the RUS was used to determine Federal cost. https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2021/RUS_h.pdf

CM-929

$$10,440 \times 6 \text{ min} = 1,044 \text{ hours} \times \$42.08 = \$43,931.52$$

CM-929P (partially completed)

$$156 \times 6 \text{ min} = 16 (15.6 \text{ rounded up}) \text{ hours} \times \$42.08 = \$673.28$$

CM-929P (fully completed)

$$1,404 \times 30 \text{ min} = 702 \text{ hours} \times \$42.08 = \$29,540.16$$

Clerical for both

$$12,000 \times 3 \text{ min} = 600 \text{ hours} \times \$20.72 = \$12,432.00$$

Total \$86,576.96

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

The total burden hours have decreased by 3,279 hours, from 6,089 to 2,810. This adjustment reflects a declining population of Part C beneficiaries.

The option to submit the completed form online through the COAL Mine web portal was added to both forms.

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.

There are no plans to publish this collection of information.

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

This ICR does not seek a waiver from the requirement to display the expiration date.

18. Explain each exception to the certification statement identified in ROCIS.

There are no exceptions to the certification statement.

B. Collections of Information Employing Statistical Methods.

Statistical methods are not used in these collections of information.