

Justification for No material/Nonsubstantive Change
Notification of Termination, Suspension, Reduction or Increase in Benefit Payments (CM-908)

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 form '*Notification of Termination, Suspension, Reduction or Increase in Benefit Payments*' (CM-908) as the OWCP medical bill processor has procured a new mailroom and requires a means to receive forms informing OWCP of the increase, decrease or termination of monthly benefits.

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