**Federal Energy Regulatory Commission**

**SUPPORTING STATEMENT**

**Request fora Medical Exception to the COVID-19 Vaccination Requirement (FERC-1000)**

**OMB Control No. 1902-NEW**

An emergency request to the Acting Administrator of OMB’s OIRA was signed on 11/8/2021 by FERC’s Executive Director, Anton Porter. The letter, requesting OMB emergency processing and clearance of the medical exception form (FERC-1000), was emailed to the OMB Desk Officer on 10/8/2021 and is included in ROCIS Supplementary Documents. The Commission requests an OMB PRA decision by 11/12/2021.

**Abstract**

The purpose of this emergency request of Paperwork Reduction Act (PRA) clearance is to allow the Federal Energy Regulatory Commission (FERC or Commission) to collect information from individuals applying for a medical exception to the COVID-19 Vaccination Requirement as specified in Part 2 of FERC Form No. 1000. Given the critical role of the collection of information to meeting our commitments as outlined in Executive Order 14043 of September 9, 2021, on *Requiring Coronavirus Disease 2019 Vaccination for Federal Employees* and the Safer Federal Workforce Task Force[[1]](#footnote-1) requirements and guidance, the Commission cannot reasonably comply at present with the normal clearance procedures.

**Justification**

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

Consistent with guidance from the Centers for Disease Control and Prevention (CDC), guidance from the Safer Federal Workforce Task Force established pursuant to Executive Order 13991 of January 20, 2021, *Protecting the Federal Workforce and Requiring Mask-Wearing*,[[2]](#footnote-2) and Executive Order 14043 of September 9, 2021, *Requiring Coronavirus Disease 2019 Vaccination for Federal Employees*,[[3]](#footnote-3) the request for this collection of information is essential to implement the Commission’s health and safety measures regarding the federal employee medical exemptions to the COVID-19 mandatory vaccinations. The Rehabilitation Act of 1973, as amended, requires Federal Agencies to provide reasonable accommodations to qualified employees with disabilities unless that reasonable accommodation would impose an undue hardship on the employee’s Agency. See 29 U.S.C. 791; 29 C.F.R. Part 1614; see also 20 C.F.R. Part 1630 and Executive Order 13164 of July 26, 2000, *Requiring Federal Agencies to Establish Procedures to Facilitate the Provision of Reasonable Accommodation*. Section 2 of E.O. 14043 mandates that each agency “implement, to the extent consistent with applicable law, a program to require COVID-19 vaccination for all of its Federal employees, with exceptions only as required by law.” This medical exemption form (new FERC Form No. 1000) is necessary for the Commission to determine legal exemptions to the vaccine requirement under the Rehabilitation Act.

Government agencies have an urgent need to request medical exemption information with input from medical providers from federal employees. Applying regular Paperwork Reduction Act clearance procedures is likely to cause harm because of the threat of COVID-19 exposure and transmission (5 C.F.R § 1320.13(c)).

**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.**

This information is being requested to promote the safety of the Federal workforce, the safety of Federal buildings, and the safety of others on site at agency facilities or those interacting with the public consistent with the COVID-19 Workplace Safety: Agency Model Safety Principles established by the White House Safer Federal Workforce Task Force and guidance from the Centers for Disease Control and Prevention. To request a medical exemption from the COVID-19 vaccination requirement, an employee must complete Part 1 of the medical exemption form and their medical provider must complete Part 2.

The Commission seeks OMB’s approval to process the form as an emergency clearance request in accordance with 5 C.F.R. § 1320.13, Emergency Processing.

**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 m24eans of collection. Also, describe any consideration of using information technology to reduce burden.**

This information collection will require the individual responder to fill out the required fields of the form, obtain medical provider’s signature for Part 2, and submit the completed form to the appropriate Commission personnel. A link to this form or a PDF version may be emailed to respondents who will then print it out to complete it or complete it electronically. We will continue to explore options to use technology to reduce the burden on individuals.

**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 Question 2**

We are unaware of other sources of similar information.

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

This information collection request has no identified impact on small businesses and organizations.

**6. Describe the consequence to 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.**

Less frequent collection (meaning no collection) would inhibit the Commission’s ability to meet the mandates of the Safer Federal Workforce Task Force and the Commission’s specific established COVID-19 workplace safety protocols.

**7. Explain any special circumstances associated with conducting this information collection.**

There are no other special circumstances involved in the collection of this information.

**8. If applicable, provide a copy and identify the date and page number of publications 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. Specifically address comments received on cost and hour burden.**

The Commission has requested a waiver from the requirement to publish a notice in the Federal Register in connection with a request for emergency clearance of this information collection request.

Aside from discussions with Office of Management and Budget (OMB) personnel, and other Federal agencies, no additional consultation was conducted for this submission.

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

No gifts or payments of any kind have been provided to any individuals who are connected to this collection.

**10. Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statute, regulation, or agency policy. If the collection requires a system of records notice (SORN) or privacy impact assessment (PIA), those should be cited and described here.**

**Purposes/Routine Uses:** The information on this form may be used by the Commission to help determine whether the employee is entitled to an accommodation. The supervisor will maintain a record of all accommodation requests, including this form, which will be utilized to determine the efficacy and consistency of the reasonable accommodation process and be compiled for reports to the Equal Employment Opportunity Commission (EEOC); these records are subject to periodic review by the EEOC, or the Director, Office of Civil Rights, at their request, to ensure compliance. In addition, the information collected on this form may be used for Routine Uses set forth in 75 FR 35099 (June 21, 2010), amended, 80 FR 74815 (Nov. 30, 2015), except as prohibited by the Rehabilitation Act of 1973 or as otherwise prohibited by law. The information collected on this form must be kept in files separate from the individual's personnel file and treated as a confidential medical record, except that:  supervisors and managers who need to know may be told about necessary restrictions on the work or duties of the employee and about the necessary accommodation(s);  first aid and safety personnel may be told if the disability might require emergency treatment or evacuation assistance;  government officials may be given information necessary to investigate the agency's compliance with the Rehabilitation Act or other applicable laws;  the information may in certain circumstances be disclosed to workers' compensation offices;  and agency EEO officials may be given the information to maintain records and evaluate and report on the agency's performance in processing reasonable accommodation requests.

**System of Records Notice (SORN).** Proposed FERC Form No. 1000 is covered by FERC SORN-24.[[4]](#footnote-4)

**11. Provide additional justification for any questions of a sensitive nature.**

The questions included on this form are consistent with the White House and OMB guidance for requesting a medical exemption.

**12. Provide estimates of the respondent burden hours and labor costs**

**–**The Estimated Annualized Respondent Burden Hours and Costs follow.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FERC Form No. 1000** | **Type of Respondent (e.g., Occupational Title)** | **# Of Respondents** **(a)** | **Annual # of Responses/ Respondent (b)** | **Total # of Annual Responses** **(column a X column b= column c)** | **Burden Hours and Cost ($) per Response (d)** | **Total Annual Burden Hours****(column c x column d)** |
| Part 2 of FERC Form No. 1000 | Medical Provider | 24 | 1 | 24 | 10 minutes(1/6 hour);$24.05[[5]](#footnote-5) | 240 minutes(4 hours);$577.12 |
| **Totals** |  |  |  | **24** |  | **4 hours;****$577.12** |

**13. Provide an estimate for the total annual cost burden to respondents or record keepers resulting from the collection of information. (Do not include the cost of any burden costs already reflected on the burden worksheet).**

There are no annualized costs to respondents other than the labor burden costs addressed in Section 12 of this document to complete this collection.

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

The Annualized Federal Costs follow.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Parts 1 and 2 of FERC Form No. 1000** | **Number of Responses****Annually (a)** | **Federal Hours Per Response (b)** | **Total Hours****(column a x column b)****(c)** | **Cost ($)** **(column c x $72.00[[6]](#footnote-6))** |
| Review, Analysis, & Processing of Parts 1 and 2 of FERC Form No. 1000 | 24 | 1 | 24 | $1,728 |
| PRA processing |  |  |  | $8,279 |
| Total  |  |  |  | $10,007 |

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

This is a new information collection as discussed in Executive Order 14043 (of September 9, 2021, on Requiring Coronavirus Disease 2019 Vaccination for Federal Employees) and mandated by the Safer Federal Workforce Task Force and other federal guidance and requirements.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FERC-1000** | **Total Request** | **Previously Approved** | **Change due to Agency Adjustment in Estimate** | **Change Due to Agency Discretion** |
| Annual Number of Responses | 24 | 0 |  | 24 |
| Annual Time Burden (Hours) | 4 | 0 |  | 4 |
| Annual Cost Burden ($) | $0 | $0 | $0 | $0 |

**16. For collections of information whose results will be published, outline plans for tabulation and publication.**

The Commission will not publish the results of this information collection.

**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.**

After an OMB decision is issued, the OMB Expiration Date and Control No. will be displayed on the instrument and added to www.ferc.gov.

**18. Explain each exception to the certification statement identified in “Certification for Paperwork Reduction Act Submissions."**

The Commission seeks no exception.

1. See <https://www.saferfederalworkforce.gov/> for more information about the Safer Federal Workforce Task Force and its mandates and guidance. [↑](#footnote-ref-1)
2. https://www.federalregister.gov/documents/2021/01/25/2021-01766/protecting-the-federal-workforce-and-requiring-mask-wearing [↑](#footnote-ref-2)
3. https://www.federalregister.gov/documents/2021/09/14/2021-19927/requiring-coronavirus-disease-2019-vaccination-for-federal-employees [↑](#footnote-ref-3)
4. Details on FERC SORNs are listed at <https://www.ferc.gov/privacy/ferc-system-records-notice-sorn> . [↑](#footnote-ref-4)
5. The mean hourly wage plus benefits used in this calculation is $144.28. The hourly wage of $103.06 was determined by using national Bureau of Labor Statistics data for Code 29-1215 (Family Medicine Physicians) at: <http://www.bls.gov/oes/current/oes_nat.htm>, and by using a benefits multiplier of 1.4 is supported by information at <http://www.bls.gov/news.release/ecec.nr0.htm>. [↑](#footnote-ref-5)
6. The mean hourly wage plus benefits used in this calculation is $72.00. The hourly wage of $45.00 was determined using data of the Office of Personnel Management for GS-14, Step 1 at <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2021/GS_h.pdf>, and by using a benefits of multiplier of 1.6 that is implied at <http://www.bls.gov/news.release/ecec.nr0.htm>. [↑](#footnote-ref-6)