SUPPORTING STATEMENT

VA FORM 29-336 DESIGNATION OF BENEFICIARY

VA FORM 29-336a SUPPLEMENTAL DESIGNATION OF BENEFICIARY

2900-0020

**Summary of Changes from Previously Approved Collection**

* This ICR is being submitted as an “Extension” since there are no changes to the burden or the information collection instruments.
* Comments received on the 60-Day FRN on July 25, 2023.
* Response to Comments received on July 26, 2023.

1. **Justification**
	1. **Explain the circumstances that make the collection of information necessary. Identify legal or administrative requirements that necessitate the collection of information.**

These forms are used by the insured to designate beneficiaries and select an optional settlement to be used when the insurance matures by death. The information is required to determine the claimant’s eligibility to receive the proceeds. The information on the form is required by law, 38 USC Sections 1917, 1949 and 1952.

* 1. **Indicate how, by whom, and for what purposes the information is to be used; indicate actual use the agency has made of the information received from current collection.**

The data collected on the form is used by the personnel in the Insurance Division to determine who is eligible to receive the proceeds of the insurance.

* 1. **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.**

VA Form 29-336 and VA Form 29-336a is available on the One-VA web site in a fillable electronic format. VBA is currently hosting this form on a secure server and does not currently have the technology in place to allow for the complete submission of the forms. Validation edits are performed to assure data integrity. Efforts within VA are underway to provide a mechanism to allow the information to be submitted electronically with a recognized signature technology. There currently is no utility process in place that will allow the data submitted on the forms to be incorporated with an existing centralized legacy database.

* 1. **Describe efforts to identify duplication. Show specifically why all similar information already available cannot be used or modified for use for the purposes described in Item 2 above.**

The information is not contained in any other VA records. Similar information is not available elsewhere.

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

The information does not involve any small businesses.

* 1. **Describe the consequences 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.**

These forms are designed for use by the insured to designate his/her beneficiary and select a settlement option to be used when the insurance matures by death. If the information is not collected, or is collected less frequently, the VA Insurance Center will not have up to date information in order to pay the proceeds of the insurance policies according to the Veteran’s last wishes.

* 1. **Explain any special circumstances that would cause an information collection to be conducted more often than quarterly or require respondents to prepare written responses to a collection of information in fewer than 30 days after receipt of it; submit more than an original and two copies of any document; retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years; in connection with a statistical survey that is not designed to produce valid and reliable results that can be generalized to the universe of study and require the use of a statistical data classification that has not been reviewed and approved by OMB.**

There are no special circumstances requiring that the collection of information be conducted in a manner inconsistent with the guidelines in 5 CFR Section 1320.6.

* 1. **If applicable, provide a copy and identify the date and page number of publication in the Federal Register of the sponsor’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 sponsor in response to these comments. Specifically address comments received on cost and hour burden.**

A 60-Day Federal Register Notice (FRN) for the collection published on June 27, 2023, Volume 88, No. 122, Page 41721.

A 30-Day Federal Register Notice (FRN) for the collection published on September 1, 2023, Volume 88, No. 169, Page 60537.

The information does not involve obtaining information from any state or local Government. There is no person or organization other than VA that will collect the information which is submitted by the insured. Comments were received in response to this notice concerning the process of updating the veterans Designation of Beneficiary and Supplemental Designation of Beneficiary forms.

VA submitted a response to these comments stating VA has updated the Designation of Beneficiary and Supplemental Designation of Beneficiary forms to encourage updating beneficiaries online; this is noted at the top of the form. Finally, federal regulation has required the use of the Designation of Beneficiary and Supplemental Designation of Beneficiary forms to complete all paper beneficiary designations to ensure all designations are clear of intent.

* 1. **Explain any decision to provide any payment or gift to respondents.**

The information collected is supplied by the respondent. No remuneration is made.

* 1. **Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statue, regulation, or agency policy.**

The information collection conforms with the Privacy Act of 1974 and is subject to the conditions of disclosure contained therein. The records are maintained in the system identified as 36VA29, “Veterans of Uniformed Services Personnel Programs of U.S. Government” as contained in the Privacy Act Issuances, 1993 Compilation.

* 1. **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; include 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.**

There are no questions of a sensitive nature.

* 1. **Estimate of the hour burden of the collection of information:**
1. Number of Respondents: 83,500 (VA Form 29-336) and (VA Form 29-336a to be included with VA Form 29-336 as additional pages if needed to list additional beneficiaries or to list beneficiaries for additional policies)
2. Frequency of Response: On occasion
3. Annual Burden Hours: 13,917 hours
4. Estimated Completion Time: 10 minutes
5. The Bureau of Labor Statistics (B:S) gathers information on full-time wage and salary workers. According to the latest available BLS data, the mean weakly earnings of full-time wage and salary workers are $1,190.40. Assuming a forty (40) hour work week, the mean hourly wage is $29.76 based on the BLS wage code – “00-0000 All Occupations.” This information was taken from the following website: (<https://www.bls.gov/oes/current/oes_nat.htm>, May 2022).

Legally, respondents may not pay a person or business for assistance in completing the information collection. Therefore, there are no expected overhead costs for completing the information collection.  VBA estimates the total cost to all respondents to be **$414,170** (13,917 burden hours x $29.76 per hour).

* 1. **Provide an estimate of the total annual cost burden to respondents or record keepers resulting from the collection of information.**

This submission does not involve any record keeping costs.

* 1. **Provide estimates of annual cost to the Federal Government. Also, provide a description of the method used to estimate cost, which should include quantification of hours, operation expenses (such as equipment, overhead, printing, and support staff), and any other expense that would not have been incurred without this collection of information.**

Estimated Costs to the Federal Government:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Grade | Step | Burden Time | Fraction of Hour | Hourly Rate | Cost Per Response | Total Responses | Total |
| 9 | 3 | 10 | 0.17 | $25.06 | $4.26 | 83,500 | $355,710.00 |
| Overhead at 100% Salary | $355,710.00 |
| 5 | 3 | 2 | 0.03 | $16.54  | $0.50 | 83,500 | $41,750.00 |
| Overhead at 100% Salary | $41,750.00 |
| 4 | 3 | 2 | 0.03 | $14.78 | $0.44 | 83,500 | $36,740.00 |
| Overhead at 100% Salary | $36,740.00 |
|   |  |
| Processing / Analyzing Costs | $868,400.00 |
| Printing and Production Cost | $54.00 |
| Total Cost to Government  | $868,454.00 |

Note: The hourly wage information above is based on the hourly 2023 General Schedule (Base) Pay (<https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2023/GS_h.pdf>).  This rate does not include any locality adjustment as applicable.

The processing time estimates above are based on the actual amount of time employees of each grade level spend to process to completion a claim received on this form. The within-grade step (3) of each employee represents the average experience of employees within each grade.

* 1. **Explain the reason for any program changes or adjustments reported in Items 13 or 14 of OMB 83-I.**

There is no change in respondent burden.

* 1. **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 of information, completion of report, publication dates, and other actions.**

The information is collected for insurance purposes only and there are no plans for publication.

* 1. **If seeking approval to omit the expiration date for OMB approval of the information collection, explain the reasons that display would be inappropriate.**

The collection instrument, VA Form 29-336, is a beneficiary designation form utilized by the Veteran to name the rightful recipient of the life insurance benefit. Unlike other VBA benefits, VA Life Insurance is a contract between the Veteran and the government where VA Form 29-336 is not adjudicated at the time of receipt but is adjudicated after the death of the insured Veteran, which is typically many years after receipt of the VA Form 29-336. It is kept on record indefinitely. VA Form 29-336 is legally binding; the designation cannot be overruled by a will, divorce decree, or court order. A printed expiration date on the form would result in unnecessary confusion to the respondent and potential legal issues. The VA Form 29-336a is a form that can be used as an additional page to the 29-336 if the Veteran decides to list more than three beneficiaries. The 29-336a can also be used to list beneficiaries on a different policy under the same file number. This form is governed under the same laws and guidelines as the 29-336.

VA Forms 29-336 and 29-336a are submitted to OMB for review and approval every three years. Including a printed expiration date on the form may lead respondents to believe they have to resubmit the form each time it expires. Consequently, the risk of the printed expiration date presenting difficulties relative to the validity of the form is high and may result in unnecessary delay in payment of insurance proceeds at a time when financial need for survivors is critical, particularly when families need the insurance proceeds to pay last expenses for the decedent. Additionally, a printed expiration date on the beneficiary designation form could potentially be used to support a contested claim; the claimant may claim that the named beneficiary is not the rightful recipient if there is an expiration date on the form. VA requests an exemption to waive displaying the expiration date on VA Form 29-336 and 29-336a for the reasons outlined above.

* 1. **Explain each exception to the certification statement identified in Item 19, “Certification for Paperwork Reduction Act Submissions,” of OMB 83-I.**

This submission does not contain any exceptions to the certification statement.

**PART B**

**B. Collection of Information Employing Statistical Methods**

This collection of information does not employ statistical methods.