



U.S. DEPARTMENT OF LABOR **Office of Workers' Compensation Programs**
Division of Coal Mine Workers'
Compensation

Paperwork Reduction Act Statement

A Federal agency may not conduct or sponsor an information collection subject to the requirements of the Paperwork Reduction Act unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 1225-0093 (expires 1/31/2027). Without this approval, we could not conduct this survey. Public reporting for this information collection is estimated to be approximately 5 minutes per response. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to U. S Department of Labor, DCMWC, 200 Constitution Ave., N. W., Suite C-3520, Washington, DC 20210 or email at DCMWC-public@dol.gov.

OWCP Federal Black Lung Customer Experience Survey

Date of Survey _____

Please circle a numerical response for each of the following questions:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A
I trust the Federal Black Lung Program to fulfill its mission. <i>Additional Comments:</i>	5	4	3	2	1	n/a
I am satisfied with the service I have received from the Federal Black Lung Program. <i>Additional Comments:</i>	5	4	3	2	1	n/a
It took a reasonable amount of time for my decision to be issued. *If you have not received a decision yet, mark n/a. <i>Additional Comments:</i>	5	4	3	2	1	n/a
The correspondence or letters I received from the Federal Black Lung program were clear and understandable. <i>Additional Comments:</i>	5	4	3	2	1	n/a

The Black Lung Program Representatives that I interacted with were helpful. <i>Additional Comments:</i>	5	4	3	2	1	n/a

1. Have you ever attempted to use the Federal Black Lung Program's Claimant Online Access Link (C.O.A.L.) portal to submit case documents electronically?

☐ Yes [Go to next question]

☐ No [Skip to Question 3]

2. How was your experience using the C.O.A.L. portal? Select the response that best matches your experience.

☐ I was able to upload my documents easily.

☐ I was able to upload my documents with difficulty.

☐ I was not able to upload my documents.

3. Why have you never attempted to use the C.O.A.L. portal? Select the response that best matches your experience.

☐ I was not aware it existed.

☐ I found it too confusing/intimidating to even try.

☐ I generally prefer paper to online.

☐ Other _____

Did you know that you can provide an address change, update direct deposit information, report a death, report issues, or request a status update online?

☐ Yes

☐ No

The new online contact form can be accessed through the C.O.A.L. Mine portal link: <https://coalmine.dol.gov/>

Do you have internet access? ☐ Yes ☐ No

Would you like to speak with a Federal Black Lung Program Representative? ☐ YES ☐ NO	If yes, please provide your name and telephone number: Name: _____ Phone: _____
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Additional Comments: