

Supporting Statement for Paperwork Reduction Act Submissions

OMB Control Number: 3206-0162, OPM 1530 - Report of Medical Examination of Person Electing Survivor Benefits under the Civil Service Retirement System

A. Justification

1. *Explain the circumstances of this collection, why this collection is necessary, and the legal statutes that allow it.*

Title 5, U. S. Code, Section 8339(k)(1) provides that an employee in good health who is applying for a non-disability annuity may elect, at the time of retirement, a reduced annuity to provide a survivor benefit for a person who has an insurable interest. An insurable interest exists if the survivor is a person who would suffer financially because of the death of the retiree.

2. *The information is to be used. Except for a new collection, describe how the agency has made use of the information received from the current collection.*

When an employee elects an insurable interest survivor annuity, the Office of Personnel Management requires that the applicant provide evidence of a recent medical examination to verify their good health. OPM Form 1530 is designed to collect information from both the applicant and the applicant's physician regarding the applicant's health. This information is used to determine whether the insurable interest survivor benefits election can be allowed. Specifically, solicitation of this information is also authorized by the Federal Employees Retirement System (Chapter 84, title 5, United States Code).

3. *How are the respondents expected to complete the collection? Can this collection be completed electronically (e.g., through a website or application).*

A PDF file is available on the OPM website at: www.opm.gov/forms/pdf_fill/opm1530.pdf and meets our GPEA requirements. The form is available electronically to print, is completed by a physician, and mailed to OPM for processing.

4. *Does this collection duplicate any other collection of information? Describe why the agency doesn't already have this information within their systems.*

Applications are filed individually. There is no duplication because the respondents initiate the collection.

5. *Describe any impacts on small business. If applicable, describe any methods used to minimize those impacts.*

Information is not collected from nor has any impact on small businesses or organizations.

6. *What are consequences to the Federal program or policy goals if this collection is not done or the information is collected less frequently? Describe any technical or legal obstacles to reducing burden.*

The collection of this information is performed as needed to grant the survivor reduction to eligible persons. Less frequent collection would deny this benefit which is provided by law.

7. *Do any of the following special circumstances apply?*
- *requiring respondents to report information to the agency more often than quarterly;*
 - *requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it;*
 - *requiring respondents to submit more than an original and two copies of any document;*
 - *requiring respondents to 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;*
 - *requiring the use of a statistical data classification that has not been reviewed and approved by OMB;*
 - *that includes a pledge of confidentiality that is not supported by authority established in statute or regulation, that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use; or*
 - *requiring respondents to submit proprietary trade secrets, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.*

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

8. *Cite the Federal Register publication for a request for public comments and address any comments received.*

On March 9, 2026, a 60 Day Federal Register Notice was published at 91 FR 11347 requesting comments. The following comments were received.

1. ***Comment from Kendra Barlow-Johnson***

"The medical examination required by OPM Form 1530 is unnecessary, intrusive, and unsupported by any meaningful actuarial or administrative purpose. The insurable-interest survivor benefit is a self-funded election, paid for entirely through a permanent reduction in the retiree's own annuity, and therefore does not expose the government to additional financial risk. Requiring a physician's exam adds no practical value: vital signs are momentary and highly sensitive to setting, medical history is already available to OPM through existing records, and the physician's assessment consists of questions OPM could ask the retiree directly at no cost. A retiree who has reached retirement age, is ambulatory, able to care for himself, and of sound mind is already demonstrably healthy enough to elect a benefit he is paying

for. The current requirement forces retirees to surrender medical privacy and incur unnecessary expenses for a determination that can be made through self-attestation and observable functional capacity. Respect for federal service, personal autonomy, and the principles of the Paperwork Reduction Act all support eliminating the medical-exam requirement and allowing retirees to designate an insurable-interest beneficiary without undergoing an irrelevant clinical evaluation.

In short: If he is still walking, able to care for himself, and has his wits about him...He is healthy. After retiring from a life of service, the government now serves the retiree. If the retiree elects to take a reduction in benefit to provide an actuarial benefit, the government's response should be: "Who would you like to name? We'll take care of everything. Thank you for your service."

2. Comment from Andrew McIntire

"The OPM has no business collecting this information about us at all. This proposed regulation is outrageous and should be consigned to oblivion."

OPM thanks both commenters for their feedback. The requirement that an employee or Member show he or she is in "good health" before he or she may make an insurable interest election is not a product of OPM's 1530 form. It is a threshold eligibility requirement provided by statute under 5 U.S.C. §§ 8339(k) and 8420 (a)(1). Therefore, whether such a requirement "supports a meaningful actuarial or administrative purpose" is a determination that must be left to Congress, not OPM. To implement this statutory requirement, OPM's regulations provide that employees or Members must establish they are "in good health" to meet this threshold statutory eligibility criteria by submitting "a certificate of good health in a form prescribed by OPM" 5 C.F.R. § 842.605(d)(FERS), or must do so by submitting "a report of [a] medical examination, signed and dated by a licensed physician" that is "furnished to OPM on such forms and at such time and place as OPM may prescribe." 5 C.F.R. § 831.613 (CSRS). Thus, the SF 1530, Report of Medical Examination of Person Electing Survivor Benefits, for which OPM is requesting renewal does not establish this eligibility criteria, it simply provides the method upon which an employee or Member may establish he or she meets this criterion. Although OPM sympathizes that a medical examination for this purpose may seem to some as intrusive, OPM has nevertheless determined that review of a healthcare professional's report of a medical examination conducted at retirement is the most objective, least intrusive, and most efficient way OPM is able to make such a determination.

9. Are payments or gifts given to the respondent?

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

10. Describe any assurances of privacy/confidentiality. Cite specific privacy laws, relevant OPM regulations, and SORNs.

This information collection is protected by the Privacy Act of 1974 and OPM regulations (5 CFR 831.106). The routine uses of disclosure appear in the Federal Register for OPM/Central-1 (87 FR 5874, published February 2, 2022; revised 88 FR 56058 August 17, 2023).

11. Are any questions of a sensitive nature asked, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private? If yes, provide justification. 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.

The information collection does not include questions regarding sexual behavior and attitudes or religious beliefs, and other matters that are commonly considered private. However, the collection does include questions about the health and physical condition of the applicant because these matters are fundamental to the decision as to whether to allow the insurable interest survivor election.

12. Describe the hour time burden and the hour cost burden on the respondent needed to complete this collection. Please specify hourly salary for your respondent audience by referencing [Bureau of Labor Statistics Occupational Employment and Wage Estimates](#) or other alternative wage site, when applicable.

Approximately 500 annuitants apply to elect an insurable interest survivor annuity each year. The form requires approximately one hour and 90 minutes to complete. This includes the time needed to undergo a physical examination and enter the results on the form. A burden of 750 hours is estimated and is not expected to vary substantially.

Form Name	Form Number	No. of Respondents	No. of Responses per Respondent	Average Burden per Response (in hours)	Total Annual Burden (in hours)	Average Hourly Wage Rate	Total Annual Respondent Cost
Report of Medical Examination of Person Electing Survivor Benefits under the Civil Service Retirement System	OPM 1530	500	1	1.5	750	\$32.66	\$24,495

The total Annual Respondent Cost is \$24,495.

13. Describe the non-hourly monetary burden to respondents needed to complete this collection. This is defined as out-of-pocket costs such as application fees for the collection, document fees ([birth/death certificates](#), school transcripts), mailing costs ([printing](#), [postage](#), and/or [mileage](#)), or anything else respondents may need to pay to complete and/or implement the collection.

After the deductible is met, Medicare typically covers 80% of approved services, leaving a 20% coinsurance responsibility for the beneficiary. For Medicare Advantage plans, copays vary by plan, but standard office visit copays typically range from \$0–\$50 per visit.

FEHB Program (2026): Copayment amounts vary by plan type and enrollment tier. Typical 2026 FEHB copay ranges include: Primary Care Office Visit: \$15–\$30 per visit (for most fee-for-service and HMO plans).

Assuming the annuitant is driving to their appointment, USPS estimates that the average driving distance between post offices is around 9 miles. The cost for first class postage in 2026 is \$.73 totaling a cost of \$365.00. Mileage cost in 2026 at a rate of \$.0725 totaling \$326.25.

14. Describe the cost incurred by the Federal Government to complete this collection table.

The estimated cost to the Federal government is \$24,150.

15. Explain any changes/adjustments to this collection since the previous submission, if applicable. Describe whether these changes impact the hour or cost burden. If yes, describe if the impact is the result of deliberate Federal government action (“program change”) or something else (“adjustment”).

The Privacy Act Statement has been updated since it was last published. However, there is no change in the hour or cost burden that is not based on updates on economic data. Therefore, any changes noted would be categorized as “adjustments.”

16. Specify if the data gathered by this collection will be published. This could include Congressional reporting, using respondent numbers in budget justification, or other broad reporting.

The details of this ICR are not published. However, there may occasionally be aggregate data reported, as needed, including in Congressional reporting, budget justifications, or other broad reporting.

17. If applicable, explain the reason(s) for seeking approval to not display the OMB expiration date.

We seek approval to not display the OMB clearance expiration date on the forms and to communicate version changes to the public via the revision date. The results of this collection are not published.

18. Explain each exception to the topics of the certification statement identified in [“Certification for Paperwork Reduction Act Submissions.”](#)

There are no exceptions to the certification statement.