Non-substantive Change Request

OMB Control Number 1240-0014

REGULATIONS GOVERNING THE ADMINISTRATION OF THE LONGSHORE AND HARBOR WORKERS' COMPENSATION ACT

Notice of Employee's Injury or Death (LS-201)

Employee's Claim for Compensation (LS-203)

Date Submitted: 02/27/2025

**Summary of Request:** The Office of Workers' Compensation Programs is requesting a change request to revise questions to align with E.O. 14168 *Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government*.

Description of Changes Requested: This request updates sex questions used in Notice of Employee's Injury or Death (LS-201) and Employee's Claim for Compensation (LS-203) to be in accordance with E.O. 14168. Please check the boxes below if your request includes:

☑ Revision of an existing question(s)

☐ Deletion of an existing question(s)

This change does not affect current burden estimates.

Table A: Description of Changes

| Form | Type of Change | Question/Item | Requested Change |
|---|---|---|---|
| Notice of Employee's Injury or Death (LS-201) | Question Revision | Question #3 'Sex' | Revision to allow for only two options: 'Male' and 'Female' instead of seven |
| Employee's Claim | Question Revision | Question #7 'Sex' | Revision to allow |

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| for Compensation (LS-203) | | | for only two options: ‘Male’ and ‘Female’ instead of seven |