



## OFFICE OF PERSONNEL MANAGEMENT

[Docket ID: OPM-2023-0011]

### **Submission for Review: 3206-0162, Report of Medical Examination of Person Electing Survivor Benefits, OPM 1530**

**AGENCY:** Office of Personnel Management.

**ACTION:** 60-day notice and request for comments.

**SUMMARY:** The Office of Personnel Management (OPM) offers the general public and other Federal agencies the opportunity to comment on an expiring information collection request (ICR), without change, titled “Report of Medical Examination of Person Electing Survivor Benefits,” OPM 1530.

**DATES:** Comments are encouraged and will be accepted until [INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE *FEDERAL REGISTER*].

**ADDRESSES:** You may submit comments, identified by docket number and/or Regulatory Information Number (RIN) and title, by the following method:

- Federal Rulemaking Portal: <https://www.regulations.gov>. Follow the instructions for submitting comments.

All submissions received must include the agency name and docket number or RIN for this document. The general policy for comments and other submissions from members of the public is to make these submissions available for public viewing at <https://www.regulations.gov> as they are received without change, including any personal identifiers or contact information.

**FOR FURTHER INFORMATION CONTACT:** A copy of this ICR with applicable supporting documentation, may be obtained by contacting the Retirement Services Publications Team, Office of Personnel Management, 1900 E Street, NW, Room 3316-L, Washington, DC 20415, Attention: Cyrus S. Benson, or sent via electronic mail to [Cyrus.Benson@opm.gov](mailto:Cyrus.Benson@opm.gov) or faxed to (202) 606-0910 or reached via telephone at (202) 936-0401.

**SUPPLEMENTARY INFORMATION:** As required by the Paperwork Reduction Act of 1995 (Public Law 104-13, 44 U.S.C. chapter 35) as amended by the Clinger-Cohen Act (Pub. L. 104-106), OPM is soliciting comments for this collection (OMB No. 3206-0162). The Office of Management and Budget is particularly interested in comments that:

1. Evaluate whether the proposed collection of information is necessary for the proper performance of functions of the agency, including whether the information will have practical utility;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
3. Enhance the quality, utility, and clarity of the information to be collected; and
4. Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submissions of responses.

At the time of retirement, an employee or Member in good health may elect an insurable interest survivor annuity benefit on behalf of an eligible beneficiary. OPM Form 1530 is used to collect the information necessary to determine whether the employee or Member is in good health so that OPM can determine whether the applicant is eligible to elect an insurable interest survivor annuity benefit.

**Analysis:**

*Agency:* Retirement Operations, Retirement Services, Office of Personnel Management

*Title:* Report of Medical Examination of Person Electing Survivor Benefits

*OMB Number:* 3206-0162

*Frequency:* On occasion

*Affected Public:* Individuals or households

*Number of Respondents:* 500

*Estimated Time Per Respondent: 90 minutes*

*Total Burden Hours: 750*

U.S. Office of Personnel Management.

**Kayyonne Marston,**

*Federal Register Liaison.*

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