



**DEPARTMENT OF LABOR**

**[OMB Control No. 1240-0045]**

**Office of the Worker's Compensation Programs**

**Proposed Extension of Information Collection; Rehabilitation Plan and Award,  
(OWCP-16)**

**AGENCY:** Office of Workers' Compensation, Division of Federal Employees' Longshore and Harbor Workers' Compensation, (OWCP/DFELHWC), Labor.

**ACTION:** Request for public comments.

**SUMMARY:** The Department of Labor, as part of its continuing effort to reduce paperwork and respondent burden, conducts a pre-clearance request for comment to provide the general public and Federal agencies with an opportunity to comment on proposed collections of information in accordance with the Paperwork Reduction Act of 1995. This request helps to ensure that: requested data can be provided in the desired format; reporting burden (time and financial resources) is minimized; collection instruments are clearly understood; and the impact of collection requirements on respondents can be properly assessed. Currently, OWCP/DFELHWC is soliciting comments on the information collection for Rehabilitation Plan and Award , (OWCP-16).

**DATES:** All comments must be received on or before [INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

**ADDRESSES:** You may submit comment as follows. Please note that late, untimely filed comments will not be considered.

**Written/Paper Submissions:** Submit written/paper submissions in the following way:

- Mail/Hand Delivery: Mail or visit DOL- OWCP/DFELHWC, Office of Workers' Compensation Programs, Division of Federal Employees' Longshore and Harbor

Workers' Compensation, U.S. Department of Labor, 200 Constitution Ave., NW, Room S-3323, Washington, DC 20210.

- Electronic submission: You may submit comments and attachments electronically at <http://www.regulations.gov>. Follow the online instructions for submitting comments .

**FOR FURTHER INFORMATION CONTACT:** Anjanette Suggs, Office of Workers' Compensation Programs, Division of Federal Employees Longshore, and Harbor Workers' Compensation, OWCP/DFELHWC, at [suggs.anjanette@dol.gov](mailto:suggs.anjanette@dol.gov) (email); (202) 354-9660.

## **SUPPLEMENTARY INFORMATION:**

### **I. Background**

The Office of Workers' Compensation Programs (OWCP) is the agency responsible for administration of the Longshore and Harbor Workers' Compensation Act (LHWCA), and the Federal Employees' Compensation Act (FECA). 33 U.S.C. 939 (LHWCA) and 5 U.S.C. 8104 and 8111 (FECA) authorizes OWCP to pay for approved vocational rehabilitation services to eligible workers with work-related disabilities. In order to decide whether to approve a rehabilitation plan, OWCP must receive a copy of the plan, supporting vocational testing materials and the estimated cost to implement the plan, broken down to show the fees, supplies, tuition and worker maintenance payments that are contemplated. OWCP also must receive the signatures of the worker and the rehabilitation counselor to show that the worker agrees to follow the proposed plan, and that the proposed plan is appropriate. Form OWCP-16 is the standard format for the collection of this information. The regulations implementing these statutes allow for the collection of information needed for OWCP to determine if a rehabilitation plan should be approved and payment of any related expenses should be authorized. (LHWCA, 702.506 and 702.507, (FECA, 20 CFR 10.518, 10.519)

## **II. Desired Focus of Comments**

OWCP is soliciting comments concerning the proposed information collection (ICR) titled , “Rehabilitation Plan and Award”, OWCP-16. OWCP/DFELHWC is particularly interested in comments that:

- Evaluate whether the collection of information is necessary for the proper performance of the functions of the Agency, including whether the information has practical utility;
- Evaluate the accuracy of OWCP/DFELHWC’s estimate of the burden related to the information collection, including the validity of the methodology and assumptions used in the estimate;
- Suggest methods to enhance the quality, utility, and clarity of the information to be collected; and
- Minimize the burden of the information collection 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 submission of responses.

Background documents related to this information collection request are available at <https://regulations.gov> and at DOL-OWCP/DFELHWC located at 200 Constitution Avenue., NW, Room S-3323, Washington, DC 20210. Questions about the information collection requirements may be directed to the person listed in the FOR FURTHER INFORMATION section of this notice.

## **III. Current Actions**

This information collection request concerns the Rehabilitation Plan and Award, OWCP-16. OWCP/DFELHWC has updated the data with respect to the number of respondents, responses, burden hours, and burden costs supporting this information collection request from the previous information collection request.

*Type of Review: Extension, without change , of a currently approved collection.*

*Agency: Office of Workers' Compensation Programs, Division of Federal Employees' Longshore, and Harbor Workers' Compensation, OWCP/DFELHWC*

*OMB Number: 1240-0045*

*Affected Public: Not-for-profit institutions, Businesses or other for-profits*

*Number of Respondents: 3, 413*

*Frequency: On occasion*

*Number of Responses: 3, 413*

*Annual Burden Hours: 1,707 hours*

*Total Respondent or Recordkeeper Cost: \$0*

*OWCP Form 16, Rehabilitation Plan and Award.*

Comments submitted in response to this notice will be summarized in the request for Office of Management and Budget approval of the proposed information collection request; they will become a matter of public record and will be available at <https://www.reginfo.gov>.

**Anjanette Suggs,**

*Certifying Officer.*

[FR Doc. 2023-18668 Filed: 8/29/2023 8:45 am; Publication Date: 8/30/2023]