



## DEPARTMENT OF LABOR

### **Agency Information Collection Activities; Submission for OMB Review; Comment Request; Authorization Request Form/Certification/Letter of Medical Necessity**

**ACTION:** Notice of availability; request for comments.

**SUMMARY:** The Department of Labor (DOL) is submitting this Office of Workers' Compensation Programs (OWCP)-sponsored information collection request (ICR) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (PRA). Public comments on the ICR are invited.

**DATES:** The OMB will consider all written comments that the agency receives on or before [INSERT DATE 30 DAYS AFTER DATE OF PUBLICATION IN THE *FEDERAL REGISTER*].

**ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting "Currently under 30-day Review - Open for Public Comments" or by using the search function.

**FOR FURTHER INFORMATION CONTACT:** Michelle Neary by telephone at 202-693-6312, or by email at [DOL\\_PRA\\_PUBLIC@dol.gov](mailto:DOL_PRA_PUBLIC@dol.gov).

**SUPPLEMENTARY INFORMATION:** The form, Authorization Request Form and Certification/Letter of Medical Necessity Certification/Letter of Medical Necessity for Opioid Medications (CA-27), requires an injured worker's treating physician to answer a number of questions about the prescribed opioids and certify that they are medically necessary to treat the work-related injury. The responses to the questions on the form is intended to ensure that treating physicians have considered non-opioid drug alternatives, and are only prescribing the most cost effective and medically necessary drugs. The form

will also permit OWCP to more easily track the volume, type, and characteristics of opioids authorized by the FECA program. The form will serve as a means for injured workers to continue receiving opioids drugs only where medically necessary and simultaneously give OWCP greater oversight in monitoring their appropriate use and gather additional data about their use. For additional substantive information about this ICR, see the related notice published in the *Federal Register* on January 26, 2024 (89 FR 5263).

Comments are invited on: (1) whether the collection of information is necessary for the proper performance of the functions of the Department, including whether the information will have practical utility; (2) if the information will be processed and used in a timely manner; (3) the accuracy of the agency's estimates of the burden and cost of the collection of information, including the validity of the methodology and assumptions used; (4) ways to enhance the quality, utility and clarity of the information collection; and (5) ways to minimize the burden of the collection of information on those who are to respond, including the use of automated collection techniques or other forms of information technology.

This information collection is subject to the PRA. A Federal agency generally cannot conduct or sponsor a collection of information, and the public is generally not required to respond to an information collection, unless the OMB approves it and displays a currently valid OMB Control Number. In addition, notwithstanding any other provisions of law, no person shall generally be subject to penalty for failing to comply with a collection of information that does not display a valid OMB Control Number. *See* 5 CFR 1320.5(a) and 1320.6.

DOL seeks PRA authorization for this information collection for three (3) years. OMB authorization for an ICR cannot be for more than three (3) years without renewal.

The DOL notes that information collection requirements submitted to the OMB for existing ICRs receive a month-to-month extension while they undergo review.

*Agency:* DOL-OWCP.

*Title of Collection:* Authorization Request Form/Certification/Letter of Medical Necessity.

*OMB Control Number:* 1240-0055.

*Affected Public:* Individuals or Households.

*Total Estimated Number of Respondents:* 78.

*Total Estimated Number of Responses:* 490.

*Total Estimated Annual Time Burden:* 245 hours.

*Total Estimated Annual Other Costs Burden:* \$0.

(Authority: 44 U.S.C. 3507(a)(1)(D))

**Michelle Neary,**

*Senior Paperwork Reduction Act Analyst.*

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