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: Rehabilitation Action Report.

OMB Control Number: 1240–0008.

Affected Public: Private Sector—Businesses or other for-profits; Not-for-profit institutions.

Total Estimated Number of Respondents: 6,136.

Total Estimated Number of Responses: 6,136.

Total Estimated Annual Time Burden: 1,043 hours.

Total Estimated Annual Other Costs Burden: $0.

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

Michelle Neary,

Senior Paperwork Reduction Act Analyst.

[FR Doc. 2024–06358 Filed 3–25–24; 8:45 am]

BILLING CODE 4510–CH–P

DEPARTMENT OF LABOR

Agency Information Collection Activities; Comment Request; Authorization and Certification/Letter of Medical Necessity, CA–26/CA–27; Correction

ACTION: Request for public comments; correction.

SUMMARY: The Department of Labor (DOL), Office of Workers' Compensation Programs, is correcting a notice that appeared in the **Federal Register** on January 26, 2024. After publication of the notice, the DOL discovered that the information provided in the **SUPPLEMENTARY INFORMATION** section contained several errors. DOL is issuing this correction to provide the correct information.

FOR FURTHER INFORMATION CONTACT: Anjanette Suggs, Office of Workers' Compensation Programs, OWCP, at *suggs.anjanette@dol.gov* (email); (202) 354–9660 (phone).

SUPPLEMENTARY INFORMATION:

Correction

In FR. Doc. 2024–01535 appearing at 89 FR 5263 in the **Federal Register** of Friday, January 26, 2024, on page 5264, in the third column, the following corrections are made to the **SUPPLEMENTARY INFORMATION** section, I. Background subsection:

1. The first four full paragraphs of that third column are corrected to read as follows:

OWCP believes that the the two forms used to monitor compound and opiate medication further strengthens medical management procedures for prescription drugs, assist our stakeholders in controlling costs afrom medically unnecessary treatements, and lessens the impact of potential drug addiction and medical fraud. However, OWCP is bifurcating the CA–26 from this collection so that it may be transferred to 1240–0NEW where it will be renamed OWCP–26. (The OWCP–26 will be updated to be applicable in all of OWCP's program areas; otherwise, it will remain the same. The public and stakeholders for all programs will have opportunity to comment on the new form with the upcoming publication of the 60-day **Federal Register** Notice for 1240–0NEW.)

A major goal of the FECA program is to return an injured employee back to employment as soon as medically feasible. The CA–27 form is a means for injured workers to continue receiving opiod drugs only where medically necessary and simultaneously gives OWCP greater oversight in monitoring opioid use.

OWCP has issued regulations relating to its authority to require prior authorization for medical treatment which will now be applied through the CA–27 to opioids. (20 CFR 10.310, 10.800 & 10.809). Requiring Prior Authorization will assist OWCP in determining whether the prescribed medication will assist in curing, giving relief, and lessening the degree of disability. FECA further provides OWCP the authority to conduct such investigation as necessary before making an award of compensation (including the need for medical treatment by certain prescription drugs). 5 U.S.C. 8124(a)(2). Finally, 5 U.S.C. 8149 provides OWCP the authority to prescribe rules and regulations necessary for the administration of FECA.

As such, the CA–27, Authorization Request form and Certification/Letter of Medical Necessity or Opioid Medications, fulfill these requirements and obligations under the FECA.

2. On page 5265, in the first column, the following corrections are made to the summary of the collection contained in subsection III. Current Actions:

Type of Review: Revision.

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

OMB Number: 1240–0055.

Affected Public: Individuals or households; business or other for-profit.

Number of Respondents: 78.

Frequency: On occasion.

Number of Responses: 490.

Annual Burden Hours: 245 hours.

Annual Respondent or Recordkeeper Cost: $28,116.20.

Anjanette Suggs,

Certifying Officer.

[FR Doc. 2024–06361 Filed 3–25–24; 8:45 am]

BILLING CODE 4510–CH–P

DEPARTMENT OF LABOR

Agency Information Collection Activities; Submission for OMB Review; Comment Request; OSHA Outreach Training Program and OSHA Training Institute Education Centers Program Forms

ACTION: Notice of availability; request for comments.

SUMMARY: The Department of Labor (DOL) is submitting this Occupational Safety & Health Administration (OSHA)-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 April 25, 2024.

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.* 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: Nicole Bouchet by telephone at 202–693–0213, or by email at *DOL_PRA_PUBLIC@dol.gov.*

SUPPLEMENTARY INFORMATION: OSHA's Office of Training and Educational Programs is designed to recognize and promote excellence in safety and health training. The OSHA Training Institute's (OTI) Education Centers offer courses for the private sector and other federal agency personnel at locations throughout the United States. OSHA extends its training reach to workers through its various Outreach Training Programs. Through the Outreach Training Programs, qualified individuals complete an OSHA trainer course and become authorized to teach student courses. The collection of information requirements contained in these programs are necessary to evaluate the applicant organization and to implement, oversee, and monitor the OTI Education Centers and Outreach Training Programs, courses and trainers. For additional substantive information about this ICR, see the related notice published in the **Federal Register** on December 28, 2023 (88 FR 89730).

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) 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; (3) ways to enhance the quality, utility and clarity of the information collection; and (4) 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–OSHA.

Title of Collection: OSHA Outreach Training Program and OSHA Training Institute Education Centers Program Forms.

OMB Control Number: 1218–0262.

Affected Public: Individuals or Households; Private Sector—Businesses or other for-profits, Not-for-profit institutions.

Total Estimated Number of Respondents: 53,502 and 26.

Total Estimated Number of Responses: 58,242.

Total Estimated Annual Time Burden: 16,377 hours.

Total Estimated Annual Other Costs Burden: $0.

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

Nicole Bouchet,

Certifying Official.

[FR Doc. 2024–06360 Filed 3–25–24; 8:45 am]

BILLING CODE 4510–26–P

DEPARTMENT OF LABOR

Office of the Worker's Compensation Programs

[OMB Control No. 1240–0NEW]

Proposed of Information Collection; Authorization Request Form and Certification/Letter of Medical Necessity for Compounded Drugs (OWCP–26)

AGENCY: Office of Workers' Compensation (OWCP), 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 is soliciting comments on the information collection for Authorization Request Form and Certification/Letter of Medical Necessity for Compounded Drugs (OWCP–26).

DATES: All comments must be received on or before May 28, 2024.

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/, Office of Workers' Compensation Programs, U.S. Department of Labor, 200 Constitution Ave. NW, Room S–3524, Washington, DC 20210.
- OWCP will post your comment as well as any attachments, except for information submitted and marked as confidential, in the docket at *https://www.regulations.gov.*

FOR FURTHER INFORMATION CONTACT: Anjanette Suggs, Office of Workers' Compensation Programs, OWCP, at *suggs.anjanette@dol.gov* (email); (202) 354–9660 (phone).

SUPPLEMENTARY INFORMATION:

I. Background

In 2013, the President of the United States, Barack Obama, signed a law, which provides greater federal oversight over compounding pharmacies that custom mix medication in bulk for patients who may benefit from prescriptions that are specific to their individual medical needs. See *Compounding Quality Act,* Public Law 113–54, 127 Stat. 587 (2013).

Compounded drugs have two or more ingredients and are offered as an alternative to Food and Drug Administration (FDA)-approved medications that do not meet an individual patient's health needs, such as when a patient has an allergy that requires a medication to be made without a certain dye. See *Compounding and the FDA: Questions and Answers, http://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/PharmacyCompounding/ucm339764.htm.*

Compounded drugs are not FDA-approved. This means that the FDA does not verify the safety or effectiveness of compounded drugs. Consumers and health professionals rely on the drug approval process to ensure that drugs are safe and effective, and made in accordance with Federal quality standards. Compounded drugs also lack an FDA finding of manufacturing quality before they are marketed.

Health risks associated with compounded drugs include the use of ingredients that may be sub- or super-potent, contaminated, or otherwise adulterated. Additionally, patients may use ineffective compounded drugs instead of FDA-approved drugs, which have been shown to be safe and effective.