Job Family Position Classification Standard for Assistance and Technical Work in the Medical, Hospital, Dental, and Public Health Group, GS-0600

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INTRODUCTION

This job family standard provides series definitions, titling instructions, and grading criteria for nonsupervisory one-grade interval administrative support (i.e., assistance) and technical positions in the Medical, Hospital, Dental, and Public Health Group, GS-0600.

COVERAGE

This initial installment covers the following occupational series:

Series				
Medical Records Technician	GS-0675			
Medical Support Assistance	GS-0679			

Ultimately, this job family standard will cover all of the one-grade interval administrative support and technical occupations in the GS-0600 Group. For additional information about occupations in this job family, please see the **DEFINING STUDY AND JOB FAMILY COVERAGE** section of Appendix H.

MODIFICATIONS TO AND CANCELLATIONS OF OTHER EXISTING OCCUPATIONAL SERIES AND STANDARDS

Issuance of this job family standard renames or cancels occupational series and classification standards as described in the following table. The table also indicates how to classify work previously covered by classification standards affected by this issuance.

Previous Series	Action Taken / How to Classify Work Previously Covered		
Medical Records GS-0675 Technician	Cancels this classification standard, last revised in November 1991.		
Medical Clerk GS-0679	 Cancels this classification standard, last revised in April 1978. Renames this series. Classify work previously covered by this series to the 0679 		

GENERAL SERIES, TITLING, AND OCCUPATIONAL GUIDANCE

This section provides information on series definitions, titling instructions, and occupational guidance for nonsupervisory one-grade interval administrative support and technical positions in the Medical, Hospital, Dental, and Public Health Group, GS-0600. It also provides information on titling instructions for supervisors and leaders and for agency-established parenthetical titles in this job family.

GENERAL TITLING PROVISIONS

Supervisors and Leaders

- Add the prefix "Supervisory" to the title of positions classified using the **General Schedule Supervisory Guide**.
- Add the prefix "Lead" to the title of positions classified using the <u>General Schedule Leader Grade</u> <u>Evaluation Guide</u>.

Parenthetical Titles

• None prescribed. Agencies may supplement the basic and prescribed titles authorized in this standard with agency-established parenthetical titles if necessary for recruitment or other human resources needs.

Organizational Titles

• Use the official position titles as outlined below for human resources management, budget, and fiscal purposes. This does not preclude continued use of organizational or functional titles for internal administration, public convenience, program management, or similar purposes. You may use such organizational titles on organization charts or other internal documents.

INFORMATION BY SERIES				
Medical Records Technician, GS-0675	•	Series Definition		
	•	<u>Titling</u>		
	•	Occupational Information		
Medical Support Assistance, GS-0679	•	Series Definition		
	•	<u>Titling</u>		
	•	Occupational Information		

MEDICAL RECORDS TECHNICIAN, GS-0675

Qualification Standards

efinition

This series covers one-grade interval technical support positions that supervise, lead, or perform support work in connection with processing and maintaining medical records for compliance with regulatory requirements. It also covers positions that review, analyze, code, abstract, and compile or extract medical records data. The work requires a practical knowledge of medical record procedures and references and the organization and consistency of medical records. Positions also require a basic knowledge of human anatomy, physiology, and medical terminology.

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The basic title for this occupation is *Medical Records Technician*.

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General Occupational Information

Medical records technicians assemble, analyze, code, abstract, report, maintain, and extract medical records information. They organize and check medical records for completeness, accuracy, and compliance with regulatory requirements. In most Federal medical centers today, the medical staffs, including medical records technicians, use automated records systems.

Federal health care facilities maintain permanent medical records that contain health care information to support and justify the diagnosis and treatment rendered on each patient. These records include the patient's:

- medical history;
- physical examination results;
- x-ray and laboratory reports;
- diagnosis and treatment plans; and
- orders and notes from doctors, nurses, and other health care professionals.

Accurate medical records are essential for:

- clinical, legal, and fiscal purposes;
- correct and prompt diagnosis and treatment of illnesses and injuries;
- continuity of care;
- background and documentation for insurance claims, legal actions, professional review of prescribed treatments and medications, and training of health professionals;
- research, clinical studies, and resource management planning purposes;
- proper evaluation and justification of the costs of various medical procedures; and
- full assessment of overall health needs.

Specific duties of medical records technicians vary with the complexity and characteristics of the facility. Use of the latest treatment methods by health care professionals results in comprehensive medical records, in some cases with many diagnoses and treatments. The time and knowledge needed to analyze and code a record increases in proportion to the patient's length of stay and the complexity of the patient's diagnosis and treatment. The scope of the work performed by the medical records technician is increased when there are many health care providers involved in the care of a single patient. Several physicians may provide care to one patient, all of whom write progress notes and determine diagnoses and treatments. Medical records technicians in facilities offering a greater number of specialties, health care providers, and diagnostic and therapeutic services must have increased knowledge and understanding of many health care processes. They must stay abreast of new procedures and therapies so they can analyze and code the records.

(continued)

Occupational Information

MEDICAL RECORDS TECHNICIAN, GS-0675 (continued)

In some Federal facilities, medical records administrators manage medical records activities. In others, an experienced medical records technician may head the medical records organization.

Medical records technicians must have knowledge of:

- medical terminology and uses, covering the full range of general medical, surgical, pharmaceutical, and hospital terms and abbreviations, as well as medical abstracts;
- physiology, major anatomical systems, and related disease processes;
- medical records forms and formats;
- correlation of laboratory tests, procedures, and treatments with diagnoses;
- medical records classification systems and references;
- legal and regulatory requirements for medical records to be sure the record is acceptable as a legal document:
- laws and regulations on the confidentiality of medical records (e.g., Privacy Act and Freedom of Information Act) and the procedures for obtaining informed consent for release of information from the record:
- · computerized data entry and information processing systems; and
- data collection methods for basic health care and research information.

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MEDICAL SUPPORT ASSISTANCE, GS-0679

Qualification Standards

efinition

Occupational Information (continued)

This series covers one-grade interval administrative support positions that supervise, lead, or perform support work in connection with the care and treatment given to patients in wards, clinics, or other such units of a medical facility. The work includes functions such as serving as a receptionist, performing record keeping duties, and providing miscellaneous support to the medical staff of the unit. This series includes work that requires a practical knowledge of computerized data entry and information processing systems, the medical facility's organization and services, basic rules and regulations governing visitors and patient treatment, and a practical knowledge of the standard procedures, medical records, and medical terminology of the unit supported.

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The basic title for this occupation is *Medical Support Assistant*.

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Occupational Information

General Occupational Information

Medical support assistants perform a variety of support duties that facilitate the work of physicians, physician assistants, nurses, nursing assistants, and other members of the medical facility who provide patient care. They frequently occupy the single support position located in one or more units and link the nursing service with the medical administrative services and outpatient departments. Medical support assistants are considered chief sources of information and play an important role in accomplishing the work of the unit by performing such duties as:

- receiving and relaying incoming and outgoing telephone, intercom, and electronic messages;
- receiving and directing patients and visitors, answering routine inquiries, and making appropriate referral of questions concerning patients' conditions;
- assembling patient records according to prescribed formats;
- inserting additional forms and charts as necessary, and stamping them with correct patient identification;
- filing results of treatment in medical records;
- reviewing patients' charts and recording a variety of medical data;
- determining patients' eligibility for treatment and paid travel expenses;
- recording physicians' orders for patients on a variety of records;
- selecting, completing, and routing requests for patient activities and treatment procedures;
- scheduling appointments for patients with other medical services;
- preparing patient census reports;
- keeping time and attendance records;
- ordering and keeping records of supplies; and
- receiving and distributing mail to medical staff and patients.

Medical support assistants must have knowledge of:

- procedures, medical records, and medical terminology of the unit(s) supported;
- the facility's organization and services; and
- computerized data entry and information processing systems used by the facility.

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IMPACT OF AUTOMATION

Automation greatly affects the way health care services are delivered. Employees use computers to perform a wide variety of record keeping, correspondence, and tracking operations. They input, delete, retrieve, manipulate, and correct information in databases or automated records. They design and produce reports using automated computer systems.

Although medical records technicians and medical support assistants use computers to perform basic work processes, knowledge of the rules and processes in the medical support arena remains the paramount subject matter knowledge required to perform this work. The kind of automation tools involved and the skill required to use them generally replace or supplement work methods and techniques previously performed through manual or machine enhanced processes. Although computers are used to facilitate work within these occupations, the use of automation does not change the primary purpose of the work. Proper classification of positions within these and other administrative support occupations is based on the relevant knowledge and skills required to perform the primary – in these instances, medical records and support – duties of the position.

CROSSWALK TO THE STANDARD OCCUPATIONAL CLASSIFICATION

The Office of Management and Budget requires all Federal agencies that collect occupational data to use the Standard Occupational Classification (SOC) system for statistical data reporting purposes. The Bureau of Labor Statistics will use SOC codes for National Compensation Survey and other statistical reporting. The Office of Personnel Management (OPM) and agencies will develop and maintain the "crosswalk" between the Federal occupational series and the SOC codes to serve this need. These SOC codes and this requirement have no effect on the administration of any Federal human resources management systems. The information contained in this table is for information only and has no direct impact on the classification of positions covered by this job family standard. The SOC codes shown here generally apply only to nonsupervisory positions in these occupations. As changes occur to the SOC codes, OPM will update this table. More information about the SOC is available at http://stats.bls.gov/soc/

Federal Occupational Series and Position Titles and Their Related Standard Occupational Classification System Codes

Occupational Series	Classif	l Occupational ication Code ccupational Series	Position Title	Standard Occupational Classification Code Based on Position Title	
Medical Records Technician,	29-2071	Medical	Medical Records Technician	29-2071	Medical
GS-0675		Records and			Records and
		Health			Health
		Information			Information
		Technicians			Technicians
Medical Support Assistance,	43-4199	Information and	Medical Support Assistant	43-4199	Information and
GS-0679		Record Clerks,			Record Clerks,
		All Other			All Other

EXCLUSIONS

Although some positions may include administrative support or technical work requiring some knowledge and skills in the medical area, classification to a series in the Medical, Hospital, Dental, and Public Health Group, GS-0600, may not be appropriate. To select the appropriate series, you must determine the paramount knowledge; i.e., the most important subject-matter knowledge required to perform the primary duties of the position. To determine the paramount knowledge, you must also consider the primary purpose for the position's existence, the most important qualification(s) required, recruitment sources, career progression, and the background knowledge required. The following table provides examples of situations where the work may involve the application of related knowledge and skills, but not to the extent that it may warrant classification to a series in this job family.

NOTE: In the table below, job family standard is abbreviated as JFS.

If	See This Standard or Series Definition:
 Work involves composing or reviewing correspondence to obtain or provide factual information. The work primarily requires skill in composing letters and memoranda. 	GS-0309, Correspondence Clerk
2. Work involves performing general office duties independent of any other administrative support position in the office to assist one individual and in some instances the subordinate staff.	GS-0318, Secretary
3. Work involves typing or taking dictation that requires a fully qualified typist or stenographer and the performance of general office clerical work (such as answering the telephone, filing, opening and distributing mail, etc.).	GS-0312, Clerk- Stenographer and Reporter
	GS-0322, Clerk-Typist GS-0326, Office Automation Clerical and Assistance
 4. Work involves: receiving and directing callers or visitors to Government agencies, installations, or offices; and providing information in person or by telephone concerning the office, organization, function, activities, and personnel. 	GS-0304, Information Receptionist
5. Work involves operating keyboard-controlled machines to transcribe data or to verify data in a form used in automated data processing systems.	GS-0356, Data Transcriber
6. Work involves coding information from schedules, questionnaires, reports, documents, and other written source material according to codes involving numerical or alphabetical symbols.	<u>GS-0357, Coding</u>

(continued)

EXCLUSIONS (continued)

If	See This Standard or Series Definition:
7. Work involves applying knowledge of statistical methods, procedures, and techniques to collect, process, compile, compute, analyze, edit, and present statistical data.	GS-1531, Statistical Assistant
Work primarily involves knowledge of medical records administration and management skills and abilities.	GS-0669, Medical Records Administration
Work involves assistance work that supports accounting, budget, and other related financial management activities.	JFS for Clerical and Assistance Accounting and Budget Work, GS- 0500

HOW TO USE THIS STANDARD

Evaluate positions on a factor-by-factor basis using the factor level descriptions (FLDs) provided in this standard. Compare each factor in the position description to the appropriate FLDs and illustrations in the standard. If the factor information in the position description fully matches an FLD for the series in the standard, you may assign the level without reviewing the illustrations. FLDs are progressive or cumulative in nature. For example, each FLD for Factor 1 – Knowledge Required by the Position encompasses the knowledge and skills identified at the previous level. Use only designated point values. Record the results of your analysis on the Position Evaluation Summary form on the next page. Convert total points for all factors to grade levels using the grade conversion table that follows the FLDs.

This standard provides occupation-specific illustrations as a frame of reference for applying factor level concepts. Do not rely solely on the illustrations in evaluating positions, because they reflect a limited range of actual work examples. Use the illustrations to gain insights into the meaning of the grading criteria in the FLDs. Consider each illustration in its entirety and in conjunction with the FLDs in your analysis, and do not merely use a selected portion of an illustration taken out of context as evidence of a match. The level of work described in some illustrations may be higher than the threshold for a particular factor level. If the factor information in the position description you are evaluating fails to fully match a relevant illustration, but does fully match the FLD, you may still assign the level.

The FLDs in this standard cover nonsupervisory positions at grades GS-2 through GS-8. Evaluate supervisory and leader positions by applying the appropriate guide.

You will find more complete instructions for evaluating positions in the following OPM publications: <u>Introduction to the Position Classification</u> <u>Standards</u> and <u>The Classifier's Handbook.</u>

POSITION EVALUATION SUMMARY

Org	Organization					
Po	sition#					
	Evaluation Factors Standards Used	Factor Level Used (FL#, etc.)	Points Assigned	Comments		
1.		, , , , , ,	, , , , , , , , , , , , , , , , , , ,			
2.	Supervisory Controls					
3.	Guidelines					
4.	Complexity					
5.	Scope and Effect					
6/7	Personal Contacts and Purpose of Contacts					
8.	Physical Demands					
9.	Work Environment					
S U M		Total Points				
A R Y	Gra	ade Conversion				
Additional Remarks:						
Title, Series, and Grade Assigned:						
Da	Date: Agencies may copy for local use.					

FACTOR LEVEL DESCRIPTIONS

FACTOR 1 - KNOWLEDGE REQUIRED BY THE POSITION

Factor 1 measures the nature and extent of information or facts that an employee must understand to do acceptable work (e.g., steps, procedures, practices, rules, policies, theories, principles, and concepts) and the nature and extent of the skills necessary to apply that knowledge. You should only select a factor level under this factor when the knowledge described is required and applied.

NOTE: In the tables below, factor level description is abbreviated as FLD. Factor 1 illustrations are located in Appendix F1.

Level 1-2 200 Points

Series

Medical Support Assistance GS-0679 Illustration(s)

Knowledge of, and skill in applying, established rules, regulations, and operating procedures of the medical facility, its personnel, and its functions, sufficient to:

- refer calls;
- answer questions;
- schedule patients;
- determine eligibility for service;
- assemble patient charts in their required order and sequence;
- record a variety of physicians' orders for patient activities, diets, tests, and treatment;
- refer patients to proper clinics;
- answer questions regarding routine procedures;
 - relay physician instructions to patients;
- file test results;
- relay information regarding the patient's condition;
- compile/submit data on patients treated;
- operate personal computers, data processing equipment, and/or office support software for word processing, data entry, or data retrieval; and
- use correct grammar, spelling, punctuation, and required formats.

Level 1-3 350 Points

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Medical Records Technician GS-0675 <u>Illustration(s)</u>

Knowledge of, and skill in applying, a standardized body of rules, procedures, and operations such as:

- general physiology, major anatomical systems, and related disease processes;
- medical terminology that covers the full range of general medical, surgical, pharmaceutical, and hospital terms and abbreviations, as well as medical abstracts;
- eligibility requirements for Medicare, Medicaid, Veterans' Health, and Vocational Rehabilitation;
- eligibility requirements for contract medical care procedures;
- laws and regulations related to the confidentiality of medical records and the release of information from medical records;
- computerized data entry and information systems; and
- standard formats, forms, grammar, spelling, capitalization, and punctuation
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sufficient to:

- code diagnostic and operative/procedural information;
- organize patient charts to search and extract medical data;
- review records for completeness, accuracy, and compliance with applicable medical facility and accreditation standards;
- prepare correspondence, reports, and other material; and
- determine the probability of payment from various sources (e.g., Medicare, Medicaid).

Series

Medical Support Assistance GS-0679 Illustration(s)

Knowledge of, and skill in applying, a standardized body of rules, procedures, and operations, such as:

- available medical facility services, medical terminology used in the facility, and procedures of each unit serviced;
- the facility's automated and/or manual records system; and
- regulations, administrative policies, and professional service procedures applicable to a variety of issues

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sufficient to:

- give instructions to patients and arrange appointments;
- assemble patients' charts;
- record physicians' orders;
- retrieve x-rays, laboratory reports, and other relevant patient data;
- organize patient records to research records, extract medical information and review records for completeness, accuracy, and consistency with medical facility requirements; and
- record data involving outpatient appointments, inpatient admissions, and discharge and transfer information using the medical facility's automated and/or manual medical records system.

Level 1-4 550 Points

Series

Medical Records Technician GS-0675 <u>Illustration(s)</u>

Knowledge of, and skill in applying, an extensive body of rules, procedures, and operations, such as:

- well-established medical records procedures, regulations, and principles;
- Joint Commission on Accreditation of Healthcare Organizations (JCAHO) standards and medical records classification systems and references;
- elementary practical anatomy and physiology, medical techniques, and major disease processes, diagnoses, procedures, tests, pharmaceuticals operations, psychological, and other specialized terms; and
- computerized data entry and retrieval systems

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sufficient to:

- analyze medical records, maintain special registries, perform quality assurance, compile statistical data, and release medical information;
- code diagnostic and operative/procedural information;
- collect and organize data for statistical reports, audits, and/or research projects; and
- extract data for statistical and other reports.

Level 1-5 750 Points

Series

Medical Records Technician GS-0675 <u>Illustration(s)</u>

Thorough and detailed knowledge of, and skill in applying, a comprehensive body of rules, procedures, and operations, such as:

- medical records activities, operations, and regulations;
- medical terminology, procedures, anatomy, physiology, and disease processes;
- medical record classification systems coding techniques; and
- computerized data entry and retrieval systems

sufficient to:

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- assist in a wide range of quality assurance studies;
- make recommendations to improve procedures for compiling and retrieving medical records information;
- identify specific clinical findings, support existing diagnoses, or substantiate listing additional diagnoses in the medical record;
- code complicated medical records that are difficult to classify;
- plan, organize, and maintain special registries;
- gather and represent data graphically;
- make a variety of basic statistical computations;
- identify possible trends and patterns for preparing reports; and
- manage medical records.

FACTOR 2 - SUPERVISORY CONTROLS

This factor covers the nature and extent of direct or indirect controls exercised by the supervisor or another individual over the work performed, the employee's responsibility, and the review of completed work. The supervisor determines how much information the employee needs to perform the assignments; e.g., instructions, priorities, deadlines, objectives, and boundaries. The employee's responsibility depends on the extent to which the supervisor expects the employee to develop the sequence and timing of the various aspects of the work, to modify or recommend modification of instructions, and to participate in establishing priorities and defining objectives. The degree of review of completed work depends upon the nature and extent of the review; e.g., close and detailed review of each phase of the assignment; detailed review of the completed assignment; spot check of finished work for accuracy; or review only for adherence to policy. The primary components of this factor are: **How Work Is Assigned, Employee Responsibility,** and **How Work Is Reviewed**.

NOTE: In the tables below, factor level description is abbreviated as FLD.

Level 2-1 25 Points

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Medical Records Technician GS-0675

Medical Support Assistance GS-0679

How Work Is Assigned – The supervisor makes assignments with clear, detailed, and specific instructions that cover what to do, how to do it, and what to bring to the supervisor's attention.

Employee Responsibility – The employee:

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- performs the work as instructed; and
- consults with the supervisor or higher-grade co-worker on problems not specifically covered by the original instructions, or for clarification of instructions.

How Work Is Reviewed – The supervisor closely reviews work while in progress and when completed for accuracy, adequacy, and adherence to instructions and established procedures.

Level 2-2 125 Points

Series

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Medical Records Technician GS-0675

Medical Support Assistance GS-0679

How Work Is Assigned – The supervisor:

- makes assignments by giving general instructions regarding the purpose of the assignment, limitations, expected deadlines, priorities, quality and quantity expected; and
- provides additional specific instructions for new or difficult assignments.

Employee Responsibility – The employee:

- uses initiative and works independently within the framework established by the supervisor for carrying out recurring assignments; and
- refers specific problems not covered by the supervisor's instructions or standard operating procedures to a designated employee or the supervisor for assistance and/or a decision.

How Work Is Reviewed – The supervisor:

- reviews work to verify accuracy and conformance to required procedures and any special instructions;
- may spot check routine work products for accuracy;
- · reviews new or difficult assignments; and
- closely reviews situations with potential adverse impact in progress and upon completion.

Level 2-3 275 Points

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Medical Records Technician GS-0675

Medical Support Assistance GS-0679

How Work Is Assigned – The supervisor:

- makes assignments by defining the overall objectives, priorities, and deadlines; and
- assists with unusual situations that do not have clear precedents.

Employee Responsibility – The employee:

- independently plans the work, resolves problems, carries out successive steps of assignments, and makes adjustments using accepted standard operating procedures or practices;
- handles problems and/or deviations that arise in accordance with established policies, regulatory and administrative guidelines, directives, instructions, and accepted practices in the occupation; and
- refers new or controversial issues to the supervisor for direction and/or assistance.

How Work Is Reviewed – The supervisor reviews completed work for:

- results achieved:
- technical soundness; and
- conformance with applicable regulations, policies, and requirements.

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FACTOR 3 - GUIDELINES

This factor covers the nature of guidelines and the judgment employees need to apply them. Individual assignments may vary in the specificity, applicability, and availability of guidelines; thus, the judgment employees use similarly varies. The existence of detailed plans and other instructions may make innovation in planning and conducting work unnecessary or undesirable. However, in the absence of guidance provided by prior agency experience with the task at hand or when objectives are broadly stated, the employee may use considerable judgment in developing an approach or planning the work. Here are examples of guidelines used in medical records technician and medical support assistance work:

- Freedom of Information Act and Privacy Act of 1974
- Medicare, Medicaid, Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and American College of Surgeons standards and/or directives
- State and Federal rules and regulations
- Contract health care regulations
- Medical facility manuals, circulars, technical manuals, policies, and procedural manuals
- Medical records classification systems and references such as International Classification of Diseases (ICD),
 Diagnostic Related Groups (DRG), Current Procedural Terminology (CPT), Physician's Desk Reference
 (PDR), medical dictionaries, manuals, textbooks, and glossaries
- Pamphlets, letters, and brochures from other agencies and programs such as private insurers, social welfare agencies, Department of Veterans Affairs, Medicare and Medicaid
- Agency policies and precedents
- · Textbooks on medical terminology, anatomy, and physiology
- Miscellaneous medical textbooks and journals
- Oral directives from nurses and physicians

Do not confuse guidelines with the knowledge described under Factor 1 – Knowledge Required by the Position. Guidelines either provide reference data or impose certain constraints on applications. For example, in some of the functional areas covered by this standard, there may be several generally accepted methods of accomplishing work, perhaps set forth in an agency operating manual. However, in a particular office or medical facility, the policy may be to use only one of those methods; or the policy may state specifically under what conditions the office or medical facility may use each method. The primary components of this factor are: **Guidelines Used** and **Judgment Needed**.

NOTE: In the tables below, factor level description is abbreviated as FLD.

Level 3-1 25 Points

Series

Medical Records Technician GS-0675

Medical Support Assistance GS-0679

Guidelines Used – The employee uses specific, detailed, oral and written guidelines such as:

- medical facility manuals;
- circulars:
- technical manuals;
- coding manuals;
- policy and procedural manuals;
 other standard guidelines coveri
 - other standard guidelines covering all aspects of the work; and
 - oral instructions.

Judgment Needed – The employee:

- · works in strict adherence to the guidelines; and
- does not deviate from outlined steps unless the supervisor or designated employee authorizes it.

Level 3-2 125 Points

Series

Medical Records Technician GS-0675

Medical Support Assistance GS-0679

Guidelines Used – The employee uses a number of procedural and regulatory guidelines that specifically cover the assigned work.

Judgment Needed – The employee:

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- uses judgment to identify and select, from a number of similar guidelines and work situations, the most appropriate guidelines, references, and procedures to apply when making minor deviations or adapting guidelines to specific cases; and
- refers situations that do not readily fit instructions or other applicable guidelines to the supervisor or a designated employee for resolution.

Level 3-3 275 Points

Series

Medical Records Technician GS-0675

Medical Support Assistance GS-0679

Guidelines Used – The employee uses guidelines that:

- consist of a variety of technical instructions, technical manuals, medical facility regulations, regulatory requirements, and established procedures; and
- are not completely applicable to some of the work or have gaps in specificity.

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Judgment Needed – The employee:

- uses judgment to adapt and interpret guidelines to apply to specific cases or problems;
- uses discretion and initiative to decide on the appropriate course of action to correct deficiencies and improve the reliability of the information; and
- may, within the framework established by higher authority, develop approaches to apply to new regulatory requirements, or to adapt to new technology.

FACTOR 4 - COMPLEXITY

This factor covers the nature, number, variety, and intricacy of tasks, steps, processes, or methods in the work performed; the difficulty in identifying what needs to be done; and the difficulty and originality involved in performing the work. The primary components of this factor are: Nature of Assignment, What Needs To Be Done, and Difficulty and Originality Involved.

NOTE: In the tables below, factor level description is abbreviated as FLD. Factor 4 illustrations are in Appendix F4.

evel 4-2 75 Points
Medical Records Technician GS-0675 <u>Illustration(s)</u>
Nature of Assignment — Work consists of related steps, processes, or standard explanations of methods, such as compiling, recording, and reviewing medical records data.
What Needs To Be Done – The employee decides what needs to be done by choosing from a few recognizable alternatives, such as determining the relevance of many facts and conditions of information within the medical record, legal and regulatory requirements, and other variables.
Difficulty and Originality Involved – The employee:
 recognizes inconsistencies in the medical records; and applies prescribed medical records procedures and methods to validate that the record contains factual information.
Medical Support Assistance GS-0679 <u>Illustration(s)</u>
Nature of Assignment – Work consists of several related processes such as compiling, recording, reviewing, selecting, and interpreting medical data and information incidental to a variety of patient care and treatment activities.
What Needs To Be Done – The employee decides what needs to be done by choosing from various options that require recognition of and differences among a few easily recognizable alternatives.
Difficulty and Originality Involved – The employee responds to changing priorities that frequently depend upon:
 the urgency of the situation; and the differences in medical information about each patient.

Level 4-3 150 Points

Series

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Medical Records Technician GS-0675 Illustration(s)

Nature of Assignment – Work consists of different, varied, and unrelated medical record processes and methods, including reviewing the work of other employees to verify compliance with regulatory requirements.

What Needs To Be Done – The employee:

 determines the relevance of many facts and conditions such as information contained in the record, legal and regulatory requirements, and other variables; and

• determines the appropriate action from many alternatives.

Difficulty and Originality Involved – The employee identifies and analyzes medical records problems and issues and determines their interrelationships and the appropriate methods and techniques needed to resolve them.

FACTOR 5 - SCOPE AND EFFECT

This factor covers the relationships between the nature of work; i.e., the purpose, breadth and depth of the assignment, and the effect of work products or services both within and outside the organization. Effect measures such things as whether the work output facilitates the work of others, provides timely services of a personal nature, or impacts on the adequacy of research conclusions. The concept of effect alone does not provide sufficient information to properly understand and evaluate the impact of the position. The scope of the work completes the picture allowing consistent evaluations. Only consider the effect of properly performed work. The primary components of this factor are: **Scope of the Work** and **Effect of the Work**.

NOTE: In the tables below, factor level description is abbreviated as FLD. Factor 5 illustrations are located in Appendix F5.

L	evel 5-1		25 Points
Series	Medical Records Technician	GS-0675	Illustration(s)
FLD	concepts, methods, and procedures programs, automated system procedures	Employees us dures, and funct	designed to train employees to apply functional area see basic guidelines and become familiar with the particular tions of the employing organization. gher-grade co-workers within the immediate organizational
Series	Medical Support Assistance	GS-0679	Illustration(s)
FLD	straightforward, recurring reception	nist, record keep	ministrative support to the unit by performing a variety of bing, and miscellaneous functions. patients and the efficiency with which the unit provides
	service.		

Level 5-2 75 Points

Series

Medical Records Technician GS-0675 <u>Illustration(s)</u>

9

Scope of the Work – Work involves performing assignments according to specific rules or procedures that represent a significant segment of the medical records function for the organization.

Effect of the Work – Work affects the accuracy, timeliness, reliability, and acceptability of information in the medical records.

Series

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Medical Support Assistance GS-0679 <u>Illustration(s)</u>

Scope of the Work – Work involves:

- performing receptionist and general recordkeeping duties;
- giving patients correct instructions on test preparation, diets, and procedural requirements; and
- properly recording physicians' orders.

Effect of the Work – Work affects the efficiency, accuracy, and acceptability of further processes or services, including patient care.

Level 5-3 150 Points

Series

Medical Records Technician GS-0675 <u>Illustration(s)</u>

Scope of the Work – Work involves:

- performing a variety of specialized medical records tasks, and resolving problems according to established criteria (e.g., processing medical records and data that involve inconsistencies, discrepancies, and other non-routine problems); and
- developing, maintaining, and monitoring special registries that assist physicians in the care and treatment
 of patients.

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Effect of the Work – Work affects the accuracy and reliability of medical records, which in turn affect:

- the outcome of research efforts:
- the outcome of internal and external audits;
- the quality of information physicians receive on such things as readmission and legal claims; and
- the quality of patient care rendered.

FACTOR 6 - PERSONAL CONTACTS AND FACTOR 7 - PURPOSE OF CONTACTS

These factors include face-to-face and remote dialogue – e.g., telephone, email, and video conferences – with persons not in the supervisory chain. (Note: Personal contacts with supervisors are under Factor 2 - Supervisory Controls.) The levels of these factors consider and take into account what is required to make the initial contact, the difficulty of communicating with those contacted, the setting in which the contact takes place, and the nature of the discourse. The setting describes how well the employee and those contacted recognize their relative roles and authorities. The nature of the discourse defines the reason for the communication and the context or environment in which the communication takes place. For example, the reason for a communication may be to exchange factual information or to negotiate. The communication may take place in an environment of significant controversy and/or with people of differing viewpoints, goals, and objectives.

Above the lowest levels, credit points under Factors 6 and 7 only for contacts that are essential for successful performance of the work and that have a demonstrable impact on the difficulty and responsibility of the work performed. Factors 6 and 7 are inter-dependent. Accordingly, use the same personal contacts for selection of both the Factor 6 and the Factor 7 levels.

Determine the appropriate level for Personal Contacts and the corresponding level for Purpose of Contacts. Obtain the point value for these factors from the intersection of the two levels as shown on the **Point Assignment Chart** at the end of this section.

PERSONAL CONTACTS					
Medical Re	GS-0679				
Other employees within the immediate work unit or related work units. Some contacts may be with members of the general public in very highly structured situations. Contacts at this level are of a routine and recurring nature.				highly structured	
Level 2	Employees within the medical facility, but outside of the immediate or related work units. Some contacts may be with the general public in moderately structured settings. Such contacts may include representatives from insurance companies, private physicians, other care providers, and individuals from other agencies or organizations seeking information.				

	PURPOSE OF CONTACTS						
Medical l	Medical Records Technician GS-0675 Medical Support Assistance GS-0679						
Level A To acquire, clarify, or give facts or exchange general and medical information directly related to the work. The information may range from general admission information to highly specialized medical information. Contacts at this level are directly related to recurring functions.							
Level B To initiate and follow through on work efforts or to resolve operating or technic problems related to the treatment of patients and/or the maintenance of patient records. Employees at this level influence or persuade individuals or groups ware working towards mutual goals and who have basically cooperative attitudes				e of patient or groups who			
To influence, persuade, interrogate, or control people or groups. The people contacted are unusually difficult to communicate with because of very poor physical and/or mental conditions and/or because they are easily excitable, irrational, fearful, skeptical, uncooperative, or dangerous. Employees must be skillful in approaching the individual or group in order to obtain the desired res							

POINT ASSIGNMENT CHART					
Medical Records	Medical Records Technician GS-0675		Medical Support Assistance		5-0679
				Purpose of Contacts	;
	Level		Α	В	С
Personal Contacts	1		30	60	130
	2		45	75	145

⇔BACK

FACTOR 8 - PHYSICAL DEMANDS

NOTE: Laws and regulations governing pay for irregular or intermittent duty involving unusual physical hardship or hazard are in section 5545(d), of title 5, United States Code, and Subpart I of part 550 of title 5, Code of Federal Regulations.

NOTE: In the tables below, factor level description is abbreviated as FLD.

L	evel 8-1 5 Poir	nts
Series	Medical Records Technician GS-0675 Medical Support Assistance GS-0679	
FD	The work is mainly sedentary, but may require walking, bending, standing, and/or carrying of light items such as files and manuals. The work does not require any special physical effort or ability.	

L	evel 8-2	20 Points
Series	Medical Records Technician GS-0675 Medical Support Assistance	GS-0679
FLD	The work requires some physical exertion such as prolonged periods of standing, bending, rea stooping, stretching, and lifting moderately heavy items such as manuals and record boxes.	ching, crouching,

FACTOR 9 - WORK ENVIRONMENT

NOTE: Laws and regulations governing pay for irregular or intermittent duty involving unusual physical hardship or hazard are in section 5545(d), of title 5, United States Code, and Subpart I of part 550 of title 5, Code of Federal Regulations.

NOTE: In the tables below, factor level description is abbreviated as FLD.

L	evel 9-1	5 Points
Series	Medical Records Technician GS-0675 Medical Support Assistance	GS-0679
FLD	The work area is usually an adequately lighted, heated, and ventilated office or medical facility work environment involves everyday risks or discomforts that require normal safety precaution	

Level 9-2 20 Points

Medical Records Technician GS-0675

Medical Support Assistance GS-0679

FLD

The work environment involves moderate risks or discomforts that require special safety precautions; e.g., exposure to contagious diseases. Employees may be required to use protective clothing or gear such as masks, gowns, gloves, or shields. Employees may work in close proximity to mentally disturbed patients, and consequently, there is a possibility of physical abuse.

GRADE CONVERSION TABLE

Convert total points on all evaluation factors to General Schedule (GS) grades using the following table. The shaded areas reflect grade levels commonly attained in this job family.

Point Range	GS Grade
190-250	1
255-450	2
455-650	3
655-850	4
855-1100	5
1105-1350	6
1355-1600	7
1605-1850	8
1855-2100	9
2105-2350	10
2355-2750	11
2755-3150	12
3155-3600	13
3605-4050	14
4055-up	15

APPENDICES

APPENDIX F1 - FACTOR 1 ILLUSTRATIONS

Level 1-2: Medical Support Assistant, GS-0679

Knowledge of, and skill in applying, general rules and regulations of the medical facility, its personnel, and its functions, and automated data processing methods sufficient to:

- provide general information to new employees regarding equipment/supplies and techniques involved in the treatment of patients;
- using the available computer data system, schedule patients for treatment;
- process patient demographic data into the automated or manual system, and identify and correct patient data errors:
- provide patients with required paperwork for treatment;
- review all paperwork to ensure accuracy of information; and
- annotate patient records and maintain a variety of information files.

⇔BACK

Level 1-3: Medical Records Technician, GS-0675

Knowledge of, and skill in applying, rules and regulations concerning patient charts, records, and other procedures such as automated data processing sufficient to:

- search and abstract medical data:
- review records for compliance with applicable medical facility and JCAHO standards;
- analyze and evaluate patient medical records for completeness and consistency;
- determine the correct code to assign to each diagnosis/operation and/or selected procedure;
- request information pertaining to follow up of consultations, laboratory and other contracted services from within the medical facility, and from other health care facilities to complete patient records; and
- participate in quality assurance duties that include review, analysis, and filing reports reflecting inpatient medical records data.

<u>←BACK</u>

Level 1-3: Medical Support Assistant, GS-0679

Knowledge of, and skill in applying, all standardized available medical facility services, medical terminology, and procedures of each serviced unit sufficient to:

- give instructions to patients and arrange appointments;
- schedule in-patient appointments and consultations with various clinics and services throughout the medical facility;
- record in patient records a variety of physicians' orders involving patient activities, diets, tests, and medications;
 and
- record telephone messages pertaining to detailed laboratory reports, x-rays, and test results, and refer urgent ones to appropriate professional staff for immediate action.

⇔BACK

Level 1-4: Medical Records Technician, GS-0675

Knowledge of, and skill in applying, extensive, well-established medical records procedures sufficient to:

- analyze the consistency of medical records involving a wide range of diseases, and medical and surgical procedures;
- ensure that each medical record contains appropriate documentation to support the principal diagnosis, principal procedure, qualifying complications, and co-morbidities;
- consult with medical staff for clarification and additional required information;
- maintain special registries/databases of trauma or tumor patients treated at the medical facility; and
- review requests for release of information from the medical record by interpreting and applying the Privacy Act and other applicable guidelines.

<u>←BA</u>CK

Level 1-5: Medical Records Technician, GS-0675

Knowledge of, and skill in applying, medical records activities, operations, and regulations sufficient to:

- carry out specialized assignments;
- set up special registries;
- compile and complete various special and recurring reports;
- implement and monitor internal quality assurance programs;
- assist administrative or clinical personnel in the completion of special research studies;
- code highly technical and diversified diagnoses, operations, procedures, and other medical and demographic data;
- serve as a resource person for coding and abstracting problems; and
- train new employees and resolve problems encountered.

⇔BACK

APPENDIX F4 - FACTOR 4 ILLUSTRATIONS

Level 4-2: Medical Records Technician, GS-0675

Nature of Assignment – Reviews, screens, and analyzes inpatient and outpatient records for compliance with established criteria.

What Needs To Be Done – Determines what records are to be archived and retired. Ensures proper sequencing in terminal digit order and separates records by patient category depending upon the designated retention period specified in applicable regulations.

Difficulty and Originality Involved – Recognizes inconsistencies in medical records, and applies prescribed procedures to correct errors.

 \Leftarrow BACK

Nature of Assignment – Reviews, screens, and analyzes all requests for release of medical information.

What Needs To Be Done – Analyzes each request to ensure that proper authorizations are submitted and determines the originator's entitlement to information in accordance with the Privacy Act and medical facility regulations. Retrieves records, compiles and collates medical data, and coordinates the release of medical records data with various medical and administrative staff members.

Difficulty and Originality Involved – Determines easily recognizable inconsistencies in forms completed by patients that affect entitlement.

⇔BACK

Level 4-2: Medical Support Assistant, GS-0679

Nature of Assignment – Serves as receptionist for the unit.

What Needs To Be Done – Registers emergency patients, assembles patient charts, and reviews and selects medical information for a variety of purposes. Enters specific lab and radiological orders in the automated patient care system and completes a computerized medical record at the time of discharge.

Difficulty and Originality Involved – Responds to changing priorities that frequently depend upon the urgency of the situation.

<u>←BACK</u>

Nature of Assignment – Performs a variety of clinical and administrative procedures related to providing medical treatment services.

What Needs To Be Done – Schedules and reschedules patients for treatment. Interviews patients for appointments. Refers patients to other medical specialty clinics. Assembles, files, and initiates patient medical records. Provides information necessary to resolve complaints.

Difficulty and Originality Involved – Responds to changing priorities that frequently depend upon differences in medical information about each patient.

⇔BACK

Level 4-3: Medical Records Technician, GS-0675

Nature of Assignment – Serves as coder for the unit.

What Needs To Be Done – Translates the primary diagnosis, complications, co-morbid conditions, and principal and secondary procedures into International Classification of Diseases codes. Identifies, sequences, codes, and abstracts the data.

Difficulty and Originality Involved – Resolves medical records problems and issues that are critical to the selection of the correct Diagnostic Related Group.

⇔BACK

Nature of Assignment – Performs a variety of medical records duties in a medical facility.

What Needs To Be Done – Analyzes Emergency Room medical trauma records for pertinent information related to type of injury or extent of disability, diagnosis, medication prescribed, and procedure performed for inclusion in the Trauma Registry database. Develops accurate and meaningful statistical data. Identifies, analyzes, and resolves medical records problems and issues.

Difficulty and Originality Involved – Resolutions reached serve as the basis for quality assurance action plans. **◯ BACK**

APPENDIX F5 - FACTOR 5 ILLUSTRATIONS

Level 5-1: Medical Records Technician, GS-0675

Scope of the Work – Maintains a master file of the active and closed research studies. Assists physicians by:

- entering patient data;
- retrieving, recording, and transmitting data;
- maintaining a log of all registered patients; and
- recording long-term follow-up treatment on registered patients.

Effect of the Work – Work contributes to the efficiency of the organization.

⇔BACK

Scope of the Work – Maintains outpatient medical records at a medical facility. Ensures that medical documents are filed in the correct medical record and in the correct location within the record.

Effect of the Work – Work contributes to the efficiency of the organization.

⇐BACK

Level 5-1: Medical Support Assistant, GS-0679

Scope of the Work – Receives telephone calls and visitors to the unit. Makes and cancels appointments, and obtains all medical records, x-rays, and laboratory results prior to patient's arrival.

Effect of the Work – Work contributes to the efficiency of the unit.

⇔BACK

Scope of the Work – Maintains office files on all laboratory reports and searches for and withdraws lab reports, medical data, and other clerical information upon request. Distributes lab reports according to prescribed format. Keeps records of all tests referred to other laboratories.

Effect of the Work – Work contributes to the efficiency of the laboratory.

⇔BACK

Level 5-2: Medical Records Technician, GS-0675

Scope of the Work – Analyzes medical records information to ensure compliance with Quality Assurance regulations, and compiles reports and studies showing trends in medical occurrences.

Effect of the Work – Work affects the accuracy, timeliness, reliability, and acceptability of information in medical records.

Scope of the Work – Receives and screens all incoming correspondence requesting the release of medical information. If the information requested is not in the medical record, forwards the request to the appropriate source for a response.

Effect of the Work – Accuracy and efficiency of the work affects the reliability of services the unit provides.

Scope of the Work – Examines and analyzes medical records for the presence of required forms and completeness of data; i.e., discharge notes, proper signatures, test results, and other technical and administrative data.

Effect of the Work – The completeness of medical records and supporting documentation affect timeliness and the ability of the facility to provide medical services.

⇔BACK

Level 5-2: Medical Support Assistant, GS-0679

Scope of the Work – Performs routine front desk duties that include reviewing patient records for necessary forms, preparing appropriate forms for laboratory, x-ray, and EKG studies. Sets up next day schedules for providers. Performs end-of-day processing, and requests and retrieves necessary x-rays and medical records for physician appointments.

Effect of the Work – Work affects the efficiency, accuracy, and acceptability of patient care rendered by the facility.

Scope of the Work – Obtains data from various forms and enters data into an automated data system to effect the admission and disposition of patients to and from the medical clinic. Meets and greets all inpatients being admitted, and verifies eligibility for care. Assists patients with the check-in and checkout process and provides patient information within the provisions of the Privacy Act of 1974.

Effect of the Work – Work affects the quality of service the facility provides and the relationship with patients. **(continued)**

Level 5-2: Medical Support Assistant, GS-0679 (continued)

Scope of the Work – Schedules appointments in radiology using an automated hospital-wide computer system. Ensures that accurate and complete data is entered. Explains test preparation and provides instructions to patients. Determines priority of patients according to urgency of medical condition and obtains all necessary medical information and film for scheduled patients.

Effect of the Work − Work affects the quality of service the unit provides and the relationship with patients. **BACK**

Level 5-3: Medical Records Technician, GS-0675

Scope of the Work – Evaluates diagnoses and procedures identified by the professional staff to ensure compliance with the Diagnostic Related Group management program objectives. Reviews and verifies component parts of medical records to ensure all required notes, orders, reports, and other data are:

- recorded in proper terminology;
- documented and authenticated on the proper form and in the appropriate format; and
- filed in the proper sequence.

Effect of the Work – Work affects the unit's ability to maintain its accreditation.

Scope of the Work – Reviews and corrects medical records that contain discrepancies and deficiencies. Determines the subsequent action to correct the record. Considers the medico-legal repercussions of deficient and/or incorrect medical records. Oversees the accurate and complete retrieval of records and medical data to meet internal and external auditors' requirements.

Effect of the Work – Work affects the quality and adequacy of the unit's patient care, and ultimately, the facility's accreditation.

⇔BACK

APPENDIX H - HISTORICAL RECORD AND EXPLANATORY MATERIAL

This appendix describes the development of this job family standard (JFS). We highlight some key dates and milestones and provide information about proposals we tested and about our deliberations as we crafted the final version of the standard for issuance. We believe users will find the information helpful as background for understanding and applying the job family standard. Readers with extensive position classification experience may recall the forerunner of this appendix as the Explanatory Memorandum that we formerly issued with some final position classification standards.

KEY DATES AND MILESTONES

In **December 1997**, the Classification Programs Division (CPD) (formerly the Office of Classification) within the Office of Personnel Management (OPM) officially notified agencies that we were initiating a study of one-grade interval work in the Medical, Hospital, Dental, and Public Health Group, GS-0600 and the Veterinary Medical Science Group, GS-0700 so that we could develop appropriate job family standards. Specifically, the notice memorandum explained our intent to begin factfinding to cover clerical and technical positions in these groups.

As explained further in *Defining Study and Job Family Coverage* below, we focused first on the two clerical occupations in the GS-0600 group. In **April 2000**, we issued a draft job family standard containing material from this first part of the overall study for agency review, comment, and test application. In this appendix, we present agency reactions to our proposals in the draft standard and explain how we resolved the major issues. The job family standard provided here issues the results of this first sub-study for agency implementation while we continue studying the rest of the one-grade interval work in the overall study.

DEFINING STUDY AND JOB FAMILY COVERAGE

⇔BACK

Currently, 23 occupations in the GS-0600 and GS-0700 groups cover one-grade interval work. These occupations range across nursing functions (Practical Nurse, GS-0620), sophisticated medical record keeping work (Medical Records Technician, GS-0675) and quasi-professional activities (Diagnostic Radiologic Technologist, GS-0647). Within this range, two occupations, the **Medical Records Technician Series, GS-0675,** and the **Medical Clerk Series, GS-0679**, are substantially different from the other occupations, yet somewhat similar to each other in that both deal extensively with patient medical records. Consequently, prior to initiating factfinding, we divided the overall study of one-grade interval work into separate sub-studies. Also, by limiting the initial sub-study to these two occupations, we could proceed more quickly with issuing up-to-date standards that take into account systematic changes in their duties and responsibilities. We placed these remaining one-grade interval occupations in the second sub-study:

- Practical Nurse, GS-0620
- Nursing Assistant, GS-0621
- Medical Supply Aide and Technician, GS-0622
- Autopsy Assistant, GS-0625
- Rehabilitation Therapy Assistant, GS-0636
- Health Aide and Technician, GS-0640
- Nuclear Medicine Technician, GS-0642
- Medical Technician, GS-0645
- Pathology Technician, GS-0646
- Diagnostic Radiologic Technologist, GS-0647
- Therapeutic Radiologic Technologist, GS-0648
- Medical Instrument Technician, GS-0649
- Medical Technical Assistant, GS-0650
- Respiratory Therapist, GS-0651
- Pharmacy Technician, GS-0661
- Restoration Technician, GS-0664
- Dental Assistant, GS-0681
- Dental Hygiene, GS-0682
- Dental Laboratory Aid and Technician, GS-0683
- Environmental Health Technician, GS-0698
- Animal Health Technician, GS-0704

When we complete the second sub-study, we expect to incorporate its results into this JFS (and perhaps other JFSs), thereby creating a broader job family standard than the present one. Although we will look for any reasonable streamlining possibilities (e.g., combining grading criteria, abolishing unused or outdated series and/or titles), we do not envision any major changes to the titling and grading criteria for GS-0675 and GS-0679 positions as a result.

RESULTS OF AGENCY REVIEW, COMMENT, AND TRIAL APPLICATION

- **A. JOB FAMILY STANDARDS GENERAL ISSUES.** In addition to using the job family standard (JFS) approach to developing and issuing position classification standards, we make every attempt to simplify and streamline position classification concepts, documents, and procedures with every issuance of a new JFS.
- 1. Using the Factor Evaluation System (FES) Format for All Job Family Standards. Prior to April 1999, we polled the agency chiefs of position classification to determine their preferred format for classification standards (i.e., either narrative or FES).

Agency Comment: Almost unanimously, agency classification chiefs preferred the FES format.

Our Response: We developed this JFS – and will develop all future JFSs – in the FES format.

2. Incorporating Hypertext Linking and Embedded File Features to Improve Navigation Through a Job Family Standard. Job family standards can incorporate a significant amount of material about various occupations and specializations, only some of which will be relevant to a particular classification determination. Also, we continue to emphasize moving to an automated, electronic environment for using this classification guidance. Consequently, we included in this and previous draft JFSs links between factor level descriptions (FLDs) and their related illustrations, as well as other electronic features so that individuals applying the standard could be selective about the material that was actually displayed on the screen.

Agency Comments: Many agencies found these features useful. Others found the separation of FLDs and illustrations in a printed version of the document to be confusing and cumbersome. In particular, the separation of titling and occupational information from the general guidance about series was unpopular.

Our Response: We will retain the links that are designed to permit selective reading of the illustrations. We believe this feature will be even more valuable in JFSs that have a large number of occupations, as this one will in the future. However, we have reunited all the guidance about series, titling, and occupational information near the beginning of a JFS. Also, we will retain the links between our JFSs and the relevant qualification standards. We view the continued development of such features as important to fulfilling our general commitment to make classification less dependent on printed documentation. We believe that our agency customers, particularly those with limited classification experience, will find them beneficial. Of course, users who prefer having the illustrations closer to the FLDs are free to print copies of the JFS and rearrange its pages in whatever way they find most useful.

3. Eliminating Occupational Category Codes(s) from Job Family Standard Designations. On the draft JFS, we had appended "C" to the occupational group code to indicate that it covered clerical work. Based on a subsequent decision, as explained in Section B. 1. below,

we are no longer universally using the term "clerk" as a title for administrative support positions. For this reason, and to prevent confusion in future, more complicated JFSs, we have decided not to append the occupational category letters (i.e., P, A, T, C, and O) to the occupational group codes in our standards. This does not mean that series and positions no longer have designated occupational categories. We will continue to use those categories and record them in the Central Personnel Data File (CPDF). This change should have no impact on agency application of the job family standard.

- 4. Providing Information About Standard Occupational Classification (SOC) Codes. The Office of Management and Budget requires OPM, as a Federal agency that uses and reports statistical information about employment, to use the Standard Occupational Classification (SOC) system to identify occupations. These SOC codes and this requirement have no impact on the administration of any Federal human resources management systems. To help our users acquaint themselves with the SOC structure and coding scheme, we are providing information in a new table, "Crosswalk to the Standard Occupational Classification," within GENERAL SERIES, TITLING, AND OCCUPATIONAL GUIDANCE in each JFS. We do this to indicate the SOC codes that apply to Federal positions in that job family on the basis of their occupational series and position titles. We provide the table as information only. As stated earlier, the SOC system has no immediate impact on agency application of the job family standard.
- 5. Clarifying the Intent and Use of Illustrations for Assigning Factor Point Values. When we first began issuing position classification standards in the FES format, they contained benchmark position descriptions (PDs) at various grade levels. These benchmarks were representations of real-life work situations, and our intent was to make them available as short cuts to position classification decisions. That is, users could use either a complete benchmark PD or any portion of a benchmark to justify assigning the appropriate levels and points to the PD being evaluated. In effect, our current practice of linking illustrations to FLDs gives the user such portions of benchmark PDs. An illustration does not describe an entire job across all the factors. Rather, an illustration provides information about a real-life work situation that is relevant to or "illustrates" a given factor level for a specific occupation or specialty within the job family.

Agency Comments: In a few instances, agency comments on other draft JFSs had revealed some confusion about the intended use of illustrations, particularly when used in combination with FLDs and with respect to the concept of FES criteria expressing a threshold that must be met. In the test application of the draft JFS to existing PDs, some reviewers had concluded that unless the duties and responsibilities of the tested position fully met both the FLD threshold and the level described in a relevant illustration for that factor level, they could not assign the points for that level.

Our Response: We want to continue to use illustrations to add occupation-specific guidance to enhance FLDs, particularly for Factor 1 – Knowledge Required by the Position, Factor 4 – Complexity, and Factor 5 – Scope and Effect. By design, FLDs show the application of the Primary Standard to a given series or, for some JFSs, for a specialty within a series. Consequently, we instruct users that the factor information in a PD must match the FLD fully

for the evaluator to assign the points at that level. No such requirement exists with respect to illustrations, and we have revised the material on **HOW TO USE THIS STANDARD** to clarify what illustrations are for and how users should apply them. We note that users should consider each illustration in its entirety and should not simply focus on selected language. An illustration may describe a level of work that is somewhat higher than the threshold level of its related FLD. A PD must fully match only the FLD to merit its point value.

6. Retaining "Knowledge Required by the Position" to Describe Factor 1. As part of an ongoing effort to work with OPM's Employment Service (ES) to integrate occupational studies and their related products more fully, we had proposed renaming Factor 1 to "Competencies Required by the Position" in another draft JFS and were following that practice with this draft JFS.

Agency Comments: As with the other draft JFS, agencies expressed concern about the confusion that using the "competencies" label could cause. Moreover, they noted, correctly, that the competencies that ES is looking at in their models are not confined to the classification and grading criteria covered by Factor 1.

Our Response: We will continue to use "Knowledge Required by the Position" as the name of Factor 1 in this and future JFSs. Factor level descriptions for this factor will continue to focus on the kind or nature of the knowledge and skill needed and how that knowledge and those skills are used in doing the work.

7. Using Generic Factor Level Descriptions for Several Factors. In our pursuit of creating classification guidance that is standardized across occupational groups, we have looked for ways we can make JFSs consistent and use similar language and approaches. After initially focusing on Factor 2 – Supervisory Controls and Factor 3 – Guidelines in some JFSs, we attempted to establish more generic wording for the criteria for Factor 6 – Personal Contacts, Factor 7 – Purpose of Contacts, Factor 8 – Physical Demands, and Factor 9 – Work Environment. We asked agencies to pay close attention to this generic wording when conducting trial application.

Agency Comments: Understandably, most commenters did not provide extensive comments on this issue and indicated that the generic language for all six factors appeared workable.

Our Response: We will issue this and future JFSs using principally generic FLD language for Factors 2, 3, 6, 7, 8, and 9. We should note that the material on Factor 3 – Guidelines will often include at its start a more specific listing of particular guidelines that affect the occupations in the particular job family. Other FLDs may include some particular language that is relevant to a job family; for example, in this JFS the Factor 9 FLDs include references to medical situations.

- B. THE GS-0600 JOB FAMILY STANDARD FOR ASSISTANCE AND TECHNICAL WORK SPECIFIC ISSUES. We also tested and resolved several proposals that apply only to work covered by this JFS.
- 1. **Retaining Current Series:** In keeping with our ongoing objective to streamline the classification system, in our transmittal of the draft JFS, we asked for opinions on the feasibility of consolidating the GS-0675 and GS-0679 series, since they both cover support work in similar settings.

Agency Comments: Almost unanimously, agencies agreed that combining the series would not be a good idea. In their responses, agencies explained that although the series look alike on the surface, they have significant differences. They also cited these differences in their comments on proposed changes to series names and titles, as discussed in B.2. below.

Our Response: We did not combine the series.

2. Retaining the Current Series Name and Basic Title for GS-0675 and Establishing a New Series Name and Basic Title for GS-0679. As we undertook the current overall effort to establish JFSs for the entire General Schedule, we had developed a policy to replace the terms "clerk" and "technician" in official position titles for clerical occupations and to use the term "assistant" instead. We based that policy on our observations and on agency suggestions that, in general, traditional clerical jobs are now functioning more along the lines of assistants in administrative support settings than as pure clerical roles. Consequently, in the GS-0600 draft JFS, we proposed to discontinue use of the terms "clerk" and "technician" in the official position titles for the covered occupations as shown in the table below.

Agency Comments: Although the majority of respondents had no problem with the GS-0600 titling we proposed, two major agency users voiced serious concerns. The two agencies explained that the term "assistant" has a strong connotation within their respective specialized workplaces that differs from general use and application of the term. In most medical settings, the agencies explained, the term "assistant" connotes work roles that relate to direct patient care. Neither GS-0675 work nor GS-0679 work really involves such direct care, so "assistant" would be a misnomer. Further, GS-0675 work in particular, as the agencies explained, is actually highly specialized quasi-technical support work to such an extent that it deserves different titling treatment. Therefore, according to the dissenting agencies, to apply our more general practice (i.e., substituting "assistant" for "clerk" and "technician") to positions covered by this JFS would be not only confusing, but also misleading and inappropriate.

Our Response: After careful consideration of this input, including the results of a meeting we held with the agency with the highest population of covered positions, we decided to make an appropriate exception to our more general policy about using "assistance" and "assistant" with clerical occupations. We agree that GS-0675 work is, in fact, highly specialized "quasi-technical" support work that differs from mainstream administrative support work to the extent that different titling treatment is appropriate. For example,

although certification is not a position classification factor, some agencies require certain levels of certification as a condition of employment and/or promotion for GS-0675 employees. To recognize this type of specialized work, we decided to leave the current title *Medical Records Technician*, *GS-0675* in place, but discontinue use of "Medical Records Clerk" as an official position title.

As for GS-0679, after conferring with the concerned agencies, we decided to retain the term "assistant," but to insert "support" as part of the series name and official position title. This addition counter-balances the medical connotation of "assistant" and is still descriptive of the work. In other words, "support assistance" work is not direct patient care, but in fact is more akin to the record-keeping duties of the positions that have evolved from the days of the former ward clerks. Thus, the official title is *Medical Support Assistant, GS-0679*.

	GS-0675	GS-0679
Previous Series	Medical Records Technician	Medical Clerk
Previous Title	Medical Records Clerk Medical Records Technician	Medical Clerk
Proposed Series	Medical Records Assistance	Medical Assistance
Proposed Title	Medical Records Assistant	Medical Assistant
Final Series	Medical Records Technician	Medical Support Assistance
Final Title	Medical Records Technician	Medical Support Assistant

- 3. Expanded Roles Acknowledged. During factfinding and subsequent discussions with subject matter experts in various agencies, we identified several constants that have impacted on the duties and responsibilities of covered positions. These include the rise in the use of computers; the increased number of medical standards and guides that employees in these occupations must know and apply; and the accompanying updated terminology. We attempted to address these throughout the draft JFS, including the following FLDs and illustrations:
 - Factor Levels 1-3, 1-4 and 1-5;
 - Factor 3 (including the list of guidelines); and
 - illustrations for both series in Appendices F1, F4, and F5.

Agency Comments: Agencies provided substantial positive feedback, which indicated that we accomplished our objective.

Occupational Information section of the GENERAL SERIES, TITLING, AND OCCUPATIONAL GUIDANCE portion of the JFS for both series, we explain how computers are used as an integral part of medical record keeping. In addition, throughout the JFS we list and explain medical terminology, standards, and guides used by covered employees.

4. Releasing the Final Standard. We followed our usual practice of requesting that agencies report any effects that applying the draft JFS had on the grades of the tested positions.

Agency Comments: Overall, the results of agency test application were extremely positive. Of a combined total (both series) of 653 positions tested, agencies reported only 10 potential changes (upgrades and downgrades combined).

Our Response: Based on the results of agency test application, we had ample justification to release the final JFS. We acknowledge that the title changes involved will require actions on several thousand positions, which will be accomplished to a great extent using automated human resources processing systems. We believe that the positive resolution of the titling questions discussed earlier permits OPM to issue an improved standard that meets users' needs and that reflects significant changes in the work through the first installment of this important Job Family Position Classification Standard for Assistance and Technical Work in the Medical, Hospital, Dental, and Public Health Group, GS-0600.