Office of Personnel Management Office of Merit Systems Oversight and Effectiveness Classification Appeals and FLSA Programs

San Francisco Oversight Division 120 Howard Street, Room 760 San Francisco, CA 94105

Classification Appeal Decision Under Section 5112 of Title 5, United States Code

Appellant: [The appellant]

Agency classification: Patient Services Assistant

GS-303-6

Organization: [The appellant's organization]

Department of Veterans Affairs

OPM decision: GS-303-6

Title at agency discretion

OPM decision number: C-0303-06-02

Carlos A. Torrico

Classification Appeals Officer

February 7, 2000

Date

As provided in section 511.612 of title 5, Code of Federal Regulations, this decision constitutes a certificate that is mandatory and binding on all administrative, certifying, payroll, disbursing, and accounting officials of the government. The agency is responsible for reviewing its classification decisions for identical, similar, or related positions to ensure consistency with this decision. There is no right of further appeal. This decision is subject to discretionary review only under conditions and time limits specified in the Introduction to the Position Classification Standards, appendix 4, section G (address provided in appendix 4, section H).

Decision sent to:

[The appellant's address]

[The appellant's servicing personnel office] Department of Veterans Affairs

Deputy Assistant Secretary for Personnel and Labor Relations Department of Veterans Affairs Washington, DC 20420

Introduction

On August 3, 1998, the San Francisco Oversight Division of the U.S. Office of Personnel Management (OPM) received a classification appeal (forwarded to OPM by the employing agency) from [the appellant]. The position is currently classified as Patient Services Assistant, GS-303-6, however the appellant believes it should be classified as Medical Administrative Specialist, GS-301-9. The appellant works in the [appellant's organization], Department of Veterans Affairs. We have accepted and decided this appeal under section 5112 of title 5, United States Code (U.S.C.).

General issues

This decision is based on a review of all information submitted by the appellant and her agency, as well as telephone interviews with the appellant's first and second level supervisors. The appellant's supervisors have certified to the accuracy of the appellant's official position description (number 0114A). However, the appellant believes the position description is not accurate in that it does not address additional duties and responsibilities which she performs. Both the appellant and her agency have been unable to mutually resolve this issue. In such cases it is OPM policy to decide the appeal on the actual duties that management has assigned and that the appellant performs.

The appellant makes various statements about her agency and its evaluation of her position. Also included in the case file are copies of past appeal decisions issued by OPM that have some similarity to the appellant's work but are not the same. In adjudicating this appeal, our only concern is to make our own independent decision on the proper classification of the appellant's position. By law, OPM must classify positions solely by comparing current duties and responsibilities to OPM standards and guidelines (5 U.S. Code 5106, 5107, and 5112). Since comparison to standards is the exclusive method for classifying positions, we cannot compare the appellant's position to others as a basis for deciding this appeal, and we have considered her statements only insofar as they are relevant to making that comparison. The appellant also expresses concern that as a result of a reorganization of the medical administrative functions at the medical center, her former position graded at the GS-9 level was abolished, but she still possesses the knowledge, skills, abilities and qualifications which she applied when assigned to that position. Qualifications are considered in classifying positions. However, these are qualifications required to perform current duties and responsibilities, not qualifications that appellants personally possess or knowledge they applied in former positions. Therefore, we cannot consider the appellant's personal qualifications or knowledge, except insofar as they are required to perform her current duties and responsibilities.

Position information

The appellant is assigned as a senior health benefits advisor (HBA) in the [appellant's organization]. She works during irregular duty periods including weekends, holidays, evenings and nights. Her position requires that she assist applicants applying for care or treatment at the

medical center. Her primary duties include registering applicants for care; obtaining information to make tentative determinations on eligibility for medical benefits; validating military and veterans benefits information from the registration file through automated and other processes; obtaining medical care insurance information on all new and return applicants for DVA medical care benefits, entering data in the appropriate VISTA file, and coordinating with the medical center's Medical Care Cost Recovery (MCCR) Unit; providing applicants with information and counseling regarding VA medical care benefits, copayments, and MCCR procedures; and preparing the applicant's initial medical record. In addition, the senior HBA has responsibilities and performs duties relating to decedent affairs, bed control, on the job training of new HBA's, and orientation of clinical staff to administrative requirements for patient admissions.

The results of our interviews and other material of record furnish much more information about the appellant's duties and responsibilities and how they are performed.

Series, title and standards determination

The *Miscellaneous Administration and Program Series, GS-301* (standard dated January 1979), includes positions that perform, supervise, or manage nonprofessional, two-grade interval work for which no other series is appropriate. The work requires analytical ability, judgment, discretion, and knowledge of a substantial body of administrative or program principles, concepts, policies, and objectives. The administrative work of this series involves skills such as analytical, research, and writing ability, and requires the application of judgment typically demonstrated by substantial, responsible experience, or that equivalent of a college level education.

The *Miscellaneous Clerk and Assistant Series, GS-303* (standard dated January 1979), includes positions that perform or supervise clerical, assistant, or technician, one-grade interval work for which no other series is appropriate. The work requires knowledge of the procedures and technique involved in carrying out the work of an organization and involves application of procedures and practices within the framework of established guidelines.

Classification guidance in the *Introduction to the Position Classification Standards* (HRCD-7, dated July 1999) and in *The Classifier's Handbook* (HRCD-7, dated July 1999) provides guidance in distinguishing between positions that are properly classified in two-grade interval administrative series, and those properly classified in one-grade interval support series.

The *Introduction to the Position Classification Standards* (section III, pages eight - nine) explains that administrative work (typically two-grade interval series) involves the exercise of analytical ability, judgment, discretion, and personal responsibility, and the application of a substantial body of knowledge of principles, concepts, and practices applicable to one or more fields of administration or management. Employees engaged in administrative work are concerned with analyzing, evaluating, modifying, and developing the basic programs, policies, and procedures which facilitate the work of Federal agencies and their programs. They apply a knowledge of

administrative analysis, theory, and principles in adapting practice to the unique requirements of a particular program.

Technical work, as described in the same reference, is typically associated with and supportive of a professional or administrative field. It involves extensive practical knowledge, gained through experience and/or specific training less than that represented by college graduation. Work in these occupations (typically one-grade interval series) may involve substantial elements of the work of the professional or administrative field, but requires less than full knowledge of the field involved. The *Introduction* goes on to explain that technical employees carry out tasks, methods, procedures, and/or computations that are laid out either in published or oral instructions and covered by established precedents or guidelines, and that, depending on the level of difficulty of the work, these procedures often require a high degree of technical skill, care, and precision.

Information contained within *The Classifier's Handbook*, confirms this guidance, and provides examples of further distinctions between administrative and support series positions. According to the *Classifier's Handbook* (Chapter Four, pages 30 - 31), some tasks are common to both types (administrative and technical) of occupations. The *Classifier's Handbook* characterizes support work as usually involving proficiency in one or more functional areas or in certain limited phases of a specified program. The *Handbook* states that normally, a support position can be identified with the mission of a particular organization or program. The work usually does not require knowledge of the interrelationships among functional areas or organizations. Employees who perform support work follow established methods and procedures. They may occasionally develop work plans or recommend new procedures, but these typically are related to the employee's individual assignment or immediate work unit. Support work can be performed based on a practical knowledge of the purpose, operation, procedures, techniques, and guidelines of the specific program area or functional assignment. Support personnel typically learn to do the job through what may sometimes be many years of experience. They also may attend specific training courses related to their work.

The *Classifier's Handbook* explains that administrative work primarily requires a high order of analytical ability combined with a comprehensive knowledge of (1) the functions, processes, theories, and principles of management; and (2) the methods used to gather, analyze, and evaluate information. Administrative work also requires skill in applying problem solving techniques and skill in communicating effectively, both orally and in writing. Employees who perform administrative work are required to understand the interrelationships between their specific area of expertise and other functions and programs. The *Handbook* further describes administrative work as that which often involves planning for and developing systems, functions and services; formulating, developing, recommending, and establishing policies, operating methods, or procedures; and adapting established policy to the unique requirements of a particular program.

The *Handbook* cautions classifiers to take into account the career ladder in which the position is located. If the duties are clearly developmental and are designed as preparation for a higher level of administrative work, then the position is properly classified in a two-grade interval

administrative series. If management intends that the duties assigned are to be performed without potential for reaching the grade level of full performance administrative work, the *Handbook* advises the position should be classified in a one-grade interval clerical or support series.

The position description of record, other information contained in the appeal file and submitted by the appellant and others at the medical center, and interviews conducted by our oversight division representative with the appellant, her supervisor, and the second level supervisor (manager of the appellant's unit), clearly identify the predominant nature of work performed as technical, or support, and not two-grade interval administrative in nature.

The appellant's work contains to a limited degree some aspects of administrative work. In order to perform effectively in her position, the appellant must have skill in problem solving and in communicating effectively, both orally and in writing, such as when counseling patients or documenting medical, insurance, and other information. She is also required to have knowledge of the interrelationships among some functional areas and different organizations within the medical center. For example, she must understand the interrelationship between the [appellant's unit] and the Medical Care Cost Recovery Unit. She must also have knowledge of the interrelationships between the medical center and outside organizations, such as the [local county] Coroner's Office, the Inland Eye and Tissue Bank, mortuaries, and the DVA Regional Offices.

These skills and knowledge are required so that the appellant can perform work that is identified with the mission of a particular organization or program; in this case, the [appellant's unit]. All the work the appellant performs is *in support of* the mission of the section, which is to provide efficient and courteous enrollment and registration processing of applicants for care at or through the medical center. In carrying out her duties, and in providing extensive on-the-job training to other health benefits advisors, she follows established methods and procedures. While she may occasionally develop work plans or recommend new procedures, these typically are related to her individual assignment or immediate work unit [the appellant's unit]. The appellant's work does not involve planning for and developing systems, functions and services; formulating, developing, recommending, and establishing policies, operating methods, or procedures; nor adapting established policy to the unique requirements of a particular program. Finally, neither the organizational chart nor any other information in the appeal file suggests the appellant's duties to be clearly developmental or designed as preparation for a higher level or full performance level of administrative work. The absence of evidence of such managerial intent further strengthens the conclusion that the position should be classified in a support series.

For the preceding reasons, the appellant's position is appropriately assigned to the *Miscellaneous Clerk and Assistant Series, GS-303*. No titles are specified for positions in this series, although the standard for the GS-303 series cautions against use of the word *administrative* in order to avoid confusion with the *Administrative Officer* (GS-341) series. Therefore, although the title is at the agency's discretion, in constructing the title for this position the agency should avoid using that term and follow the titling guidance discussed in the *Introduction to the Position Classification Standards*.

The standard for the GS-303 series does not include grade-level criteria. The standard instructs that positions in this series be evaluated by reference to other standards for occupations with analogous knowledge and skills. We find that the appellant's medical administrative support work is best evaluated by application of the grading criteria in the *Grade Level Guide for Clerical and Assistance Work* (dated June 1989, reissued in HRCD-7, July 1999). In addition, although she does not perform the full scope of contact representative duties, we have evaluated her work involving contacts with the public/veterans (which is not the primary purpose of the position but rather an extension of her medical administrative duties) to explain certain DVA benefits by cross reference to the grading criteria in the standard for the *Contact Representative Series*, *GS-962* (dated April 1971, reissued in HRCD-7, July 1999). Our evaluation of the grade level of this position follows.

Grade determination

Evaluation of Medical Administrative Support Duties

The *Grade Level Guide for Clerical and Assistance Work* provides general criteria for use in determining the grade level of non-supervisory clerical and assistance administrative support work. For the purposes of applying the guide, assistance work is defined as performing technical work to support the administration or operation of the programs of an organizational unit. This work requires a working knowledge of the work processes and procedures of an administrative field and the mission and operational requirements of the unit. The guide is also appropriate for use in evaluating positions which involve the performance of technical or specialized work which also includes administrative or support duties evaluated by the criteria within. The guide evaluates positions in terms of two factors: (1) Nature of Assignment, and (2) Level of Responsibility.

Nature of Assignment

Assistance work at the GS-6 grade level (page 15) requires considerable evaluative judgment within well-defined, commonly occurring aspects of an administrative program or function. The work may involve providing direct assistance to specialists or analysts by performing a segment of their work, or it may involve responsibility for a stream of products or continuing processes based on direct application of established policies, practices, and criteria. Assignments involve a relatively narrow range of case situations that occur in a broad administrative program or function. This work typically involves identifying issues, problems, or conditions and seeking alternative solutions based on evaluation of the intent of applicable rules, regulations and procedures.

At the GS-6 level, assignments requiring evaluative judgment are narrowly focused, address a single product or action, and are relatively clear cut. The employee usually deals with problems or situations that remain stable, and resemble past problems or situations. Assignments often involve problems or situations where there is not one absolutely correct solution, only a best or most appropriate one.

Work at this level requires practical knowledge of guidelines and precedent case actions relating to a particular program area equal to that acquired through considerable work experience or specialized training. The work also requires skill to recognize the dimensions of a problem and express ideas in writing.

At the GS-7 level (page 17), assistance work consists of specialized duties with continuing responsibility for projects, questions, or problems that arise within an area of a program or functional specialty as defined by management. Work assignments involve a wide variety of problems or situations common to the segment of the program or function for which the employee is responsible. Each assignment typically consists of a series of related actions or decisions prior to final completion. Decisions or recommendations are based on the development and evaluation of information that comes from various sources. The work involves identifying and studying several factors or conditions and determining their interrelationships as appropriate to the defined area of work. The employee must be concerned about taking or recommending actions that are consistent with the objectives and requirements of the program or function.

The work at the GS-7 level requires knowledge and skill to recognize the dimensions of the problems involved, collect the necessary information, establish the facts, and take or recommend action based on application or interpretation of established guidelines. The work also requires practical knowledge, developed through increasingly difficult, on-the-job training or experience dealing with the operations, regulations, principles and peculiarities of the assigned program, function, or activity.

The appellant's position fully meets the GS-6 level, but falls short of the assignments typical of the GS-7 level. Like the GS-6 level, she applies considerable evaluative judgment to well-defined and commonly occurring aspects of the medical administrative program at the installation. She is particularly concerned with the enrollment and registration of applicants for care at the facility, and determining any related medical insurance they may have to cover treatment. Her assignments involve a relatively narrow range of case situations (e.g., the requirements an applicant must meet for eligibility for treatment or admission to a DVA medical center), in which she must identify the eligibility issues involved and determine the application of various agency rules and regulations concerning the situation at hand. Like the GS-6 level, the appellant deals with recurring situations that are stable, and are similar to past situations encountered. Due to her considerable work experience in patient eligibility and admission processes, she is able to apply (particularly during irregular tours of duty) a practical knowledge of the guidelines and precedent case actions relating to the medical administrative program at the installation.

The position does not meet GS-7 level assignments. Unlike that level, in order to effectively perform her duties she is not required to deal with assignments involving a wide variety of problems or situations, nor is she required to identify and study factors or conditions and determine their interrelationships as appropriate to patient admissions. She is not required to recognize dimensions of situations and interpret established guidelines to determine a course of/or to recommend action. Even during irregular tours, supervision is available to assist with this level

of analysis and decision making should it become necessary. The main situation encountered is that the applicant is seeking care and treatment, and the appellant must weigh those objectives against the rules and guidelines established to make the relevant determination.

Level of Responsibility

At the GS-6 level (page 15), the supervisor assists with precedent assignments by providing an interpretation of policy. Completed work is evaluated for appropriateness and effectiveness in meeting goals. Guidelines such as regulations and agency instructions are available but often are not completely applicable to the assignment, or have gaps in specificity. The employee uses judgment in interpreting and adapting guidelines. Personal contacts are with employees in the agency or in other agencies, with management, or with those using the agency's services. The contacts are for the purpose of providing, receiving, or developing information in order to identify problems, needs, or issues or coordinate work efforts and resolve problems.

At the GS-7 level (page 18), the supervisor makes assignments in terms of objectives, priorities, and deadlines. The employee independently completes assignments in accordance with accepted practices, resolving most conflicts that arise. Completed work is evaluated for appropriateness and conformance to policy. Guidelines for the work are more complex than at the GS-6 level because the employee encounters a wider variety of problems and situations which require choosing alternative responses. Guides, such as regulations, policy statements, and precedent cases, tend to be general and descriptive of intent, but do not cover all aspects of the assignments. Guidelines apply less to specific actions and more to the operational characteristics and procedural requirements of the program or function. Thus employees must use significant judgment and interpretation to apply the guides to specific cases, and adapt or improvise procedures to accommodate unusual or one-of-a-kind situations.

The contacts and purpose of contacts are usually the same as at the next lower level, i.e., GS-6. However, to a greater degree, the employee serves as a central point of contact to provide authoritative explanations of requirements, regulations and procedures, and to resolve operational problems or disagreements affecting assigned areas.

The appellant's level of responsibility meets the GS-6 level, but does not reach the GS-7 level. Similar to that level, the supervisor on duty assists with precedent assignments, although very few have occurred. Guidelines, procedures and regulations are available but frequently are not completely applicable to the situation at hand, so the appellant must use judgment in adapting and interpreting them. Although in past years in different positions the appellant operated with a higher degree of independence and greater delegated authority, in her present position during irregular tours, the supervisor on staff makes ultimate program decisions. Completed work is evaluated for appropriateness and effectiveness in meeting goals. The nature and purpose of the appellant's personal contacts favorably compare to the GS-6 level.

The appellant's position does not meet the GS-7 level. She does not operate with the independence characterized at that level, and the variety of problems and situations encountered is more limited. Situations dealt with primarily relate to issues concerning eligibility for treatment and/or admission where guidelines require some interpretation or adaptation. Unlike the GS-7 level, the appellant does not serve as the central point of contact during her tour of duty to provide authoritative explanations of requirements, regulations, etc., in all matters relating to medical administrative support at the installation. Authoritative explanations and resolution of operational problems would be referred to her supervisor, or the nursing supervisor on duty during irregular tours (i.e., all tours other than regular day shift) who acts for the installation director.

By application of the grade level criteria in the *Grade Level Guide for Clerical and Assistance Work*, we find that the appellant's nature of assignments and level of responsibility meet the GS-6 level. Therefore, the appellant's duties and responsibilities involving technical work in support of the medical administrative functions at the medical center during her assigned tours of duty are graded at that level.

Evaluation of Public Contact Duties

As previously noted, one aspect of the appellant's work is to carry out contacts with the public/veterans, providing them with some DVA benefits information. Although those duties do not require application of the full scope of contact representative knowledge and skills, and the appellant is not required to possess comprehensive knowledge of DVA benefits, her contact work is best evaluated by cross reference to the grading criteria in the standard for the *Contact Representative Series, GS-962*. The standard for the GS-962 series includes positions that primarily involve personal contacts with the public for the purpose of (1) providing information on rights, benefits, privileges, or obligations under a body of law; (2) explaining pertinent legal provisions, regulations, and related administrative practices and their application to specific cases; and (3) assisting individuals in developing needed evidence and preparing required documents or resolving errors, delays, or other problems in obtaining benefits or fulfilling obligations. The work requires (1) a high degree of skill in oral communication; and (2) a good working knowledge of, and ability to apply governing laws, regulations, precedents, and agency procedures.

Contact representative positions are found in agencies that administer benefits, privileges, or obligations that affect a large segment of the general public. As stated on page two of the Contact Representative standard, these employees deal with a wide range of individuals who have varying degrees of understanding of the agency program (i.e., ranging from individuals who are semiliterate and confused about what the agency offers to professional people who are likely knowledgeable in the field). Often they must work with individuals who have difficulty in presenting their problems and understanding explanations because of age, physical disability, limited knowledge of English, emotional stress, or other factors that impede effective communications. The contact representative must be adaptable and highly skilled in oral communication to overcome such problems and to assure understanding, often under the pressure created by many people waiting for assistance.

The standard further explains that the primary purpose of the work is to respond to a variety of personal or telephonic inquiries, providing information sufficient to enable individuals to determine the required or most appropriate action to take to obtain benefits or privileges, to comply with reporting and disclosure requirements, or to fulfill other obligations under federal laws or regulations.

As explained on pages two-four of the GS-962 standard, contact representatives normally perform a variety of other tasks relating to: providing and explaining the purpose for required forms and documents; explaining administrative procedures; explaining the basis for agency determinations; explaining administrative and other recourses open to the individual and the proper procedures for filing a complaint or appealing a determination made by the agency; and writing necessary correspondence and narrative reports of contacts.

Contact representatives may also make contact with other agencies, employers, schools or other organizations to obtain or verify information needed for agency determinations; provide basic information on related programs; contact community resources to explain and publicize agency programs; and contact other agencies, businesses, civic groups or similar organizations to obtain voluntary compliance with or participation in agency programs.

Some of the knowledge, skills, and abilities required of contact representatives are somewhat similar to those required of the appellant. Both need knowledge of the agency program on which they provide information; a high degree of skill in oral communication; ability to comprehend and explain to others numerous quasi-legal guidelines; and adaptability, poise, tact, and objectivity.

The standard for the GS-962 series describes positions in terms of two factors, nature of contacts and level of responsibility. The following is our evaluation of the appellant's duties and responsibilities involving contacts with veterans and the general public regarding patient eligibility and benefits and explanations of legal and regulatory provisions.

Nature of contacts

As described on pages eight and nine of the classification standard, the GS-6 level contact representative completes contacts (i.e., conducts personal or telephone interviews, searches records or guidelines to determine answers or resolve problems, and provides full explanations in response to specific inquiries) relating to agency programs that involve the following characteristics: a body of law that covers one or two different types of benefits or obligations; and is relatively stable in basic coverage and requirements, but includes amendments or precedent decisions that affect specific provisions. The GS-6 level employee must be able to explain the impact of such changes on the way criteria are applied, or the way specific benefits or obligations are computed.

Criteria that must be interpreted in light of individual circumstances or that includes several qualifying conditions that may affect the individual's status requires the GS-6 level employee to

question the individual or his representative to obtain information needed to establish his status under the program, or needed to compute the benefit or obligation that applies. At this level, the employee goes beyond the specific inquiry by explaining conditions or actions that could affect the individual's status or change the benefits due.

The GS-6 level employee completes contacts that involve using established procedures to resolve problems. Examples provided include reviewing records or contacting others to learn the status of pending actions; reasons for delays or changes, such as recomputation of a benefit; or what additional information is required to resolve the case. They also trace missing documents; enter new or corrections into the individual's record; and contact other agencies or organizations to request expedited action on a case; or information from their records.

GS-7 level (page ten) contact representatives complete contacts relating to agency programs that involve the following characteristics: agency administers a variety of benefits that are closely related; and benefits and obligations affecting people served by the agency frequently change in significant ways. The mixture of benefits, deadlines, reporting requirements, exemptions, and optional choices that apply to individuals who are affected by agency programs requires GS-7 level contact representatives to give more consideration to alternatives and special circumstances than is typical at the GS-6 level. They evaluate the nature of each inquiry and the way it is presented so they can provide information that is appropriate to the unique circumstances of each individual.

The nature of the appellant's contacts favorably compares to the GS-6 level, but does not meet the GS-7 level. Like the GS-6 level she makes contacts relating to agency programs involving a body of law covering one or two different types of benefits or obligations. The program is relatively stable in terms of basic coverage and requirements, but includes some amendments that affect specific provisions. Although the DVA administers more than one or two types of benefits, the appellant is concerned only with the limited benefits surrounding admission or treatment of eligible applicants for medical care. The law covering eligibility is affected by amendments that sometimes change categories of eligibility of individuals, or ailments that qualify individuals for treatment. Like the GS-6 level, the appellant is often required to question individual applicants or their representatives to obtain information needed to establish their status and make tentative eligibility determinations. This task may include computing the benefit or obligation that applies.

The position does not meet the GS-7 level. In contrast to that level, the program benefits that the appellant deals with lack the complexity of those described at the GS-7 level. The mixture of benefits, deadlines, reporting requirements, exemptions, and optional choices found at that level do not apply to the normal range of applicants that the appellant deals with when they apply for medical care at the facility. Therefore, due to the limited nature of the benefit programs administered, the appellant is not required to give more consideration to alternatives and special circumstances which are typically found at the GS-7 level.

Level of responsibility

At the GS-6 level (page 10), the contact representative provides direct responses to specific inquiries regarding the program of benefits, services or obligations administered by the agency. This involves applying procedural guidelines to individual cases and interpreting the effect of such precedents as legal rulings, rules, regulations, and decisions on earlier cases rendered by courts or by administrative bodies. New decisions and rulings are typically explained by the supervisor in general terms. GS-6 contact representatives use judgment in determining the effects of such rulings on individual situations.

In relation to the range of benefits, obligations, options, and regulatory requirements typical of the level, GS-7 (page twelve) contact representatives go beyond providing specific information in response to specific questions. GS-7 level employees help the client to understand the full range of alternatives open to him/her under the agency program of benefits or obligations so the applicant can decide on a course of action. This requires greater judgment and resourcefulness in developing an approach or line of questioning for each unique situation. When individuals are adversely affected by agency decisions, contact representatives at this level are responsible for discussing the action and helping them develop other plans.

The appellant's level of responsibility meets the GS-6 level, but falls short of the GS-7 level. Like the GS-6 level, she provides direct responses to specific inquiries on benefit eligibility requirements, and admission or acceptance of the applicant for treatment. This guidance is based on the appellant's knowledge of procedural guidelines covering the situation at hand, and to a limited degree interpreting the effect of precedents such as legal rulings, decisions on earlier cases, etc., which in the appellant's case are generally incorporated into the procedures. Like the GS-6 level, any changes such as new decisions or rulings are typically explained by the supervisor.

Unlike the GS-7 level, the appellant's contacts are limited to providing direct responses to specific inquiries. Because she does not deal with the broader range of closely related benefits or obligations described at the GS-7 level where each contact may be unique, she is not concerned with helping the individual to understand the full range of alternatives open to him/her under the various benefit programs administered by the DVA. This limits the need to contact other action offices to aid the applicant in resolving problems, and does not require the level of judgment and resourcefulness in responding to the questions and concerns of the applicant.

By application of the grading criteria in the standard for the *Contact Representative Series, GS-962*, the appellant's nature of contacts and level of responsibility meets the GS-6 grade level. Therefore, the appellant's duties and responsibilities involving contacts with and assistance to veterans and the public regarding eligibility for medical benefits is evaluated at that level.

Summary

By application of the grading criteria in the *Grade Level Guide for Clerical and Assistance Work*, and cross reference to the criteria in the standard for the *Contact Representative Series*, *GS-962*,

we have determined that the appellant's position meets the GS-6 grade level. Therefore, the position is graded at GS-6.

Decision

This position is properly classified in the GS-303 series and graded at the GS-6 level. Selection of an appropriate title is at the agency's discretion.