Classification Appeal Decision Under section 5112 of title 5, United States Code

Appellant:	[appellant]
Agency classification:	Supervisory Social Insurance Specialist (Retirement) GS-105-13
Organization:	Module [#] Operations Division ARC, Processing Center Operations Office of the Regional Commissioner [location] Program Service Center Social Security Administration [city and state]
OPM decision:	Supervisory Social Insurance Specialist (parenthetical title at the agency's discretion) GS-105-12
OPM decision number:	C-0105-12-07

/s/

Jeffrey E. Sumberg Deputy Associate Director Center for Merit System Accountability

2-11-08

Date

As provided in section 511.612 of title 5, Code of Federal Regulations (CFR), 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).

Since this decision lowers the grade of the appealed position, it is to be effective no later than the beginning of the sixth pay period after the date of this decision, as permitted by title 5 CFR 511.702. The applicable provisions of parts 351, 432, 536, and 752 of title 5 CFR must be followed in implementing the decision. If the appellant is entitled to grade retention, the two-year retention period begins on the date this decision is implemented. The servicing human resources office must submit a compliance report containing the corrected position description and a Standard Form 50 showing the personnel action taken. The report must be submitted within 30 days from the effective date of the personnel action to the U.S. Office of Personnel Management (OPM) office that accepted the appeal.

Decision sent to:

[appellant] [address] [city, state, zip code]

[resource officer] Human Resources Center [location] Social Security Center [address] [city, state, zip code]

Director, Center for Classification and Organizational Management Social Security Administration [address] [address] [city, state, zip code]

Introduction

On July 21, 2006, the [location] Oversight and Accountability Group (-OAG), formerly the [location] Field Services Group of OPM accepted a classification appeal from [appellant]. Her position is currently classified as Supervisory Social Insurance Specialist (Retirement), GS-105-13, which the appellant believes should be upgraded to GS-14. We received the complete agency appeal administrative report on March 14, 2007. The position is located in [location], Assistant Regional Commissioner – Processing Center Operations (ARC-PCO), Office of the Commissioner, [location] Program Service Center (PSC), Social Security Administration (SSA), in [city and state]. The appeal was transferred to the [location] OAG for adjudication due to workload considerations. We have accepted and decided this appeal under section 5112 of title 5, United States Code (U.S.C).

To help decide this appeal, we conducted a telephone audit with the appellant on June 4, 2007. We conducted a telephone interview with the appellant's first-level supervisor on June 5, 2007. In addition, an OPM representative conducted an on-site audit with the appellant and interviewed her supervisor on August 7, 2007. In reaching our classification decision, we have carefully considered all of the information gained from the interviews, as well as the written information furnished by the appellant and her agency, including the position description (PD) of record.

Background

SSA has six regional PSCs located throughout the United States, and each is responsible for part of the agency's national claims processing and post adjudication workload covering several states. Each PSC has a number of Operating Divisions which are further divided into Processing Modules (PMs).

The appellant addressed her concerns about the grade of her position with the SSA Conference Executive Board of the Federal Managers Association (FMA) to solicit their support because the position is covered by a standardized Module Manager (MM) PD currently used for 159 positions throughout SSA. The FMA compared the position's duties and responsibilities to the grading criteria of the General Schedule Supervisory Guide (GSSG), agreed the position should be assigned a higher grade level, and brought the issue before the agency. The agency disagreed with the FMA Executive Board's assessment, finding the position was properly evaluated at the GS-13 grade level. The appellant subsequently filed this appeal requesting OPM determine the proper grade level for her position.

The appellant later wrote to OPM stating she was filing the appeal on behalf of all the PSC MMs assigned to the MM PD and included a memorandum, signed by a representative of the FMA chapter at each PSC supporting her action. In November 2006, we received another letter from the appellant regarding the appeal "filed on behalf of all Module Managers employed by the Social Security Administration" which states "The critical premise to acknowledge is that the national Module Manager position description must reflect the highest level of performance currently being required by the agency in any of the six Program Service Centers."

On February 8, 2007, we sent a letter to the appellant and each of the co-signers of the November 2006 letter explaining 5 CFR part 551, subpart F, Classification Appeals, specifically precludes the appellant from filing appeals on behalf of other Federal employees. The letter further advised the appellant we would continue our adjudication of her appeal and informed the others they could each file an appeal with the appropriate OPM OAG, based on their own work as currently assigned and performed should they wish to do so.

General issues

The appellant disagrees that her current PD, number [#], dated September 12, 1995, and amended July 18, 2005, and September 26, 2006, accurately describes her assigned duties and responsibilities because it does not include work done by the Module on the agency's national 800 number telephone service. The first PD amendment clarified the position's role in regard to negotiated and administrative grievances. The second, in July 2006, added the statement "…including 800 number spike functions" to the portion of the PD describing the various functions performed by the Modules; modified Factor 2 to reflect the new reporting structure based on the elevation of the ARC-PCO to a Senior Executive Service (SES) position; and modified Factor 5 to read "…a small clerical staff" in lieu of between 10 and 20 clerical employees. The appellant's immediate supervisor, the Deputy ARC-PCO and the ARC-PCO all certify PD [#] is current and accurate as written.

The appellant states "The Agency has repeatedly acknowledged that the established Tele-service Centers cannot meet the call volume; [and] that the process Modules' assistance is critical to the 800 line's successful performance." Each PSC process Module participates in this workload with the tele-service centers. Calls are placed by citizens, beneficiaries, employers, financial institutions, attorneys, and State and county employees and involve a wide variety of issues. Employees assigned to answer 1-800 number calls must first undergo two months of formal training on how to use the national system to access information, provide guidance and assistance to callers, provide needed forms, effectuate changes, and make referrals. They respond to questions on all aspects of the social security program, identify the nature of each inquiry, access information available on line regarding eligibility rights and benefits for services, and either initiate changes to beneficiary records on-line or make referrals within SSA and to other Federal, State, and municipality agencies. This work is done by employees at or above the GS-8 grade level. The appellant stresses the importance of this work in evaluating her supervisory duties because of the national scope and effect of this work. We will address this issue in our evaluation of Factor 1, below.

The appellant makes various statements about her agency's review and evaluation of her position and, in part, bases her appeal on the erroneous premise that the classification of her position "...must reflect the highest level of performance currently being required by the agency in any of the six Program Service Centers." A PD is the official record of the major duties and responsibilities assigned to a position or job by an official with the authority to assign work. A position is the work made up of the duties and responsibilities performed by an employee. Position classification appeal regulations permit OPM to investigate or audit a position and decide an appeal on the basis of the actual duties and responsibilities assigned by management and performed by the employee (5 CFR 511.607(a)(1) and 609). An OPM appeal decision classifies a real operating position, and not simply the PD. Therefore, this decision is based on the actual work assigned to and performed by the appellant.

By law, we must classify positions solely by comparing their current duties and responsibilities to OPM standards and guidelines (5 U.S.C. 5106, 5107, and 5112). In adjudicating this appeal, our responsibility is to make our own independent decision on the proper classification of the appellant's position. We cannot compare the appellant's position to others, which may or may not be classified properly, as a basis for deciding her appeal. Since our decision sets aside any previously issued agency decision, any actions previously taken by the agency in their review of the appellant's position are not germane to the classification appeal process.

In reaching our classification decision, we have carefully considered all information furnished by the appellant and agency, and the interviews with the appellant and her supervisor, her current PD, and all other information of record. We find that the PD of record covers the major functions assigned to and performed by the appellant and incorporate it by reference into this decision. However, as discussed in this decision, the manner in which certain aspects of the appellant's work are described imply a greater degree of difficulty and complexity in directing work than the appellant's duties and responsibilities actually entail. Standardized PDs (SPD) are appropriate only when the covered positions perform work in a substantially identical manner. However, the record shows there are significant differences in the duties and responsibilities assigned to and performed by the appellant's position is inappropriate. Since PDs must meet the standard of adequacy in the *Introduction to the Position Classification Standards*, the appellant's agency must revise her PD to meet that standard based on the findings in this decision.

Position information

The [location] PSC is responsible for the region covering the states of [cities and states]. There are four Operations Divisions in the PSC, each with four Process Modules. Work is assigned to the Modules based on the terminal digits of social security numbers (SSNs) established for individual claimants within the region. Each Module is responsible for a portion (1/16th or 6.25 percent) of the claimants within the region, and provides services to these individuals regardless of whether or not they continue to reside within the region (i.e., the Module's workload tracks SSNs established in the region even if an individual relocates outside the region). The appellant is a MM and reports directly to the Operations Division Director, who in turn reports to the full Deputy ARC-PCO and/or SES level ARC-PCO.

Module employees deal with claims for benefits under title II and XVIII of the Social Security Act. Most of the work involves retirement and survivor benefits. The staff also deals with basic health insurance (Medicare) filings and processes non-medical aspects of disability claims. Functions include: adjudicating claims for benefits, determining entitlement to health and medical insurance, and effectuating these entitlement decisions; processing appropriate actions to effectuate specific benefits and entering payment and benefit systems data to the beneficiary's records; recovering overpayments and determining if waiver of payments is applicable for particular situations; and performing clerical functions associated with the implementation of such actions. The primary mission of the Module is to ensure the right check gets to the right person at the right time.

The appellant's Module processes and authorizes initial SSA entitlement claims (other than those involving medical issues); processes and administers a wide variety of post entitlement actions requested and effectuated after an individual's entitlement to benefits has been established; and answers calls on SSA's national 800 number/customer telephone service. The Module is staffed with 35 permanent full-time civilian positions as shown below by both their official and organizational titles. For purposes of this appeal decision we assume these positions are correctly classified.

1 - GS-105-12, Supervisory Social Insurance Specialist/Assistant Module Manager (AMM);

- 1 GS-105-12, Lead Social Insurance Specialist/Management Support Specialist (MMS);
- 6 GS-105-11, Social Insurance Specialists/Claims Authorizers (CA);
- 2 GS-901-10, Legal Administrative Specialists (Claims Examining)/Post Entitlement Technical Experts (PETE);

15 - GS-901-9, Legal Administrative Specialists (Claims Examining)/Benefit Authorizers (BA);

- 4 GS-962-8, Contact Representatives/Technical Support Technicians (TST);
- 1 GS-962-6, Contact Representative/Contact Specialist (CS);
- 2 GS-998-5, Claims Assistants/Claims Record Technicians (CRT);
- 2 GS-998-5, Claims Assistant/Claims and Check Recovery Examiner (CCRE);
- 1 GS-998-5, Claims Assistant (OA)/Claims Clerk (CC)

There is also a GS-105-12, Social Insurance Specialist/Senior Claims Processing Specialist (SCPS), within the Module; but this position does not report to the appellant. The SCPS reports to, and receives direction from the Operations Division Director and Deputy ARC-PCO. SCPSs serve as initial claims technical experts; perform quality reviews of work done in the Module; provide advice, assistance and guidance to lower grade specialists for difficult claims actions; and personally adjudicate/process claim reconsideration requests. The appellant occasionally tasks the SCPS to review specified areas of the Module's operations to help her in managing the work of the Module, but this is the extent of the appellant's impact on the SCPS's work.

The AMM, MMS and PETEs all serve in either a supervisory or team leader capacity and share in the direction and control of work performed within the Module. The AMM and MMS are each assigned one PETE and direct about half the work of the Module. They spend almost all their time as technical and administrative work leaders, although only the AMM performs a full range of supervisory duties. The MMS is a Team Leader (TL), as are the two PETE positions.

Work on the 1-800 number telephone service is primarily done by TSTs (50 percent each) and BAs (15 percent each) with occasional assistance provided by the GS-10 grade level PETEs (5 percent each) during exceptionally heavy periods of peak workload. The record shows the appellant's Module spends 4.35 workyears a year answering 1-800 number calls and the appellant and her supervisor agree the Module answers about 250,000 calls a year. This equates

to more than 27 calls per hour or slightly over 2 minutes per call on average (i.e., 4.35 workyears multiplied by 2087 hours per workyear equals 9078.5 workhours a year to answer 250,000 calls).

Series, title, and standard determination

The agency has placed the appellant's position in the Social Insurance Administration Series, GS-105, for which there is a published position classification standard (PCS) and titled it Social Insurance Specialist. The PCS is structured in two parts. Part I covers nonmanagerial positions; and Part II covers managerial positions that involve responsibility for planning, administering, and managing socials insurance programs.

The appellant's position is nonmanagerial and involves providing support to the Regional Commissioner (RC), Assistant RC for Processing Center Operations (ARC-PCO), and the Director, Operations Division, in carrying out their responsibilities for regional administration of SSI programs. Therefore, the position is property covered by Part I. Supervisory positions covered by Part I, which meet the criteria of the General Schedule Supervisory Guide (GSSG), are properly titled Supervisory Social Insurance Specialist, with a parenthetical title at the agency's discretion. The appellant does not contest the title, series determination or standards used; and, based on careful analysis of the record, we concur.

Grade Determination

The GSSG is a cross-series guide used to determine the grade level of supervisory positions in the General Schedule. It has six evaluation factors, each with several factor-level definitions and corresponding point values. A factor-level must be fully met before it may be credited. Positions are evaluated by crediting the points designated for the highest level met under each factor and converting the total to a grade by using the point-to-grade conversion chart in the guide. Our evaluation with respect to the six GSSG factors follows.

The agency applied the GSSG grading criteria and credited the appellant's position with Levels 1-2, 2-2, 3-3b, 4A-2 and B-2, 5-6, and 6-4. The appellant believes her position should be credited with Levels 1-3, 2-2, 3-3b, 4A-2 and B-2, 5-6, and 6-5. Based on careful analysis of the entire record, we concur with the crediting of Levels 2-2, 3-3b, 4A-2, and B-2. We will address the remaining factors.

Factor 1, Program scope and effect

This factor assesses the general complexity, breadth, and impact of the program areas and work directed, including its organizational and geographic coverage. It also assesses the impact of the work both within and outside the immediate organization. To assign a factor level, the criteria dealing with both scope and effect, as defined below, must be met.

The levels of this factor describe two situations: agency line programs, e.g., providing services to the public; and support programs, e.g., providing administrative or other complex support services within an agency. The appellant's position falls under the first situation since her

organization provides administrative and complex clerical support work for a defined segment of the Processing Service Center's (PSC) overall serviced population.

Scope

Scope addresses the general complexity and breadth of the program or work directed including the geographic and organizational coverage within the agency structure. The concept of Scope involves more than just geographic coverage. When one considers both the general factor-level criteria and the illustrations, a general pattern of analysis emerges. OPM guidance indicates there is a dynamic at work which deals with the interaction of four aspects implicit in the concept of Scope:

- *sweep:* the geographic coverage of the program (for instance, city, region, or state);
- *magnitude:* the total population serviced directly and significantly by the program (for instance, small and confined to an installation, moderate, or large);
- *importance:* the importance of the program to the agency and its mission (whether line or staff, whether involving service to higher agency levels, other agencies, or the general public); and
- *complexity:* the complexity of the products or services provided (for instance, routine or complicated).

In deciding whether a position meets a factor level, one must consider each of these implicit aspects and how they interact. No one aspect is necessarily predominant. We consider these aspects for the appellant's position below:

With respect to *sweep*, the appellant's position meets Level 1-3. Both the appellant and her agency agree with this finding. At Level 1-3, the general factor level criteria show that some programs cover a geographic area equal in size to a major metropolitan area, or a State or a small region of several States. An illustration of programs providing services directly to the public at this level describes the size of the serviced population as equivalent to a geographic area of several rural counties, a small city, or a portion of a larger metropolitan area. As discussed earlier, the appellant's Module services part of the PSC's designated region; and we judge that the geographic area serviced covers at least as much territory as a small city and is roughly equal in size to a portion of a larger metropolitan area.

With respect to *magnitude*, the appellant's position warrants Level 1-2. The general factor-level criteria at Level 1-3 indicate that when most of an area's taxpayers are covered, work directed typically has coverage comparable to a small city. Illustrative of magnitude at Level 1-3 is a position providing services directly to a population equivalent to the number of citizens in a small city where the population may be concentrated in one place or located throughout a significant portion of a multistate area. The appellant maintains her "…current workload meets the requirement that significant services be given to a serviced population equivalent to that of a small city." We asked the appellant's supervisor for the number of individuals receiving services and the actual number of initial claims processed by the appellant's Module last year. She replied the appellant's Module processed 1,589 claims during the first six months of FY 2006 (or roughly double that, 3,178 for the year) and had a serviced population of approximately 481,812

beneficiaries in force (BIFs). The term BIF represents the total of all persons with benefits in current-payment status and persons with benefits withheld; i.e., the 7,709.000 BIFs in the PSC region divided by 16 process Modules. The appellant states the Modules each cleared 67,000 actions, on average, during FY-2006 and the majority, but not all of these represented significant services. The appellant and her supervisor agree her Module processed about 250,000 calls to the national 800 number last year, and the appellant states: "While many of these calls...do not represent significant services, many do."

We agree the total BIF population in the appellant's service area exceeds that of a small city. For instance, small cities such as [cities and states], have populations of roughly 120,000 to 185,000. In addition, we agree the Module may eventually provide some degree of service to most of the BIF population in the area serviced. However, we do not agree the appellant's position meets Level 1-3 with respect to magnitude. The discussions of Effect and the illustrations at different factor levels all indicate that in evaluating magnitude, one may consider only the total population serviced *directly and significantly* by a program which requires the Module to be actively engaged in providing such services at the current time. One cannot simply count the overall BIF population in the geographic area covered by the program, even if the individuals in that population may be provided some degree of service at some point during their lifetime. This is because only the population serviced *directly and significantly* has a major and direct effect on the difficulty of the supervisor's work. The appellant states the Module processed about 67,000 actions in FY-2006, many of which were significant actions. This is not equivalent to the magnitude of direct and significant services provided to most of the citizens of a small city as discussed previously. The appellant asserts the approximate 250,000 calls answered on SSA's 800 number should be considered in evaluating the magnitude of her Module's work. However, the nature, number and relative duration of these calls do not support the appellant's assertion that this work involves the provision of significant services as discussed in previously issued OPM decisions and advisory opinions.

With respect to *importance*, the appellant's position warrants Level 1-3. Both the appellant and agency agree with this finding. One of the GSSG illustrations at this level shows some offices furnish a significant portion of an agency's line program to the general public. While the appellant's Module does not provide some Social Security line functions, such as hearings, the work is typical of Level 1-3 in that it provides much of her agency's line program to the public.

With respect to *complexity*, the appellant's position meets Level 1-3. The appellant agrees with this assessment while the agency evaluated this aspect of the work at Level 1-2. The agency states:

"The incumbent is responsible for directing work that can be characterized as moderately complex technical and administrative work involving claims authorization and decisions on a wide array of post-entitlement issues for beneficiaries. Post entitlement work runs the gamut from moderately complex to routine, non-complex or clerical work, the majority of which falls into the routine or non-complex category" and "The position was not evaluated as fully meeting Level 1-3 for purposes of complexity due to the significant impact and proportion of less complex post-entitlement work to the overall workloads of the Modules." As described below under Factor 5, the appellant's base level of work is GS-9; and 54.4 percent of the nonsupervisory/nonleader work of the Module is performed at or above this grade level. OPM interpretive guidance on applying the GSSG (Digest of Significant Classification Decisions and Opinions, Number 20, dated October 1997) is that "...the GS-9 grade level is considered the first full performance level for administrative and professional work." As envisioned in the first sentence under Scope at Level 1-3, the appellant's subordinates perform moderately complex technical and administrative work.

In sum, the appellant's position meets Level 1-3 with respect to sweep, importance, and complexity. With respect to magnitude, the position falls short of Level 1-3 but meets Level 1-2. As noted earlier, none of these four aspects is necessarily predominant. However, considering all four aspects, how they interact, and the extent to which the appellant's position falls short of Level 1-3 for magnitude, the appellant's position must be evaluated at Level 1-2 for Scope.

Effect

The appellant's position is properly evaluated at Level 1-2 for Effect. That level involves providing services to a moderate, local, or limited population of clients or users comparable to a major portion of a small city or rural county. As discussed earlier, the appellant's Module has directly provided significant administrative or technical services to fewer than 67,000 people in the past year. Therefore, her office has furnished such services to a population of clients comparable to a portion of a small city. The appellant's position falls short of Level 1-3. At this level, activities, functions, or services directly and significantly impact a wide range of agency activities, the work of other agencies, the operations of outside interests, or the general public. The appellant's services do not fully meet these criteria, for four main reasons:

- The appellant's services are significant to her agency. However, they do not directly and significantly affect a wide range of activities throughout SSA, as envisioned at Level 1-3.
- The work performed in the Module has some affect on the work of the Department of the Treasury and State and County level agencies due to the coordination of payment issues and referrals. However, the Module's work does not affect the work of other agencies as directly and significantly as intended at Level 1-3. As an example of work that would meet this level, OPM's activities sometimes affect the work of other agencies directly and significantly. This is because OPM oversees agency personnel programs, can require agencies to make major changes in those programs, and can delegate or take away agency personnel authorities.
- The appellant's work does not directly and significantly affect the work of outside interests. Level 1-3 envisions activities equivalent to requiring businesses comprising a segment of an industry to change their practices to comply with agency regulations. For instance, a Federal Aviation Administration office might require airlines in its jurisdiction to change unsafe practices in compliance with agency regulations.

• The appellant's services affect the general public. However, Level 1-3 contemplates activities, functions, or services that directly and significantly affect members of the general public comparable in number to most taxpayers or citizens in a small city. As discussed previously, the appellant's services do not fully meet this criterion.

Since the appellant's position warrants Level 1-2 for both Scope and Effect, Level 1-2 is credited for 350 points.

Factor 5, Difficulty of Typical Work Directed

This factor measures the difficulty and complexity of the basic work most typical of the organization directed, as well as other line, staff, or contracted work for which the supervisor has technical or oversight responsibility, directly or through subordinate supervisors, team leaders, or others. The level is determined by identifying the highest grade which best characterizes the nature of the basic (mission oriented) nonsupervisory/nonleader work performed or overseen by the organization directed; and which constitutes 25 percent or more of the workload of the organization.

The GSSG excludes from consideration the work of lower level positions that primarily support or facilitate the basic work of the unit; any subordinate work that is graded based on criteria in this guide (i.e., supervisory duties) or the General Schedule Leader Grade Evaluation Guide (GSLGEG); work that is graded on an extraordinary degree of independence from supervision, or personal research accomplishments; and work for which the supervisor or a subordinate does not exercise the level of supervisory responsibility needed to meet the threshold for credit under Factor 3.

The AMM, GS-105-12, Supervisory Social Insurance Specialist, position spends all its time on supervisory work and is, therefore, excluded from the base-level determination.

The PD for the MSS, GS-105-12 Lead Social Insurance Specialist, position states it spends at least 25 percent of the time performing TL duties. However, the appellant states this position used to be supervisory and continues to operate in much the same manner as before although it no longer performs a full range of administrative supervisory duties. She further states the position only occasionally does nonsupervisory work and spends almost all of its time on TL duties. Therefore, this position is excluded from the base-level determination.

The SCPS, GS-105-12, Social Insurance Specialist/Senior Claims Processing Specialist, work is excluded from the base-level determination because the appellant does not fully supervise this work.

The PD for the PETE, GS-901-10, Legal Administrative Specialist, position states it spends 25 percent or more of its time on grade controlling duties; and the grade is based on application of the GSLGEG. The record shows the position leads GS-9 and lower grade-level work 80 percent of the time and personally performs nonsupervisory/nonleader work at the GS-9 grade level 20 percent. PETEs also fill in as needed during periods of peak workload on SSAs 800 number service line. The position's TL work is excluded from the base level determination.

The CAs are the highest graded nonsupervisory/nonleader positions in the Module. Each screens and adjudicates initial SSA benefit claims and family member claims and resolves difficult problems encountered and referred by BAs on post adjudication actions. They evaluate provided documentation and/or contact claimants for additional information, coordinate as necessary with other state and Federal agencies and/or private sector firms, and apply pertinent statutes, regulations, and policies to determine eligibility or ineligibility for benefits. They also resolve the most difficult issues encountered and referred by BAs regarding post adjudication actions. They each spend 45 percent of their time on this GS-11 level work and 55 percent of their time on post adjudicative duties at the GS-9 level. Normally the CAs do not answer calls received on the 1-800 national customer service number.

BAs implement/effectuate the full range of post adjudicative actions such as: automatic earnings readjustments for individuals who continue to work after retirement; benefit rate increases for cost of living adjustments; actions to resolve payment discrepancies and correct systems data; survivor benefits; benefit suspensions, reinstatements, terminations, and adjustments; student benefit actions, etc. They contact beneficiaries, employers, district office personnel and others to gather and verify information; make final determinations concerning the processing/approval of individual benefit actions; compute benefit payment rates; and implement decisions in accordance with established statutes, regulations, policies, and procedures. The appellant's supervisor refers to these positions as the "backbone of the Modules." BAs each spend 85 percent of their time on this GS-9 grade level work and 15 responding to 800 number customer telephone calls.

TSTs provide assistance to beneficiaries, the general public, field offices, central office, the Center for Medicare and Medicaid services, the Railroad Retirement Board, and other Government and non-Government agencies by data input, in writing or by telephone. They determine corrective actions needed to resolve hospital insurance/supplemental medical insurance entitlement and premium collection and other benefit entitlement and pay status problems and effectuate appropriate actions. They resolve non-receipt of check issues, overpayment recovery, direct review input and representative payee actions. TSTs perform this work within the PCSs defined area of responsibility 50 percent of the time and answer calls received through the national 1-800 number service line 50 percent of the time.

The CSs, CRTs, CCREs, and CCs perform various mission functions within the Module at or below the GS-6 grade level. The work is performed in accordance with established guidance and advice and assistance is available from higher level employees if needed.

The following listing shows positions performing the nonsupervisory/nonleader workload including the personally performed mission-oriented work done by the PETEs, which is included for the workload base level consideration. Amounts shown are stated in workyears.

<u>GS-11</u>

2.7 GS-105-11 Social Insurance Specialists/(CA)

<u>GS-9</u>

3.3	GS-105-11 Social Insurance Specialists/(CA)
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- 0.3 GS-901-10 Legal Administrative Specialists (Claims Examining)/(PETE)
- 12.75 GS-901-9 Legal Administrative Specialists (Claims Examining)/(BA)

<u>GS-8</u>

0.1	GS-901-10 Legal Admin. Spec.(CE)/(PETE)	1-800 number work
2.25	GS-901-9 Legal Admin. Spec.(CE)/(BA)	1-800 number work
2.0	GS-962-8 Contact Representatives/(TST)	1-800 number work
2.0	GS-962-8 Contact Representatives/(TST)	

GS-6 and below

9.6 TSTs, TSAs, CSs, CRT, CCRE, CC

Total staff years (workyears) is 35.

GS-11:	7.7%
GS-9:	46.7%
GS-8:	18.2%
GS-6 and below:	27.4%

The base level of work supervised by the appellant is GS-9 since it is the highest grade level of work supervised which meets or exceeds 25 percent of the workload of the Module.

The GSSG recognizes that second (and higher) level supervisory positions sometimes include heavy supervisory or managerial workload related to work above the base level. In such situations, the GSSG permits using the "highest level of nonsupervisory work directed, requiring at least 50 percent of the duty time of the supervisory position under evaluation, for this factor. The appellant is a second-level supervisor. However, the record shows only 2.7 workyears of nonsupervisory CA GS-11 grade level work performed above the base level which does not indicate a heavy supervisory workload requiring 50 percent or more of her time to supervise. In addition, the SCPS is available to provide advice, assistance and guidance to the CAs on difficult claims actions which also reduces the appellant's supervisory burden in this regard. Level 5-5 is credited, for 650 points.

Factor 6, Other Conditions

This factor measures the extent to which various conditions contribute to the difficulty and complexity of carrying out supervisory duties, authorities, and responsibilities. To evaluate Factor 6, two steps are used. First, the highest level that a position substantially meets is initially credited. Then, if the level selected is 6-1, 6-2, or 6-3, the Special Situations listed after the factor level definitions are considered. If a position meets three or more of the situations, then a

single level is added to the level selected in Step 1. If the level selected under Step 1 is 6-4, 6-5, or 6-6, the Special Situations may not be considered in determining whether a higher factor level is creditable.

Under the GSSG, there is a direct linkage of the criteria for Factors 5 and 6. The latter factor measures the extent to which various conditions contribute to the difficulty and complexity of carrying out supervisory duties, authorities, and responsibilities. The difficulty of work is measured primarily by the level of work credited under Factor 5. Complexity is measured by the level of coordination required and generally increases as the base level increases. The lettered paragraphs under Factor 6 are structured to cover positions that function as first-, second-, or higher-level supervisors. The agency credited the position with Level 6-4 based on the GS-11 base level it credited for Factor 5. The appellant believes her position should be credited with Level 6-5.

At Level 6-3a., the supervisor coordinates, integrates, or consolidates administrative, technical, or complex technician or other support work comparable to GS-9 or 10, or work at the GS-7 or 8 levels where the supervisor has full and final technical authority. The second situation (6-3b) covers positions which direct subordinate supervisors over positions in grades GS-7 or 8, requiring consolidation or coordination to ensure consistency of product, service, interpretation, or advice; or conformance with the output of other units, with formal standards, or agency policy.

Level 6-3a is met. As documented in the workload analysis, the appellant directs a substantial workload comparable to GS-9 and above. She does not direct the work of the organization through multiple subordinate supervisors or contractors.

Supervision at Level 6-4a requires substantial coordination and integration of a number of major work assignments, projects or programs of professional, technical, scientific, or administrative work comparable to the GS-11 grade level. Level 6-4b is credited when the position directs subordinate supervisor and/or contractors who **each** direct substantial subordinate workloads at the GS-9 or 10 grade levels. Contrary to the appellant's assertions, OPM appeal decisions and guidance have made clear use of the term "each" is deliberate and requires that multiple subordinate supervisors must individually direct a substantial GS-9 or GS-10 workload before Level 6-4b may be credited.

OPM has held that Level 6-4a may be credited to a second-level supervisory position when the position did not meet Level 6-4b, but the organization supervised required direction of a sizeable GS-11 workload. The appellant exercises full technical and administrative supervision over the work of six Claims Authorizers, each of which individually adjudicates claims at the GS-11 level 45 percent of the time and spends 55 percent of their time doing lower grade-level work. This equals 2.7 workyears at the GS-11 grade level out of the 35 workyears of work in the Module, or less than 8 percent of the work, and may not be construed as being a sizeable GS-11 workload. The appellant's position does not require substantial coordination and integration of a number of major work assignments at the GS-11 level and, as previously stated, she does not direct the work of the organization through multiple subordinate supervisors or contractors. Therefore, level 6-4a also may not be credited to the position. Because the position does not fully meet

Level 6-4, crediting Level 6-5 is precluded. Therefore, this factor is tentatively credited at Level 6-3.

Special Situations

Supervisory and oversight work may be complicated by special situations and/or conditions. For credit, the condition must be present and dealt with on a regular basis. The conditions described are: (1) Variety of Work, (2) Shift Operations, (3) Fluctuating Work Force or Constantly Changing Deadlines, (4) Physical Dispersion, (5) Special Staffing Situations, (6) Impact of Specialized Programs, (7) Changing Technology, and (8) Special Hazard and Safety Conditions. If the position meets three or more of the eight special situations, it is credited one level above that which would otherwise be assigned (e.g., at Level 6-4 in this case).

Variety of Work

Credit is given for this situation when more than one kind of work is present in the unit and the kinds of work require the supervisor to be substantially fully qualified in distinctly separate areas or have full knowledge and understanding of the rules, regulations, procedures and subject matter of distinctly different areas of work to properly carry out his/her supervisory duties and responsibilities. To be considered, the supervisor must exercise both technical and administrative supervision over the work; and it cannot be performed at more than one grade level below that used as the base level for Factor 5. A "kind of work" is usually the equivalent of a classification standard. The Module includes positions classified to three separate classification series (i.e., GS-105, 901, and 962) at grade levels meeting the criteria for credit under this situation. However, the work of these positions represents different aspects and/or phases of the same overall process requiring varying degrees of knowledge and ability to apply the same basic body of technical information; i.e., claims for benefits under title II and XVIII of the Social Security Act primarily involving retirement and survivor benefits, basic health insurance (Medicare) filing, and non-medical aspects of disability claims. Therefore, this situation is not met.

Shift Operations

Credit is given for this situation when the position supervises an operation carried out on at least two fully staffed shifts. The Module staff all work the day shift with alternative/staggered work schedules. This situation is not met.

Fluctuating Work Force or Constantly Changing Deadlines

This situation is credited when the work force has large fluctuations in size which impose a substantially greater responsibility on the supervisor to adjust assignments, train employees and maintain a smooth flow of work while adjusting to staff changes. It is also credited when a supervisor must frequently adjust work operations to accommodate abrupt and unexpected changes to work assignments, goals, and deadlines. The appellant's workforce is constant except for occasional vacancies, and major shifts in work operations are predictable (e.g. the effective

dates of cost of living adjustments, increased activity at the beginning of the month, planned/scheduled programmatic changes, etc.) This situation is not met.

Physical Dispersion

This situation is credited when a substantial amount of the workload for which the supervisor is responsible is carried out in more than one location and under conditions which make the day to day direction and administration of the work more difficult. All of the Module employees supervised by the appellant are located in the same office building within close proximity on the same floor. This situation is not met.

Special Staffing Situations

Credit is given when a substantial portion of the workforce is regularly involved in special employment programs; supervision requires unique counseling and/or motivational efforts; and job assignments and/or training must be tailored to meet special employee circumstances. The record does not indicate the appellant deals with any of these conditions on a regular basis. This situation is not met.

Impact of Specialized Programs

Credit is given for this situation when a supervisor is responsible for a significant technical or administrative workload, in grades above that credited for Factor 5, provided they exercise full technical and administrative supervision over the work. As discussed previously, the appellant supervises 2.7 workyears of work at the GS-11 grade level. The appellant also supervises two GS-10 Claims Examiners. However, the grade of these positions is based on application of the GSLGEG and they spend almost all their time on quasi-supervisory work sharing in the overall burden to monitor, direct, and control the work of the Module. As such, the work is not creditable under this situation. The appellant exercises full technical and administrative supervision over 2.7 workyears of work performed at a grade level above that credited for Factor 5 which, as discussed previously, cannot be considered a significant workload. This situation is not met.

Changing Technology

This situation is credited when the supervisor's work is regularly made more difficult because of the need to train and provide guidance to employees regarding constantly varying processes and procedures caused by changing technology. While such shifts occasionally occur, the record does not show the appellant's supervisory burden is regularly impacted by modified procedures and processes resulting from frequent technological upgrades/changes. This situation is not met.

Special Hazard and Safety Conditions

Credit is given for this situation when the supervisor's work is regularly made more difficult by the need to make provisions for unsafe and/or hazardous working conditions affecting the work of subordinates. The appellant's work does meet the criteria for crediting this situation.

The position meets none of the eight special conditions. Therefore, an additional level is not warranted; and Level 6-3 is credited for 975 points.

Summary applying the GSSG

Factor Level Points

1.	Program Scope and Effect	1-2	350
2.	Organizational Setting	2-2	250
3.	Supervisory and Managerial Authority	3-3b	775
	Exercised		
4.	Personal Contacts		
	Nature of Contacts	4-A2	50
	Purpose of Contacts	4-B2	75
5.	Difficulty of Work Directed	5-5	650
6.	Other Conditions	6-3	<u>975</u>
	Total points		3125

In accordance with the grade conversion table in the GSSG, a total of 3125 points falls within the (2755 to 3150) point range of a GS-12.

Summary

The appellant's supervisory work is evaluated at a GS-12 grade level. She does not perform non-supervisory work which would support a higher grade-level determination. We also note there is nothing to preclude a GS-12 grade-level supervisor from supervising the work of subordinate GS-12 level supervisors and/or team leaders in the General Schedule classification system.

Decision

The position is properly classified as GS-105-12 and titled Supervisory Social Insurance Specialist (parenthetical title at the agency's discretion).