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

Appellant: [appellant]

Agency classification: Transportation Assistant
(Office Automation)
GS-2102-6

Organization: Fee Consult Management
Fiscal Service
Administrative Services
Veterans Affairs Medical Center
Veterans Health Administration
Department of Veterans Affairs
[city and state]

OPM decision: Transportation Assistant
GS-2102-6

OPM decision number: C-2102-06-03

/s/ Jeffrey E. Sumberg

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

September 3, 2009

Date
As provided in section 511.612 of title 5, Code of Federal Regulations (CFR), this decision constitutes a certificate which 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 (Introduction), appendix 4, section G (address provided in appendix 4, section H).

Since this decision changes the title of the appealed position, it is to be effective no later than the beginning of the fourth pay period after the date of this decision, as permitted by 5 CFR 511.702. The servicing human resources office must submit a compliance report containing a revised position description and 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 location which accepted the appeal.

**Decision sent to:**

[appellant’s name and address]

[name]
Supervisory Human Resources Specialist (Classification)  
VISN [number] Consolidated Classification Team  
[mailing address]

Team Leader for Classification  
Office of Human Resources Management and Labor Relations  
Classification and Compensation Service (055)  
Department of Veterans Affairs  
810 Vermont Avenue, NW., Room 240  
Washington, DC  20420

Deputy Assistant Secretary for Human Resources Management (05)  
Department of Veterans Affairs  
810 Vermont Avenue, NW, Room 206  
Washington, DC  20420
Introduction

The Dallas Oversight and Accountability Group of the U.S. Office of Personnel Management (OPM) accepted a classification appeal on January 16, 2009, from [appellant]. The appellant’s position is currently classified as a Transportation Assistant (Office Automation (OA)), GS-2102-6, but the appellant believes it should be classified as Transportation Coordinator Specialist, GS-2101-9. The position is located in Fee Consult Management (FCM), Fiscal Service, Administrative Services, Veterans Affairs Medical Center (VAMC), Veterans Health Administration (VHA), Department of Veterans Affairs (VA), in [city and state]. We received the complete agency’s administrative report on March 24, 2009. We accepted and decided this appeal under section 5112 of title 5, United States Code.

Background

The VAMC restructured its fee basis program in August 2006, creating an FCM unit to streamline processes, increase efficiencies, and reduce expenditures associated with managing fee referral programs. The unit in which the appellant’s position is located assigns a nurse to each of the unit’s five teams responsible for a particular fee program. The team manages patient care including reviewing consults for medical appropriateness, coordinating healthcare, and verifying receipt of care.

Position descriptions (PD) were initially written to reflect the anticipated duties of the unit’s various positions. The unit’s previous supervisor subsequently drafted more detailed PDs, including the appellant’s (PD number [number]), and submitted them to the Veterans Integrated Service Network (VISN) [number] Consolidated Classification Team [CCT] for reclassification on March 9, 2008. In response, [CCT] provided an evaluation statement for the appellant’s position, dated May 1, 2008, determining it was appropriately classified at GS-2102-6.

Position information

The VAMC, a primary and secondary care facility, and the two [state name] Community Based Outpatient Clinics in [names of two cities] include a population of over 100,000 veterans with an estimated 37,000 veterans already on their active patient roster. Within the FCM unit, a Supervisory Clinical Case Manager (VN-610-III) directly supervises the unit’s 12 employees including, in addition to the appellant, three consult case managers (VN-610-II), an inter-facility transfer coordinator (AD-610-I), a transfer clerk (GS-620-6), and six claims assistants (GS-998-6).

The appellant is responsible for scheduling, confirming, and coordinating the transportation of veterans covered by VA’s healthcare services. The VAMC’s transportation program operates two stretcher vans, a wheelchair-lift equipped van, and a fleet of vehicles including full-size cars and minivans, to transport patients within a 300-mile radius with common destinations to other VAMCs in [names of five cities in four states]. The appellant provided a list of several specific tasks and the time she spends on each. Many tasks are related and may be grouped together. For example, she cumulatively spends 25 percent of her time on transportation-related tasks including fielding calls and in-person visits for travel requests, coordinating travel schedules,
posting and issuing travel schedules, confirming appointments, and attending training and researching travel regulations. The appellant also forwards requests for exceptions to policy (e.g., transporting patients outside the 300-mile radius or via a commercial flight) to the VAMC’s Director, Associate Director, and Chief of Staff for approval. Requests normally include the veteran’s name, purpose of trip, destination, justification, and cost analysis whenever necessary.

The unit is unique in VA for its FCM structure, coordinating a patient’s total care beginning with the request for a consult and continuing to the confirmation of care being received. The appellant estimates spending 56 percent of her time on patient care coordination work. She is assigned to the team working on consultations for outpatients requiring specialty care at another VA facility, as well as inpatient transfers. These tasks include identifying the nearest VA facility with the required specialty; contacting clinical staff when laboratory work and tests are completed; acting as liaison between the referring and receiving facilities to coordinate care; verifying patients schedule and attend appointments; and reviewing, maintaining, and entering patient data in the Veterans Health Information Systems and Technology Architecture (VistA) and the Computerized Patient Records System (CPRS), the agency’s healthcare software.

The appellant said she spends 13 percent of her time reviewing, processing, and authorizing claims for ambulance bills against strict and clear guidelines. If the claim is not approved (e.g., if the incident is non-emergent), the appellant documents the reason for denying the claim. The remaining six percent of her time is spent on miscellaneous duties. As specified in the Introduction, section III.J, only duties occupying at least 25 percent of an employee’s time can affect the grade of a position. Therefore, we will not evaluate either duty in this decision.

The appellant’s official PD and other material of record furnish additional information about the appellant’s duties and responsibilities and how they are performed, and we incorporate it by reference into this decision. We conducted telephone audits with the appellant on May 27, 2009, and June 8, 2009. We also conducted a telephone interview with the appellant’s current supervisor on June 18, 2009. In reaching our classification decision, we carefully considered all of the information gained from these interviews, as well as all other information of record furnished by the appellant and VA, including the PD of record.

**Series, title, and standards determination**

The appellant disagrees with the agency’s assignment of her position to the GS-2102 Transportation Clerk and Assistant Series. She explains her disagreement with the GS-2102 series in her July 30, 2008, appeal request to OPM, stating:

> While this title reflects the main purpose of the position, it does not embody the full scope of responsibilities and duties involved with coordination of care centering around the transport of outpatient and inpatient veterans to medical appointments and emergent transportation or processing of Interfacility consults.

During the telephone audit, the appellant said she did not support a particular series but the VAMC’s human resources staff recommended classifying her position to the GS-2101,
Transportation Specialist Series to [CTT]. The GS-2101 series covers two-grade interval administrative positions responsible for advising on, supervising, or performing work involving two or more specialized transportation functions or other transportation work not specifically included in another series of the transportation group.

We must first determine whether the work performed by the appellant is covered by a two-grade interval administrative or single-grade interval support series. Since some tasks are common to both types of occupations, it is not always easy to distinguish between assistants classified in one-grade interval support occupations and specialists classified in two-grade interval administrative occupations. Guidance on distinguishing between administrative and support work is contained in The Classifier’s Handbook.

Support work usually involves proficiency in one or more functional areas or in certain limited phases of a specified program. Employees performing support work follow established methods and procedures. They specifically have boundaries narrowly restricting their work. Assistants use a limited variety of techniques, standards, or regulations. The problems they deal with are recurring and have precedents.

In contrast, administrative work primarily requires a higher 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 both orally and in writing. Administrative positions do not require specialized education, but they do involve the types of skills (i.e., analysis, research, writing, and judgment) typically gained through college-level education or through progressive, responsible experience.

To decide the proper series, we examined the characteristics and requirements of the appellant’s work. Her work requires a high degree of skill, care, and organization. As the VAMC’s transportation coordinator, the appellant’s work involves executing a variety of procedural steps including, but not limited to, gathering basic information on the veteran, deciding if the destination is to an approved VA facility within the 300-mile radius, and identifying any special accommodations required by the traveler. To help identify special needs, the medical staff completes a form documenting the veteran’s medical, mental, and physical stability. The appellant evaluates the form to determine a patient’s basic eligibility and to match his/her needs with appropriate accommodations (e.g., a wheelchair-bound patient with the wheelchair-lift equipped van). Nonetheless, she analyzes and evaluates these data based on information which is readily apparent, readily provided, and to which past precedents are applicable. This and other transportation coordinator tasks are driven primarily by routine tasks with situations normally following clear-cut steps covered by established procedures and guidelines. The appellant’s care coordination work requires familiarity with her unit’s functions and basic understanding of medical terminology, practical considerations for scheduling, particular medical tests required by patients, etc. This work can typically be resolved by following past precedents rather than referring to established guidelines to decide the next steps and available options. Like support work, the appellant’s work is of a continuing, repetitive nature with tasks and problems recurring and where previous situations serve as a blueprint for subsequent ones. Her
assignments, unlike administrative work, do not require a high order of analytical ability or problem-solving techniques such as understanding the problem, considering options, brainstorming, and assessing results and do not require a comprehensive knowledge of the functions, processes, theories, and principles of management. The appellant drafted her unit’s September 7, 2007, Medical Center Memorandum (MCM), establishing written policies and procedures for transporting patients from the VAMC to other healthcare facilities. The MCM is available on the VAMC’s Intranet and is shared with other VISN medical centers considering implementing a similar fee consult management unit. Drafting the unit’s MCM shares some characteristics with two-grade interval work but, as a one-time rather than a regular and recurring assignment, it cannot control the classification of the position. In addition, the appellant put together the MCM using her practical knowledge of the purpose, operations, and procedures of her unit’s transportation function. Unlike administrative work, it did not require applying a combination of analytical ability, methods, and principles used to gather, analyze, evaluate, and report information. Therefore, the appellant’s position is properly assigned to a one-grade interval support occupation.

The appellant’s is a mixed series position involving work covered by more than one occupational series. The appellant’s duties require a practical knowledge of the regulations and methods covering traffic management or transportation programs. This work is appropriately classified to the GS-2102 series, and properly classified using the grading criteria in the GS-2102 position classification standard (PCS).

The appellant also performs patient care coordination work not covered by the GS-2102 PCS but by the Medical Support Assistance Series, GS-679. This series covers one-grade interval administrative support work performed 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 recordkeeping duties, and providing miscellaneous support to the unit’s medical staff. Similar to the appellant’s work, GS-679 work requires a practical knowledge of computerized data entry and information processing systems, the medical facility’s organization and services, basic rules and regulations governing patient treatment, and a practical knowledge of the standard procedures, medical records, and medical terminology. Work covered under the GS-679 series is properly evaluated using the Job Family Position Classification Standard (JFS) for Assistance and Technical Work in the Medical, Hospital, Dental, and Public Health Group, GS-600.

Based on the following grade-level analysis, we found the appellant’s GS-2102 covered duties are grade-controlling and predominant in terms of the basic purpose of the position and the paramount knowledge required. Consequently, the appellant’s position is properly classified to the GS-2102 series and is titled Transportation Assistant based on the PCS’s titling instructions.

The VA included an OA parenthetical to the appellant’s title. The Office Automation Grade Evaluation Guide (OAGEG) authorizes adding an OA parenthetical to the title of positions excluded from the Office Automation Clerical and Assistance Series, GS-326, when positions require significant knowledge of OA systems and a fully qualified typist (40 words per minute) to perform word processing duties. The appellant’s OA work is limited to preparing daily and yearly calendars, informal correspondence, data entry, etc. Careful study of these duties and
responsibilities, in addition to the PD and discussions with the appellant and supervisor, indicates the work does not require the skills of a fully qualified typist. Therefore, adding an OA parenthetical to the position’s title is inappropriate.

Grade determination

The GS-2102 PCS and the GS-600 JFS use the Factor Evaluation System (FES) format, under which factor levels and accompanying point values are assigned for each of the nine factors. The total is converted to a grade level by use of the grade-conversion table provided in each standard. Under the FES, each factor-level description demonstrates the minimum characteristics needed to receive credit for the described level. If a position fails to meet the criteria in a factor-level description in any significant aspect, it must be credited at a lower level. Conversely, if a position factor is evaluated at above the highest factor level published in the classification standard, the factor is evaluated by reference to the Primary Standard (PS), the FES’s “standard-for-standards” in Appendix 3 of the Introduction.

The appellant’s appeal request included an evaluation of her position based on application of the PS. She credits her position at Levels 1-4, 2-3, 3-4, 4-3, 5-4, 6-2, 7-2, 8-1, and 9-1. The PS is not to be used in place of more appropriate FES standards and grade-level criteria. It is also not to be used alone to classify a position except when a factor level fails to meet the lowest, or exceeds the highest, level in the applicable FES standard. Our evaluation using the appropriate FES standards is as follows.

Evaluation using the GS-2102 PCS

Factor 1, Knowledge Required by the Position

This factor covers the nature and extent of information or facts the employee must understand to do acceptable work (e.g., steps, procedures, practices, rules, policies, regulations, and principles) and the nature and extent of the skills needed to apply the knowledge.

At Level 1-3, work requires knowledge of a body of standardized transportation regulations, procedures, and operations related to one or more transportation support functions. At this level, work may require knowledge of established transportation or traffic management rules to perform a full range of transportation support duties. Work may also require knowledge of frequently used and clearly stated regulations to respond to a range of recurring questions from agency or activity personnel, customers, commercial carriers, or others. Illustrative of passenger work at Level 1-3 is an employee who screens tickets, itineraries, and bills involving foreign and/or domestic travel to ensure that information pertaining to rental cars, dates, travel periods, connections, etc., is compatible with travel authorized and that the lowest contract fare(s) was selected. The employee considers reasons for selection of higher cost or non-contract carrier. For example, he or she considers factors such as urgent timeframes, space availability, and remoteness of origin or destination points to determine if requests should be approved or forwarded for further review. The employee coordinates travel plans involving a combination of domestic and foreign travel with the contract travel service office, passport office, or other offices. In doing so, the employee can ensure maximum use of Government-owned/contracted
transportation or U.S. carriers and obtain or expedite the receipt of required documents, such as passports and visas. She or he provides information or answer recurring questions such as (1) what kind of paperwork is required for foreign travel (e.g., passports, visas, and medical or security clearances); (2) how much lead-time is needed to process the paperwork; and (3) when it is appropriate to use actual subsistence rates, non-contract carriers, or privately owned vehicles.

At Level 1-4, the highest level described in the PCS, work requires knowledge and application of an extensive body of transportation regulations, methods, and practices to perform a wide variety of interrelated or nonstandard transportation support assignments and resolve a wide range of problems. At this level, work may require knowledge of extensive and diverse regulations governing a wide variety of types of passenger travel to make arrangements, provide advice, or perform other work requiring authoritative procedural knowledge of various different travel policies or laws. Illustrative of passenger work at Level 1-4 is an employee who uses knowledge of extensive and diverse regulations governing a wide variety of types of passenger travel to make arrangements, provide advice, or perform other work that requires authoritative procedural knowledge of various different travel policies or laws. In some organizations, this might involve authoritative procedural knowledge of travel rules governing official, unofficial, military, civilian, foreign, domestic, and mobility deployment travel. In other organizations, this might involve authoritative procedural knowledge of rules governing travel sponsored by non-Federal monies, foreign travel of employees under special appointments (e.g., consultants, experts, visiting scientists), and unilateral and bilateral travel agreements with foreign countries in addition to standard kinds of civilian travel. In either case, the work typically involves knowledge of lead time needed to plan and arrange travel involving different kinds or combinations of modes of transportation, isolated origin/intermediate/destination points, multiple stops, foreign currencies, and special services (e.g., chartered buses, escorts).

The appellant’s position meets Level 1-3. As at this level, her work requires knowledge of standardized regulations, procedures, or operations related to VAMC’s transportation program. She organizes and coordinates the transportation of veterans traveling within the 300-mile radius for approved purposes including, but not limited to, radiation therapy for cancer patients, medical procedures and tests, psychiatric patients attending judicial hearings, transport of spinal cord patients, and transport of patients for hospice and palliative care. This work requires applying Federal regulations as well as VA, VHA, VISN, and VAMC guidance relating to interfacility transfers, beneficiary travel benefits, home-based primary care, spinal cord injury care, nursing home facilities, and procedures for exception to policy requests. Her work also requires practical knowledge regarding available public transportation, commercial ambulance transport services, and basic cost-benefit analysis techniques. Similar to Level 1-3, the appellant schedules transportation based on instructions provided by the veteran or clinical staff, verifying specific information such as the purpose of travel, making determinations on special requests or modes of transportation, and contacting clinical staff for additional information when needed.

Similar to the Level 1-3 passenger work illustration, the appellant’s work is influenced by comparable urgency, availability, and expediency factors. She coordinates with physicians, nurses, and other clinical staff to determine a patient’s appropriate mode of transportation based on the individual’s needs, medical condition, and urgency. If VAMC transport is inadequate for the patient’s needs, the appellant locates a vendor able to perform required services within the
allotted time; drafts the cost-benefit analysis justifying the vendor’s selection; contacts vendor; coordinates travel; and serves as liaison for the vendor, veteran, and clinical staff. This work matches Level 1-3.

The appellant’s position does not meet Level 1-4. In support of this level, the appellant cited dealing with a diabetic patient who was unresponsive while in transit and the driver’s having the patient taken to the nearest emergency room. The appellant was responsible for inputting information into VistA and CPRS; notifying clinical staff; contacting the administrative staff issuing authorizations for non-VA hospital care; and determining reasons for the incident, which, in this instance, was a faulty glucose monitor. The travel unit now has their own glucose monitoring system. Unlike the Level 1-4 illustration, this type of work, in addition to being irregular and infrequent, does not require planning and arranging travel involving different kinds or combinations of transportation modes, isolated origin or destination points, multiple stops, foreign currencies, and special services. In addition, the appellant’s transportation actions are normally clear-cut, involving vehicles owned and operated by VAMC instead of multiple outside vendors, confined to fairly populated destination points within a 300-mile radius instead of remote and inaccessible travel locales, non-stop travel instead of multiple stops, and a VA-sponsored program involving no currency of any kind. Occasionally the appellant determines a patient’s condition requires flying commercially; if so, the appellant requests an exception to policy, coordinates ground travel, and verifies arrangements with clinical staff to ensure continuity of care. Nonetheless, this work does not require applying knowledge of an extensive body of transportation regulations, methods, and practices as expected at Level 1-4. The appellant’s work is more standardized and involves coordination issues related almost exclusively to the VAMC’s transportation program.

Level 1-3 is credited for 350 points.

Factor 2, Supervisory Controls

This factor covers the nature and extent of direct or indirect controls exercised by the supervisor, the employee’s level of independence and personal responsibility, and how the work is reviewed or controlled.

At Level 2-3, the highest level described in the PCS, the supervisor outlines objectives, priorities, and deadlines and provides guidance on dealing with unusually involved or unique situations. Employees independently plan and carry out the successive steps to complete transportation support duties and use accepted practices to resolve problems and deviations which may result because of the specialized nature of the problems, the existence of various conflicting documentation, lack of documentation or information available, or other conditions. The supervisor reviews completed work for technical soundness, appropriateness, and conformity to policy and requirements. The methods used by the employee to complete assignments are usually not reviewed in detail.

The appellant’s position meets but does not exceed Level 2-3. As at this level, the appellant independently coordinates and organizes scheduling of the short- and long-distance transport of
veterans traveling to and from the VAMC. Comparable to Level 2-3, the appellant performs tasks according to established procedures and precedents, ensuring transportation support duties are consistent with the continuity of clinical care and time parameters. This involves carefully scheduling the transportation of veterans to avoid either conflicts with a patient’s treatment or the schedules of the clinic or service. She also initiates exceptions to policy without the supervisor’s prior guidance, consultation, or approval. As at this level, the supervisor outlines the general objectives of the appellant’s work, but the priorities and deadlines are uncontrollable and normally driven by the order and urgency of veterans’ requests. Typical of Level 2-3, the supervisor occasionally provides direction for unique, medical-related situations (e.g., whether a patient can be transported after surgery), reviewing the appellant’s work for customer service and conformance to policy and requirements.

Level 2-3 is credited for 275 points.

Factor 3, Guidelines

This factor considers the nature of guidelines and judgment needed to apply them.

At Level 3-3, the highest level described in the PCS, guidelines are similar to those described at Level 3-2 (e.g., transportation regulations, manuals, guides, directories, tenders, or operating procedures) but are not completely applicable to many aspects of the work because of the problem-solving or complicated nature of the assignments. Employees use judgment to interpret guidelines, adapt procedures, decide approaches, and resolve specific problems.

The appellant’s position meets but does not exceed Level 3-3. She applies a variety of transportation-related guidelines from VA, VHA, VISN, and VAMC directives, handbooks, memorandums, bulletins, and notices, in addition to the Federal laws and regulations pertaining to the VAMC’s transportation program. Her work requires sufficient practical knowledge of other VA programs as it relates to the transport of veterans (e.g., to understand patients in the spinal cord program are escorted by an aide). Like Level 3-3, the appellant interprets guidelines to adapt work procedures and decide approaches concerning the unit’s transportation support work. Examples include identifying when situations are not covered by established guidelines; drafting and forwarding exceptions to policy for review and approval; adapting and implementing procedures such as the patient stability form, requiring the medical staff provide information on the patient’s medical, mental, and physical stability; and advising drivers when incidents occur during transport.

Level 3-3 is credited for 275 points.

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.
At Level 4-3, the highest level described in the PCS, work involves performing one or more transportation support functions requiring the use of different and unrelated procedures and methods. Using different procedures may result because assignments received are relatively broad and varied; work methods are not completely standardized; or transactions are interrelated with other systems and often require extensive coordination with various, different personnel. Employees at this level identify the nature of the request, problem, or issue, and determine the need for and obtain additional information through oral or written contacts and review of regulations and manuals. Employees make recommendations or take actions based on a case-by-case review of pertinent transportation regulations and documents.

As at Level 4-3, the appellant’s work requires applying different and unrelated procedures to a variety of transportation support tasks. As each veteran has different transportation needs, the appellant’s work methods are not completely standardized and will vary according to the situation. Each transportation request typically entails deciding whether the destination is to an approved site, verifying whether an appointment has been scheduled, assessing whether the patient is medically and mentally stable for transport, determining if an aide is required, identifying the equipment required on a trip (e.g., oxygen tank, nebulizer devices, or meals) and ensuring its availability, and matching a patient’s needs to the appropriate mode of transport.

The appellant identifies any issues requiring coordination with the medical staff, e.g., she works with them to determine the proper mode of transportation based on the urgency of the patient’s condition. If VAMC transport is inadequate, the appellant will locate a vendor (e.g., MedFlight Air Ambulance for urgent or emergent flights); work up a cost analysis; and coordinate ground and air travel with the medical staff, vendor, and veteran. The appellant initiates requests for exceptions to policy by forwarding case-specific recommendations for situations falling outside existing transportation guidelines. This work, requiring extensive coordination with personnel and framing of recommendations, meets but does not exceed Level 4-3.

Level 4-3 is credited for 150 points.

**Factor 5, Scope and Effect**

This factor covers the relationship between the nature of the work (i.e., purpose, breadth, and depth of the assignment) and the effect of work products or services both inside and outside the organization.

At Level 5-2, the purpose of the work is to provide a full range of transportation services or to perform other transportation support work covering well-defined and precise program procedures and regulations. Work products affect the accuracy and reliability of further processes or services. Ensuring complete and accurate paperwork and instructions furthers the timely movement of freight, personal property, or passengers.

At Level 5-3, the purpose of the work is to apply conventional practices to treat a variety of problems with transportation transactions. For instance, problems may result from requests to expedite urgently needed items, a carrier’s inability to meet the needs of the traveler or shipper, unexpected problems in transit, or conflicting information in documents or reports. In some
situations, the work may affect the physical well-being of people, or it may affect substantial costs incurred by the agency or activity (e.g., arranging for the timely transport of emergency personnel, critical equipment, or urgently needed supplies affects the adequacy of patient care).

The appellant’s position requires applying well-defined practices and techniques to perform a full range of transportation support work including communicating with veterans and clinical staff requesting transportation services; verifying an appointment has been scheduled; assessing the need for any special accommodations; providing scheduling information and calendars to drivers and aides; and calling to remind veterans of appointments. Her work directly affects the veterans’ access to care by ensuring they arrive for medical appointments safely and on-time, ultimately affecting the broader issue of patient flow efficiency. This meets the Level 5-2 description with its impact concerning the timely movement of passengers, as well as the accuracy and reliability of further services.

The appellant’s position does not meet Level 5-3. The purpose of her work is to perform frontline customer-service oriented work, responding to transportation requests and taking necessary steps to ensure arrangements are completed satisfactorily. In contrast, Level 5-3 is intended for positions focused on resolving a variety of problems relating to broader operational transportation support issues (e.g., inadequate carriers, conflicting information, etc.) rather than occasional, ad hoc issues typical of the appellant’s position in which the response is clear cut. For example, drivers contact the appellant when patients experience problems while in transport. A course of action is normally clear as the patient’s health is key, and the appellant advises the driver to transport the veteran to the nearest hospital. Her position is not responsible for resolving problems of the breadth or depth expected at Level 5-3.

Level 5-2 is credited for 75 points.

Factors 6 and 7, Personal Contacts and Purpose of Contacts

Personal contacts include face-to-face and telephone contacts with people not in the supervisory chain. Levels are based on what is required to make the initial contact, the difficulty in communicating with those contacted, and the setting in which the contact takes place. The factors are interdependent, so the same contacts selected for crediting Factor 6 must be used to evaluate Factor 7.

Personal Contacts

At Level 2, which is the highest level identified in the PCS, contacts are with the general public in a moderately structured setting. For example, contacts may be with representatives of airlines and contract travel agencies who are completing arrangements for travelers.

The appellant’s contacts meet but do not exceed Level 2. As at this level, her regular and recurring contacts are with individuals outside the immediate organization including veterans, community health providers, and community transport service representatives. Contacts with employees may be from various levels within VA such as her counterparts at other VAMCs, medical staff, social workers, Fiscal Service staff, supervisors for the drivers and aides, etc.
appellant’s contacts require tact and sensitivity when communicating with or about a physically or mentally unstable patient. She takes steps to prevent incidents by carefully questioning patients or medical staff on the individual’s physical and mental well-being; reminding passengers of scheduled appointments; and carefully documenting patient records in case a problem arises. However, her role as VAMC’s transportation coordinator is relatively straightforward, easily explained, and clearly understood especially within the VA community comprising the most of her contacts. Since her contacts are normally with individuals with whom she has established stable and constant relationships, these interactions occur in the moderately structured setting described at Level 2.

**Purpose of Contacts**

At Level a, the purpose of contacts is to obtain, clarify, or provide information related to transportation support assignments. For example, contacts may be to obtain missing information, advise on the status of actions, or verify transportation needs.

At Level b, the purpose of contacts is to plan and coordinate actions to prevent errors, delays, or other complications from occurring. For example, contacts may include briefing various personnel on their transportation entitlements; tracing missing freight or personal property through various channels; advising on or discussing shipping requirements; ensuring the timely and accurate receipt of travel documentation; or performing similar actions.

The VA credited the appellant’s position at Level a. Her PD describes the purpose of her contacts as follows:

Plan, coordinate, or advise on work efforts or to resolve operating problems by influencing or motivating individuals or groups who are working toward mutual goals and who have basically cooperative attitudes.

The above description is similar to Level b as depicted in the PCS. The main purpose of the appellant’s contacts is to coordinate hers’ and others’ work efforts. This requires communicating with patients to carefully plan and coordinate their departure time while factoring distance, location, and traffic conditions; with drivers to arrange for pick-up times and any special accommodations required by passengers; with aides to request accompanying riders; and with clinical staff to match a patient’s medical conditions with the appropriate mode of transportation. As at Level b, her contacts generally involve individuals with helpful attitudes as both sides are working towards the mutual goal of ensuring veterans arrive safely to their destinations on-time and incident-free. The purpose of the appellant’s contacts meets but does not exceed Level b.

Level 2b is credited for 75 points.

**Factor 8, Physical Demands**

This factor covers the requirements and physical demands placed on the employee by the work assigned. This includes physical characteristics and abilities, as well as the extent of physical exertion involved in the work.
As described at Level 8-1, the appellant’s work requires no special demands other than some physical effort such as standing, walking, bending, or sitting.

The appellant’s position does not meet Level 8-2, where work requires above average physical agility such as regular and recurring periods of prolonged standing, bending, stretching, and lifting.

Level 8-1 is credited for 5 points.

**Factor 9, Work Environment**

This factor considers the risks and discomforts in the employee’s physical surroundings. Any safety regulations related to the work assigned are also considered.

As described at Level 9-1, the appellant’s work environment consists of an office setting and involves everyday risks or discomforts requiring normal safety precautions typical of an office setting.

The appellant’s work environment does not meet Level 9-2, where work is performed in areas with moderate risks or discomforts (e.g., warehouses or on loading docks) requiring use of special safety precautions.

Level 9-1 is credited for 5 points.

**Summary**

<table>
<thead>
<tr>
<th>Factor</th>
<th>Level</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge Required by the Position</td>
<td>1-3</td>
<td>350</td>
</tr>
<tr>
<td>Supervisory Controls</td>
<td>2-3</td>
<td>275</td>
</tr>
<tr>
<td>Guidelines</td>
<td>3-3</td>
<td>275</td>
</tr>
<tr>
<td>Complexity</td>
<td>4-3</td>
<td>150</td>
</tr>
<tr>
<td>Scope and Effect</td>
<td>5-2</td>
<td>75</td>
</tr>
<tr>
<td>6. &amp; 7. Personal Contacts and Purpose of Contacts</td>
<td>2-b</td>
<td>75</td>
</tr>
<tr>
<td>Physical Demands</td>
<td>8-1</td>
<td>5</td>
</tr>
<tr>
<td>Work Environment</td>
<td>9-1</td>
<td>5</td>
</tr>
</tbody>
</table>

**Total** 1,210

A total of 1,210 points falls within the GS-6 range (1,105 to 1,350) on the grade conversion table.

*Evaluation using the GS-600 JFS*
The Medical Support Assistance Series, GS-679, is one of two series covered by the GS-600 JFS.

**Factor 1, Knowledge Required by the Position**

At Level 1-3, the highest level described in the JFS for GS-679 work, employees use 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. Employees at Level 1-3 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 records system.

The appellant’s position is responsible for coordinating the patient care related to consultations for outpatients requiring specialty care at another VA facility. Inpatient consultations, for which her team is also responsible, are often complicated by medical-related factors and are typically handled entirely by the team nurse. The appellant’s work requires knowledge of patient records and documentation to accurately and adequately update, search for, and locate needed information. She reviews electronic consultation requests and determines the appropriate course of action depending on the situation. As described at Level 1-3, this may include identifying the nearest VA with a particular specialty, forwarding consultations to the appropriate VA, verifying patients schedule and attend appointments, and notifying clinical staff when laboratory reports and other test results are completed.

Similar to Level 1-3, the appellant’s work requires practical knowledge of medical terminology to recognize procedures, services, diseases, conditions, tests, and medications. She reviews consultation notes and instructions from physicians. If the patient is instructed to stop taking a certain medication prior to a procedure, the appellant reviews medical history to determine if a patient has been prescribed that medication. She also reviews patient records to research inquiries from veterans if, for example, they have been referred to a specialist but are waiting for the consultation to be forwarded or processed. The appellant’s position meets but does not exceed Level 1-3.

Level 1-3 is credited for 350 points.

**Factor 2, Supervisory Controls**

At Level 2-2, the supervisor makes assignments by providing general instructions. Employees use initiative and work independently within the framework established by the supervisor. Employees are expected to refer problems not covered by the supervisor’s instructions or procedures to the supervisor or designated employee. The supervisor reviews new or difficult
assignments and those with potential adverse impact and may spot check routine work products for accuracy.

At Level 2-3, the highest level described in the JFS, the supervisor makes assignments by defining the overall objectives, priorities, and deadlines and assists with unusual situations. Employees independently plan the work, resolve problems, carry out successive steps of the assignments, and make adjustments using accepted SOPs or practices. They handle problems and deviations which arise in accordance with established policies, regulatory and administrative guidelines, directives, instructions, and accepted practices.

The appellant’s position meets Level 2-2. She independently performs tasks within the framework established by the supervisor. The supervisor or team nurse provides guidance on medical-related matters including identifying medical conditions, diseases, or medications. Like Level 2-2, the appellant inputs information into VistA and CPRS, which the supervisor reviews for accuracy, adequacy, and compliance with accepted practices.

Level 2-3 assumes the work is sufficiently diverse and complex to require planning out work, resolving problems, carrying out successive steps, and making adjustments using accepted practices. In contrast, the appellant’s care coordination work is relatively straightforward; of a continuing, repetitive nature; completed with common and abbreviated steps; and covered by past precedents and instructions. Her work does not approach the degree of independence and decision-making expected at Level 2-3. The appellant’s deadlines and priorities are uncontrollable as they are normally established by the urgency of a patient’s medical situation or as consults enter the queue.

Level 2-2 is credited for 125 points.

Factor 3, Guidelines

At Level 3-2, employees use procedural and regulatory guidelines specifically covering the assigned work. They choose the most appropriate guidelines, references, and procedures to use from a number of similar guidelines and work situations and, as necessary, make minor deviations or adaptations to handle particular situations. Employees refer situations which do not readily fit instructions or other applicable guidelines to the supervisor or another individual for resolution.

At Level 3-3, the highest level described in the JFS, guidelines consist of a variety of technical manuals, technical instructions, medical facility regulations, regulatory requirements, and established procedures and are not completely applicable to some of the duties or have gaps in specificity. Employees use discretion and initiative to decide on the appropriate course of action to correct deficiencies, adapt and interpret guidelines in order to apply them to specific cases or problems, and may develop approaches to apply new regulatory requirements or adapt to new technology.

The appellant’s position meets Level 3-2. Her work is not specifically covered by written guidelines for her daily care coordination work, but most tasks recur regularly and are relatively straightforward with past precedents and standing instructions available and applicable to various
work situations. Like Level 3-2, the appellant consults with the supervisor or team nurse if past precedents or instructions do not apply. An absence of written guidelines is not determinative for this factor. The nature of the appellant’s care coordination work does not require using discretion and initiative to adapt and interpret guidelines to various work situations as expected at Level 3-3.

Level 3-2 is credited for 125 points.

Factor 4, Complexity

At Level 4-2, the highest level described in the JFS for GS-679 work, employees perform 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. They decide what needs to be done by choosing from various options requiring recognition of and differences among a few easily recognizable alternatives, and responding to changing priorities which frequently depend upon the differences in medical information about each patient and the urgency of the situation.

The appellant’s work involves a variety of clerical and administrative procedures related to patient care coordination. Similar to the appellant’s position, the JFS’s Level 4-2 illustration describes an employee performing work such as answering questions and providing information, reviewing and entering patient information, interpreting patient medical information to refer patients to medical specialties, determining what actions are needed and how to process them, and making adjustments in the work in response to changing priorities related to patient needs. The appellant’s work meets but does not exceed Level 4-2.

Level 4-2 is credited for 75 points.

Factor 5, Scope and Effect

At Level 5-2, the highest level in the JFS for GS-679 work, employees perform receptionist and general recordkeeping duties; give patients instruction on test preparation, diets, and procedural requirements; and record physicians’ orders. The work affects accuracy and acceptability of further processes including patient care.

The appellant’s general recordkeeping and receptionist duties include, but are not limited to, forwarding consultations to the appropriate VA facility; ensuring patients schedule and attend appointments; relaying messages pertaining to laboratory reports, test results, x-rays, etc.; and entering data into VA’s computerized patient records system. This work affects the efficiency, accuracy, and acceptability of further processes and patient care. The appellant’s position meets but does not exceed Level 5-2.

Level 5-2 is credited for 75 points.

Factors 6 and 7, Personal Contacts and Purpose of Contacts
Personal Contacts

At Level 2, the highest level described in the JFS, contacts are with other medical facility employees but outside the immediate or related units. Some contacts may be with the general public in moderately structured settings including insurance company representatives, private physicians, care providers, and individuals from other agencies or organizations seeking information.

The appellant’s contacts meet but do not exceed Level 2. As at this level, her regular and recurring contacts are with individuals outside the immediate FCM unit and include patients and their family members, medical and social work staff inside the VA but outside the VAMC, and non-VA providers including hospitals and doctor’s offices.

Purpose of Contacts

At Level a, the purpose of contacts is directly related to recurring functions and are made to acquire, clarify, or give facts or exchange general and medical information directly related to the work.

At Level b, the purpose of contacts is to initiate and follow through on work efforts or to resolve operating or technical problems related to the treatment of patients and/or the maintenance of patient records. Employees at this level influence or persuade individuals or groups working toward mutual goals and have basically cooperative attitudes.

The appellant’s position meets Level a. Her work requires contacting clinical staff at the VAMC and other medical centers to ensure they are scheduling appropriate follow-up appointments; verifying patients schedule and attend appointments; and notifying clinical staff on the status of laboratory tests and other results. This is similar to giving facts or exchanging general medical information described at Level a. Her contacts involve discussing facts and do not require influencing or persuading individuals as described at Level b.

Level 2a is credited for 45 points.

Factor 8, Physical Demands

As described at Level 8-1, the appellant’s work is primarily sedentary but may require some physical effort such as standing, walking, bending, sitting, and carrying light files.

The appellant’s position does not meet Level 8-2, where work requires physical exertion such as prolonged periods of standing, bending, reaching, crouching, stooping, stretching, and lifting moderately heavy items such as manuals and record boxes.

Level 8-1 is credited for 5 points.

Factor 9, Work Environment
As described at Level 9-1, the appellant’s work environment consists of an office setting and involves everyday risks or discomforts requiring normal safety precautions typical of an office setting.

The appellant’s work environment does not meet Level 9-2, where work is performed in areas with moderate risks or discomforts (e.g., exposure to contagious diseases) requiring use of special safety precautions.

Level 9-1 is credited for 5 points.

Summary

<table>
<thead>
<tr>
<th>Factor</th>
<th>Level</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge Required by the Position</td>
<td>1-3</td>
<td>350</td>
</tr>
<tr>
<td>Supervisory Controls</td>
<td>2-2</td>
<td>125</td>
</tr>
<tr>
<td>Guidelines</td>
<td>3-2</td>
<td>125</td>
</tr>
<tr>
<td>Complexity</td>
<td>4-2</td>
<td>75</td>
</tr>
<tr>
<td>Scope and Effect</td>
<td>5-2</td>
<td>75</td>
</tr>
<tr>
<td>Personal Contacts and Purpose of Contacts</td>
<td>2-a</td>
<td>45</td>
</tr>
<tr>
<td>Physical Demands</td>
<td>8-1</td>
<td>5</td>
</tr>
<tr>
<td>Work Environment</td>
<td>9-1</td>
<td>5</td>
</tr>
</tbody>
</table>

Total 805

A total of 805 points falls within the GS-4 range (655 to 850) on the JFS’s grade conversion table.

Summary

The appellant’s GS-2102 work is evaluated at the GS-6 grade level while her GS-679 work is evaluated at the GS-4 grade level. Based on the application of mixed grade classification principles, the final grade of the appellant’s position is GS-6.

Decision

The position is properly classified as Transportation Assistant, GS-2102-6.