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

Appellants: [Appellant].

Agency classification: File Clerk (OA), GS-305-4

Organization: [Organization]
[Name]
[Name]
[Organization]
Veterans Health Administration
Department of Veterans Affairs
[Location]

OPM decision: File Clerk, GS-305-4

OPM decision number: C-0305-04-04

Ana A. Mazzi
____________________________
Deputy Associate Director
Merit System Audit and Compliance

1/11/2011
____________________________
Date
As provided in section 511.612 of title 5, Code of Federal Regulations (CFR), this decision constitutes a classification 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 5 CFR 511.605, 511.613, and 511.614, as cited 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 decision, it is to be effective no later than the beginning of the fourth pay period after the effective 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 (OPM) location which accepted the appeal.

Decision sent to:

[Appellant]
[Appellant]
[Appellant]
[Appellant]
[Appellant]
[Appellant]
[Appellant]

(each located at:)

[Organization]
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[Location]

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Supervisory Human Resources Specialist (Classification)
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Director
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Introduction

On July 22, 2010, Dallas Oversight of OPM accepted a classification appeal from [Appellant], [Appellant], [Appellant], [Appellant], [Appellant] and [Appellant] and on September 17, 2010, it was transferred to Philadelphia Oversight for adjudication. The appellant’s occupy identical additional positions, hereinafter referred to as position, currently classified as File Clerk (OA), GS-305-4, located in the [Organization], [Name], [Name], [Organization], Veterans Health Administration (VHA), Department of Veterans Affairs (VA) in [Location]. The appellants believe their position should be classified as a Medical Support Assistant (OA), GS-679-5. We received the complete agency administrative report on August 13, 2010, and 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 telephone interviews with the appellants on November 3, 2010, and their supervisor on November 4, 2010, respectively. In reaching our classification decision, we have carefully considered all of the information obtained from the interviews, as well as all information of record provided by the appellant’s and their agency.

General issues

The appellants raise various concerns about the agency’s classification review process (e.g., revising their PD and their request for a desk audit being denied). The appellants also state their supervisor changed the series of their current PD from [number] to [number] in front of them.

In adjudicating this appeal, our responsibility is to make our own independent decision on the proper classification of their position. By law, we must make our decision solely by comparing their current duties and responsibilities to OPM standards and guidelines (5 U.S.C. 5106, 5107, and 5112). Because our decision sets aside all previous agency decisions, the agency’s classification review process is not germane to this decision.

The appellant’s do not agree PD# [Number}, dated May 28, 2009, accurately describes the duties and responsibilities of their position. The appellant’s state the PD does not include nor address all the pertinent and specific duties, as well as the scope of responsibilities needed for this position, to include an extensive knowledge of computer software applications; ability to scrutinize clinical documentation versus administrative documentation; and receiving medical records via e-mail through Adobe pdf files. The appellant’s further state their PD is a vague attempt to assess their job duties without actually knowing what is entailed in assisting the physicians, patients and their peers at the [Organization/Name], including the skills required to scan information and index it properly so there are no delays in providing treatment to veterans; “retiring” patient medical files, and knowledge of legal and medical terminology. Their current supervisor certified the accuracy of the PD.

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 duties and responsibilities which make up the work performed by the employee. Classification appeal regulations permit OPM to investigate or audit a position and decide an appeal based on the actual duties and
responsibilities currently assigned by management and performed by the employee. An OPM appeal decision classifies a real operating position and not simply the PD. This decision is based on the work currently assigned to and performed by the appellants.

A PD must contain descriptive information about the major duties and responsibilities assigned to the position which, when supplemented by other information about the organization’s structure, mission, and procedures, can be classified by one’s knowledge of the occupational field involved and the application of pertinent position classification standards (PCSs), principles, and practices. It is not meant to be a task list of every function performed. After careful review, we find the appellants PD meets the standards of PD accuracy for classification purposes as discussed in section III.E of the Introduction and we incorporate it by reference into our decision.

By law, we must classify positions solely by comparing their current duties and responsibilities to OPM PCS and guidelines (5 U.S.C. 5106, 5107, and 5112). The appellants allude to classification inconsistency based on the grades of other positions. The appellant’s state since health information technology is becoming an increasingly more important aspect of patient care and these duties are incorporated in the medical support field, their classification should be the same as other positions performing these duties. Since comparison to the standards is the exclusive method for classifying positions, we cannot compare the appellant’s current duties to other positions which may or may not be classified properly as a basis for deciding their appeal.

The appellants believe the GS-305 PCS is outdated and inappropriate to apply to their position with the various technical, computer software, and medical terminology knowledge needed to perform their work. The adequacy of grade-level criteria in OPM standards is not appealable (5 CFR 511.607). All OPM GS PCSs are consistent with the grade-level definitions of work established by law. These definitions are based on the difficulty and responsibility of the work at each level and the qualifications required to do that work. All occupations change over time, some more rapidly and profoundly than others, but the fundamental duty and responsibility patterns and qualifications required in an occupation normally remain stable. Therefore, careful application of the appropriate PCS to the work an appellant performs should yield the correct grade for their position. Any of the duties not specifically referenced in the PCS can be evaluated properly by comparison with similar or related duties the PCS does describe, as well as with the entire pattern of grade-level characteristics.

Position information

The [Location] [Organization] is a 72 bed, general medical and surgical facility that provides a full-range of primary care services. The [Organization] provides acute medical, surgical, psychiatric care and both primary and secondary levels of outpatient services to veterans. In addition to primary care services, there are Cardiology and Surgical clinics and specialty clinics for Urology, Optometry, Diabetes, Women’s Health and Mental Health. Other programs and services include Dental Care, a combined Cardio-Pulmonary function lab, Ultrasound, Echocardiography services and an Ambulatory Surgery program.
The appellants’ organization carries out a variety of health information functions related to record retention and records management. Duties include but are not limited to: receipt of records from other [Organization], as well as scanning, indexing, and destruction of health and administrative information. The appellants index every scanned document into a Structured Query Language (SQL) database which is accessible via the Computerized Patient Record System (CPRS) and Graphical User Interface (GUI). The appellants match every scanned document to the correct patient’s CPRS record and the appropriate Text Integrated Utility (TIU) document. They then assign the appropriate name to the document and electronically sign the scanned documents.

When paper documents are received, the appellants ensure all necessary health/administrative information is integrated as appropriate into CPRS using scanning software and hardware. After the information is scanned and indexed, the appellants confirm the information interchange by communicating with clinical and administrative team members as appropriate. The appellants track, retrieve, and perform follow-up activities on health record documents as they are received. They may transfer clinical information to other health care facilities and other third parties. The appellants assist in training clinic and ward program support assistant personnel as well as [Organization] staff in the process of scanning/archiving data: what can be scanned, what should not be scanned and where to locate the scanned document.

The record shows the appellants’ position is designated as a career-ladder position. An incumbent may start at the GS-3 grade level before advancing to the full-performance GS-4 grade level. At the time this appeal was accepted, one of the appellants occupied the GS-3 grade level PD and so her appeal was accepted separately. Once she was promoted to the GS-4 grade level, her appeal was incorporated into this appeal for adjudication.

**Series, title and standard determination**

The agency has assigned this position to the Mail and File Series, GS-305, but the appellant’s request the title and series be changed to Medical Support Assistant (OA), GS-679, because the purpose of the position is to provide scanned medical documentation timely and accurately. They state this makes their position a “direct patient care” administrative position.

However, use of the 679 series is reserved for positions which perform support work in connection with the care and treatment given to patients in wards, clinics or other units of a medical facility and facilitate the work of physicians, physician assistants, nurses, nursing assistants, and other members of the medical facility who provide patient care. Unlike the appellant’s position, GS-679 work entails providing direct patient support functions including but not limited to receiving and relaying incoming and outgoing telephone, intercom, and electronic messages; receiving and directing patients and visitors, answering routine inquiries, and making appropriate referral of questions concerning patients’ conditions; assembling patient records according to prescribed formats; inserting additional forms and charts as necessary, and stamping them with correct patient identification; filing results of treatment in medical records; reviewing patients’ charts and recording a variety of medical data; determining patients’ eligibility for treatment and paid travel expenses; recording physicians’ orders for patients on a variety of records; selecting, completing, and routing requests for patient activities and treatment
procedures; scheduling appointments for patients with other medical services; preparing patient census reports; keeping time and attendance records; ordering and keeping records of supplies; and receiving and distributing mail to medical staff and patients. In contrast, the appellants’ work is not properly characterized as direct patient support since it is limited to the receipt, scanning, indexing and destruction of health and administrative information created by employees in GS-679 and other direct patient care positions.

The appellant’s position is correctly classified to the 305 series. The GS-305 PCS recognizes under Occupational Information the existence of automated filing systems and states neither the mechanical devices nor the operations performed in automated systems involved have affected the basic nature of mail or file work. Automated systems involve the rearrangement of, but no basic change in, basic filing processes. The appellants’ work is directly covered by the GS-305 series since the appellants are responsible for the maintenance and control of health records in an automated filing system environment. They scan and electronically file documents into patient files from agency and non-agency health providers. Their filing work performed within an automated system is encompassed by the 305 series. The title, File Clerk, is the prescribed title for non-supervisory positions in grades GS-1 through GS-5 when file duties are predominant in the position. Therefore, the appellants’ position is properly allocated as File Clerk, GS-305.

The parenthetical title Office Automation (OA), used by the agency in classifying the position, is added to the title when the position requires a fully qualified typist to perform word processing duties. The interviews with the appellants and supervisor show the appellants input data into existing spreadsheets and occasionally produce new ones. The appellants also fill in face sheets or form letters with the service provider’s name, patient’s name and the reason for the notification (e.g., returning documents which cannot be scanned along with a suspense date for the information). The supervisor stated the appellants do not compose letters and the skills of a fully qualified typist are not needed. After careful study of the appellants’ duties and responsibilities, we concur. Therefore, the parenthetical (OA) may not be included in the title.

**Grade determination**

The GS-305 PCS uses the Factor Evaluation System (FES) under which factor levels and accompanying point values are assigned for each of the nine factors, with the total then being converted to a grade level by use of the grade-conversion table provided in the PCS. Under the FES, each factor-level description in a PCS describes the minimum characteristics needed to receive credit for the described level. Therefore, 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 unless the deficiency is balanced by an equally important aspect that meets a higher level. Conversely, the position may exceed those criteria in some aspects and still not be credited at a higher level.

The appellants state their work requires an extensive knowledge of various software applications such as CPRS, GUI, Adobe, Microsoft Excel and Word and that it is essential to have an extensive knowledge of the proper manipulation, use and maintenance of scanning hardware in order to properly scan digital images and paper documents into the patient’s electronic file. As discussed in our grade level analysis which follows, we considered this knowledge in our application of the 305 PCS, specifically in reference to automated filing systems.
The appellants disagree with their agency’s assignment of Levels 1-3, 4-2, 5-1, 8-1 and 9-1, but agree with the agency’s crediting of Levels 2-2, 3-2, 6-1, and 7-1. After careful review, we concur with the agency’s assignment of the undisputed factors and have credited the position accordingly. Therefore our evaluation will focus on Factors 1, 4, 5, 8, and 9.

*Factor 1, Knowledge required by the position*

This factor measures the nature and extent of information or facts that a worker must understand to do acceptable work, such as the steps, procedures, practices, rules, policies, theories, principles, and concepts; and the nature and extent of the skills needed to apply this knowledge.

In their rationale, the appellants state they meet the requirements of the 679 series and warrant a higher grade level because they possess an extensive knowledge of various software applications and the proper manipulation, use and maintenance of scanning hardware in order to properly scan digital images and paper documents, as well as various medical disciplines, specialties and their associated medical terminology required to identify, analyze and categorize the documents received for inclusion into CPRS. The appellants state in their appeal request they are now responsible for verifying the accurate writing, notating and signing of notes to be input into CPRS which was previously completed by the [Organization] physician and nursing staff. They further state an extensive knowledge of grammar rules are necessary to accurately transcribe procedural notes which meet quality and legal standards for inclusion into CPRS. The appellants also state they must scrutinize the medical documentation they receive to determine if it is clinical or administrative documentation and scan it to the appropriate section within the electronic medical record.

At Level 1-3, the highest level described in the PCS, file positions typically require thorough knowledge of the functions performed within the units serviced (e.g., the various operations performed within an accounting unit or the functions performed within an administrative services unit, etc.), thorough knowledge of the subject matter content of the materials being processed, and thorough knowledge of filing systems characterized as complex. This knowledge is used to classify and cross-reference materials in decimal and alphanumeric systems that may be extensively cross-referenced, or when the subject-matter of the materials is overlapping or difficult to discern. In these instances, proper determinations require study of materials to determine specific categories from among many that may be applicable.

The appellants’ position meets but does not exceed Level 1-3. Like Level 1-3, the appellants apply a thorough knowledge of the contents and filing sequence of both medical and administrative records. The appellants use knowledge of records in order to properly index and scan medical and administrative records into CPRS through related scanning hardware and imaging software. Although the electronic patient record system would appear “simple” in that patient records are retrieved either by name or social security number, it may be considered “complex” within the meaning of that term in the standard.

Within the context of an organizational filing system as referenced above, the standard describes cross-referencing as basically involving the examination of a document to determine first the primary subject under which it will be filed and then any subordinate subject breakdowns
necessary for cross-reference purposes. Since this factor measures the knowledge required by
the position being evaluated, the fundamental issue is not the actual process of cross-referencing
but the knowledge required to perform that cross-referencing. Taking this into consideration,
although the CPRS does not require the actual cross-referencing described at Level 1-3, it does
require an equivalent degree of document examination. Individual medical or administrative
documents must be accurately classified (by document/image type, medical specialty, and
procedure) and identified by means of the creation of an electronic note before being scanned
and thus “attached” to the patient record. This requires examining the documents to determine
their proper identification within the system for ease of retrieval by medical personnel. In
addition, the subject matter may be difficult to discern as the documents contain medical
terminology that may not be easily identifiable. These functions are consistent with the overall
intent of Level 1-3 in terms of the nature and extent of information required to perform the work.
Thus, the various knowledges described by the appellants as meeting the requirements for
inclusion into the 679 series, such as knowledge of various software applications, scanning
hardware, medical disciplines and terminology, are properly considered as an integral part of
their GS-305 work and help support evaluation of their work at Level 1-3.

This factor is evaluated at Level 1-3 and 350 points are assigned.

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.

In their rationale, the appellant’s state they meet the requirements of the 679 series and warrant a
higher grade level because they now receive medical records forwarded electronically as pdf files. They must route the medical documentation to designated [Name] Department personnel; examine the documentation to see if it meets [Organization] guidelines then enters accurate locations, dates and times of medical procedures into an index of electronic files for further authorizations. The appellants state the timely assignment of correct title nomenclature and classification designations of medical documents is critical for immediate access and viewing by medical staff and could impact direct patient care and delay third-party billing if not completed timely and accurately. The appellants further state this automated process increases the difficulty and responsibility of their position and they do not occupy a file room clerk position.

At Level 4-2, positions require performance of several related duties involving consideration of
choices of appropriate procedures or actions to be taken in a variety of work situations. There is
generally variety in the materials processed and in the activity required (e.g., recognizing a
variety of types of printed forms and deciding the appropriate filing actions to be taken with
each, proper processing and safeguarding of security classified materials, etc.). Work of this
type also requires a number of steps or processes involving, for example, several types of mail
and recognizing what procedures are appropriate for each type; classifying to appropriate file
categories based on subject-matter content of materials; or searching for missing materials and
locating requested materials when information varies or conflicts.
At Level 4-3, positions require performance of a number of duties involving the full range of file procedures in a work situation where there is typically a great variety in the materials received, great complexity of subject-matter materials and processing actions (e.g., scientific or technical materials, requirement for multiple actions of an independent or sequential nature, etc.). Work of this type involves multiple classifications, multiple indexes, multiple cross-referencing, and special searching when such duties are performed in a work context of overlapping classification categories, diverse and complicated subject-matter content (i.e., legal and technical subject matter in a variety of formats), and recognition of the need for (and taking action to obtain) improvements in records procedures.

Like Level 4-2, the appellants process a wide variety of documents including laboratory, nuclear, ophthalmology and cardiology reports, valuables and belongings worksheets disabled license plate forms, and ionizing radiation registry, and death certificates. The documents being scanned require variations in the procedures applied, and the appellants must be able to recognize different types of reports and use the appropriate scanning procedures for each. The appellants utilize their knowledge of medical terminology to recognize the subject matter of each document. The appellants scan documents received from the [Location] [Organization], other VA facilities, and private sector facilities. They review notes associated with the documents to be scanned. If notes are not provided, the appellants verify documents are for the correct patient and create notes using an automated template for the documents to be scanned. Notes include, for example, document type and type of medical procedure performed. This shows the process the appellants go through in terms of making choices in performing their work which corresponds to Level 4-2. The appellants work in scrutinizing clinical documents versus administrative documents, receiving of medical records via e-mail, and scanning and indexing information properly are illustrative of performing several related duties involving consideration of choices of appropriate procedures typical of GS-305 work at Level 4-2.

The appellants work does not meet Level 4-3 where duties are performed in a work context of overlapping classification categories, diverse and complicated subject-matter content, and recognition of the need for improvements in records processing procedures. The appellants are responsible for entering and properly identifying medical and administrative documents in the system. However, they have no further responsibility for the sorting or organization of materials or for improving records procedures, since these are established by higher organizational levels. The appellants review and scan approximately 100 different medical and 50 different administrative types of documents. Like Level 4-2, the appellants choose a course of action from a variety of approved procedures. Thus, the nature of the system precludes performance of the types of work that would support crediting of Level 4-3.

This factor is evaluated at Level 4-2 and 75 points are assigned.

**Factor 5, Scope and effect**

This factor covers the relationship between the nature of the work; i.e., the purpose, breadth, and depth of the assignment, and the effect of work products or services both within and outside the organization. Effect measures whether the work output facilitates the work of others, provides timely services of a personal nature, or impacts the adequacy of research conclusions. The
concept of effect alone does not provide sufficient information to properly understand and evaluate the impact of the position. The scope of the work completes the picture allowing consistent evaluations, and only the effect of properly performed work is considered.

The appellants state the purpose of their position is to provide scanned medical documentation to medical personnel and defines it as a “direct patient care administrative position.” They also state they meet the requirements of the 679 series and warrant a higher grade level because failing to scan and index medical documentation timely and accurately can adversely impact and delay medical treatment for patients. However, as discussed under Factor 5 of the Primary Standard in the Introduction, only the effect of properly performed work may be considered in the classification of a position.

At Level 5-1, positions are concerned with well-established mail or file functions. Performance facilitates the work performed in the serviced units.

At Level 5-2, positions are concerned with the improvement of methods or procedures affecting the overall efficiency of the mail or file unit, or work that involves determining and selecting appropriate materials to be made available to serviced units for their use. Performance affects the ability of personnel in the serviced units to perform their duties in an accurate manner or provide services to others.

In terms of the scope of the work, the appellants’ position is consistent with Level 5-1, in that the purpose of the appellants work is to provide scanned medical and administrative documentation in a timely and accurate manner to those employees who provide direct patient care. The appellant’s perform their duties in accordance with prescribed methods by following VHA Handbook 1605.1 and 1907.1 health information management as well as Health Information Portability and Accountability Act guidelines on a daily basis. They also reference anatomy and physiology manuals and local [Organization] policies and procedures as needed, as well as the Medical Center Memorandum 001-23, medical documents scanning policy. Like Level 5-1, the approved types of documents that can be scanned have been established and the appellants work within recognized parameters. The materials to be scanned such as records of treatment, Cardiology-Holter Monitor Report, Divorce Decrees, or Marriage Licenses are specific to each patient.

Unlike Level 5-2, the appellants are not responsible for improving file procedures, nor do they determine what materials will be retained in the system since these issues are resolved by others. The effect of their work meets Level 5-2, in that the completeness of the medical records is critical to patient care, thus affecting the quality of the medical services provided. If the appellants fail to accurately scan medical documents in a timely fashion, it could adversely impact and delay medical treatment for the patient. As stated earlier, scanning and indexing medical documentation falls within the coverage of the GS-305 PCS. However, since Level 5-2 is not fully met, Level 5-1 must be assigned.

This factor is evaluated at Level 5-1 and 25 points are assigned.
Factor 8, Physical demands

This factor covers the requirements and physical demands placed on the employee by the work assignment. This includes physical characteristics and abilities, e.g., specific agility and dexterity requirements, and the physical exertion involved in the work, e.g., climbing, lifting, pushing, balancing, stooping, kneeling, crouching, crawling, or reaching. To some extent the frequency or intensity of physical exertion must also be considered, e.g., a job requiring prolonged standing involves more physical exertion than a job requiring intermittent standing.

In their rationale, the appellants state they meet a higher level than Level 8-1 since they move boxes weighing up to forty-five pounds.

At Level 8-1, work is performed primarily while sitting, requiring occasional periods of standing, walking, bending, or carrying light objects.

At Level 8-2, work requires long periods of standing, walking, or bending or requires recurring lifting of materials of moderate weight (under 50 pounds).

The record shows the appellants move boxes weighing up to forty-five pounds from shelves or pallets as they work on the Fee Project when patient care is administered by a non-VA facility with the knowledge of the patient’s primary care physician. Each appellant removes the file folders within the box and scans the documents which meet their established criteria into CPRS and the original documents are placed in shred bins. Documents that do not meet the scanning criteria are placed in one box by each appellant to be sent to the Fee Service for corrections. The supervisor indicated it could take the appellants two or more days to review all the documents within a box. Since moving boxes is not performed on a regular and recurring basis, which must occur in order to assign a particular factor level, the appellants do not fully meet the intent of Level 8-2. Therefore, we are unable to assign a higher factor level and Level 8-1 must be assigned.

This factor is evaluated at Level 8-1 and 5 points are assigned.

Factor 9, Work environment

This factor considers the risks and discomforts in the employee’s physical surroundings, or the nature of the work assigned and the safety regulations required.

In their rationale, the appellants state they meet a higher level than Level 9-1 since they work in a restricted and secure area. They state access is gained by using a pre-approved VA Security Force Key/Card and unauthorized personnel entering the area need to sign in and out and are escorted by [Organization] employee. The appellant’s further state the highly sensitive nature of the medical documentation they handle requires them to follow established security rules and regulations and any breach of security carries a penalty of imprisonment and monetary fines.

At Level 9-1, work is performed in an office setting.
At Level 9-2, work is performed on loading docks or in areas subject to high noise levels or around moving equipment.

The appellants work in an office/file room setting within a restricted and secure room. They allude to working in a high security/highly classified work environment with sensitive information increases the position’s complexity and so a higher factor level should be assigned. However, this factor considers the risks and discomforts in the physical surroundings and/or any safety regulations required in performing work assignments. Working within a classified environment has no impact of the evaluation of this factor. The record shows the appellants work in an office setting typical of Level 9-1.

This factor is evaluated at Level 9-1 and 5 points are assigned.

Summary

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Total Points 740

The total points assigned to the appellants’ position equals 740. According to the GS-305 PCS grade-conversion table, positions with total point values between 655 and 850 are properly graded at the GS-4 level.

Decision

The appellants’ position is properly classified as File Clerk, GS-305-4.