

**CLASSIFICATION APPEAL DECISION
U.S. OFFICE OF PERSONNEL MANAGEMENT
CHICAGO OVERSIGHT DIVISION**

APPELLANT: **[appellant's name]**

POSITION NUMBER: 079710

AGENCY CLASSIFICATION: Claims Clerk (OA), GS-998-5

POSITION LOCATION: Department of Veterans Affairs
Medical Center
Administrative Services
Medical Administration Service
Fee Services Section
[activity location]

OFFICE OF PERSONNEL
MANAGEMENT DECISION: **Claims Clerk (OA), GS-998-5**

OPM DECISION NUMBER: C-0998-05-01

This appellate decision constitutes a certificate that is mandatory and binding on administrative, certifying, payroll, and accounting offices of the Government. It is the final administrative decision on the classification of the position, not subject to further appeal. It is subject to discretionary review only under the conditions and time limits specified in Part 511, Subpart F, of Title 5, U.S. Code of Federal Regulations.

/s/

FREDERICK J. BOLAND
CLASSIFICATION APPEALS OFFICER

June 25, 1997

DATE

DECISION TRANSMITTED TO:

[appellant's name and address]

[name of union official]
Executive Vice President
AFGE Local [identifying number]
[activity address]

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

[name]
Chief, Human Resources
Management Service
VA Medical Center
[servicing activity address]

INFORMATION CONSIDERED

- ▶ Appellant's fax of March 7, 1997, and earlier correspondence.
- ▶ Agency letter dated April 10, 1997, and its enclosures.
- ▶ Copy of the official description of the appellant's position.
- ▶ Copy of the official description of the appellant's supervisor's position.
- ▶ Copy of the appellant's performance standards.
- ▶ Copy of the organization chart for the Medical Administration Service.
- ▶ Audit of the appellant's position by telephone discussion with her on May 23, 1997, and with her supervisor on June 23, 1997.

EVALUATION CRITERIA

- ▶ OPM position classification standard for the *Claims Clerical, GS-998 Series*, dated June 1966

INTRODUCTION

The appellant disputes the grade level assigned to her position. She is assigned to position number 079710, which is located in the [location] Unit of the Fee Services Section, Department of Veterans Affairs, Medical Center, [location]. She indicates that responsibility for supporting the [state name] Veterans State Home has been incorporated into her duties, which already involved dental care requests, unauthorized treatment claims, and timekeeping duties. She feels her combined assignments are complex and profoundly intricate. She asks that her position be upgraded because she feels there is a multitude of complex transactions involved in supporting the [state name] Veterans State Home program.

JOB INFORMATION

The appellant is one of about ten employees in the Fee Services Section, which consists of a GS-7 Supervisory Claims Clerk, a GS-6 Lead Claims Clerk, five GS-5 Claims Clerks, and three GS-4 Claims Clerks. She is responsible for several duties concerned with paying for the care of veterans at both the Domiciliary and Nursing Home located at the [state name] Veterans State Home. These include tracking the daily movement and census of the patients at the home, verifying eligibility for admission, and reconciling the home's quarterly request for payment. She also reviews outpatient requests for dental care, determining eligibility and establishing a chart and location for the dental treatment. She also examines claims for unauthorized medical treatment and develops the information necessary for physician review. About 75 percent of her time is devoted to claims and 25 percent to reconciling requests for payment. Unauthorized treatment claims demand a substantial amount of her time (at least 25 percent).

As a collateral duty, she has timekeeping responsibility for employees in her section. She is expected to be proficient (at least 40 words per minute) in typing and in the use of word processing and other office software.

ANALYSIS AND FINDINGS

Series and Title Determination

The appellant's principle duties (those occupying the majority of her time) fall within the type of work covered by the Claims Clerical, GS-998, series, which includes positions that involve clerical work in the examination, review, or development of claims by or against the Government. Such positions include those concerned with (a) examining and developing claims cases for adjudication, (b) determining and verifying entitlement to benefits where the legal issues are clear and the examination process is routine, (c) developing and verifying post-entitlement actions regarding established beneficiaries, and (d) answering general or routine inquiries about benefits or claims filing activities. The work, like the appellant's, requires ability to apply established regulations and procedures relative to claims examining processes.

Her secondary duties fall within the Voucher Examining, GS-540, series, which covers the examination for accuracy, legality, compliance with regulations, and justification of invoices and other requests for payment for services provided to the Government. The position's paramount knowledge, purpose, organizational function, line of promotion, and recruitment source all relate to claims examining more than voucher examining. Therefore, her position is more appropriately assigned to the GS-998 series.

The prescribed title for positions in the GS-998 series is *Claims Clerk*. Because the position requires typing proficiency and significant knowledge of office automation systems (e.g., word processing and other office software) the parenthetical Office Automation or OA is added to the title. Accordingly, the appellant's position is properly titled *Claims Clerk (OA)*.

Grade Determination

The appellant's claims related duties are evaluated using the Claims Clerical, GS-998, classification standard. Her automation duties are graded against the Office Automation Grade Evaluation Guide. However, her automation duties cannot be higher graded than her claims duties, unless they involve a wide variety of nonstandard automation problems or assignments requiring knowledge of *advanced* functions of more than one type of software, which they do not. Similarly, her payment duties, which are evaluated against the Voucher Examining, GS-540, standard, cannot be higher graded unless they involve, among other things, assessing many issues such as the variability of contract provisions, different bases of payment, types of documentation required for payment, etc., which they do not. Her timekeeping duties, evaluated against the Civilian Pay, GS-544, standard, are characteristic of work lower graded than her claims duties. Consequently, only her claims work is addressed in detail in this decision.

The position classification standard for the Claims Clerical, GS-998, series is written in narrative format. It identifies three factors for grading positions: Nature of Claims Work, Judgment Exercised, and Supervision Received.

Nature of Claims Work

This factor deals with the functional claims clerical work environment, focusing on such aspects as work procedures, documents used, and sources contacted characteristic of each grade level. At grades GS-4 and 5, the standard includes descriptions of work in three specialized areas: development, entitlement, and post-entitlement. The majority of the appellant's duties concern entitlement.

The appellant feels that tracking and monitoring the whereabouts of some 554 veterans on a daily basis (which she indicates requires the continual creation, updating, and purging of records) adds significantly to the amount and variety of her work. She also feels it introduces a greater responsibility, important to the proper payment for veterans care, that warrants the assignment of a higher grade.

At the GS-5 level, she is already credited with performing more difficult claims clerical work, with greater responsibility for making difficult judgmental determinations requiring further development of claims materials, and with applying a broader scope of claims knowledge than clerks who otherwise perform a full range of clerical claims duties. Her review of unauthorized treatments, for example, requires her to determine not only basic entitlement to benefits, but whether more difficult criteria were met as well. These include whether the disease or injury requiring treatment is service-connected, whether emergency treatment was necessary, whether delaying treatment to secure approval would have been hazardous, whether Government facilities were available, etc. She must develop information from a wide variety of sources to determine entitlement or non-entitlement under these criteria. She obtains information from doctors regarding the medical aspects of such claims and uses fee schedules to determine reasonable cost of treatment and facilities furnished. Based on the evidence she develops, she determines whether payment of treatment lacking prior authorization is allowable.

The GS-5 level is the highest graded work typically encountered in clerical claims processing. However, a higher grade may be credited if the work significantly exceeds the GS-5 level in all respects. For example, GS-6 Claims Clerks regularly review problem cases that fully experienced clerks have trouble resolving. They perform a more extensive and detailed examination of claims, exercise a higher degree of judgment, and possess a more thorough knowledge of a wider range of laws, rules, and regulations than GS-5 Claims Clerks.

To support her claims, the appellant cites duties such as reviewing forms on State Home residents to determine their eligibility for benefits, updating a census of eligible residents from gain/loss reports, checking records to verify proper counts, monitoring payments against quarterly allocation levels, retrieving information by computer for veterans requesting dental treatment, determining eligibility and a location for their treatment, sending letters of denial, etc. Such duties do not exceed the GS-5 level and are largely equivalent to those performed by GS-4 clerks. For example, GS-4 Claims Clerks

establish the claimant's period of military service, the type of discharge received, and the existence of a service-connected disability by verifying claims against existing agency records and requesting corroborating data from the office having jurisdiction over the veteran's records. GS-4 Voucher Examiners establish running balance journals, tag expenses with accounting codes, prepare daily, weekly, and monthly interest lists, compute prices, extensions, costs, and discounts, etc.

Other factors the appellant cites, such as volume and variety of work are not directly considered in classification. Performance awards typically recognize unusual work volume and variety is a normal part of Claims Clerk assignments. Determining entitlement for more than one type of benefit does not by itself enhance a position's grade level.

We evaluate this factor at the GS-5 level.

Judgment Exercised

This factor is concerned with Claims Clerks' determinations and the extent to which the clerks are responsible for taking action on their own cognizance through the exercise of job related knowledges and abilities.

At the GS-5 level, the appellant is already credited with exercising the greater judgment demanded in determining entitlement to payment for unauthorized treatment. She is credited with exercising a good working knowledge of the laws, rules, and regulations governing entitlement and of the types of documentation necessary to demonstrate eligibility. None of her work significantly exceeds this level. She has no claims work that regularly demands more extensive and detailed examination of claims than already credited, that would require a higher degree of judgment than she exercises in reviewing unauthorized treatment requests, or that demands a more thorough knowledge of a wider range of laws, rules, and regulations than typical of the GS-5 level.

We evaluate this factor at grade GS-5.

Supervision Received

This factor is concerned with the control exercised over Claims Clerks' work in terms of assignments, supervisory assistance and guidance, and work review. Three types and levels of supervisory control (A-C) are described.

As at Level C, the appellant receives supervisory assistance on unusual or unprecedented claims work problems, on questions where the application of regulations is subject to a wide variety of interpretations, and in situations where legislation or regulations appear to be in conflict. She carries out recurring work independently. Her completed work is reviewed on a spot-check basis to ensure timely accomplishment, accuracy, overall effectiveness, and conformance with prescribed rules and regulations.

We evaluate this factor at Level C, which equates to the general technical supervision level demanded at GS-5.

Decision

The appellant's highest graded work meets the GS-5 criteria for all three factors described in the standard, but does not significantly exceed them. Therefore, her position is appropriately classified as Claims Clerk (OA), GS-998-5.