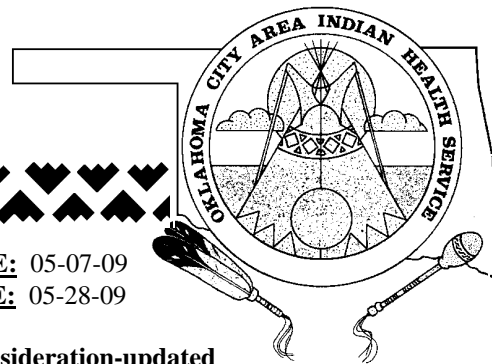


U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
OKLAHOMA CITY AREA INDIAN HEALTH SERVICE
DIVISION OF HUMAN RESOURCES



VACANCY ANNOUNCEMENT: SER 09-0212R-HAS

OPENING DATE: 05-07-09

POSITION: Medical Support Assistant (OA), GS-679-5

CLOSING DATE: 05-28-09

(One Full-Time, Time-Limited Appointment, NTE 13 months)

Readvertised. All who applied to SER-09-0212-HAS will receive automatic reconsideration-updated or missing documents may be submitted if needed.

DUTY LOCATION: Haskell Indian Health Center, Lawrence, Kansas

STARTING SALARY: May be adjusted on Present/Former Federal Employees

GS-5: \$30,772 per annum

PROMOTION POTENTIAL: None Beyond GS-5

RELOCATION EXPENSES: Not Authorized

SUPERVISORY/MANAGERIAL: No

AREA OF CONSIDERATION: IHS WIDE

DESCRIPTION OF ASSIGNMENT: This position is located in the Third Party Billing Office, Haskell Indian Healthcare Center. Responsible for analyzing and maintain a portion of the total billing operation for third party programs. Acts as an advocate for the HIS in the collection of alternate resources. Responds to third part requirements on post-payment reviews, exclusions, denials and appeals. Actively performs audits and medical reviews to ensure documentation and accountability of all health insurance claims submitted for payment by conduction random sample reviews. Verifies that medical records contain proper documentation in accordance with regulations. Searches and gathers the clinical management of individual patient's condition and diagnosis to generate volumes and CPT coding system. Verbally communicates with outside entities to identify problems with applications and operating systems and follows up on suggested methods. Maintains communications with the Section Chief to ensure that expenditures of funds collected from third party insurance meet the conditions and requirements. Compiles and types letters of correspondence regarding third part insurance claims. Maintains a current checking system on each patient receiving medical care. Maintains and prepares a current quick reference manual for the purpose of typing medical claims and correspondence. Prepares and compiles the authorization for release of medical information. Searches and retrieves individual patient health records. Completes the required billing forms and reviews for accuracy the billing and coding information on them prior to submission. Ensures that all forms are submitted and adequately reflect the services rendered.

INDIAN PREFERENCE: In the filling of this position by appointment, promotion, transfer, reassignment, reinstatement, or any other personnel action, we are required by law to give absolute preference in selection to qualified Indian preference candidates. Eligibility will be determined from current Indian Health Service Policy. (See APPLICATION FORMS for information on how to claim Indian Preference)

EQUAL EMPLOYMENT: Except for Indian Preference, consideration will be made without regard to any non-merit factor such as race, color, religion, sex, sexual orientation, national origin, politics, disabilities, marital status, age, or membership or non-membership in any employee organization.

REASONABLE ACCOMMODATIONS: Reasonable accommodation is provided to applicants with disabilities, except when so doing would impose an undue hardship on the Indian Health Service. If you need a reasonable accommodation for any part of the application and hiring process, please notify the agency. The decision on granting reasonable accommodation will be made on a case-by-case basis.

SELECTIVE SERVICE CERTIFICATION: If you are a male born after December 31, 1959, and you want to be employed by the Federal Government, you must (subject to certain exemptions) be registered with the Selective Service System.

WHO MAY APPLY:

MERIT PROMOTION PLAN (MPP) CANDIDATES: Applications will be accepted from status eligibles (e.g. reinstatement eligibles and current permanent employees in the competitive Federal service), from current IHS employees who are eligible for Indian Preference, and from individuals who are eligible for excepted appointment in IHS under some other authority (e.g. handicapped authority, etc.) Those MPP candidates eligible for Indian Preference, who so desire, may also apply under ESEP provisions by indicating on their application, "Consideration under both MPP and ESEP". Other than above, non-status eligibles are not included in the area of consideration.

Under the Veterans Employment Opportunities Act (VEOA), veterans who are preference eligibles or who have been separated from the armed forces under honorable conditions after 3 years or more of continuous active service may apply for permanent positions as an MPP candidate; however veterans' preference is not a factor in these appointments. Candidates must submit a copy of their DD-214 or other proof of eligibility.

EXCEPTED SERVICE EXAMINING PLAN (ESEP) CANDIDATES: Applications will be accepted from individuals entitled to Indian Preference who wish consideration for excepted appointment in IHS, under the authority of 5 C.F.R., Part 213, Schedule A 213.3116(B)(8). (See APPLICATION FORMS for information on how to claim Indian Preference).

This position is in a Tobacco-Free Environment

ADDITIONAL SELECTIONS OF CANDIDATES MAY BE POSSIBLE WITHIN 90 DAYS FROM DATE THE CERTIFICATE OF

ELIGIBLES IS ISSUED FROM THE ANNOUNCEMENT, FOR FILLING ADDITIONAL SIMILAR VACANCIES.

To Claim **Veterans' Preference** – applicants must submit a copy of their DD-214 or other proof of eligibility. Veterans with service connected disability and others claiming 10 point preference, must submit a completed SF-15, “Application for 10-Point Veterans' Preference”, with all supporting documents. For more specifics on all Veterans employment issues such as Veterans' preference or special appointing authorities, please refer to this hyperlink: VetsInfoGuide at: <http://www.opm.gov/veterans/html/vetguide.asp>

CAREER TRANSITION ASSISTANCE PLAN (CTAP) /INTERAGENCY CAREER TRANSITION PLAN (ICTAP): Surplus or displaced employees covered by the U.S. Department of Health & Human Services CTAP program or the ICTAP program for all agencies, may apply and will be given special selection priority if determined to be eligible and well qualified. Well qualified is defined as meeting all education, experience, knowledge's, skills & abilities (KSA's) with a score in the above average range of a four-level crediting plan for all KSA's. For information on how to apply and required proof of eligibility, please refer to these hyperlinks: for **CTAP** at: <http://www.ihs.gov/JobCareerDevelop/JobAtIHS/doc/ctap.doc>, and for **ICTAP** at <http://career.psc.gov/chpublic/ictap.html>.

CONDITIONS OF EMPLOYMENT:

1. One Full-Time, Time-Limited Appointment, NTE 13 months. Agency has option of extending Time-Limited appointments for up to a maximum of four years.
2. **IMMUNIZATION REQUIREMENT**-In accordance with the IHS Employee Immunization policy, selectee will be required to be immunized against measles and rubella by providing documentation/proof of immunity to measles and rubella prior to entrance on duty. Exceptions are persons born before 1957 who are not required to take the measles vaccine or provide proof of immunity. Special consideration may be allowed to individuals who are allergic to a component of vaccine or have a history of severe reaction to a vaccine or who are currently pregnant. This applies to candidates for positions in any Service Unit or any Area Office position which requires regular work at a Service Unit.
3. In accordance with the Child Care Services Act, applicants must complete the attached addendum and submit it to the Human Resources Office with their application.

NOTE: PERSONS WHO SUBMIT INCOMPLETE APPLICATIONS WILL BE GIVEN CREDIT ONLY FOR THE INFORMATION THEY PROVIDE AND MAY NOT, THEREFORE, RECEIVE FULL CREDIT FOR THEIR VETERANS' PREFERENCE, INDIAN PREFERENCE, EDUCATION, TRAINING AND/OR EXPERIENCE. All application forms are subject to verification. Therefore, careful attention should be given to the information provided. Fraudulent statements or any form of misrepresentation in the application process could result in loss of consideration for this position and/or a determination of unsuitability for Federal employment.

LEGAL AND REGULATORY REQUIREMENTS: Candidates must meet all requirements cited in the following “QUALIFICATIONS REQUIRED” and “TIME-IN-GRADE REQUIREMENTS” sections within 30 days after the closing date of this announcement.

QUALIFICATION REQUIREMENTS

All applicants will be rated in accordance with the Office of Personnel Management (OPM) Qualification Standards Handbook; however, any Time-In-Grade requirements will not apply to ESEP applicants. Your description of work experience, level of responsibility and accomplishments will be used to determine that you meet these requirements.

QUALIFICATIONS REQUIRED:

GS-5: One (1) year of *Specialized Experience* equivalent to at least the GS-4 grade level **OR** Four (4) years of education above high school.

Specialized Experience: Experience that equipped the applicant with particular knowledge, skills, and abilities (KSAs) to perform successfully the duties of the position, and that is typically in or related to the position to be filled. Experience and knowledge of medical records procedures and methods.

TYPING/OFFICE AUTOMATION (OA) REQUIREMENTS:

FEDERAL EMPLOYEES (PERMANENT AND THOSE IN TEMPORARY APPOINTMENTS OVER 30 DAYS) - Presently in a position titled with the word “Typing”, “Steno”, or “OA”. Typing Performance Test results or self-certification will not be required, if a copy of the latest SF-50 is submitted indicating a current title of Typing, Steno or OA.

ALL OTHER APPLICANTS - One of the following must be submitted with your application indicating possession of the required minimum standard typing skill based on a five (5) minute test (40 words per minute with three (3) or fewer errors):

1. **Acceptable Typing Performance Test Results**, not more than three years old and in the form of a copy of an Office of Personnel Management Notice of Rating or test certification from any State Employment Office, or Business or Vocation School, American Indian Education Training and Employment Center. Test results without date, signature of official administering test, typing speed, and number of errors cannot be considered, which will result in an ineligible rating.

OR

2. **Self-Prepared Certification Statement:** Applicants may self-certify their proficiency by submitting a self-certification statement with their application, which must include wpm, original signature and date. **OR**

3. **Self-Certification Statement:** Applicants may also self-certify their proficiency by completing and submitting the attached SELF-CERTIFICATION STATEMENT with their application.

SUBSTITUTION OF EDUCATION FOR EXPERIENCE: may be allowed in accordance with the Office of Personnel Management Qualification Standards Handbook or IHS Excepted Service Qualification Standards, whichever is applicable.

EVALUATION METHODS: When required by Personnel Regulations, an evaluation will also be made to the extent to which experience, education, training, self-development, outside activities, and/or awards demonstrate that basically qualified applicants possess the Ranking KSA's described below. This will determine the Highly qualified applicants among the Basically qualified eligibles. Measurement of possession of the KSA's will be accomplished through review of the Application forms, performance appraisals (MPP candidates only), the Narrative Statement related to the KSA's, employment interviews and reference check results.

Ranking KSA's:

1. Knowledge of third party billing procedures and availability of health resources and programs.
2. Skill in basic accounting methods to assist with monthly reports.
3. Skill in use of electronic systems to provide general clerical office support.
4. Ability to communicate efficiently both orally and in writing.

APPLICATION PROCEDURES

SUBMIT APPLICATION TO THE FOLLOWING ADDRESS, Oklahoma City Area Indian Health Service, Southeast Region Human Resources Office, 701 Market Drive, Oklahoma City, OK 73114. All applications become property of the Division of Human Resources and will not be returned. Therefore, all original documents and the completed application forms should be duplicated before being submitted. **ALL APPLICATIONS AND FORMS MUST ACTUALLY BE RECEIVED IN HUMAN RESOURCES BY 4:30 P.M. ON THE CLOSING DATE. ELECTRONICALLY FILED APPLICATIONS (email attachments) WILL BE ACCEPTED. FAXED APPLICATIONS WILL NOT BE ACCEPTED.** We do not fax vacancy announcements. For further information or application forms contact the Southeast Region Human Resources Office at 918-207-3701. Forms may also be available at nearest IHS facility. Vacancy announcements may also be downloaded from the OPM Website - USAJOBS at <http://www.usajobs.opm.gov> or IHS Website at <http://www.ihs.gov>. The IHS Website has current vacancy locations listed.

EMAIL APPLICATIONS: These applications must be sent as an email attachment to: aov@ihs.gov. The Vacancy Announcement Number must be included in the subject line of the e-mail. Additional required forms may be sent as e-mail attachments or mailed as hard copies. Application materials provided by different means must be cross-referenced so they may be combined at the Human Resources office. Applicants are responsible for ensuring that application materials are formatted in a manner that will transmit successfully.

APPLICATION FORMS LISTED BELOW MUST BE SUBMITTED AND INDIVIDUALLY IDENTIFIED BY ANNOUNCEMENT # SER 09-0212R-HAS

1. **The Federal Government does not require a standard application form for most jobs, but certain information is needed to evaluate your qualifications and determine if you meet legal requirements for Federal employment.** Applicants must submit one of the following: (1) OF-612 (Optional Application for Federal Employment), (2) Resume, or (3) any other written application format. For (2) and (3) see "ADDITIONAL INFORMATION REQUIRED FOR RESUMES AND" section below. Position Descriptions will not be accepted.
2. **"Declaration for Federal Employment"- OF-306 (revised January 2001)**, must be fully completed and submitted with current dated signature to determine your suitability for Federal employment, to authorize a background investigation, and to certify the accuracy of all the information in your application. **If you make a false statement in any part of your application, you may not be hired; you may be fired after you begin work; or you may be fined or jailed.** Form may be downloaded from: the IHS Human Resources Website at <http://www.ihs.gov/NonMedicalPrograms/DHR/index.cfm?module=applicants>.
3. **Verification of Indian Preference:** If claiming Indian Preference, applicants must submit a copy of a properly completed and signed Bureau of Indian Affairs (BIA) certification form, 4432, "Verification of Indian Preference for Employment in BIA and IHS". Current employees with acceptable proof (as identified above) on file in their Official Personnel Folder are still required to submit a copy of the required BIA form 4432 with their applications. **Indian Preference will not be given unless the BIA form 4432, as previously explained, is attached to the application/resume.**
4. The attached "Addendum to Declaration for Federal Employment (IHS) in Child Care and Indian Child Care Worker Positions" for Civil Service and Commissioned Corps applicants. This OMB Approved form No. 0917-0028 (expires 2/28/09) is available at nearest IHS Facility, and must be fully completed and submitted with current dated signature. Form may also be downloaded from the IHS HR Website at: <http://www.ihs.gov/NonMedicalPrograms/DHR/Documents/ApplicantInfo/PL101-630.pdf>.
5. Copy of latest Personnel Action (SF-50), if a current or former Federal Employee, or if requesting Reinstatement Eligibility, the SF-50 proof of Career or Career-Conditional Status must be submitted.
6. If claiming Veterans' Preference or eligibility for VEOA or other special appointing authority for Veterans, a copy of all DD-214 forms, one for each period of service, and if claiming 10-point Veterans' preference, a completed SF-15 with all supporting documents.
7. A copy of your most recent performance appraisal (required for current Federal employees).
8. Narrative Statement, related to the Quality Ranking Knowledge's, Skills, and Abilities (KSA's) as outlined in Evaluation Methods.
9. A copy of college transcript(s), listing the college courses and credits earned, is required in order to receive appropriate credit for education. When allowed by Qualification Standards, copies of training certificates (non-college) must be submitted for appropriate credit. Although a

transcript is always preferred, a list of courses and credit hours earned is sufficient at the time of application, however, by the time of appointment an appointee must provide an official college transcript (not a copy).

10. To request CTAP/ICTAP special selection priority, you must submit a copy of the RIF separation notice, Certification of Expected Separation (CES) or Notice of Proposed Separation for declining a Directed Reassignment or Transfer of Function outside the local commuting area.
11. Proof of typing proficiency is required as indicated under the "TYPING/OFFICE AUTOMATION (OA) REQUIREMENTS" in the qualification requirements section.

ADDITIONAL INFORMATION REQUIRED FOR RESUMES AND OTHER APPLICATION FORMATS:

Resumes or other application formats must contain all of the information listed below in sufficient detail to enable the Division of Human Resources to make a determination that you have the required qualifications for the position. Applicants for positions in some occupational series must meet certification, licensure, or registration requirements, if required by law, in addition to meeting experience and/or educational requirements. SPECIFICALLY, THE INFORMATION PROVIDED UNDER #6 (HIGH SCHOOL), #7 (COLLEGES AND UNIVERSITIES), #8 (WORK EXPERIENCE), AND #10 (JOB-RELATED TRAINING) WILL BE USED TO EVALUATE YOUR QUALIFICATIONS FOR THIS POSITION. FAILURE TO INCLUDE ANY OF THE INFORMATION LISTED BELOW MAY RESULT IN LOSS OF CONSIDERATION FOR THIS POSITION. **ADDITIONAL INFORMATION WILL NOT BE SOLICITED BY THIS OFFICE.**

1. Announcement Number, Title and Grade of the job for which you are applying.
2. Full Name, Mailing Address (with Zip Code) and Day and Evening Phone Numbers (with Area Codes).
3. Social Security Number.
4. Country of Citizenship.
5. Highest Federal civilian grade held (give Job Series and Dates held).
6. High School - Name, City, State (Zip Code if known), and date of Diploma or GED.
7. College and University Credit/Degrees - Name, City, State (Zip Code if known), Majors, Type and Year of any Degrees received (if no Degree show Total Semester or Quarter Hours earned).
8. Work Experience (paid and non-paid) - Job Title (include series and grade if Federal job), Duties and Accomplishments, Employer's Name and Address, Supervisor's Name and Phone Number, Starting and Ending Dates (month, day and year), Hours Per Week, and Salary.
9. Indicate if we may contact your current Supervisor.
10. Job-related Training Courses, Skills, Honors, Awards, Special Accomplishments.

SELECTION FOR THIS POSITION WILL BE IN ACCORDANCE WITH THE INDIAN PREFERENCE POLICIES OF THE INDIAN HEALTH SERVICE AND THE OKLAHOMA CITY AREA. CANDIDATES, IF CLAIMING INDIAN PREFERENCE, MUST FURNISH THE APPROPRIATE DOCUMENTATION AS EXPLAINED UNDER "APPLICATION PROCEDURES" OR WILL BE CONSIDERED AS A NON-INDIAN CANDIDATE .

RECRUITMENT CASE FILE CONTACT:

/s/ Deborah Vance

Deborah Vance
Human Resources Specialist
(JR# 84697, 52# 09-0826)

DVANCE/dsv/050609/H:\HR\staff\SER-09-0212R-679-4.doc

Item 15a. Agency Specific Questions

Name: _____ Social Security Number: _____

(Please print)

Job Title in Announcement: Medical Support Asst (OA) Announcement Number: SER-09-0212R-HAS

Section 231 of the Crime Control Act 1990, Public Law 101-647, requires that employment applications for Federal child care positions contain a question asking whether the individual has ever been arrested for or charged with a crime involving a child and for the disposition of the arrest or charge.

Section 408 of the Miscellaneous Indian Legislation, Public Law 101-630, contains a related requirement for positions in the Department of Health and Human Services that involve regular contact with or control over Indian children. The agency must ensure that persons hired for these positions have not been found guilty of or pleaded nolo contendere or guilty to certain crimes.

To assure compliance with the above laws, the following questions are added to the Declaration for Federal Employment:

1) Have you ever been arrested for or charged with a crime involving a child? YES _____ NO _____

[If AYES@, provide the date, explanation of the violation, disposition of the arrest or charge, place of occurrence, and the name and address of the police department or court involved.]

2) Have you ever been found guilty of, or entered a plea of nolo contendere (no contest) or guilty to, any felonious or misdemeanor offense under Federal, State, or tribal law involving crimes of violence; sexual assault, molestation, exploitation, contact or prostitution; or crimes against persons; or offenses committed against children? YES _____ NO _____

[If AYES@, provide the date, explanation of the violation, disposition of the arrest or charge, place of occurrence, and the name address of the police department or court involved.]

I certify that (1) my response to these questions is made under penalty of perjury, which is punishable by fines of up to \$2,000 or 5 years imprisonment, or both; and (2) I have received notice that a criminal check will be conducted. I understand my right to obtain a copy of any criminal history report made available to the Indian Health Service and my right to challenge the accuracy and completeness of any information contained in the report.

Applicant=s Signature (sign in ink) _____ Date _____

Public Burden Statement: In accordance with Paperwork Reduction Act (5 CFR 1320.8 (b)(3), a Federal agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Respondents must be informed (on the reporting instrument, in instructions, or in a cover letter) the reasons for which the information will be collected; the way the information will be used to further the proper performance of the functions of the agency; whether responses to the collection of the information are voluntary, required to obtain a benefit (citing authority), or mandatory (citing authority); and the nature and extent of confidentiality to be provided, if any (citing authority). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the necessary data, and completing and reviewing the collection information. Send comments regarding the burden estimate or any other aspect of this collection of information to the IHS PRA Information Collection Clearance Staff, 12300 Twinbrook Parkway, Suite 450, Rockville, MD 20852. Please do not send completed data collection instruments to this address.

FORM APPROVED: O.M.B. NO. 0917-0028

Expires 02/28/2009

DEPARTMENT OF HEALTH AND HUMAN SERVICES
INDIAN HEALTH SERVICE
OKLAHOMA CITY AREA OFFICE

SELF-CERTIFICATION STATEMENT

In addition to meeting experience or education requirements, applicants must show possession of the following skill:

40 WORDS PER MINUTE TYPING SPEED WITH THREE (3) OR FEWER ERRORS

This position requires the services of a fully qualified typist. Applicants electing to self-certify their typing speed must include in the application, an appropriate self-certification statement, or they will be rated ineligible and receive no further consideration.

EACH APPLICANT MUST COMPLETE SELF-CERTIFICATION OF QUALIFICATIONS.

Please submit a self-certification statement with your application. You may submit the following statement or a similar statement.

I certify that I can type 40 words per minute, with no more than three (3) errors.

APPLICANT'S SIGNATURE: _____ DATE: _____