

NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) LUNSFORD, ERIN MICHELLE	2. Social Security Number (b)(6)	3. Date of Birth (b)(6)	4. Effective Date 07/17/2022
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FIRST ACTION		SECOND ACTION	
5-A. Code 170	5-B. Nature of Action EXC APPT	6-A. Code	6-B. Nature of Action
5-C. Code Y7M	5-D. Legal Authority SCH C, 213.3316. AGENCY- UNIQUE SCHEDULE C AU	6-C. Code	6-D. Legal Authority
5-E. Code ZLM	5-F. Legal Authority OPM FORM 1019 DATED 06-30-2022	6-E. Code	6-F. Legal Authority

7. FROM: Position Title and Number	15. TO: Position Title and Number SPECIAL ASSISTANT PD:HHS391 POSITION:00481971
8. Pay Plan	16. Pay Plan GS
9. Occ. Code	17. Occ. Code 0301
10. Grade or Level	18. Grade or Level 11
11. Step or Rate	19. Step or Rate 01
12. Total Salary	20. Total Salary/Award \$74,950.00
13. Pay Basis	21. Pay Basis PA
12A. Basic Pay	20A. Basic Pay \$56,983.00
12B. Locality Adj.	20B. Locality Adj. \$17,967.00
12C. Adj. Basic Pay	20C. Adj. Basic Pay \$74,950.00
12D. Other Pay	20D. Other Pay \$0
14. Name and Location of Position's Organization	22. Name and Location of Position's Organization OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES OFFICE OF THE ASSISTANT SECRETARY FOR LE WASHINGTON DC USA

EMPLOYEE DATA

23. Veterans Preference (b)(6)	24. Tenure 3	25. Agency Use	26. Veterans Preference for RIF (b)(6)
27. FEGLI (b)(6)	28. Annuitant Indicator (b)(6)	29. Pay Rate Determinant (b)(6)	
30. Retirement Plan (b)(6)	31. Service Comp. Date (Leave) (b)(6)	32. Work Schedule F FULL TIME	
33. Part-Time Hours Per Biweekly Pay Period			

POSITION DATA

34. Position Occupied 2	35. FLSA Category E	36. Appropriation Code 21990365	37. Bargaining Unit Status 8888
38. Duty Station Code 110010001		39. Duty Station (City - County - State or Overseas Location) WASHINGTON DIST COLUMBIA DC USA	

40. Agency Data	41.	42.	43.	44. PAR NUMBER:
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45. Remarks
 FEDERAL DENTAL AND VISION PROGRAM (FEDVIP): (b)(6)
 (b)(6) TO OBTAIN ADDITIONAL INFORMATION AND TO ENROLL, VISIT WWW.BENEFEDS.COM. ONLINE ENROLLMENT IS MANDATORY.
 APPOINTMENT IS INDEFINITE.
 APPOINTMENT AFFIDAVIT EXECUTED 07-18-2022.
 CREDITABLE MILITARY SERVICE: (b)(6)
 PREVIOUS RETIREMENT COVERAGE: (b)(6) (b)(6) (b)(6)
 (b)(6)
 (b)(6)
 FEDERAL EMPLOYEES' HEALTH BENEFITS (FEHB): (b)(6) SEND YOUR COMPLETED SF-2809 TO ERD.NEWEMPLOYEEORIENTATION@HHS.GOV FOR PROCESSING. TO COMPARE PLANS AND OBTAIN ADDITIONAL INFORMATION, VISIT WWW.OPM.GOV/INSURE FLEXIBLE SPENDING ACCOUNT (FSA): (b)(6)
 (b)(6) (b)(6) (b)(6)
 (b)(6) TO OBTAIN ADDITIONAL INFORMATION AND TO ENROLL, VISIT WWW.FSAFEDS.COM. ONLINE ENROLLMENT IS MANDATORY.
 THRIFT SAVINGS PLAN (TSP): (b)(6)
 *** REMARKS CONTINUED ON THE NEXT PAGE ***

46. Employing Department or Agency DEPARTMENT OF HEALTH AND HUMAN SERVICES	50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY: TISA TOLLIVER SUPERVISORY, HUMAN RESOURCES S
47. Agency Code HE10	48. Personnel Office ID 1704
49. Approval Date 07/28/2022	

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5-E. Code ZLM	5-F. Legal Authority OPM FORM 1019 DATED 06-30-2022	6-E. Code	6-F. Legal Authority

7. FROM: Position Title and Number						15. TO: Position Title and Number SPECIAL ASSISTANT PD:HHS391 POSITION:00481971					
8. Pay Plan GS	9. Occ. Code 0301	10. Grade or Level 11	11. Step or Rate 01	12. Total Salary \$74,950.00	13. Pay Basis PA	16. Pay Plan GS	17. Occ. Code 0301	18. Grade or Level 11	19. Step or Rate 01	20. Total Salary/Award \$74,950.00	21. Pay Basis PA
12A. Basic Pay \$56,983.00	12B. Locality Adj.	12C. Adj. Basic Pay	12D. Other Pay	20A. Basic Pay \$56,983.00	20B. Locality Adj. \$17,967.00	20C. Adj. Basic Pay \$74,950.00	20D. Other Pay \$0				
14. Name and Location of Position's Organization						22. Name and Location of Position's Organization OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES OFFICE OF THE ASSISTANT SECRETARY FOR LE WASHINGTON DC USA					

EMPLOYEE DATA			
23. Veterans Preference (b)(6) 1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/50%		24. Tenure 3 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite	
25. Agency Use		26. Veterans Preference for RIF (b)(6)	
27. FEGLI (b)(6)		28. Annuitant Indicator (b)(6)	
30. Retirement Plan (b)(6)		31. Service Comp. Date (Leave) (b)(6)	
32. Work Schedule F FULL TIME		33. Part-Time Hours Per Biweekly Pay Period	

POSITION DATA			
34. Position Occupied 2 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved		35. FLSA Category E E - Exempt N - Nonexempt	
36. Appropriation Code 21990365		37. Bargaining Unit Status 8888	
38. Duty Station Code 110010001		39. Duty Station (City - County - State or Overseas Location) WASHINGTON DIST COLUMBIA DC USA	

40. Agency Data	41.	42.	43.	44. PAR NUMBER:
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45. Remarks
 *** REMARKS CONTINUED ***
 (b)(6) TO INCREASE OR DECREASE YOUR CONTRIBUTION AMOUNT, COMPLETE A TSP-1 AND SEND TO ERD.NEWEmployeeORIENTATION@HHS.GOV FOR PROCESSING. PERS EMPLOYEES: (b)(6) TO OBTAIN ADDITIONAL INFORMATION, VISIT WWW.TSP.GOV/PUBLICATIONS/TSPEK30.PDF
 FEDERAL LONG TERM CARE INSURANCE PROGRAM (FLTCIP): (b)(6) TO OBTAIN ADDITIONAL INFORMATION AND APPLY ONLINE, VISIT WWW.LTCFEDS.COM. FEDERAL EMPLOYEES' GROUP LIFE INSURANCE (FEGLI): (b)(6) SEND YOUR COMPLETED SF-2817 TO ERD.NEWEmployeeORIENTATION@HHS.GOV FOR PROCESSING. TO OBTAIN ADDITIONAL INFORMATION AND ACCESS THE FEGLI CALCULATOR, VISIT WWW.OPM.GOV/HEALTHCARE-INSURANCE/LIFE-INSURANCE/

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