

NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) FLAGG, ANN CLARK	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 146	5-B. Nature of Action SES NONCAREER APPT	6-A. Code	6-B. Nature of Action
5-C. Code V4L	5-D. Legal Authority 5 U.S.C. 3394(A). NON- CAREER. SES NONCAR. APPT	6-C. Code	6-D. Legal Authority
5-E. Code AWM	5-F. Legal Authority OPM FORM 1652 DATED 06/16/2022	6-E. Code	6-F. Legal Authority

7. FROM: Position Title and Number						15. TO: Position Title and Number DIRECTOR, OFC OF FAMILY ASSISTANCE PD:ES1113 POSITION:00481953					
8. Pay Plan	9. Occ. Code	10. Grade or Level	11. Step or Rate	12. Total Salary	13. Pay Basis	16. Pay Plan	17. Occ. Code	18. Grade or Level	19. Step or Rate	20. Total Salary/Award	21. Pay Basis
						ES	0301	00	00	\$175,000.00	PA
12A. Basic Pay		12B. Locality Adj.		12C. Adj. Basic Pay		20A. Basic Pay		20B. Locality Adj.		20C. Adj. Basic Pay	
						\$175,000.00		\$0		\$175,000.00	
14. Name and Location of Position's Organization						22. Name and Location of Position's Organization ADMINISTRATION FOR CHILDREN AND FAMILIES THE OFC OF FAMILY ASSISTANCE OFC OF THE DIRECTOR WASHINGTON DC USA					

EMPLOYEE DATA					
23. Veterans Preference (b)(6) 1 - None 3 - 10-Point/Disability 5 - 10-Point/Other 2 - 5-Point 4 - 10-Point/Compensable 6 - 10-Point/Compensable/50%			24. Tenure 0 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite	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 3 1 - Competitive Service 3 - SES General 2 - Excepted Service 4 - SES Career Reserved		35. FLSA Category E E - Exempt N - Nonexempt	36. Appropriation Code 2G996430	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.
 VETERAN PREFERENCE IS NOT APPLICABLE TO THE SENIOR EXECUTIVE SERVICE.
 APPOINTMENT AFFIDAVIT EXECUTED 07-18-2022.
 PREVIOUS RETIREMENT COVERAGE: (b)(6)
 (b)(6)
 FEDERAL EMPLOYEES' HEALTH BENEFITS (FEHB): (b)(6) SEND YOUR
 COMPLETED SF-2809 TO ERD.NEWEMPLOYEE.ORIENTATION@HHS.GOV FOR PROCESSING. TO COMPARE PLANS AND OBTAIN
 ADDITIONAL INFORMATION, VISIT WWW.OPM.GOV/INSURE.FLEXIBLE.SPENDING.ACCOUNT (FSA): (b)(6)
 (b)(6) IF
 HIRED ON/AFTER OCT 1ST YOU WILL BE ELIGIBLE TO ENROLL DURING THE FSA OPEN SEASON. TO OBTAIN ADDITIONAL
 INFORMATION AND TO ENROLL, VISIT WWW.FSAFEDS.COM. ONLINE ENROLLMENT IS MANDATORY.
 TENURE AS USED FOR 5 U.S.C. 3502 IS NOT APPLICABLE TO THE SENIOR EXECUTIVE SERVICE.
 FEDERAL LONG TERM CARE INSURANCE PROGRAM (FLTCIP): (b)(6)
 (b)(6) TO OBTAIN ADDITIONAL INFORMATION AND APPLY
 *** 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 HE90	48. Personnel Office ID 1704	49. Approval Date 07/28/2022			

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5-E. Code AWM	5-F. Legal Authority OPM FORM 1652 DATED 06/16/2022	6-E. Code	6-F. Legal Authority

7. FROM: Position Title and Number	15. TO: Position Title and Number DIRECTOR, OFC OF FAMILY ASSISTANCE PD:ES1113 POSITION:00481953						
8. Pay Plan ES	16. Pay Plan ES	9. Occ. Code 0301	17. Occ. Code 0301	18. Grade or Level 00	19. Step or Rate 00	20. Total Salary/Award \$175,000.00	21. Pay Basis PA
12A. Basic Pay	12B. Locality Adj.	12C. Adj. Basic Pay	12D. Other Pay	20A. Basic Pay \$175,000.00	20B. Locality Adj. \$0	20C. Adj. Basic Pay \$175,000.00	20D. Other Pay \$0
14. Name and Location of Position's Organization				22. Name and Location of Position's Organization ADMINISTRATION FOR CHILDREN AND FAMILIES THE OFC OF FAMILY ASSISTANCE OFC OF THE DIRECTOR WASHINGTON DC USA			

EMPLOYEE DATA			
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27. FEGLI (b)(6)	28. Annuitant Indicator (b)(6)	29. Pay Rate Determinant (b)(6)	
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40. Agency Data	41.	42.	43.	44. PAR NUMBER:
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45. Remarks
 *** REMARKS CONTINUED ***
 ONLINE, VISIT WWW.LTCFEDS.COM . FEDERAL EMPLOYEES' GROUP LIFE INSURANCE (FEGLI): (b)(6) SEND YOUR
 COMPLETED SF-2817 TO ERD.NEWEMPLOYEE ORIENTATION@HHS.GOV FOR PROCESSING. TO OBTAIN ADDITIONAL
 NFORMATION AND ACCESS THE FEGLI CALCULATOR, WWW.OPM.GOV/HEALTHCARE-INSURANCE/LIFE-INSUR

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 HE90	48. Personnel Office ID 1704
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