

## NOTIFICATION OF PERSONNEL ACTION

|   |                                     |                            |  |
|---|-------------------------------------|----------------------------|--|
| 1. Name (Last, First, Middle)<br><b>PRYOR, RACHEL C</b> | 2. Social Security Number<br>(b)(6) | 3. Date of Birth<br>(b)(6) | 4. Effective Date<br><b>03/01/2021</b> |
|---|-------------------------------------|----------------------------|--|

|                     |                      |
|---------------------|----------------------|
| <b>FIRST ACTION</b> | <b>SECOND ACTION</b> |
|---------------------|----------------------|

|                         |  |           |                       |
|-------------------------|--|-----------|-----------------------|
| 5-A. Code<br><b>146</b> | 5-B. Nature of Action<br><b>SES NONCAREER APPT</b>                             | 6-A. Code | 6-B. Nature of Action |
| 5-C. Code<br><b>V4L</b> | 5-D. Legal Authority<br><b>5 U.S.C. 3394(A). NON- CAREER. SES NONCAR. APPT</b> | 6-C. Code | 6-D. Legal Authority  |
| 5-E. Code<br><b>AWM</b> | 5-F. Legal Authority<br><b>OPM FORM 1652 DATED 02-23-2021</b>                  | 6-E. Code | 6-F. Legal Authority  |

|                                    |   |
|------------------------------------|---|
| 7. FROM: Position Title and Number | 15. TO: Position Title and Number<br><b>COUNSELOR FOR HEALTH POLICY<br/>PD:ES0341<br/>POSITION:00145406</b> |
|------------------------------------|---|

|                |              |                    |                  |                    |               |                     |               |                    |                  |                        |               |
|----------------|--------------|--------------------|------------------|--------------------|---------------|---------------------|---------------|--------------------|------------------|------------------------|---------------|
| 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 |
|                |              |                    |                  |                    |               | <b>ES</b>           | <b>0301</b>   | <b>00</b>          | <b>00</b>        | <b>\$183,100.00</b>    | <b>PA</b>     |
| 12A. Basic Pay |              |                    |                  | 12B. Locality Adj. |               | 12C. Adj. Basic Pay |               | 12D. Other Pay     |                  |                        |               |
|                |              |                    |                  |                    |               |                     |               |                    |                  |                        |               |

|  |   |
|--|---|
| 14. Name and Location of Position's Organization | 22. Name and Location of Position's Organization<br><b>OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES<br/>IMMEDIATE OFFICE OF THE SECRETARY<br/>WASHINGTON DC USA</b> |
|--|---|

**EMPLOYEE DATA**

|   |   |   |   |
|---|---|---|---|
| 23. Veterans Preference<br>(b)(8) 1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/50% | 24. Tenure<br>0 - None 1 - Permanent 2 - Conditional 3 - Indefinite | 25. Agency Use                          | 26. Veterans Preference for RIF<br>(b)(6)   |
| 27. FEGLI<br>(b)(6)   | 28. Annuitant Indicator<br>(b)(6)                                   | 29. Pay Rate Determinant<br>(b)(6)      |   |
| 30. Retirement Plan<br>(b)(6)   | 31. Service Comp. Date (Leave)<br>(b)(6)                            | 32. Work Schedule<br><b>F FULL TIME</b> | 33. Part-Time Hours Per Biweekly Pay Period |

**POSITION DATA**

|   |   |   |   |
|---|---|---|---|
| 34. Position Occupied<br>1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved<br><b>3</b> | 35. FLSA Category<br>E - Exempt N - Nonexempt<br><b>E</b> | 36. Appropriation Code<br><b>11990362</b>   | 37. Bargaining Unit Status<br><b>8888</b> |
| 38. Duty Station Code<br><b>110010001</b>   |   | 39. Duty Station (City - County - State or Overseas Location)<br><b>WASHINGTON DIST COLUMBIA DC USA</b> |   |

|                 |     |     |     |                 |
|-----------------|-----|-----|-----|-----------------|
| 40. Agency Data | 41. | 42. | 43. | 44. PAR NUMBER: |
|-----------------|-----|-----|-----|-----------------|

45. Remarks  
 VETERAN PREFERENCE IS NOT APPLICABLE TO THE SENIOR EXECUTIVE SERVICE.  
 APPOINTMENT AFFIDAVIT EXECUTED 03-08-2021.  
 PREVIOUS RETIREMENT COVERAGE: (b)(6)  
 (b)(6)  
 TENURE AS USED FOR 5 U.S.C. 3502 IS NOT APPLICABLE TO THE SENIOR EXECUTIVE SERVICE.  
 (b)(6)

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|--|--|
| 46. Employing Department or Agency<br><b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b> | 50. Signature/Authentication and Title of Approving Official<br><b>ELECTRONICALLY SIGNED BY: STEVEN D. CHURCH<br/>SUPERVISORY, HUMAN RESOURCES</b> |
| 47. Agency Code<br><b>HE10</b>   | 48. Personnel Office ID<br><b>1704</b>   |
| 49. Approval Date<br><b>03/12/2021</b>   |  |