

## NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) <b>HEFCART, JORDAN ROBERT</b>				2. Social Security Number <b>(b)(6)</b>		3. Date of Birth <b>(b)(6)</b>		4. Effective Date <b>01/20/2021</b>							
<b>FIRST ACTION</b>					<b>SECOND ACTION</b>										
5-A. Code <b>002</b>		5-B. Nature of Action <b>CORRECTION</b>			6-A. Code <b>190</b>		6-B. Nature of Action <b>PROVISIONAL APPT NTE 05/20/2021</b>								
5-C. Code		5-D. Legal Authority			6-C. Code <b>Y7M</b>		6-D. Legal Authority <b>SCH C, 213.3302A AGENCY- UNIQUE SCHEDULE C AUTH.</b>								
5-E. Code		5-F. Legal Authority			6-E. Code		6-F. Legal Authority								
7. FROM: Position Title and Number					15. TO: Position Title and Number <b>SPECIAL ASSISTANT PD:15AR21 POSITION:00450246</b>										
8. Pay Plan		9. Occ. Code		10. Grade or Level		11. Step or Rate		12. Total Salary		13. Pay Basis					
<b>GS</b>		<b>0301</b>		<b>15</b>		<b>01</b>		<b>\$144,128.00</b>		<b>PA</b>					
12A. Basic Pay		12B. Locality Adj.		12C. Adj. Basic Pay		12D. Other Pay		20A. Basic Pay		20B. Locality Adj.		20C. Adj. Basic Pay		20D. Other Pay	
<b>\$110,460.00</b>								<b>\$110,460.00</b>		<b>\$33,668.00</b>		<b>\$144,128.00</b>		<b>\$0</b>	
14. Name and Location of Position's Organization					22. Name and Location of Position's Organization <b>OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES OFC NATIONAL COORDINATOR FOR HEALTH INFO IMMEDIATE OFFICE OF THE NATIONAL COORDINATOR WASHINGTON DC USA</b>										
<b>EMPLOYEE DATA</b>															
23. Veterans Preference <b>(b)(6)</b>				24. Tenure <b>3</b>				25. Agency Use		26. Veterans Preference for RIF <b>(b)(6)</b>					
27. FEGLI <b>(b)(6)</b>				28. Annuitant Indicator <b>(b)(6)</b>				29. Pay Rate Determinant <b>(b)(6)</b>							
30. Retirement Plan <b>(b)(6)</b>				31. Service Comp. Date (Leave) <b>(b)(6)</b>				32. Work Schedule <b>F FULL TIME</b>		33. Part-Time Hours Per Biweekly Pay Period					
<b>POSITION DATA</b>															
34. Position Occupied <b>2</b>			35. FLSA Category <b>E</b>			36. Appropriation Code <b>1199SA15</b>			37. Bargaining Unit Status <b>8888</b>						
38. Duty Station Code <b>110010001</b>					39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON DIST COLUMBIA DC USA</b>										
40. Agency Data		41.		42.		43.		44. PAR NUMBER:							
45. Remarks <b>CORRECTS ITEM 5-B FROM PROVISIONAL APPT NTE 4-21-2021</b>															
46. Employing Department or Agency <b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>					50. Signature/Authentication and Title of Approving Official <b>ELECTRONICALLY SIGNED BY: STEVEN D. CHURCH SUPERVISORY, HUMAN RESOURCES</b>										
47. Agency Code <b>HE10</b>		48. Personnel Office ID <b>1704</b>		49. Approval Date <b>01/29/2021</b>											

## NOTIFICATION OF PERSONNEL ACTION

<b>1. Name (Last, First, Middle)</b> HEFCART, JORDAN ROBERT	<b>2. Social Security Number</b> (b)(6)	<b>3. Date of Birth</b> (b)(6)	<b>4. Effective Date</b> 02/02/2021
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FIRST ACTION		SECOND ACTION	
5-A. Code 570	5-B. Nature of Action CONV TO EXC APPT	6-A. Code	6-B. Nature of Action
5-C. Code Y7M	5-D. Legal Authority SCH C, 213.3301A AGENCY- UNIQUE SCHEDULE C AC	6-C. Code	6-D. Legal Authority
5-E. Code ZLM	5-F. Legal Authority OPM FORM 1019 DATED 02-02-2021	6-E. Code	6-F. Legal Authority

<b>7. FROM: Position Title and Number</b> SPECIAL ASSISTANT PD:15AR21 POSITION:00450246	<b>15. TO: Position Title and Number</b> SPECIAL ASSISTANT PD:AR0580 POSITION:00451065
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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
GS	0301	15	01	\$144,128.00	PA	GS	0301	15	01	\$144,128.00	PA

12A. Basic Pay	12B. Locality Adj.	12C. Adj. Basic Pay	12D. Other Pay	20A. Basic Pay	20B. Locality Adj.	20C. Adj. Basic Pay	20D. Other Pay
\$110,460.00	\$33,668.00	\$144,128.00	\$0	\$110,460.00	\$33,668.00	\$144,128.00	\$0

<b>14. Name and Location of Position's Organization</b>  OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES OFC NATIONAL COORDINATOR FOR HEALTH INFO IMMEDIATE OFFICE OF THE NATIONAL COORDIN WASHINGTON DC USA	<b>22. Name and Location of Position's Organization</b>  OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES OFC NATIONAL COORDINATOR FOR HEALTH INFO IMMEDIATE OFFICE OF THE NATIONAL COORDIN WASHINGTON DC USA
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### EMPLOYEE DATA

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

### POSITION DATA

<b>34. Position Occupied</b> 2	<b>35. FLSA Category</b> E	<b>36. Appropriation Code</b> 1199SA15	<b>37. Bargaining Unit Status</b> 8888
<b>38. Duty Station Code</b> 110010001		<b>39. Duty Station (City - County - State or Overseas Location)</b> WASHINGTON DIST COLUMBIA DC USA	

<b>40. Agency Data</b>	<b>41.</b>	<b>42.</b>	<b>43.</b>	<b>44. PAR NUMBER:</b>
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**45. Remarks**  
 CREDITABLE MILITARY SERVICE: (b)(6)  
 PREVIOUS RETIREMENT COVERAGE: (b)(6)

<b>46. Employing Department or Agency</b> DEPARTMENT OF HEALTH AND HUMAN SERVICES	<b>50. Signature/Authentication and Title of Approving Official</b> ELECTRONICALLY SIGNED BY: STEVEN D. CHURCH SUPERVISORY, HUMAN RESOURCES
<b>47. Agency Code</b> HE10	<b>48. Personnel Office ID</b> 1704
<b>49. Approval Date</b> 02/05/2021	



## NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) <b>HEFCART, JORDAN ROBERT</b>	2. Social Security Number (b)(6)	3. Date of Birth (b)(6)	4. Effective Date <b>08/01/2022</b>
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FIRST ACTION		SECOND ACTION	
5-A. Code <b>317</b>	5-B. Nature of Action <b>RESIGNATION</b>	6-A. Code	6-B. Nature of Action
5-C. Code <b>RPM</b>	5-D. Legal Authority <b>REG 715.202. RESIGNATION</b>	6-C. Code	6-D. Legal Authority
5-E. Code	5-F. Legal Authority	6-E. Code	6-F. Legal Authority

7. FROM: Position Title and Number <b>SPECIAL ASSISTANT PD:AR0580 POSITION:00451065</b>	15. TO: Position Title and Number										
8. Pay Plan <b>GS</b>	9. Occ. Code <b>0301</b>	10. Grade or Level <b>15</b>	11. Step or Rate <b>02</b>	12. Total Salary <b>\$153,434.00</b>	13. Pay Basis <b>PA</b>	16. Pay Plan	17. Occ. Code	18. Grade or Level	19. Step or Rate	20. Total Salary/Award	21. Pay Basis
12A. Basic Pay <b>\$116,653.00</b>	12B. Locality Adj. <b>\$36,781.00</b>	12C. Adj. Basic Pay <b>\$153,434.00</b>	12D. Other Pay <b>\$0</b>	20A. Basic Pay	20B. Locality Adj.	20C. Adj. Basic Pay	20D. Other Pay				

14. Name and Location of Position's Organization <b>OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES OFC NATIONAL COORDINATOR FOR HEALTH INFO IMMEDIATE OFFICE OF THE NATIONAL COORDINATOR WASHINGTON DC USA</b>	22. Name and Location of Position's Organization
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### EMPLOYEE DATA

23. Veterans Preference (b)(6)	24. Tenure <b>3</b>	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 <b>F FULL TIME</b>	33. Part-Time Hours Per Biweekly Pay Period

### POSITION DATA

34. Position Occupied <b>2</b>	35. FLSA Category <b>E</b>	36. Appropriation Code <b>2199SA15</b>	37. Bargaining Unit Status <b>8888</b>
38. Duty Station Code <b>110010001</b>	39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON DIST COLUMBIA DC USA</b>		

40. Agency Data	41.	42.	43.	44. PAR NUMBER:
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45. Remarks  
 SF 2819 WAS PROVIDED. (b)(6)  
 (b)(6)  
 (b)(6)  
 (b)(6)  
 FORWARDING ADDRESS: (b)(6)  
 REASON FOR RESIGNATION: (b)(6)

46. Employing Department or Agency <b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>	50. Signature/Authentication and Title of Approving Official <b>ELECTRONICALLY SIGNED BY: TISA TOLLIVER SUPERVISORY, HUMAN RESOURCES S</b>
47. Agency Code <b>HE10</b>	48. Personnel Office ID <b>1704</b>
49. Approval Date <b>08/04/2022</b>	