



STATE OF WASHINGTON
OFFICE OF THE STATE HUMAN RESOURCES DIRECTOR

DIRECTOR'S REVIEW PROGRAM
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December 17, 2012

TO: Teresa Parsons, SPHR
Director's Review Program Supervisor

FROM: Kris Brophy, SPHR
Director's Review Investigator

SUBJECT: Heather Sleight v. Heath Care Authority (HCA)
Allocation Review Request ALLO-11-108

Director's Determination

As the Director's designee, I carefully considered all of the documentation in the file, including the exhibits presented during the Director's review conference and the verbal comments provided by both parties. Based on my review and analysis of Ms. Sleight's assigned duties and responsibilities, I conclude her position is properly allocated to the Medical Assistance Specialist 3 classification.

Background

On May 24, 2011, HCA Human Resources (HCA-HR) received Ms. Sleight's Position Review Request (PRR) form, requesting that her position be reallocated to the Information Technology Specialist 2 or 3 classifications (Exhibit B-4).

HCA-HR, conducted a position review and by letter dated October 24, 2011, notified Ms. Sleight that her position was properly allocated to the Medical Assistance Specialist 3 classification (Exhibit B-1).

On November 2, 2011, the Office of the State Human Resources Director received Ms. Sleight's request for a Director's review of HCA's allocation determination (Exhibit A-1).

On October 3, 2012, I conducted a Director's review conference. Present for the conference were Ms. Heather Sleight; Ms. Stacey Leanos, Council Representative, WFSE; Mr. Milton Haire, Office Chief, Office of Claims Processing, HCA; Ms. Christine Chumley, Program Manager, Systems Operations & Implementation Unit (SOIU), HCA; Ms. Myla Hite, Human Resources Director, HCA; and Mr. Michael Otter-Johnson, Human Resource Consultant, HCA.

Rationale for Director's Determination

The purpose of a position review is to determine which classification best describes the overall duties and responsibilities of a position. A position review is neither a measurement of the volume of work performed, nor an evaluation of the expertise with which that work is performed. A position review is a comparison of the duties and responsibilities of a particular position to the available classification specifications. This review results in a determination of the class that best describes the overall duties and responsibilities of the position. Liddle-Stamper v. Washington State University, PAB Case No. 3722-A2 (1994).

Duties and Responsibilities

Ms. Sleight works as a Medical Assistance Specialist 3 (MAS 3) in the Claims Processing Unit of the Office of Claims Processing at the HCA. Ms. Sleight provides expert level consultation to MAS staff and others in adjudicating and resolving complex medical claims issues that arise in the State's ProviderOne (P1) system. Ms. Sleight states in the PRR that the purpose of her position is to determine payments, denials, and adjustments for complex medical claims processed through the P1 system. The P1 system is maintained by the agency's Office of Medicaid Systems and Data (OMSD).

Ms. Sleight's duties and responsibilities are summarized from the PRR (Exhibit B-4) as follows:

- 30% Highest level adjudication of medical claims to determine payment and/or denial of claims.
- 20% Initiate service requests and change requests by identifying issues and discrepancies with the ProviderOne [P1] payment system. Analyze information to see what sort of action is necessary if any. Examine information to determine scope of issue. Provide necessary business justification for required updates and/or changes evidenced by policy information, provider billing instructions, reference text files, various WAC's and other research. Submit the appropriate information through the ticketing system for review by technical analysts.
- 15% Review all claim inquiries submitted by MACSC staff and other MPA staff through the ticketing system for all members of the unit. Forward inquires to appropriate staff and then review their determinations for accuracy. Respond to general inquiries regarding system automated payment, denial, or recoupment. Send all responses back through the appropriate chain and keep track of all inquires for each individual unit member, myself and all other general system inquiries.
- 10% Work one-on-one with various OMSD technical staff to review and or confirm required updates.
- 10% Field questions and aid unit staff in the adjudication of claims.
- 5% Problem solving and troubleshooting direct issues from Providers, Program Managers and other managers regarding claim payment and or denial.

- 5% Relay pertinent information to staff directly from management as regards work related issues and other relevant information.
- 5% Make determinations and or necessary adjustments to staff workload in accordance with current and changing business needs.

In exhibit A-2, Ms. Sleight clarified her duties further by stating that:

As a MA 3, I determine claim payment or denial using a variety of resources. Primarily we use reference text files created and made available by staff in the Systems Operations and Implementation Unit (SOI) within the Office of Medicaid Systems and Data (OMSD). On occasion a few staff members are allowed to review the Provider One Billing Instructions to verify accurate information for processing claims. 99% of claims processed and adjudicated by a claims examiner are done so through the examination of reference text files and reference text files alone. Additionally, as a MA 3 we initiate text file changes and updates by means of requesting a review by OMSD staff of existing files as necessary to interpret text files, if there is a disagreement among staff as to how to adjudicate a claim accordingly.

If I suspect that something was either paying or denying incorrectly I would submit a help-ticket through the ticketing system, via the Claims Processing Technical Manager, who would then forward my request explaining my question or concern. It would then be assigned and researched by an OMSD staff member and I would receive notification back either confirming that there was an error or that the system was functioning correctly in regard to that particular issue or question from the ticketing system by the Technical Manager.

While at times my duties vary, according to my PDF and the distinguishing characteristics of the MA 3 series whether it be through training staff, adjusting claims, adjudicating claims, reviewing claims questions from providers and/or other staff, and analyzing and researching claims payments/denials for accuracy it is ultimately centered upon the correct adjudication of claim payment and/or other staff, and analyzing and researching claims payment and/or denial. Even if we disagree with a text file we still adjudicate according to the text unless or until a text file change is made. We do not review policy, WACs or other rules or regulations. The ITS staff within OMSD are responsible for the creation and maintenance of the text files we use in making payment decisions for claims. It is their job to ensure that the policy, WACs and federal and state guidelines are being met when writing and creating these text files.

Ms. Sleight's supervisor, Mr. Milton Haire, Office Chief, completed the supervisor's section of the PRR. Mr. Haire indicates that Ms. Sleight's description of assigned duties and responsibilities is not accurate and complete. In his comments, Mr. Haire clarified that Ms. Sleight's description of duties in section 2 of the PRR were temporary and part of a project to get the P1 system "up and running" and to stabilize the system. Mr. Haire states that Ms. Sleight's statement of being the only MAS of any series on the floor that has continual and frequent direct contact with the OMSD is incorrect. He states that Ms. Sleight was not the designated point of contact for resolving system issues nor was she assigned this function. Mr. Haire clarified that the only staff directed to submit work orders/tickets to the SOIU unit regarding the P1 system is Judy Campbell, the Technical Manager (ITS 2) position assigned to the Claims Processing Office.

In a rebuttal statement, Ms. Sleight stated that she agreed that the duties she described in section 2 were not permanent assigned essential functions of her job; however she states that she has been performing those duties continuously since the P1 system went live in May 2010 (Exhibit A-4, page 2).

Summary of Ms. Sleight's Perspective

Ms. Sleight asserts the majority of her duties meet the requirements of the ITS 3 classification.

Ms. Sleight contends the level of analysis and technical support work she performs is consistent with ITS 3 level responsibility. Ms. Sleight asserts her work extends beyond performing MAS claims adjudication work to include assisting in the resolution of system issues and defects within the P1 system.

Ms. Sleight asserts she reviews and researches edit logic, independently identifying and documenting inconsistencies and discrepancies and providing documentation and business justifications for system modifications and enhancements. Ms. Sleight asserts she uses other tools frequently used by SIO units and OMSD staff. Ms. Sleight asserts she has access to the OMSD Access database – ProviderOne Edit Rules and Management System, which includes legacy system information, system enhancements, historical information, as well as containing the edit logic behind the error codes that are created to post on claims.

Ms. Sleight contends she accesses the database and receives requests from OMSD staff to review the information for accuracy. Ms. Sleight asserts she works with OMSD and SOI unit staff on issues, identifies gaps and errors in edit logic, and rewrites and creates new text files for completely new edits or error codes using the edit logic as the basis. Ms. Sleight acknowledged during the review conference that she does not program the text files into the P1 system.

Summary of HCA's Reasoning

HCA asserts Ms. Sleight provides expert consultative services in adjudicating complex claims using multiple systems. HCA asserts Ms. Sleight helps the Office's designated IT support position (i.e. Technical Manager (ITS2) in determining and defining issues, addressing questions from providers regarding policy and claims payment and denial, and reviewing all help tickets submitted to Claims Processing for both her unit and others.

HCA acknowledges that Ms. Sleight was consulted and provided feedback and performed an initial level of text file design during P1 implementation, but in total, her duties do not encompass professional information technology-related work as a primary focus of her position. HCA contends Ms. Sleight provides input to the agency's IT staff from a customer's perspective regarding how the text instruction should be written so that the MAS staff can understand how to properly process claims.

HCA acknowledges a portion of Ms. Sleight's time is spent performing text file reviews and rewrites to align adjudication instructions with new system terminology which requires knowledge of new technology, but no IT experience or skills. HCA asserts that Ms. Sleight does not program text files into the P1 system and is not performing professional IT duties.

In total, HCA asserts Ms. Sleight's position is properly allocated to the Medical Assistance Specialist 3 class.

Comparison of Duties to Class Specifications

When comparing the assignment of work and level of responsibility to the available class specifications, the class series concept (if one exists) followed by definition and distinguishing characteristics are primary considerations. While examples of typical work identified in a class specification do not form the basis for an allocation, they lend support to the work envisioned within a classification.

Comparison of Duties to Information Technology Series

The Class Series Concept for the Information Technology Specialist series states:

Positions in this category perform professional information technology systems and/or applications support for client applications, databases, computer hardware and software products, network infrastructure equipment, or telecommunications software or hardware.

This category broadly describes positions in one or more information technology disciplines such as: Application Development And Maintenance, Application Testing, Capacity Planning, Business Analysis and/or Process Re-Engineering, Data Base Design And Maintenance, Data Communications, Disaster Recovery/Data Security, Distributed Systems/LAN/WAN/PC, Hardware Management And Support, Network Operations, Production Control, Quality Assurance, IT Project Management, Systems Software, Web Development, or Voice Communications.

Positions which perform information technology-related work to accomplish tasks but are non-technical in nature would not be included in this occupational category.

[Emphasis added]

Ms. Sleight's position does not meet the intent of the Information Technology (IT) class series.

Incumbents in this series provide professional information technology systems, programming, installation, maintenance and/or systems support in one or more of the IT disciplines identified in the class series concept. Ms. Sleight's position does not have this level of responsibility assigned to her position.

During the P1 system implementation and continuing through the review time period, a portion of Ms. Sleight's time was spent consulting and providing customer-based feedback to SOIU IT staff regarding adjudication-related text files. During P1 implementation, Ms. Sleight conducted text file reviews and rewrites to properly align adjudication instructions with the new system terminology for the P1 system. Ms. Sleight continues to help the Office's designated IT 2 support position (i.e. Judy Campbell, Technical Manager) in determining and defining issues and questions from providers regarding policy and claims payment and denial, and reviewing all help tickets submitted to Claims Processing for both her unit and others in the agency.

To accomplish this work, Ms. Sleight has access to the OMSD Access database – ProviderOne Edit Rules and Management System. Ms. Sleight states in her comments that she rewrites text files and creates entirely new text files or error codes using the program's edit logic as the basis.

However, in her comments, Ms. Christine Chumley, Unit Supervisor for SOIU, OMSD, acknowledges that while Ms. Sleight's work conducting text file reviews and re-writing text files encompasses an initial level of text file design, she states that these duties do not encompass professional-level information technology work. Ms. Chumley states in her comments that during the implementation of the P1 system, "...access to the ProviderOne Edit Rules and Management System was not severely restricted at that time. In 2010 ... [Ms. Sleight] ...did spend some short term/limited hour project work doing text file reviews and rewrites to align adjudication instructions with new system terminology. As 98% of the edits implemented in ProviderOne were copies of edits that existed in the legacy system, this work did require knowledge of new technology, but no IT experience or skills."

Ms. Chumley further states that, "Ms. Sleight spent several hours a week as a customer liaison with SOIU staff in the review, modification, and creation of text files for one ProviderOne program (professional claims) as those text files were required as general instructions to all Claims Processing customers. This is not a primary ITS function and has historically been done by various CP staff over the years. With the design and implementation of ProviderOne, SOIU had the invaluable assistance of many individuals in the administration that did not fall into the IT job description category."

HCA states in its comments that, "If a claim stops in the ProviderOne claims payment system, the text files in the system provide instruction to MAS staff on how to adjudicate the claim to resolution." Therefore, the primary focus of Ms. Sleight's position is to provide input as a claims adjudication expert to agency IT staff on how the text instruction should be written so that MAS staff understands how to work the claim. Ms. Sleight uses her knowledge and experience as an adjudication expert to provide input on text file content and rewriting text file content so that proper adjudication instructions can be programmed into the P1 system by agency staff. Ms. Sleight acknowledged during the review conference that she does not program the text files into the P1 system. Actual programming is performed by SOIU staff who are the only staff authorized to have access to the system.

Therefore, while a portion of Ms. Sleight's time is spent performing IT-related work involving an initial level of text file design by reviewing text files and rewriting code to properly align adjudication instructions with the new system terminology, the primary focus of Ms. Sleight's position is not to perform professional IT technical support to application systems, but rather to perform work resolving claims-related technical issues by investigating, researching and analyzing problems to P1 text files to ensure timely and accurate payment to medical providers for all professional non-institutional claims processed in the State.

Ms. Sleight's knowledge and use of information technology is secondary to her primary function of investigating, researching, analyzing, and adjudicating claims as a medical assistance claims specialist. The primary thrust of her position, and the majority of her duties involve adjudicating complex medical claims and medical information for payment.

Thus, the primary thrust of her position, and the majority of her duties as a whole do not meet the intent of the Information Technology series as indicated by the class series concept which states, "...positions which perform information technology-related work to

accomplish tasks but are non-technical in nature would not be included in this occupational category.”

The Definition for the Information Technology Specialist 3 (ITS 3) class states:

In support of information systems and users in an assigned area of responsibility, independently performs consulting, designing, programming, installation, maintenance, quality assurance, troubleshooting and/or technical support for applications, hardware and software products, databases, database management systems, support products, network infrastructure equipment, or telecommunications infrastructure, software or hardware.

Uses established work procedures and innovative approaches to complete assignments and coordinate projects such as conducting needs assessments; leading projects; creating installation plans; analyzing and correcting network malfunctions; serving as system administrator; monitoring or enhancing operating environments; or supporting, maintaining and enhancing existing applications.

The majority of assignments and projects are moderate in size and impact an agency division or large workgroup or single business function; or internal or satellite operations, multiple users, or more than one group. Consults with higher-level technical staff to resolve complex problems.

As stated in the Definition for this class, ITS 3 level positions independently perform IT support as a fully qualified information technology specialist within an assigned area of responsibility. Incumbents provide technical IT support and identify and resolve operational or other problems within an assigned scope of operation such as a division, or large workgroup or single business function, multiple users or more than one group. This is distinct from the ITS 2 level where the majority of assigned tasks are limited in scope, principally involving completing specified tasks or providing direct IT support to individuals or small groups of employees working within a department or unit.

The work methods used and the level of independent decision making required at the ITS 3 level often combine following pre-defined standards as well as developing innovative approaches to resolving problems or issues that arise. While fully capable of working independently, complex problems are resolved through consulting with higher-level technical staff.

Incumbents at the ITS 3 level use established work procedures to complete assignments and projects which often impact their assigned area of responsibility. Project coordination at this level requires completing all phases of an assigned project including conducting needs assessments, creating installation plans and independently leading or supervising projects to completion.

Ms. Sleight's duties do not involve performing professional information technology work as the primary focus of her position. The Technical Manager, Ms. Campbell has responsibility for performing the technical IT work of assisting Office of Technical Services OTS in system testing and resolving computer technical problems associated with the ProviderOne Medical Management Information system (MMIS).

Further, Ms. Sleight's duties do not meet the requirements of the ITS 3 class. Ms. Sleight does not perform systems analysis. Ms. Sleight is not responsible for managing and monitoring system design to ensure appropriate policies and procedures are followed; act as a senior business consultant, technical advisor, or customer liaison; coordinate with program management, or work with stakeholder management.

Ms. Sleight does not provide professional business and systems expertise. Ms. Sleight provides input and/or revises text files from a customer perspective. In her comments, Ms. Chumley states that, "Historically, text file instructions have been maintained by SOIU to provide clear adjudication and claim analysis information for the administration, most often for Claims Processing and Call Center staff. SOIU staff has always worked collaboratively with these non-technical customers as they are the primary users of these texts. Creating/maintaining these text files is a minimal part of an ITS 3 position and is not what makes SOIU ITS 3 eligible. All staff in this administration, regardless of role or responsibility, are expected to have basic knowledge of many Medicaid tools including WAC's, billing instructions, and other on-line information available from the Centers for Medicare & Medicaid Services (CMS)."

Further, Ms. Sleight is not responsible for managing and monitoring system design to ensure appropriate policies and procedures are followed; act as a senior business consultant, technical advisor, or customer liaison; coordinate with program management, or work with stakeholder management. As a whole, Ms. Sleight's duties do not involve performing professional information technology systems analysis functions as the primary focus of her position.

Therefore, the overall focus and majority of duties performed by Ms. Sleight in her position do not meet the requirements of the ITS series, nor do they reach the requirements of the ITS 3 class specifically, or other classes within the ITS series. There is another class series which specifically addresses the majority of work performed by Ms. Sleight in her position. In summary, Ms. Sleight's position should not be reallocated to a class within the IT series.

This is supported by a Personnel Resources Board (PRB) decision. In *Alvarez v. Olympic*, PRB No. R-ALLO-08-013 (2008), the Board held that "[w]hen there is a definition that specifically includes a particular assignment and there is a general classification that has a definition which could also apply to the position, the position will be allocated to the class that specifically includes the position. [See *Mikitik v Depts. of Wildlife and Personnel*, PAB No. A88-021 (1989)."

Comparison of Duties to Medical Assistance Specialist 3

The Definition for this class states:

Provides expert consultative services to providers, clients, and/or other external customers and independently:

1. Determines prior authorization of medical services; or
2. Adjudicates complex claims utilizing multiple systems and/or contracts; or
3. Coordinates benefits; or
4. Interprets, coordinates and/or services complex medical accounts such as exemptions from managed care enrollment and complaint resolution and/or enrollments such as those involving the Basic Health Plan; or

5. Determines initial and/or ongoing medical eligibility for medical assistance programs;
or
6. Resolves technical problems involving clients, agencies, carriers, and/or providers;
or
7. Trains newly hired entry level internal staff; or
8. Supervises a unit of Medical Assistance Specialists 1s and/or 2s.

The Distinguishing Characteristics for this class states:

Positions are assigned investigation, research, and analysis duties involved in resolving problems such as payments to providers, eligibility, enrollment, recoupment, overpayments, and authorizations a majority of the time. Positions at this level may be distinguished from the Medical Assistance Specialist 2 by their independence of action, limited supervisory direction, and broad discretion to perform the full range of technical and professional duties.

The Medical Assistance Specialist 3 class describes the primary focus and overall level of responsibility assigned to Ms. Sleight's position.

The majority of Ms. Sleight's duties involve providing expert-level adjudication of medical claims to determine payment and/or denial of professional non-institutional claims. Ms. Sleight trains staff, adjusts claims, adjudicates claims, reviews claims questions from providers and/or other staff, and analyzes and researches claims payments/denials for accuracy. This includes reviewing all claims inquiries submitted by MACSC staff and other MPA staff through the ticketing system for all members of the unit. She forwards inquiries to the appropriate employee staff and reviews their determinations for accuracy. She responds to general inquiries regarding system automated payment, denial, or recoupment. She ensures that all responses are sent back through the appropriate chain and monitors and tracks individual staff and other general system inquiries. Her duties include fielding questions and aiding unit staff in adjudicating claims. In addition, she solves problems and troubleshoots direct issues from Providers, Program Managers and other managers regarding claim payment and or denial issues.

Ms. Sleight also reviews, and initiates text file changes and updates from a business perspective for the P1 system. Ms. Sleight works one-on-one with various OMSD technical staff to review and or confirm required updates.

It is clear that Ms. Sleight uses her knowledge and experience as a Medical Assistance Specialist to spend a portion of her time performing IT-related work which includes performing an initial level of text file design by reviewing text files and rewriting portions of code to properly align adjudication instructions within the P1 system. However, the primary focus of Ms. Smith's position and the majority of her duties as a whole are more accurately and fully described by the Medical Assistance Specialist 3 classification.

Ms. Sleight is performing MAS 3 level duties the majority of the time and is appropriately classified as a MAS 3.

A position's allocation is not a reflection of performance or an individual's ability to perform higher-level work. Rather, it is based on the majority of work assigned to a position and how

that work best aligns with the available job classifications. Based on the level and scope of the overall duties and responsibilities assigned to Ms. Sleight's position, the Medical Assistance Specialist 3 classification is the best fit.

When determining the appropriate classification for a specific position, the duties and responsibilities of that position must be considered in their entirety and the position must be allocated to the classification that provides the best fit overall for the majority of the position's duties and responsibilities. Dudley v. Dept. of Labor and Industries, PRB Case No. R-ALLO-07-007 (2007).

Further, positions are to be allocated to the class which best describes the majority of the work assignment. Ramos v DOP, PAB Case No. A85-18 (1985).

In this case, the majority of the duties assigned to Ms. Sleight's position and her level of responsibility are best described by the Medical Assistance Specialist 3 classification. Ms. Sleight's position should remain allocated to that class.

Appeal Rights

RCW 41.06.170 governs the right to appeal. RCW 41.06.170(4) provides, in relevant part, the following:

An employee incumbent in a position at the time of its allocation or reallocation, or the agency utilizing the position, may appeal the allocation or reallocation to . . . the Washington personnel resources board Notice of such appeal must be filed in writing within thirty days of the action from which appeal is taken.

The mailing address for the Personnel Resources Board (PRB) is P.O. Box 40911, Olympia, Washington, 98504-0911. The PRB Office is located on the 4th floor of the Insurance Building, 302 Sid Snyder Avenue SW, Olympia, Washington. The main telephone number is (360) 902-9820, and the fax number is (360) 586-4694.

If no further action is taken, the Director's determination becomes final.

c: Stacie Leanos, WFSE
Heather Sleight
Myla Hite, HCA
Lisa Skriletz, OSHRD

Enclosure: List of Exhibits

HEATHER SLEIGHT v HCA

ALLO-11-108

List of Exhibits

A. Heather Sleight Exhibits

1. Director's Review Form received November 2, 2011 (page 1-2)
2. Supplemental description of duties and responsibilities (page 1-5)
3. HCA allocation determination letter October 4, 2011 (page 1-5)
4. Letter with rational/argument and exhibit listing (exhibits 1-9) submitted for Director's review (page 1-5):
 - Exhibit 1: Email correspondence from James Woodward, supervisor, detailing work that will no longer be assigned to Ms. Sleight (page 1-2)
 - Exhibit 2: Email chain indicating types of requests received and sent to supervisor for approval (page 1)
 - Exhibit 3: Email correspondence by SOI staff requesting review of edit logic and text file (page 1-4)
 - Exhibit 4: Email sent to SOI staff detailing new procedure (page 1)
 - Exhibit 5: Email of SOI staff apologizing for work that is out of class for Ms. Sleight (page 1)
 - Exhibit 6: Meeting request sent by supervisor to SOI to discuss work duties (page 1)
 - Exhibit 7: Email to SOI staff informing them that previous duties would continue (page 1-6)
 - Exhibit 8: ProviderOne Help ticket example (page 1)
 - Exhibit 9: Partial list of help tickets (page 1-6)
5. Email from Heather Sleight to Karen Wilcox enclosing a letter from Trina Hogan dated March 28, 2012

B. HCA Exhibits

1. HCA allocation determination letter dated October 4, 2011 (page 1-5)
2. PDF for Heather Sleight's position dated September 2010 (pages 1-4)
3. Office of Claims Processing organizational chart
4. May 2011 Position Review Request for Heather Sleight (page 1-7)

Employee exhibits submitted with PRR:

- a. PDF for position SA51 (page 1-5)
 - b. September 2010 PDF for position RV92 used for position review (page 1-4)
 - c. A copy of DOP Web Site page titled, "The Purpose of Reviewing a Position's Allocation" (1 page)
 - d. Sept 2010 PDF for position RV92-data change (page 1-4)
 - e. Sept. 2009 PDF with org chart (page 1-5)
 - f. PDF for position PB211 (pages 1-5)
 - g. Job Bulletin – ITS 3 In-Training (page 1-3)
 - h. Job Bulletin – ITS 3 In-Training (page 1-3)
 - i. Emails-examples of work (pages 1-21)
 - j. Cover letter with attachments submitting additional work examples to HR for position review (pages 1-51)
5. December 21, 2011 cover letter from Carol Nacht to Karen Wilcox explaining additional exhibit (B6).
 6. Comments from Christine Chumley, unit supervisor, to Ms. Sleight's description of work.

C. Class Specifications

1. DOP Class Specification for IT Specialist 1 (479I)
2. DOP Class Specification for IT Specialist 2 (479J)
3. DOP Class Specification for IT Specialist 3 (479K)
4. DOP Class Specification for Medical Assistance Specialist 3 (170G)