

COMPLIANCE REVIEW REPORT

DEPARTMENT OF MANAGED HEALTH CARE

Compliance Review Unit
State Personnel Board
March 27, 2015

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INTRODUCTION

Established by the California Constitution, the State Personnel Board (the SPB or Board) is charged with enforcing and administering the civil service statutes, prescribing probationary periods and classifications, adopting regulations, and reviewing disciplinary actions and merit-related appeals. The SPB oversees the merit-based recruitment and selection process for the hiring of over 200,000 state employees. These employees provide critical services to the people of California, including but not limited to, protecting life and property, managing emergency operations, providing education, promoting the public health, and preserving the environment. The SPB provides direction to departments through the Board's decisions, rules, policies, and consultation.

Pursuant to Government Code section 18661, the SPB's Compliance Review Unit (CRU) conducts compliance reviews of appointing authority's personnel practices in four areas: examinations, appointments, equal employment opportunity (EEO), and personal services contracts (PSC's) to ensure compliance with civil service laws and board regulations. The purpose of these reviews is to ensure state agencies are in compliance with merit related laws, rules, and policies and to identify and share best practices identified during the reviews. The SPB conducts these reviews on a three-year cycle.

The CRU may also conduct special investigations in response to a specific request or when the SPB obtains information suggesting a potential merit-related violation.

EXECUTIVE SUMMARY

The CRU conducted a routine compliance review of the California Department of Managed Health Care (DMHC) personnel practices in the areas of examinations, appointments, EEO, and PSC's from November 1, 2012, through April 30, 2014. The following table summarizes the compliance review findings.

Area	Finding	Severity
Examinations	EEO Questionnaires Were Not Separated from Applications	Very Serious
Appointments	Appointment Documentation Was Not Kept for the Appropriate Amount of Time	Serious
Appointments	Probationary Evaluations Were Not Provided for All Appointments Reviewed	Serious

Area	Finding	Severity
Equal Employment Opportunity	Equal Employment Opportunity Program Complied with Civil Service Laws and Board Rules	In Compliance
Personal Services Contracts	Personal Services Contracts Complied with Procedural Requirements	In Compliance

A color-coded system is used to identify the severity of the violations as follows:

- Red = Very Serious
- Orange = Serious
- Yellow = Non-serious or Technical
- Green = In Compliance

BACKGROUND

The DMHC, a first-in-the-nation health care consumer protection organization, helps California consumers resolve problems with their health plans and works to provide a stable and financially solvent managed care system. The Department operates under a body of statutes collectively known as the Knox-Keene Health Care Service Plan Act of 1975 (KKA), as amended.

The DMHC has 405 authorized positions and executes its responsibilities through three locations: (1) headquarters is located in downtown Sacramento; (2) the Help Center is located on the Franchise Tax Board campus in Sacramento; and (3) a satellite office in downtown Los Angeles housing the southern region staff in the Office of Financial Reporting and the Office of Plan Licensing.

The DMHC operates the Financial Solvency Standards Board (FSSB), comprised of experts in the medical, financial and health plan industries. The FSSB advises the Director on ways to keep the managed health care industry financially healthy and available for the more than 21 million Californians who are currently enrolled in these types of health plans.

SCOPE AND METHODOLOGY

The scope of the compliance review was limited to reviewing DMHC examinations, appointments, EEO program, and PSC's from November 1, 2012, through April 30, 2014. The primary objective of the review was to determine if DMHC personnel

practices, policies, and procedures complied with state civil service laws and board regulations, and to recommend corrective action where deficiencies were identified.

A cross-section of the DMHC examinations and appointments were selected for review to ensure that samples of various examinations and appointment types, classifications, and levels were reviewed. The CRU examined the documentation that the DMHC provided, which included examination plans, examination bulletins, job analyses, 511b's, scoring results, notice of personnel action forms, vacancy postings, application screening criteria, hiring interview rating criteria, certification lists, transfer movement worksheets, employment history records, correspondence, and probation reports.

The review of DMHC EEO program included examining written EEO policies and procedures; the EEO officer's role, duties, and reporting relationship; the internal discrimination complaint process; the upward mobility program; the reasonable accommodation program; the discrimination complaint process; and the Disability Advisory Committee (DAC). The CRU also interviewed appropriate DMHC staff.

DMHC PSC's were also randomly selected to ensure that various types of contracted services and contract amounts were reviewed. The DMHC executed PSC's for customer communications, ergonomic evaluations, medical claims reviews, software consultation and implementations, and strategic consulting services.¹ It was beyond the scope of the compliance review to make conclusions as to whether DMHC justifications for the contracts were legally sufficient. The review was limited to whether DMHC practices, policies, and procedures relative to PSC's complied with applicable statutory law and board regulations.

On February 13, 2015, an exit conference was held with the DMHC to explain and discuss the CRU's initial findings and recommendations, and to provide the DMHC with a copy of the CRU's draft report. The amended draft report was provided to the DMHC on March 6, 2015. The DMHC was given until March 13, 2015 to submit a written response to the CRU's draft report. On March 13, 2015, the CRU received and carefully reviewed the response, which is attached to this final compliance report.

¹ If an employee organization requests the SPB to review any personal services contract during the SPB compliance review period or prior to the completion of the final compliance review report, the SPB will not audit the contract. Instead, the SPB will review the contract pursuant to its statutory and regulatory process. In this instance, none of the reviewed PSC's were challenged.

FINDINGS AND RECOMMENDATIONS

Examinations

Examinations to establish an eligible list must be competitive and of such character as fairly to test and determine the qualifications, fitness, and ability of competitors to perform the duties of the class of position for which he or she seeks appointment. (Gov. Code, § 18930.) Examinations may be assembled or unassembled, written or oral, or in the form of a demonstration of skills, or any combination of those tests. (*Ibid.*) The Board establishes minimum qualifications for determining the fitness and qualifications of employees for each class of position and for applicants for examinations. (Gov. Code, § 18931.) Within a reasonable time before the scheduled date for the examination, the designated appointing power shall announce or advertise the examination for the establishment of eligible lists. (Gov. Code, § 18933, subd. (a).) The advertisement shall contain such information as the date and place of the examination and the nature of the minimum qualifications. (*Ibid.*) Every applicant for examination shall file a formal signed application in the office of the department or a designated appointing power within a reasonable length of time before the date of examination. (Gov. Code, § 18934.) Generally, the final earned rating of each person competing in any examination is to be determined by the weighted average of the earned ratings on all phases of the examination. (Gov. Code, § 18936.) Each competitor shall be notified in writing of the results of the examination when the employment list resulting from the examination is established. (Gov. Code, § 18938.5.)

During the period under review, the DMHC conducted 14 examinations. The CRU reviewed 11 of these examinations, which are listed below:

Classification	Exam Type	Exam Components	Final File Date	No. of Applications
Assistant Chief Counsel	Departmental Promotional	Qualifications Appraisal Panel (QAP) ²	11/19/2012	15
Associate Personnel Analyst	Departmental Promotional	Education & Experience (E&E) ³	11/08/2013	2

² The qualification appraisal panel (QAP) interview is the oral component of an examination whereby competitors appear before a panel of two or more evaluators. Candidates are rated and ranked against one another based on an assessment of their ability to perform in a job classification.

Classification	Exam Type	Exam Components	Final File Date	No. of Applications
Career Executive Assignment (CEA), Chief Counsel II	CEA	Statement of Qualifications (SOQ) ⁴	6/14/2013	7
CEA 2, Deputy Director, Office of Legal Services	CEA	SOQ	4/18/2014	1
CEA 2, Deputy Director, Office of Plan Licensing	CEA	SOQ	4/09/2013	6
CEA 3, Deputy Director, Plan and Provider Relations	CEA	SOQ	1/11/2013	8
Corporation Examiner	Departmental Promotional	E&E	Continuous	5
Senior Health Care Service Plan Analyst	Open	QAP	7/09/2013	7
Senior Life Actuary	Open	E&E	Continuous	1
Staff Health Care Service Plan Analyst	Open	E&E	4/01/2014	7
Supervising Health Care Service Plan Analyst	Departmental Promotional	QAP	10/16/2012	5

FINDING NO. 1 – EEO Questionnaires Were Not Separated from Applications

Summary: The DMHC did not separate 2 of 5 EEO questionnaires from the STD. 678 employment application for the Corporate Examiner examination.

³ In an education and experience (E&E) examination, one or more raters reviews the applicants' Standard 678 application forms, and scores and ranks them according to a predetermined rating scale that may include years of relevant higher education, professional licenses or certifications, and/or years of relevant work experience.

⁴ In a statement of qualifications (SOQ's) examination, applicants submit a written summary of their qualification and experience related to a published list of desired qualifications. Raters, typically subject matter experts, evaluate the responses according to a predetermined rating scale designed to assess their ability to perform in a job classification, assign scores and rank the competitors in a list.

Criteria: Government Code section 19704 makes it unlawful for a hiring department to require or permit any notation or entry to be made on any application indicating or in any way suggesting or pertaining to any protected category listed in Government Code section 12940, subdivision (a) (e.g., a person's race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status). Applicants for employment in state civil service are asked to provide voluntarily ethnic data about themselves where such data is determined by the California Department of Human Resources (CalHR) to be necessary to an assessment of the ethnic and sex fairness of the selection process and to the planning and monitoring of affirmative action efforts. (Gov. Code, § 19705.) The EEO questionnaire of the state application form (STD 678) states, "This questionnaire will be separated from the application prior to the examination and will not be used in any employment decisions."

Severity: Very Serious. The applicants' protected classes were visible, subjecting the agency to potential liability.

Cause: The failure to separate two EEO Questionnaires retained within a secured examination file occurred during a time when the single DMHC Examination Analyst position was vacant and a part-time retired annuitant examination analyst was addressing this workload. The ongoing difficulty in recruiting and retaining knowledgeable human resources personnel resulted in a process error.

Action: It is recommended that within 60 days of the Executive Officer's approval of these findings and recommendations, the DMHC submit to the CRU a written corrective action plan that the department will implement to ensure conformity with in the future that EEO questionnaires are separated from all applications. Copies of any relevant documentation should be included with the plan.

Appointments

In all cases not excepted or exempted by Article VII of the California Constitution, the appointing power must fill positions by appointment, including cases of transfers, reinstatements, promotions, and demotions in strict accordance with the Civil Service



Act and Board rules. (Gov. Code, §19050.) Appointments made from eligible lists, by way of transfer, or by way of reinstatement, must be made on the basis of merit and fitness, which requires consideration of each individual’s job-related qualifications for a position, including his or her knowledge, skills, abilities, experience, and physical and mental fitness.(Cal. Code Regs., tit. 2, §250, subd. (a).)

During the compliance review period, the DMHC made 218 appointments. The CRU reviewed 24 of those appointments, which are listed below:

Classification	Appointment Type	Tenure	Time Base	No. of Appointments
Attorney	Certification List	Permanent	Full Time	1
Consumer Assistance Technician	Certification List	Permanent	Full Time	1
Nurse Evaluator II, Health Services	Certification List	Permanent	Full Time	1
Office Technician (General)	Certification List	Permanent	Full Time	2
Office Technician (General) (LEAP)	Certification List	Limited Term	Full Time	1
Personnel Specialist	Certification List	Permanent	Full Time	1
Staff Programmer Analyst (Specialist)	Certification List	Permanent	Full Time	1
Staff Services Analyst (General)	Certification List	Permanent	Full Time	1
CEA, Chief Counsel II	Information List	Permanent	Full Time	1
CEA 2, Deputy Director, Office of Plan Licensing	Information List	Permanent	Full Time	1
CEA 3, Deputy Director, Plan and Provider Relations	Information List	Permanent	Full Time	1

Classification	Appointment Type	Tenure	Time Base	No. of Appointments
CEA 2, Office of Legal Counsel	Information List	Permanent	Full Time	1
Consumer Assistance Technician	Mandatory Reinstatement	Permanent	Full Time	1
Special Consultant	Temporary Appointment	Limited Term	Full Time	1
Associate Governmental Program Analyst	Transfer	Limited Term	Full Time	1
Associate Health Care Service Plan Analyst	Transfer	Permanent	Full Time	1
Auditor I	Transfer	Permanent	Full Time	1
Corporation Examiner	Transfer	Permanent	Full Time	1
Health Program Manager I	Transfer	Permanent	Full Time	1
Health Program Specialist I	Transfer	Limited Term	Full Time	1
Staff Services Analyst (General)	Transfer	Permanent	Full Time	3

FINDING NO. 2 – Appointment Documentation Was Not Kept for the Appropriate Amount of Time

Summary: The DMHC submitted 12 of 24 appointment files that did not contain hiring interview rating criteria.

Criteria: In relevant part, civil service laws require that the employment procedures of each state agency shall conform to the federal and state laws governing employment practices. (Gov. Code, §18720.) State agencies are required to maintain and preserve any and all applications, personnel, membership, or employment referral records and files for a minimum period of two years after the records and files are initially created or received. (Gov. Code,

§12946.) State agencies are also required to retain personnel files of applicants or terminated employees for a minimum period of two years after the date the employment action is taken. (Ibid.)

Severity: Serious. Without documentation, the CRU could not verify if the appointments were legal.

Cause: Although interview rating criteria was applied during the hiring process, some departing supervisors erroneously confidentially destroyed their supervisor files as opposed to turning them over to the Office Human Resources Liaison.

Action: It is recommended that within 60 days of the Executive Officer’s approval of these findings and recommendations, the DMHC submit to the CRU a written corrective action plan that addresses the corrections the department will implement to ensure conformity with the record retention requirements of Government Code section 12946. Copies of any relevant documentation should be included with the plan.

FINDING NO. 3 – Probationary Evaluations Were Not Provided For All Appointments Reviewed

Summary: The DMHC did not prepare, complete, and/or retain required probationary reports of performance for 3 of the 24 appointments reviewed by CRU.

Classification	Appointment Type	No. of Appointments	Number of Uncompleted Prob. Reports
Office Technician (General)	Certification List	1	1
Auditor I	Transfer	1	1
Health Program Manager I	Transfer	1	1
Total		3	3

Criteria: During the probationary period, the appointing power is required to evaluate the work and efficiency of a probationer at sufficiently frequent intervals to keep the employee adequately informed of progress on the job. (Gov. Code, § 19172; Cal. Code Regs., tit. 2,

§ 599.795.) The appointing power must prepare a written appraisal of performance each one-third of the probationary period. (Cal. Code Regs., tit. 2, § 599.795.)

Severity: Serious. The probationary period is the final step in the selection process to ensure that the individual selected can successfully perform the full scope of their job duties. Failing to use the probationary period to assist an employee in improving his or her performance or terminating the appointment upon determination that the appointment is not a good job/person match is unfair to the employee and serves to erode the quality of state government.

Cause: One supervisor elected to provide one report covering two reporting periods and two other supervisors, while addressing heavy workload and unit vacancies, were unable to complete all three reports.

Action: It is recommended that within 60 days of the Executive Officer's approval of these findings and recommendations, the DMHC submit to the CRU a written corrective action plan that addresses the corrections the department will implement to ensure conformity with the probationary requirements of Government Code section 19172.

Equal Employment Opportunity

Each state agency is responsible for an effective EEO program. (Gov. Code, § 19790.) The appointing power for each state agency has the major responsibility for monitoring the effectiveness of its EEO program. (Gov. Code, § 19794.) To that end, the appointing power must issue a policy statement committed to equal employment opportunity; issue procedures for filing, processing, and resolving discrimination complaints; issue procedures for providing equal upward mobility and promotional opportunities; and cooperate with the California Department of Human Resources (CalHR) by providing access to all required files, documents and data. (*Ibid.*) In addition, the appointing power must appoint, at the managerial level, an EEO officer, who shall report directly to, and be under the supervision of, the director of the department to develop, implement, coordinate, and monitor the department's EEO program. (Gov. Code, § 19795.) In a state agency with less than 500 employees, like DMHC, the EEO officer may be the personnel officer. (*Ibid.*)

Each state agency must establish a separate committee of employees who are individuals with a disability, or who have an interest in disability issues, to advise the

head of the agency on issues of concern to employees with disabilities. (Gov. Code, § 19795, subd. (b)(1).) The department must invite all employees to serve on the committee and take appropriate steps to ensure that the final committee is comprised of members who have disabilities or who have an interest in disability issues. (Gov. Code, § 19795, subd. (b)(2).)

The CRU reviewed the DMHC EEO program that was in effect during the compliance review period. In addition, the CRU interviewed appropriate DMHC staff.

FINDING NO. 4 – Equal Employment Opportunity Program Complied with Civil Service Laws and Board Rules

After reviewing the policies, procedures, and programs necessary for compliance with the EEO program's role and responsibilities according to statutory and regulatory guidelines, the CRU determined that the DMHC's EEO program provided employees with information and guidance on the EEO process including instructions on how to file discrimination claims. Furthermore, the EEO program outlines the roles and responsibilities of the EEO Officer, as well as supervisors and managers. The EEO Officer, who is at a managerial level, reports directly to the director of the DMHC. In addition, the DMHC has an established DAC, that reports to the director on issues affecting persons with a disability. The DMHC completed a workforce analysis, which was submitted to the CRU. The DMHC also provided evidence of its efforts to promote equal employment opportunity in its hiring and employment practices, to increase its hiring of persons with disabilities, and to offer upward mobility opportunities for its entry-level staff.

Personal Services Contracts

A PSC includes any contract, requisition, or purchase order under which labor or personal services is a significant, separately identifiable element, and the business or person performing the services is an independent contractor that does not have status as an employee of the State. (Cal. Code Reg., tit. 2, § 547.59.) The California Constitution has an implied civil service mandate limiting the state's authority to contract with private entities to perform services the state has historically or customarily performed. Government Code section 19130, subdivision (a), however, codifies exceptions to the civil service mandate where PSC's achieve cost savings for the state. PSC's that are of a type enumerated in subdivision (b) of Government Code section 19130 are also permissible. Subdivision (b) contracts include private contracts for a new state function, services that are not available within state service, services that are

incidental to a contract for the purchase or lease of real or personal property, and services that are of an urgent, temporary, or occasional nature.

For cost-savings PSC's, a state agency is required to notify the SPB of its intent to execute such a contract. (Gov. Code, § 19131.) For subdivision (b) contracts, the SPB reviews the adequacy of the proposed or executed contract at the request of an employee organization representing state employees. (Gov. Code, § 19132.)

During the compliance review period, the DMHC had 31 PSC's that were in effect. The CRU reviewed nine of those contracts, which are listed below:

Vendor	Services	Contract Dates	Contract Amount	Justification Identified
Aurora Enterprises	Implementation Services for Software	10/22/2013 – 5/31/2014	\$75,525.23	Yes
Leading Resources	Strategic Consulting Services	12/23/2013 - 9/30/2014	\$146,088.22	Yes
Legal Aid Society of San Diego,	Consumer Assistance	4/07/2014 - 8/31/2016	\$1,456,255.00	Yes
MAXIMUS Federal Services, Inc.	Independent Dispute Resolution Determinations	6/26/2013 - 6/30/2015	\$144,000.00	Yes
MAXIMUS Federal Services, Inc.	Independent Medical Review Services	6/29/2013 - 6/28/2015	\$2,500,000.00	Yes
Paperless Knowledge	Knowledge Management Software	12/15/2013 - 8/23/2015	\$145,500.00	Yes
Quest Analytics	IT Integration Services	6/22/2013 - 5/31/2016	\$428,500.00	Yes
Samsan Consulting	IT Programming Services	3/12/2013 - 3/23/2014	\$279,000.00	Yes
Western University of Health Care	Affordable Care Act Outreach Materials	6/28/2013 - 2/23/2014	\$259,533.00	Yes

FINDING NO. 5 – Personal Services Contracts Complied With Procedural Requirements

When a state agency requests approval from the Department of General Services (DGS) for a subdivision (b) contract, the agency must include with its contract transmittal a written justification that includes *specific and detailed factual information* that demonstrates how the contract meets one or more conditions specified in Government Code section 19131, subdivision (b). (Cal. Code Reg., tit. 2, § 547.60.) The total amount of all the PSCs reviewed was \$5,434,401.45. It was beyond the scope of the review to make conclusions as to whether DMHC’s justifications for the contract were legally sufficient. For all PSCs subject to DGS approval, the DMHC provided specific and detailed factual information in the written justifications as to how each of the 15 contracts met at least one condition set forth in Government Code section 19131, subdivision (b). Accordingly, the DMHC’s PSC’s complied with civil service laws and board rules.

DEPARTMENTAL RESPONSE

The DMHC’s response is attached as Attachment 1.

SPB REPLY

Based upon the DMHC’s written response, the DMHC will comply with the CRU recommendations and findings and provide the CRU a corrective action plan.

It is further recommended that the DMHC comply with the afore-stated recommendations within 60 days of the Executive Officer’s approval and submit to the CRU a written report of compliance.

MEMORANDUM

DATE: March 25, 2015

TO: Compliance Review Unit
State Personnel Board

FROM: Michelle Rouillard *Michelle Rouillard*
Director, Department of Managed Health Care

SUBJECT: STATE PERSONNEL BOARD COMPLIANCE REVIEW – DEPARTMENT RESPONSE

The Department of Managed Health Care (DMHC) thanks the Compliance Review Unit (CRU) audit team for their dedication and professionalism throughout this process. The CRU audit team's compliments on several DMHC "Best Practices" deployed by its Human Resources team were very rewarding.

As discussed with the CRU audit team, the DMHC is currently developing automated solutions to exclude repetitive manual tasks that lead to procedural errors. Additionally, compliance checklists were developed for the following three Merit System processes:

- Hiring Supervisor Files
- Request for Personnel Action Files
- Examination Documentation Files

These checklists, deployed in 2014, have significantly improved procedural compliance and are expected to improve compliance in future CRU audits. The DMHC responses to each finding of the current CRU report are provided below.

Finding 1: EEO Questionnaires Were Not Separated from Applications

The DMHC acknowledges that 2 of the 47 applications tested included the EEO Questionnaire. These 2 applications were contained within a secured Education and Experience (E&E) examination file. The DMHC procedure is to separate the EEO Questionnaire from an examination application and place it into a sealed envelope within the E&E examination file. Applications for an E&E examination are received, processed, scored, and filed by the Examination Analyst, only. The Examination Analyst is required to upload the EEO Questionnaire into the CalHR Examination Legacy System. As such, the Examination Analyst is exposed to this information as a matter of business process. At no time was this information exposed to hiring supervisors or used in an employment decision.

Corrective Action:

The DMHC has prepared an Examination File "Checklist" that will be attached to the front of each file. This checklist includes the requirement to separate the EEO Questionnaire from the Examination Application and its placement into a sealed envelope within the examination file. The Examination Analyst is required to initial each checklist item prior to closing out the file.

Finding 2: Appointment Documentation Was Not Kept for the Appropriate Time

The DMHC acknowledges that 12 of the 24 appointment files tested, from the November 1, 2012 through April 30, 2014 audit period, were missing a copy of the interview rating criteria. Although interview rating criteria was applied during the hiring process supervisor turnover contributed to the difficulty of securing complete hiring documentation.

Corrective Action:

The DMHC launched its best practice "HR Liaison Academy" on June 11, 2013. All program HR Liaisons were provided training on Module 4, "Merit Based Candidate Selection" on March 11, 2014. This module covered the application screening matrix, the interview scoring tool, and the components of the application selection file which must be retained for two years by the Office HR Liaison for SPB audit purposes. The DMHC has seen a significant compliance improvement in hiring supervisor document retention since the class was given. As the SPB Compliance Audit period predated the Module 4 training by 13 months, the DMHC was expecting that some documents may not have been retained properly. The DMHC anticipates the next SPB Audit will reveal significant improvement in interview rating sheet retention.

Finding 3: Probationary Evaluations Were Not Provided For All Appointments

The DMHC recognizes the importance of the Probationary Period reporting for both the employee and the organization. The 24 appointments tested required 3 probation reports each, for a total of 72 reports. The audit revealed that while every appointed employee did receive probationary reports there were 3 employees who received 2, rather than 3, probation reports.

Corrective Action:

The DMHC has redoubled its efforts to keep supervisors on track by temporarily utilizing Outlook appointments for each of the 3 probationary reports required by each new appointment and by elevating outstanding probationary reports to the responsible Deputy Director. The DMHC will be looking at departments that deploy an automated tool to release and collect these reports, while generating a deficiency report, in order to improve Probationary Report compliance.

The DMHC strives to ensure all Merit System principles, practices, laws and rules are observed in order to ensure an objective and fair appointment system. Thank you for the opportunity to revisit our processes in support of our Human Resources Office ongoing process improvement.