

Nature of Action and  
Remarks Codes

Nature of Actions

The following Nature of Actions, and their Authority, is to be used when documenting actions on the Individual Retirement Records (IRR's) for former Federal appointees employed by the Cooperative Extension Service (CES). Questions regarding these Nature of Actions, or their use, should be addressed to the U. S. Department of Agriculture (USDA), Agricultural Research Service, Human Resources Division, Metropolitan Services Branch, Cooperative Extension Team. Some of the Nature of Actions are unique to the USDA, Cooperative Extension Service.

**APPOINTMENT ACTIONS**

**AUTHORITY**

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**CHANGE ACTIONS**

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- 4 Administrative Pay Decrease
- 5 Reassignments (that result in a pay change)
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- 7 Military Furlough NTE
- 8 LWOP NTE
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- 10 Return to Duty
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- 13 Change in TSP (from enrolled to not enrolled or vice versa) - Show the change in Remarks
- 14 Change in FEHB (from enrolled to not enrolled or vice versa) - Show the change in Remarks
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34	Retirement Special Option (FERS Early Out)	*USM and AZM *5 U.S.C. Chapter 84 *OPM Authorization
35	Retirement-In Lieu of Involuntary Action (ILIA) (CSRS DSR or FERS DSR))	
36	Retirement Mandatory (CSRS or FERS)	
37	Death	

Note: Nature of Actions that have Authorities and Authority Codes must include the Authority and Code on the IRR's.

\* These authorities may change. The proper authority will be included in the letter of approval for the Voluntary Early Out request.

## Remarks

The following remarks codes are to be used when processing Federal personnel actions for Cooperative Extension Service employees with Federal benefits. Any questions regarding these remarks, or their use, should be addressed to the U. S. Department of Agriculture, Agricultural Research Service, Human Resources Division, Metropolitan Services Branch, Cooperative Extension Team. Some of the remarks codes, like the CES- 436 Notification of Personnel Action form and codes, are unique to the U.S. Department of Agriculture, Cooperative Extension Services and are not used by other Federal agencies.

### (1) Re-Appointment

RAP 1 Previously employed with \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

(Official Personnel Folder for prior service must be requested and received prior to the effective date of the reappointment action.)

RAP 2 Creditable Military Service from \_\_\_\_\_ to \_\_\_\_\_, has been verified.

(Request DD-214 or equivalent and file right side OPF)

RAP 3 Prior military/civilian service from \_\_\_\_\_ to \_\_\_\_\_ is not creditable for Retirement

RAP 4 Employee has 31 days to enroll in the Federal Employees Group Life Insurance program

RAP 5 Employee has 60 days to enroll in the Federal Employees Health Benefits

RAP 6 Employee is eligible to participate in the Thrift Savings Plan immediately.

RAP 7 Employee is eligible to participate in the Thrift Savings Plan during the first open season to be conducted from \_\_\_\_\_ to \_\_\_\_\_.

RAP8 FERS employee eligible for Immediate Government contribution.

RAP 9 Organization does not contribute matching funds to the employee's TSP account.

RAP 10 TSP SCD is \_\_\_\_\_.

(Enter the TSP-SCD to establish the date for the vesting of contributions).

- RAP11 Employee has prior TSP withholdings with agency contributions from \_\_\_\_\_ to \_\_\_\_\_.  
(Enter the beginning and ending date of service with agency contributions to the employee's TSP account).
- RAP 12 Employee has prior federal service with no break in service.
- RAP 13 Employee already enrolled in the Federal Employee Group Life Insurance
- RAP 14 Employee already enrolled in the Federal Employee Health Benefits
- RAP 15 Previous retirement coverage was \_\_\_\_\_
- RAP 16 Previously ineligible to participate in the Thrift Savings Plan.
- RAP 17 Leave to be re-credited.  
  
Leave can be re-credited IF the *last appointment* was with the same Cooperative Extension organization with the same leave policies and procedures. Note: There may be a limitation on the length of time off the rolls for the leave to be re-credited.
- RAP 18 Leave cannot be transferred  
  
Leave from other Cooperative Extension organizations and other federal agencies is not transferable to the new Cooperative Extension organization.
- RAP 19 Competitive selection under Announcement Number \_\_\_\_\_ which opened on \_\_\_\_\_ and closed on \_\_\_\_\_.  
  
(This remark is **mandatory** for the selection and appointment/promotion, or reassignment of employees with Federal benefits to the position of Director/Administrator and other key administrative positions. This remark can also be used for other positions that are filled using competitive principles and practices.)
- RAP 20 Eligible to elect coverage under the Federal Employees Retirement System (FERS) within six months of the effective date of this personnel action. SF-3109 provided to employee.

This remark is required on all re-appointment actions for employees that are covered under the CSRS retirement plan.

RAP 21 Enter remarks appropriate for the college/university process and procedures.

(2) Promotion

PRM 1 Competitive selection under Announcement Number \_\_\_\_\_ which opened on \_\_\_\_\_ and closed on \_\_\_\_\_.

(This remark is **mandatory** for the selection and appointment/promotion, or reassignment of an employee with Federal benefits to the position of Director/Administrator and other key administrative positions. This remark can also be used for other positions that are filled using competitive principles and practices.)

PRM 2 Enter remarks appropriate for the college/university process and procedures.

(3) Administrative Pay Increase

API 1 Pay increase as a result of \_\_\_\_\_

Enter the remarks appropriate for the pay increase, e.g. Letter from the President, dated 1/1/00, authorizing a 4.5 % pay increase.

(4) Administrative Pay Decrease

APD 1 Pay decrease as a result of \_\_\_\_\_

Enter the reason for the decrease in pay

(5) Reassignments (that result in a pay change)

RSM 1 Competitive selection under Announcement Number \_\_\_\_\_ which opened on \_\_\_\_\_ and closed on \_\_\_\_\_.

(This remark is **mandatory** for the selection and appointment/promotion, or reassignment of an employee with Federal benefits to the position of Director/Administrator and other key administrative positions. This remark can also be used for other positions that are filled using competitive principles and practices.)

RSM 2 Enter remarks appropriate for the college/university process and procedures.

(6) Sabbatical NTE (enter the not to exceed date for the Sabbatical)

SAB 1 Employee is to suffer no loss or reduction in pay, or credit for time or service.

(7) Military Furlough NTE (enter the not to exceed date for the military furlough)

MFN 1 Copy of military orders on file

(Request a copy of the military orders and file Right side OPF.)

MFN 2 FEGLI stops, except for a 31 day extension of coverage, on the day immediately before entry on active duty.

(8) LWOP NTE (enter the not to exceed date for the extended leave with no pay)

(Note: LWOP must be beneficial to employee and agency and reasonable expectancy to return.)

LWP 1 Action at Employee's request

(A copy of the employee's request for leave without pay must be maintained with the employee's time sheets.)

LWP 2 Reason for placement in nonpay status

(Enter the reason that the employee is placed on leave without pay.)

LWP 3 FEHB continues while in nonpay status for 365 days and the employee is required to pay the premiums while in non-pay status.

(Enter this remark codes IF the employee participates in the Federal Employees Health Benefits program. Also issue letter to employee advising them of their obligation to pay their premiums.)

LWP 4 FEHB terminated. Employee elected not to pay premiums while in nonpay status. (Also need to process change in FEHB action.)

LWP 5 FEGLI coverage continues, with no cost to the employee, for the first 12 months in nonpay status.

LWP 6 Employee is entitled to 6 months of nonpay time during a calendar year with no loss to creditable service for retirement purposes.

LWP 7 To be or expected to be paid under 5 U.S.C. Chapter 81

(Enter this remark for OWCP LWOP.)

LWP 8 FEHB will continue while OWCP is being paid and the premiums will be deducted from the OWCP payments.

LWP 9 Basic FEGLI coverage will continue under OWCP and the premiums will be deducted from the OWCP payments.

LWP 10 Basic and Optional FEGLI coverage will continue under OWCP and the premiums will be deducted from the OWCP payments.

LWP 11 Employee ineligible for Optional FEGLI coverage while on OWCP.

(9) Ext of LWOP NTE (enter the new not to exceed date for the LWOP period)

ELWP 1 Initial LWOP started \_\_\_\_\_

(10) Return to Duty

RTD 1 Time off on LWOP is creditable for retirement.

RTD 2 Employee has \_\_\_\_\_ excess LWOP in calendar year.

(Need to re-compute SCD for Retirement and process a Change In SCD for Retirement with the RTD action.)

RTD 3 Employee has 31 days to elect FEGLI coverage.

RTD 4 Employee has 60 day to enroll in FEHB

(11) Change in Service Computation Date (SCD) for Retirement

CSCD 1 Change as a result of error in the computation of the former SCD date.

CSCD 2 Change as a result of additional service that was not included in the prior SCD date.

(12) Change in Retirement Plan

CRP 1 Retirement plan changed as a result of \_\_\_\_\_

(Enter the reason for the change in Retirement plan, e.g., FERS Open Season, Error in determining the correct retirement coverage.)

CRP 2 Enter remarks unique to the situation and/or university/college.

(13) Change in TSP

CTSP 1 Elected to enroll in TSP

CTSP 2 Agency will contribute % in matching funds

CTSP 3 Agency will not contribute matching funds

CTSP 4 Employee participates in TSP with no matching funds

Use this remark for CSRS participants

(14) Change in FEHB

CFHB 1 Employee canceled FEHB coverage

CFHB 2 FEHB change due to \_\_\_\_\_

(Enter the event that allowed the employee to change FEHBA coverage.)

CFHB 3 FEHB canceled because \_\_\_\_\_

(Enter the reason for the cancellation.)

CFHB 4 FEHB terminated because \_\_\_\_\_

(Enter the reason for the termination.)

(15) Change in FEGLI

CFGL 1 Employee canceled FEGLI coverage

CFGL 2 FEGLI change due to \_\_\_\_\_

(Enter the event that allowed the employee to change FEGLI coverage.)

CFGL 3 FEGLI canceled because \_\_\_\_\_

(Enter the reason for the cancellation.)

CFGL 4 FEGLI Terminated because \_\_\_\_\_

(Enter the reason for the termination.)

(16) Elected Full Living Benefits

EFLB 1 Elected full Living Benefits on \_\_\_\_\_.  
Basic coverage now equals zero.

(17) Elected Partial Living Benefits

EPLB 1 Elected partial Living Benefits on \_\_\_\_\_.  
Post-election Basic Insurance Amount is \_\_\_\_\_.  
Must elect "No reduction" at retirement."

EPLB 2 Optional insurance amounts are Option A \_\_\_\_\_,  
Option B (including the number of multiples, if applicable) \_\_\_\_\_

(18) Name Change from ( )

NMCG 1 Name change due to ( )

NMCG 2 Name change was reported to the Social Security Administration by the employee  
on \_\_\_\_\_.

(19) Change in Work Schedule

CWSH 1 You may change your HB enrollment within 60 days after the effective date of  
this action. Government share will be reduced because you are working part-time.

(Use this remark if the work schedule changes from full-time to part-time and the  
employee is enrolled in a Federal health plan.) .)

CWSH 2 Government share of premium for health benefits coverage will be reduced  
because you are working part time. You will have to pay the employee share of  
the premium plus the difference between what the government pays.

(Use this remark if the work schedule changes from full-time to part-time and the  
employee is enrolled in a Federal health plan.)

(20) Change in Hours

CGHR 1 Change in work hours from \_\_\_\_\_ hours to \_\_\_\_\_ hours per week.

(21) (Year) Part-Time Paid Hours xxx

(22) Military Service History and Deposit Record

(23) Deposit for Non-Deducted Service

(24) Redeposit for prior CSRS service

(25) No Post -1956 Military Service Credit  
Deposit Made with This Agency

(26) Resignation

RESG 1 Employee resigned to \_\_\_\_\_

Enter the reason for the resignation, i.e., to return to school, moving out of  
the area, accepted position with private industry, etc.

RESG 2 Forwarding Address is \_\_\_\_\_

Enter the forwarding address for the employee.

RESG 3 Official Personnel Folder will be forwarded to the National Personnel Records Center in St. Louis, Missouri, 111 Winnebago Street, St. Louis, Missouri 63118.

RESG 4 Health Insurance coverage is extended for 31 days during which you are eligible to convert to an individual policy (non-group contract), and you may be eligible for Temporary Continuation of Coverage (TCC). SF-2810 was provided on \_\_\_\_\_.

Enter the date the SF-2810 was given to the employee.

RESG 5 Life insurance coverage is extended for 31 days during which you are eligible to convert to an individual policy (non-group contract). SF-2819 was provided on \_\_\_\_\_.

Enter the date the SF-2819 was given to the employee.

RESG 6 Employee has assigned ownership of Life Insurance Coverage. Assignment terminates 31 days after separation date unless employee is entitled to continued coverage before that date.

RESG 7 You appear to be eligible for immediate MRA +10 retirement annuity. If you have questions, contact your agency retirement counselor.

RESG 8 You appear to be eligible for early deferred retirement benefits at age \_\_\_\_\_. If you have questions, contact your agency retirement counselor.

Enter the age that the employee will be eligible for an early deferred retirement.

RESG 9 Enter remarks appropriate for the college/university process and procedures.

(27) Term Appt in (Agency)

TMAI 1 Employee accepted position with \_\_\_\_\_

Enter the government organization that the employee is going to, i.e. the gaining agency.

TMAI 2 Forwarding Address is \_\_\_\_\_

Enter the forwarding address for the employee.

TMAI 3 Official Personnel Folder will be forwarded to the \_\_\_\_\_  
(Enter the name of the gaining agency and address that the OPF was/is to be sent.)

TMAI 4 Health Insurance is transferred to \_\_\_\_\_ effective \_\_\_\_\_.

TMAI 5 Health Insurance cannot be transferred to the gaining agency because \_\_\_\_\_ and coverage is extended for 31 days during which you are eligible to convert to an individual policy (non-group contract), or you may enroll in the Temporary Continuation of Coverage (TCC) provided by the Federal Health Benefits Program. SF-2810 was provided on \_\_\_\_\_.

Enter the reason why the health insurance cannot be transferred and the date that the SF-2810 was given to the employee.

TMAI 6 Life Insurance is transferred to \_\_\_\_\_ effective \_\_\_\_\_.

TMAI 7 Life insurance cannot be transferred to the gaining agency because \_\_\_\_\_ and coverage is extended for 31 days during which you are eligible to convert to an individual policy (non-group contract). SF-2819 was provided on \_\_\_\_\_.

Enter the reason why the life insurance cannot be transferred and the date that the SF-2819 was given to the employee.

(28) Termination - Inefficiency

TMI 1 Employee terminated because \_\_\_\_\_. Notice issued on \_\_\_\_\_.

Enter the reason for the termination inefficiency and the date of the notice provided to the employee.

TMI 2 Forwarding Address is \_\_\_\_\_.

Enter the forwarding address for the employee.

TMI 3 Official Personnel Folder will be forwarded to the National Personnel Records Center, 111 Winnebago Street, St. Louis, Missouri 63118.

TMI 4 Health Insurance is terminated and coverage continues for 31 days after the effective date of termination. You are eligible to convert to an individual policy (non-group contract), or you may enroll in the Temporary Continuation of Conversion (TCC) plan for your Federal Health Benefits coverage. SF-2810 was provided on \_\_\_\_\_.

TMI 5 Life insurance is terminated and coverage is extended for 31 days during which you are eligible to convert to an individual policy (nongroup contract). SF-2819 was provided on \_\_\_\_\_.

TMI 6 Employee has assigned ownership of Life Insurance Coverage. Assignment terminates 31 days after separation date unless employee is entitled to continued

coverage before that date.

TMI 7 You appear to be eligible for immediate MRA +10 retirement annuity. If you have questions, contact your agency retirement counselor.

TMI 8 You appear to be eligible for early deferred retirement benefits at age \_\_\_\_\_. If you have questions, contact your agency retirement counselor.

Enter the age that the employee will be eligible for an early deferred retirement.

TMI 9 Enter remarks appropriate for the college/university process and procedures.

(29) Termination – Reduction in Force

(30) Termination

TM 1 Employee terminated because \_\_\_\_\_. Notice issued on \_\_\_\_\_.

Enter the reason for the termination, e.g. lack of funds, transfer of function outside the commuting area, and the date of the notice to the employee.

TM 2 Forwarding Address is \_\_\_\_\_.

Enter the forwarding address for the employee.

TM 3 Official Personnel Folder will be forwarded to the National Personnel Records Center, 111 Winnebago Street, St. Louis, Missouri 63118.

TM 4 Health Insurance is terminated and coverage continues for 31 days after the effective date of termination. You are eligible to convert to an individual policy (non-group contract), or you may enroll in the Temporary Continuation of Conversion (TCC) plan for your Federal Health Benefits coverage. SF-2810 was provided on \_\_\_\_\_.

TM 5 Life insurance is terminated and coverage is extended for 31 days during which you are eligible to convert to an individual policy (nongroup contract). SF-2819 was provided on \_\_\_\_\_.

TM 6 Employee has assigned ownership of Life Insurance Coverage. Assignment terminates 31 days after separation date unless employee is entitled to continued coverage before that date.

TM 7 You appear to be eligible for immediate MRA +10 retirement annuity. If you have questions, contact your agency retirement counselor.

TM 8 You appear to be eligible for early deferred retirement benefits at age \_\_\_\_\_. If you have questions, contact your agency retirement counselor.

Enter the age that the employee will be eligible for an early deferred retirement.

TM 9 Enter remarks appropriate for the college/university process and procedures.

(31) Retirement-Disability (CSRS or FERS)

(32) Retirement Voluntary (CSRS or FERS)

(33) Retirement Special Option (CSRS Early Out)

(34) Retirement Special Option (FERS Early Out)

(35) Retirement-In Lieu of Involuntary Action (ILIA) (CSRS DSR or FERS DSR)

(36) Retirement Mandatory (CSRS or FERS)

(37) Death