|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | |  | | --- | | **State of Michigan Civil Service Commission** | |  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **Position Code** | |  | |  |  | | |  | | --- | | 1. FINCALTEE64N | | | | |  | |  | | --- | | Capitol Commons Center, P.O. Box 30002 Lansing, MI 48909 | | | | | |  | |  |  |  | |  |  |  |  |  |  |  |  | |  |  | |  | | --- | | **POSITION DESCRIPTION** | | | |  |  |  | |  |  |  |  |  |  |  |  | |  |
|  |  |  |  |  |
|  |  | |  |  | | --- | --- | | |  | | --- | | This position description serves as the official classification document of record for this position. Please complete the information as accurately as you can as the position description is used to determine the proper classification of the position. | | |  | | |  |  | | --- | --- | | **2. Employee's Name (Last, First, M.I.)** | **8. Department/Agency** | |  | MDHHS-COM HEALTH CENTRAL OFF | | **3. Employee Identification Number** | **9. Bureau (Institution, Board, or Commission)** | |  | Budget | | **4. Civil Service Position Code Description** | **10. Division** | | FINANCIAL ANALYST-E | Information Technology and Administration Division | | **5. Working Title (What the agency calls the position)** | **11. Section** | | Budget Liaison | HHS Information Technology Section | | **6. Name and Position Code Description of Direct Supervisor** | **12. Unit** | | FOSTER, SHAWNA; STATE ADMINISTRATIVE MANAGER-1 |  | | **7. Name and Position Code Description of Second Level Supervisor** | **13. Work Location (City and Address)/Hours of Work** | | PHILLIPS, JEREMY R; STATE DIVISION ADMINISTRATOR | Grand Tower Building: 235 S. Grand Ave, Lansing, MI / Monday - Friday; 8am - 5pm | | |  | | |  |
|  | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  | |  | | --- | | **14. General Summary of Function/Purpose of Position** | |  |  | |  |  |  |  | | |  | | --- | | The role is responsible for creating and overseeing annual spending plans and quarterly financial projections.  It involves monitoring and correcting revenue and expenditure activity, establishing account coding and reporting systems, and providing technical information to program management for assigned appropriations. | | | |  | |  |  |  |  | | | |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **15. Please describe the assigned duties, percent of time spent performing each duty, and what is done to complete each duty.  List the duties from most important to least important. The total percentage of all duties performed must equal 100 percent.** | | | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | **Duty 1** | | | | **General Summary:** | **Percentage:** | **30** | | Prepare and monitor financial reports and data to ensure expenditures and revenues are posting correctly and to provide others with information. | | | | **Individual tasks related to the duty:** |  |  | | * Provide analysis of expenditures and revenues; identify problems or issues and take correction action when required. * Maintain frequent contact with grant accounting, accounting and program staff about expenditures and revenue. * Maintain financial reports using the State’s financial reporting tool, Business Intelligence, and other data sources. * Provide technical assistance to program management regarding budget availability, spending, and other financial issues. | | | | **Duty 2** | | | | **General Summary:** | **Percentage:** | **50** | | Develop annual spend plans and quarterly projections for assigned appropriations. | | | | **Individual tasks related to the duty:** |  |  | | * Conduct reviews of budget bills to identify appropriated funding amounts, full time equivalent (FTE) counts, and spending requirements defined in the boilerplate language. * Update budget documents and spending plans from previous years with input from program management. * Communicate regularly with program staff to gather details about planned expenditures and any adjustments. Incorporate adjustments into spend plans and provide regular updates on financial status. * Prepare quarterly projections to compare actual expenses and revenue with budgeted assumptions. * Gather and prepare information for work project requests. | | | | **Duty 3** | | | | **General Summary:** | **Percentage:** | **20** | | Maintain account coding for assigned appropriations to (1) track and monitor revenues and expenditures, (2) ensure spending remains within available amounts, (3) provide program management with relevant financial information, and (4) comply with state and federal reporting requirements. | | | | **Individual tasks related to the duty:** |  |  | | * Works with program and finance staff to assist in developing account coding. * Apply account coding to and approve employee requisitions and contracts. | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **16. Describe the types of decisions made independently in this position and tell who or what is affected by those decisions.** | | |  |  | | |  | | --- | | Maintaining the appropriate account classification structure, developing financial reporting systems, interpreting financial data, monitoring and reconciling financial transactions, providing technical assistance to program management regarding financial issues, and preparation of the annual spending plans.  Working with program management to identify financing sources to implement new programs or modify existing programs. | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **17. Describe the types of decisions that require the supervisor's review.** | | |  |  | | |  | | --- | | Release of confidential and/or sensitive information to outside contacts, implementation of major policy/legislative changes or new major programs, final inclusion of recommendations in the department’s annual budget request, final submission of legislative transfer and supplemental appropriation requests. | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | |  |  |  | | --- | --- | --- | |  | |  | | --- | | **18. What kind of physical effort is used to perform this job? What environmental conditions in this position physically exposed to on the job? Indicate the amount of time and intensity of each activity and condition. Refer to instructions.** | | |  |  | | |  | | --- | | Office environment. | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | |  |  |  |  | | --- | --- | --- | --- | | |  | | --- | | **19. List the names and position code descriptions of each classified employee whom this position immediately supervises or oversees on a full-time, on-going basis.** | | | | |  |  |  | | |  | | --- | | **Additional Subordinates** | | |  | |  |  |  | |  | |  | | --- | |  | |  | |  |  |  | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **20. This position's responsibilities for the above-listed employees includes the following (check as many as apply):** | | | | | | | | | | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Complete and sign service ratings. | |  | |  | | --- | | N | |  | |  | | --- | | Assign work. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Provide formal written counseling. | |  | |  | | --- | | N | |  | |  | | --- | | Approve work. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | |  | | --- | | N | |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Approve leave requests. | |  |  | |  | | --- | | Review work. | |  | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Approve time and attendance. | |  | |  | | --- | | N | |  | |  | | --- | | Provide guidance on work methods. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Orally reprimand. | |  | |  | | --- | | N | |  | |  | | --- | | Train employees in the work. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **22. Do you agree with the responses for items 1 through 20? If not, which items do you disagree with and why?** | | | |  |  | |  | |  | | --- | | Yes. | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **23. What are the essential functions of this position?** | | | |  |  | |  | |  | | --- | | The role is responsible for creating and overseeing annual spending plans and quarterly financial projections.  It involves monitoring and correcting revenue and expenditure activity, establishing account coding and reporting systems, and providing technical information to program management for assigned appropriations. | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.** | | | |  |  | |  | |  | | --- | |  | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **25. What is the function of the work area and how does this position fit into that function?** | | | |  |  | |  | |  | | --- | | This section is responsible for budget development, implementation, and monitoring; financial reporting, forecasting and analyses; serves as a liaison between program office staff and the Financial Operations Administration. | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **26. What are the minimum education and experience qualifications needed to perform the essential functions of this position.** | | | | | | |  | |  |  |  |  |  |  |  | | |  | | --- | | **EDUCATION:** | | |  |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | Possession of a bachelor's degree in any major with at least 12 semester (18 term) credits in one or a combination of the following: accounting, finance, or economics. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **EXPERIENCE:** | | |  |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | **Financial Analyst 9** No specific type or amount is required.  **Financial Analyst 10** One year of professional experience providing a systematic review, analysis, interpretation, and/or evaluation of budgets, mortgages, loans, or other financial data, equivalent to a Financial Analyst 9, Accountant 9, or Auditor 9.  **Financial Analyst P11** Two years of professional experience providing a systematic review, analysis, interpretation, and/or evaluation of budgets, mortgages, loans, or other financial data, equivalent to a Financial Analyst, including one year equivalent to a Financial Analyst 10, Accountant 10, or Auditor 10. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **KNOWLEDGE, SKILLS, AND ABILITIES:** | | | |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | As listed on the Civil Service job specification. In addition to:  Ability to effectively communicate.  Ability to interpret and analyze financial data.  Ability to assimilate data, analyze facts, apply criteria and make logical conclusions or recommendations.  Knowledge of financial management principles and practices.  *The MDHHS mission is to provide opportunities, services, and programs that promote a healthy, safe, and stable environment for residents to be self-sufficient. We are committed to ensuring a diverse workforce and a work environment whereby all employees are treated with dignity, respect and fairness.* | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **CERTIFICATES, LICENSES, REGISTRATIONS:** | | | | |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | None. | | | | | | | | |  |  |  |  |  |  |  | |  | |  | | --- | | ***NOTE: Civil Service approval does not constitute agreement with or acceptance of the desired qualifications of this position.*** | | | | |  |  | |  |  |  |  |  |  |  | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.*** | | | |  | |  | |  | | --- | |  | |  | |  | | --- | |  | |  | |  |  |  |  |  | |  | |  | | --- | | **Supervisor** | |  | |  | | --- | | **Date** | |  | |  |  |  |  |  | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | |  | | --- | | **TO BE FILLED OUT BY APPOINTING AUTHORITY** | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | |  |  |  | | --- | --- | --- | |  |  |  | |  | |  | | --- | | **Indicate any exceptions or additions to the statements of employee or supervisors.** | |  | |  |  |  | |  | |  | | --- | | None | |  | |  |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***I certify that the entries on these pages are accurate and complete.*** | | | |  | |  |  |  |  |  | |  | |  | | --- | | HILLARY PLATTE | |  | |  | | --- | | 12/5/2024 | |  | |  |  |  |  |  | |  | |  | | --- | | **Appointing Authority** | |  | |  | | --- | | **Date** | |  | |  |  |  |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.*** | | | |  | |  | |  | | --- | |  | |  |  |  | |  |  | |  | | --- | |  | |  | |  |  |  |  | |  |  |  |  |  | |  | |  | | --- | | **Employee** | |  |  |  | |  |  | |  | | --- | | **Date** | |  | |  |  |  |  | |  |  |  |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |