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SE	CTION 1. I	POSITIO	N INFORMA	ATION					
а.	Classificat	ion Title:	Business (Operations	Manager 2				
э.	Classificat	ion No:	X7084			C.	Effective I	Date: 10	/1/2025
d.	I. Position No:		2730399						
Э.	Working T	itle:	Marketplac	e Busines	s Process ar	nd Data Qua	ality Manage	er	
	Agency No	o:	44300						
g.	Section Ti	tle:	Oregon He	ealth Insura	ance Market	olace			
ղ.	Employee	Name:							
i.	Work Loca	ation (City	/ — County)	: Salem	- Marion				
j.	Superviso	r Name:	Misty Raya	as					
Κ.	Position:	⊠ Perm	anent	Seaso	nal	Limited	Duration	☐ Acad	emic Year
		⊠ Full-T	ime	☐ Part-T	ime	☐ Intermit	tent	☐ Job S	Share
١.	FLSA:	⊠ Exem	npt I	f Exempt:		re m.	Eligible for	Overtime	:
		 ☐ Non-E	Exempt	•	 ☐ Professi		J		_ ⊠ No
			•		Adminis	trative			

SECTION 2. PROGRAM AND POSITION INFORMATION

a. Describe the program in which this position exists. Include program purpose, who's affected, size and scope. Include relationship to agency mission.

The Oregon Health Authority (OHA) values health equity, service excellence, integrity, leadership, partnership, innovation, and transparency. OHA's health equity definition is "Oregon will have established a health system that creates health equity when all people can reach their full potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, age, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances. Achieving health equity requires the ongoing collaboration of all regions and sectors of the state, including tribal

governments to address: the equitable distribution or redistributing of resources and power; and recognizing, reconciling, and rectifying historical and contemporary injustices." OHA's 10-year goal is to eliminate health inequities.

The Health Policy and Analytics (HPA) Division is aligned with the OHA's core values of partnership, service excellence, leadership, integrity, health equity, innovation, and transparency. In our practice, these values are expressed through:

Service Excellence:

- Understanding and responding to Oregon public health needs and the people we serve
- Pursing our commitment to innovation and science-based best practices
- Fostering a culture of continuous improvement

Leadership:

- Building agency-wide and community-wide opportunities for collaboration
- Championing public health expertise and best practices
- Creating opportunities for individual development and leadership

Integrity:

- Working honestly and ethically in our obligation to fulfill our public health mission
- Ensuring responsible stewardship in public health resources

Health Equity:

- Eliminating health disparities and working to attain the highest level of health for all people
- Ensuring the quality, affordability, and accessibility of health services for all Oregonians
- Integrating social justice, social determinants of health, diversity, and community

Partnership:

- Working with associates, interested parties and communities to protect and promote the health of all Oregonians
- Seeking, listening to, and respecting internal and external ideas and opinions
- Exploring and defining the roles and responsibility of public health staff and partners

Innovation:

 We are not satisfied with the status quo if there are new and better ways to meet the needs of the people we serve. We bring creativity, experience, and openness to our search for solutions to problems. We pursue opportunities to develop new evidence to evolve our practices.

Transparency:

 We communicate honestly and openly, and our actions are upfront and visible. We provide open access to information and meaningful opportunities to provide input and participate in our decision-making

The Oregon Health Insurance Marketplace ("Marketplace"), an office within HPA, certifies Qualified Health Plans (QHPs) and Standalone Dental Plans (SADPs) for sale to Oregonians. The Marketplace coordinates with the Centers for Medicaid and Medicare Services (CMS) to utilize HealthCare.gov as the automated platform through which individuals can be determined eligible for tax credits and purchase on-exchange coverage and runs the Small Employer Health Options Program (SHOP) for small employers. Starting with the 2027 open enrollment season, the Marketplace will be replacing HealthCare.gov with its own state-run platform and consumer assistance center.

The Marketplace is also responsible for establishing collaborative partnerships with local, state, and federal entities that provide outreach, enrollment assistance, and education to Oregonians

seeking to enroll in on-exchange coverage. The Marketplace partners with the Division of Financial Regulation (DFR) in managing policy and legislative matters related to on-exchange individual and small group market insurance.

b. Describe the primary purpose of this position, and how it functions within this program. Complete this statement. The primary purpose of this position is to:

This position serves on the Marketplace management team and supervises the Business Process and Data Quality unit. The manager leads the implementation and improvement of Marketplace eligibility, enrollments, business policy, data quality, quality assurance, and appeals. This position and unit are key staff in transitioning and implementing the Oregon Health Insurance Marketplace from a State-based Marketplace using the Federal Platform (SBM-FP) to a fully operational State-based Marketplace (SBM). This includes establishing and overseeing a contracted consumer assistance center that will support eligibility and enrollment into the Marketplace year-round. The transition from an SBM-FP and implementation of a SBM is required by Senate Bill 972 (2023).

The Business Process and Data Quality Manager oversees workflow, with a focus on synthesizing data gleaned from analyses, assessments, and research on best practices into high-level development of policy, procedures technical assistance, and other supports for health system collaborators. This position is responsible for overseeing data entry and data analyses for the Marketplace, and other data sources relevant to identifying needs related to the Marketplace transition from an SBM-FP to an SBM. This position facilitates the development of program policy, reports, and presentations related to business processes and data.

This position is accountable for all work products, deliverables, and activities of the team and is responsible for coordinating and aligning across any diverse projects and programs that coordinate with the Marketplace transition to an SBM including coordinating with Oregon's Medicaid programs, Medicare, Centers for Medicare and Medicaid Services (CMS), the Federally Facilitated Marketplace (FFM), Oregon statutes and administrative rules, the Oregon Health Policy Board, the Health Insurance Marketplace Advisory Committee, and the Department of Consumer and Business Services (DCBS).

SECTION 3. DESCRIPTION OF DUTIES

List the major duties of the position. State the percentage of time for each duty. Mark "N" for new duties, "R" for revised duties or "NC" for no change in duties. Indicate whether the duty is an "Essential" (E) or "Non-Essential" (NE) function.

% of Time	N/R/NC	E/NE	DUTIES
30%	N	Е	Program Development
			Oversees SBM implementation of eligibility, enrollment, appeals, quality assurance, and the Marketplace Consumer Assistance Center (CAC).
			Provides program development and management decision-making. Proposes budget execution, interprets division policy, and determines appropriate presentation to agency staff and the public.

Budget Management - Oversee the development and execution of the Business Process and Data Quality unit which includes:

- The preparation of quarterly expenditure forecast plans to project program expenditures.
- Oversight assistance of the Consumer Assistance Center (CAC) vendor contract.
- Oversight of contracts with vendors that include data or quality assurance deliverables.
- Review of monthly accounting management reports for irregularities and recommend changes.
- Development of organization structure information on staffing levels and related costs.
- Assistance to Marketplace Director with budget development for the Governor's Office and the legislative assembly.

Implementation tasks encompass synthesizing data obtained from analyses, and needs assessment, conducting research on the strategic development of learning collaboratives, providing technical assistance, and delivering additional support services.

Conducts oversight, strategic planning, and implementation of objectives and initiatives including managing data entry and data analyses, Marketplace enrollment and eligibility, and any other data sources relevant to identifying needs related to the SBM.

Develops measurable program components based on thorough review of an SBM including taking into consideration state and federal legislation, laws, and regulations.

Develops and effectively communicates the program's mission, vision, and strategic objectives to staff.

Develops strategies and organizational structure to:

- Continuously improve the program's work processes and evaluates the cost-effectiveness of the program.
- Uses consumer data to improve the program's products and services and leverage exceptional results and outcomes to increase awareness and public utility of the program and services.

Continuously monitors and improves the cost of providing the programs, products, and services. Contributes to discussions regarding planning and preparation of the program's budget.

			Ensures confidential information is appropriately secure under state and agency policies and procedures.
30%	N	Е	Unit Leadership and Subject Matter Expertise
			Manages and supervises the Business Process and Data Quality unit. Includes regular oversight of content, quality of work, setting priorities and providing direction for the business and data process team.
			Provides feedback to staff, guidance on coordination with internal and external interested parties.
			Performs supervisory functions by interviewing and recommending or hiring staff members.
			Provides training for subordinates; establishes expectations and goals, evaluates subordinates' performance; resolves disputes, recommends, or initiates disciplinary action when appropriate.
			Conducts effective staff meetings and prepares written instructions for work assignments.
			Monitors employees work assignments, schedules and duties.
			Promotes the safety and health of the Business Process and Data Quality staff.
			Promotes a work environment in which staff members feel trusted by division and agency leadership, division and agency leadership feel trusted by staff, and everyone feels safe to discuss difficult and constructive issues.
			Establishes and maintains partner relationships with other offices, divisions, state agencies, and boards.
			Work with various interested parties and agencies to address consumer issues.
			Represents the Marketplace in meetings, strategic planning, and other initiatives across divisions and agencies.
			Includes collaborating with the community, governing boards and commissions, local, state and federal government entities, tribal nations, and other interested parties.
			Serves as a senior expert on Marketplace's program and policy issues regarding the SBM with a focus on business processes, eligibility, enrollment, appeals, and customer service.

25%	N	Е	Program Policy Performance Management
			Facilitates the development, implementation, operation, evaluation, monitoring, continuous improvement, and updates of a program performance management and supporting infrastructure of an SBM regarding business processes, data management, eligibility, enrollment, appeals, and oversight of the Marketplace SBM consumer and application customer service center vendor.
			Advises the division director, Marketplace director, and Marketplace deputy director on the program's policy issues.
			Directs, manages, and coordinates management activities including implementation of policies, procedures, and priorities to carry out the program's objectives.
			Implements improvements in the program, organization, and policies and procedures.
			Manages and coordinates the activities of the program to assure uniformity in information and services provided to the public.
			Collaborates with other OHA divisions, other HPA offices, other state agencies, the Governor's Office, and other interested parties in coordinating on policy and consumer insurance issues of statewide importance and public consequence.
			Prepares and presents position papers and policy direction recommendations to interest groups, work groups, and the Oregon Legislature, including identifying the impact of recommendations on consumers and members of the insurance industry.
			Represents the office personally or in writing, regarding program policy and activities to the public, including a wide array of interest groups and professional organizations.
			Tests, audits, and validates system improvements to implement performance measures. Assures performance data is captured and maintained timely and accurately.
			Identifies opportunities for implementing measures across program areas.
			Tracks and monitors operational results and outcomes from measurements; highlights areas that require corrective action.

			Integrates performance measures into daily business	
			processes.	
10%	N	E	Contract Management: Manages the administration of contracts relating to the business process and data quality. Oversees any grants within the Business Process and Data Quality unit.	
5%	N	Е	Other duties as assigned	
At all times	N	Е	Fosters and promotes the importance and value of a diverse, discrimination- and harassment-free workplace.	
			Respects diversity of opinions, ideas, and cultural differences. Supports outreach and diversity-related efforts to diversify the workforce.	
			Performs position duties in a manner which promotes customer service and harmonious working relationships, including treating all persons courteously and respectfully.	
			Engages in effective team participation through willingness to assist and support co-workers, supervisors, and other work-related associations.	
			Develops good working relationships with staff through active participation in accomplishing group projects and in identifying and resolving problems in a constructive manner.	
			Demonstrates openness of constructive feedback/criticism and suggestions to strengthen work performance.	
			Contributes to a positive, respectful, and productive workplace. Regular attendance is an essential requirement of this position.	

SECTION 4. WORKING CONDITIONS

Describe any on-going working conditions. Include any physical, sensory, and environmental demands. State the frequency of exposure to these conditions.

Working hours are 8 a.m. to 5 p.m.; however, often required to work other than normal duty hours occasionally for prolonged periods, especially during legislative sessions; occasionally must testify before legislative subcommittees; occasionally subject to abusive language from hostile or angry people; travel required periodically in and out of state. This position is eligible for remote work part-or full-time once the incumbent has gained the proficiency to perform work independently. The incumbent may occasionally be asked to work from the office on an as-needed basis.

SECTION 5. GUIDELINES

a. List any established guidelines used in this position, such as state or federal laws or regulations, policies, manuals, or desk procedures:

Oregon Health Authority Policies and Procedures

Oregon Health Insurance Marketplace Training

Oregon Health Insurance Marketplace policy and procedures

HealthCare.gov website and CMS regulations

Insurance Rules

Collective Bargaining Agreement

Office and Division Policies and Procedures

Public Information Laws

Health Insurance Portability and Accountability Act (HIPAA)

Administrative Rules and Bulletins

Accounting and Budget Execution Manual

Dept of Administrative Services Personnel Rules

Code of Federal Regulations

Affordable Care Act of 2010 (ACA)

b. How are these guidelines used?

This position will use these guidelines to recommend policies and programs that impact complex statewide health coverage options, programs and how the design of an SBM is executed and implemented. This position provides valuable analysis and leadership which will enable top management to make policy decisions of far-reaching consequences. Guidelines provide structure and guidance for performing the job, which entails independent judgement and reasoning. Guidelines are used to identify the requirements, constraints or barriers related to the SBM transition and sustainable growth. These strategies must be shaped to gain compliance, to identify areas requiring legislative change or concepts and/or identify areas that require federal waivers or other regulatory action to allow implementation of proposed options.

To provide accurate information or referrals to the public, coordinate and manage Marketplace business processes and data quality units' responsibilities, coordinate functions with other sections of the division, prepare budgets, and initiate personnel actions. These guidelines are also used in developing and administering a strategic plan for eligibility, enrollment, and the consumer assistance center, for managing information, and for supervising staff.

Used in preparing policy analyses, in assisting department and division with issues requiring research, and in preparing materials for various presentations.

SECTION 6. WORK CONTACTS

With whom, outside of co-workers in this work unit, must the employee in this position regularly come in contact?

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Who Contacted	How	Purpose	How Often?
All levels of OHA staff, other state agencies' staff, Governor's Office	By telephone, virtual, conferencing, reports, letters, email, or in person	Develop strategies, policies, goals, for programs and services. Discuss communication, policy, and legal issues impacting the Marketplace. Provide consultative advice, research findings, collaborate on legislative or policy changes related to health policy.	Daily
Communications staff	By telephone, virtual, conferencing, reports, letters, email or in person	Gain and provide information and to develop/maintain effective working relationships	Weekly
HPA Director, Deputy Director	Phone/in person	Discuss policy, legal, DOJ issues for HPA, and to provide/gain information on department/office communication issues	Weekly
Media & members of the public	By telephone, virtual, conferencing, reports, letters, email or in person	Discuss policy and procedures, cases, and administrative rules. Collaborate on legislative or policy changes related to health policy and the Marketplace.	Weekly
Marketplace Consumer Assistance Center (CAC) vendor and contractors	By telephone, virtual, conferencing, reports, letters, email or in person	Collect, provide, and discuss information, manage projects, provide consultative advice, collaborate on legislative or policy changes related to health policy and the Marketplace.	Daily
Health Insurance Agents, Community- based organization staff and leadership	By telephone, virtual, conferencing, reports, letters, email or in person	Collect, provide, and discuss information, manage projects, provide consultative advice, collaborate on legislative or policy changes related to health policy and the Marketplace.	Weekly
Public, Insurance Industry Representatives, Employers	Phone/in person	Discuss policy and procedures, cases, and administrative rules	Weekly

SECTION 7. POSITION-RELATED DECISION MAKING

Describe the typical decisions of this position. Explain the direct effect of these decisions:

Decisions involve policy and procedure changes, budget overview, workflow operational systems, personnel actions, dispute resolutions, legislative reviews, directing staff, setting priorities and goals, interpretation of law, administrative rules, and agency policies. Decisions affect staff and have impact on the operations of the SBM implementation success. Decisions must consistently reflect agency policies and Department of Administrative Services' policies and procedures. Position analyzes issues regarding personnel, budget, legislation, and policy and formulates recommendations regarding the appropriate action to be taken.

Provides program development and management decision-making. Proposes budget execution, interprets division policy, and determines appropriate presentation to agency staff and the public. Makes decisions regarding the Marketplace's Business Processes and Data Quality unit's organization structure and assignment of work.

SECTION 8. REVIEW OF WORK

Who reviews the work of the position?

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Classification Title	Position Number	How	How Often	Purpose of Review	
Marketplace Deputy		PAF review	Quarterly	To monitor performance	
Director (Health	1020264	Touch base	Bi-Weekly	To obtain consumer issues and to	
Policy and Program Manager 3)				determine program effectiveness and performance	

a. How many employees are directly supervised by this position? How many employees are supervised through a subordinate supervisor? b. Which of the following activities does this position do? Plan work Assigns work Assigns work Approves work Responds to grievances Disciplines and rewards SECTION 9. OVERSIGHT FUNCTIONS 6 Coordinate supervisor? 0 Coordinates schedules Hires and discharges Recommends hiring Gives input for performance evaluations Prepare and signs performance evaluations

SECTION 10. ADDITIONAL POSITION-RELATED INFORMATION

ADDITIONAL REQUIREMENTS:

List any knowledge and skills needed at time of hire that are not already required in the classification specification.

All positions in OHA require a Criminal Background Check and an Abuse/Neglect Check. Fingerprints may be required.

- Knowledge and experience (lived, professional, or academic) in understanding health insurance and health insurance exchanges.
- Ability to communicate varied technical information regarding the Affordable Care Act and general knowledge about the insurance industry and rules pertaining to consumers without opportunity for specific research. This requires expert proficiency with communication, interpersonal, and strong facilitation skills.
- The position requires the ability to communicate very technical information both orally and in writing.
- Ability to communicate varied technical information regarding the Affordable Care Act, general knowledge about the insurance industry and rules pertaining to consumers without opportunity for specific research.
- The person in this position is expected to be a participating member of the division's Management Team and needs to be collaborative, have good team skills, support continuous process improvement, understand, and support strategic planning, and have good overall management skills.
- Strong understanding of eligibility and the enrollment process regarding Marketplace and how Medicaid and other health insurance programs and options effect that process.
- Skill coordinating activities of individuals or groups with differing priorities and agendas.
- Skill in organizing work by establishing operating and/or reporting relationships and by assigning the work accordingly.
- Skill working effectively with technically skilled, relatively independent subordinates.
- Ability to prioritize work among conflicting priorities and ability to meet imposed deadlines and completed duties.
- Provides program development and management decision-making.
- Proposes budget execution, interprets division policy, and determines appropriate presentation to agency staff and the public.

BUDGET AUTHORITY: If this position has authority to commit agency operating money, indicate the following:

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Operating Area	Dollar Limit	Fund Type
Administrative purchases	\$10,000	Other Fund
Contract payments	\$10,000	Other Fund
Petty cash disbursements	\$25	Other Fund
Refunds	\$500	Other Fund
Reimbursements	\$2,500	Other Fund
Travel expenses	\$2,500	Other Fund

SECTION 11. ORGANIZATIONAL CHART

Attach a current organizational chart. Be sure the following information is shown on the chart for each position: classification title, classification number, salary range, employee name and position number.

SECTION 12. SIGNATURES						
Employee Signature	Date					
Supervisor Signature	Date					
Appointing Authority Signature	 Date					