Click here to link to instructions **All positions in OHA require a Criminal Background Check and an Abuse/Neglect Check. Fingerprints may be required.**

STATE OF OREGON
Oregon Health Authority (OHA)
POSITION DESCRIPTION

Position Revised Date:

Agency: Oregon Health Authority

Division: Health Policy & Analytics

☒ New ☐ Revised

Statutory Assignment:
- ☐ Classified
- ☐ Unclassified
- ☐ Executive Service
- ☐ Mgmt Svc – Supervisory
- ☒ Mgmt Svc – Managerial
- ☐ Mgmt Svc – Confidential

SECTION 1. POSITION INFORMATION

a. Classification Title: Operations & Policy Analyst 4
b. Classification No: 0873 **c.** Effective Date: 09/23/2026
d. Position No:
e. Working Title: Health Care Market Oversight, Senior Policy Advisor
f. Agency No: 44300
g. Section Title: Office of Health Policy
h. Employee Name:
i. Work Location (City — County): Portland - Multnomah; Remote
j. Supervisor Name: Sarah Bartelmann
k. Position: ☐ Permanent ☐ Seasonal ☒ Limited Duration ☐ Academic Year ☒ Full-Time ☐ Part-Time ☐ Intermittent ☐ Job Share
l. FLSA: ☒ Exempt ☐ Non-Exempt If Exempt: ☐ Executive ☐ Professional ☒ Administrative **m.** Eligible for Overtime: ☐ Yes ☒ No

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.

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 redistribution 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 & Analytics Division is aligned with the Oregon Health Authority'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 stakeholders 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.

In 2021, the Oregon Legislature passed HB 2362 to oversee health care consolidation, creating the Health Care Market Oversight (HCMO) program. This law directs OHA to review proposed business deals involving health care entities, such as hospitals, health insurance companies, and provider groups, to make sure they will help – and not hurt – Oregon's shared goals of health equity, lower consumer costs, increased access, and better care. HCMO launched March 1, 2022, and aims to:

- Promote transparency: Track and publicly post notices when health care transactions occur to inform communities about proposed transactions.
- Support statewide priorities: Ensure that health care consolidation in Oregon supports statewide goals related to health equity, lower costs, increased access, and better quality.

- Monitor impacts: Analyze the type, number, and frequency of transactions, and study how transactions impact people in Oregon.

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:

The Senior Policy Advisor is responsible for the ongoing implementation of Oregon's Health Care Market Oversight Program, which includes leading material change transaction (e.g. health care mergers or acquisitions) reviews. As OHA is statutorily required to review qualifying material change transactions within 30 days, the HCMO Program is staffed with multiple Senior Policy Advisors to lead respective review teams.

The Senior Policy Advisor manages transaction reviews that affect major hospitals, health systems, health insurance plans and other health care providers with statewide impact, involve multiple government jurisdictions, and require coordination across multiple state agencies, and internal and external stakeholder groups. The Senior Policy Advisor is responsible for developing the analysis plan, identifying and scoping work for outside advisors and contractors, internal staff and subject matter experts, developing questions and requests for information for transacting entities, and interpreting and synthesizing findings into reports and legal orders for each transaction review.

The Senior Policy Advisor coordinates review content, timelines and findings across OHA, DCBS and DOJ, and coordinates with federal agencies, other states, and other Oregon regulatory review bodies when applicable. The Senior Policy Advisor provides recommendations to senior management (including Oregon Health Authority Director), on whether proposed material change transactions should be approved, approved with conditions, or disapproved.

The decisions and policy recommendations within the purview of this position are highly visible and of significant interest to the state legislature, multiple stakeholder groups, a variety of public constituents, and the Governor's Office.

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.

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

% of Time	N/R/NC	E/NE	DUTIES
At all times	N	E	**Cultural Competency** Demonstrate recognition of the value of individual and cultural differences; create a work environment where talents and

			abilities are valued. Create and maintain a work environment that is respectful and accepting of diversity.
15%	N	E	**Program Development & Coordination** • Lead the ongoing implementation of the Health Care Market Oversight Program, including the development of processes and policies. Responsible for identifying the need for and developing regulatory and sub-regulatory guidance and other public facing materials explaining the program. • Recommend policy strategies and options to address Health Care Consolidation in Oregon. Recommend policy strategies, options and legislative positions on the Health Care Market Oversight Program to senior managers, including administrative rule changes, legislative changes, project scope and budgets, and risk mitigation strategies. • Manage vendor and consultant contracts, ensuring deliverables and timelines are met, and coordinating activities across the Program team and all parties involved. • Provide project management and coordination for the HCMO team, including developing workplans, timelines, and documents as needed to ensure all deliverables and timelines are met, including developing workplans, timelines, and documents as needed; managing project steps to cause the participation of project team members, vendors and consultants and other internal and external stakeholders, including subject matter experts in other agencies; monitoring and tracking project budget, schedule, and performance.
40%	N	E	**Material Change Transaction Reviews** The Senior Policy Advisor provides project management and assumes responsibility for all assigned material change transaction reviews. Specific activities include, but are not limited to: • Consultation with health care entities (and legal counsel) to advise on whether a transaction is subject to review under state statute and regulation, explain how the program works, and identify any potential risks, confidentiality concerns, and address questions. Provide technical assistance and issue formal determination of reviewability if applicable. • Determine whether outside advisors are needed to inform transaction review; identify potential outside advisors; determine no conflicts of interest exist with outside advisor; determine best options for contracting and manage procurement and contracting process; develop scope of work and budget for outside advisor; determine need for data sharing agreements and any other confidentiality protections; develop data sharing

			agreements and other confidentiality protections with outside advisors; ensure secure communications and data sharing of all materials with outside advisors; monitor and track budget, schedule, and performance of outside advisors. • Communication with health care entities involved in the proposed transaction, including holding pre-filing conferences to answer entity questions; sending formal notices of complete or incomplete submission; responding to all entity questions about the transaction review; formally notifying entites of key activities during transaction review such as tolling, engaging outside advisors, etc; developing and issuing Requests for Information; invoicing; developing proposed conditions; and more. • Develops analytic plans and coordinates required analyses, including analyzing the impacts of the proposed transaction on patients, consumers, competitors, and health care markets in Oregon • Manage project steps and participation of project team members and other stakeholders, including but not limited to identifying and assigning tasks, reviewing work products from team members, synthesizing information into final products, and managing timelines and competing priorities. • Interprets and synthesizes analyses to determine potential impacts, such as potential loss or change in access to essential services, the potential to impact a large number of residents, and any significant changes in the market share of any entities involved in the transaction; whether a transaction meets criteria for approval; required approval conditions; and whether a comprehensive review is required. • Leads community and public engagement efforts, including determining when a Community Review Board is required and provide direction and coordination for Community Review Boards as needed. • Manage project team to ensure completion of all review deliverables, such as preliminary or comprehensive review report, legal orders, determinations, emergency exemptions, etc.
40%	N	E	**Follow-Up Reviews** The Senior Policy Advisor provides project management and assumes responsibility for all assigned follow-up reviews, which occur 1-year, 2-years, and 5-years after a reviewed transaction closes. Where possible, the Senior Policy Advisor will serve as the lead for follow-up reviews they were the initial review lead on, but may also be assigned to other follow-up reviews; the Senior Policy Advisory will be responsible for multiple,

			simultaneous follow-up reviews. Specific activities include, but are not limited to: • Managing project steps and participation of project team members and other stakeholders, including but not limited to identifying follow-up review team members, identifying and assigning tasks, reviewing work products from team members, synthesizing information into final products, and managing timelines and competing priorities. • Leading follow-up review planning, including developing or revising the analysis plan, and ensuring follow-up review team completes all tasks (e.g. notifying entities and public of follow-up review commencing, identifying and addressing compliance issues, requesting data and information from entities, etc.) • Interpreting and synthesizing analyses, data and information from entities, and supplemental material (e.g. market trend reports, public comments) to assess compliance with conditions (if applicable) and determine changes since the transaction closed and their potential impact on access, quality, cost and equity for Oregonians. • Managing project team to ensure completion of all follow-up review deliverables, such as reports, and determine appropriate legal actions regarding compliance issues.
5%	N	E	**Subject Matter Expertise** • Provides advanced subject matter expertise by independently researching, analyzing, and interpreting complex information related to health care mergers, acquisitions, and affiliations. • Maintains current knowledge of national and Oregon-specific trends, emerging research, and regulatory developments, and evaluates their implications for Oregon's material change transaction review program. • Develops and sustains expert-level understanding of DCBS rate review and related regulatory authorities to inform program decision-making. • Establishes and maintains relationships with policy analysts and researchers in other states to compare methodologies and integrate effective practices into Oregon's processes. • Evaluates program statewide operations to ensure activities align with and accurately apply relevant federal and state laws, regulations, and policy frameworks.

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.

There are frequent interruptions, demanding time frames, and the need for some overtime. Work is done in open cubicles and via tele- and video-conference. There is daily work on desktop computer for extended periods of time. There may be some in-state travel.

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:

Standards of professional principles and practices, including ethical standards
Oregon Revised Statutes
Oregon Administrative Rules
Oregon Health Authority Policies and Procedures
Attorney General's Administrative Law Manual
Attorney General's Model Public Contract Rules Manual
Attorney General's Public Records and Meetings Manual
Federal laws and rules governing program-specific grants
Requirements of relevant federal cooperative agreements
Requirements of relevant grants or other funding sources
Applicable federal and state information privacy and security laws, policies, and procedures

b. How are these guidelines used?

Assist in formulating policies and establishing priorities and procedures and to establish parameters for carrying out the duties of this position.

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?
Note: *If additional rows of the below table are needed, place curser at end of a row (outside table) and hit "Enter".*			
OHA Health Policy & Analytics Leadership	By telephone, electronic mail, instant message or in person	Coordinate publication timelines and press releases. Discuss information and findings. Provide program updates. Give consultative advice. Recommend policy options.	Weekly

OHA Sustainable Health Care Cost Growth team, Hospital Reporting team, and APAC team	By telephone, electronic mail, instant message or in person	Collect, provide and discuss information related to the program. Respond to queries and information requests. Prepare content for stakeholder meetings and reports.	Weekly
Representatives of the health care/insurance industry	By telephone, electronic mail, letter or in person	Collect, provide and discuss information.	weekly
DCBS Division of Financial Regulation	By telephone, electronic mail, letter or in person	Coordinate material change transaction review process, when applicable. Coordinate other related efforts. Give consultative advice. Recommend policy options.	Monthly
Department of Justice	By telephone, electronic mail, letter or in person	Communicate reports and findings. Coordinate other related efforts Request legal advice	Daily
All levels of OHA/DHS, staff of other agencies, staff of other public and private organizations, and national health research and policy groups	By telephone, electronic mail, letter or in person	Respond to queries and information requests.	Weekly
External Vendors and Consultants	By telephone, electronic mail, letter or in person	Coordinate workflow, tasks; clarify processes, issues.	Weekly
General public	By telephone, electronic mail, letter or in person	Respond to information requests.	Weekly

SECTION 7. POSITION-RELATED DECISION MAKING

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

This position plans, schedules and leads major complex analysis and policy development related to the Health Care Market Oversight Program. The position decides whether to broaden or narrow the scope of projects or research. Working closely with program and agency leadership, the position provides advice and recommendations related to transaction review decisions, policy direction, interpretation of regulations, and program risks. Findings and recommendations are normally accepted without significant change. This position exercises substantial judgment to ensure compliance with statutory and regulatory requirements. This position is responsible for keeping informed of the progress of related projects and/or activities within and external to OHA. Recommendations and work products are highly visible and of significant interest to the legislature and a broad set of stakeholders.

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
This position resides in the Office of Health Policy.				
Project Manager: Principal Executive Manager F – Cost Growth Target Program Manager	1019081	In person, telephone or email	Weekly or biweekly	Review work products, provide project direction, ensure alignment between projects

SECTION 9. OVERSIGHT FUNCTIONS

a. How many employees are directly supervised by this position? 0

How many employees are supervised through a subordinate supervisor? 0

b. Which of the following activities does this position do?

- ☒ Plan work
- ☒ Assigns work
- ☐ Approves work
- ☐ Responds to grievances
- ☐ Disciplines and rewards
- ☐ Coordinates schedules
- ☐ Hires and discharges
- ☐ Recommends hiring
- ☐ Gives input for performance evaluations
- ☐ Prepares 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 Skills

- Excellent written and verbal communication skills required, with an ability to convey and synthesize complex information for diverse audiences and experience producing written public-facing materials, such as reports, memos, presentations or information / data briefs.

- Demonstrated experience communicating with a diverse group of stakeholders on complex topics required; ability to consider viewpoints and needs expressed by these groups and make a good faith effort at communicating such required.

- Demonstrated ability to operate with a high degree of independence and manage multiple, competing priorities in a high-paced, cross-functional or matrixed environment required. 5 years of experience with project management and/or project coordination, including developing and implementing project plans, preferred.

- Demonstrated experience and expertise in leading policy or data analyses, including developing analytic plans, reviewing evidence, compiling relevant information, guiding analyses, and summarizing findings and conclusions required. Demonstrated ability to analyze complex technical and legal materials, such as statute, regulation, contracts, term sheets, financial statements, etc. preferred.

- Knowledge of or subject matter expertise related to at least one of these areas required:
  - Health care industry consolidation and impacts of consolidation
  - Medicaid and Medicare programs and commercial health insurance
  - Mergers, acquisitions, affiliations, joint ventures and other types of transactions
  - Health care payments, financing, budgets
  - Health care services research

- Experience or subject-matter expertise related to state or federal policy and regulatory reviews of health care transactions such as mergers, acquisitions, and affiliations preferred.

- Graduate education in law, health sciences, economics, public health, social science, or public policy preferred.

This position is subject to a criminal records check, which may require fingerprints. If you are offered employment, the offer will be contingent upon the outcome of a criminal record check (FBI and/or LEDS). Any history of criminal activity will be reviewed and could result in the withdrawal of the offer or termination of employment.

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	Biennial Amount ($00,000.00)	Fund Type

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	Oct 28, 2026 Date

PD_ HCMO OPA4 Position Description Revised 10.28.26

Final Audit Report 2026-10-28

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