

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
- Pursuing 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

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:

The primary purpose of this position is to oversee Marketplace data management and ensure quality assurance. This position will be responsible for managing data and processing related to individuals who have applied for or are determined eligible for Marketplace coverage. This position will evaluate programs, services, systems, and program effectiveness through comprehensive operational research. The research may be challenged by conflicting operational or service goals and objectives from other state agencies, state divisions and insurance providers.

The person in this role will develop new information about the Marketplace; establish criteria to identify and measure program effectiveness; and develop methods to improve operations or develop new approaches to program evaluation that serve as precedents for others. This position will design and oversee the collection of data for organizational surveys, as well as analyze data, evaluate findings, and recommend policy and operational changes. This position will be responsible for developing comprehensive plans, objectives and strategies to support the short- and long-term implementation of various Marketplace programs, as well as designing processes to facilitate organizational change. This position will collaborate with information systems team to automate business processes and coordinate the data transition from HealthCare.gov to fully operational State-based Marketplace (SBM), as mandated by Senate Bill 972 (2023).

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
50%	N	E	<p>Program Level Data Management and Analysis</p> <ul style="list-style-type: none"> • Utilizes data mining and analytics to support business and policy decision-making • identifies, and resolves complex issues reconciling large data sets, and effectively communicates findings to all levels of management. • Monitors performance statistics and compliance of data. Serves as a subject matter expert on data analytics and reporting for the team and its functional areas, including, but not limited to, files processing, reconciliation, reporting, encounter data, and data calls. • Collaborates with leaders in various internal program areas and external parties to ensure timely and accurate data.

			<ul style="list-style-type: none"> • Collaborates with various program areas to identify and resolve complex issues and errors that involve internal and external systems, data, and regulatory guidance. • leads and executes complex data-related analytical projects to drive business decisions and efficiencies. • ensures timely and accurate reporting, rectifies issues and errors, identifies and implements best practices, supports audits and attestations. • Prepares analyses to identify trends and issues; troubleshoots errors and proposes methods for resolution. • validates data against other data sources, requirements and/or technical specifications. • Collaborates on data exchange processes and workflows among state, federal government entities, and stakeholders; ensures data accuracy and completeness • Develops and implements data analytics, reconciliation, and reporting policies and procedures.
25%	N	E	<p>Business Analysis (Operational Research & Evaluation)</p> <ul style="list-style-type: none"> • Develops and maintains a solid understanding of the business processes related to market conditions and how those processes relate to the associated business reporting applications. • Liaises with the Office of Information Services (OIS) team to communicate business needs and support the development, testing business systems for the division. • Queries multiple state and federal databases and leverages the collected information to meet business needs. • Supports the division and agency direction by interpreting data and provide analytical expertise to retrieve answers for complex questions. • Performs comprehensive studies to identify and manage reporting requirements from regulatory authorities, aiming to detect and address areas of non-compliance that may not be readily apparent. • Develops procedures for modifying reporting systems, creates instructions for end-users to provide information, and manages implementation and data collection. • Engages with HealthCare.gov, Marketplace and Medicaid managers and staff to gain a comprehensive understanding of their operational processes and job objectives. <ul style="list-style-type: none"> • Educates internal and external customers on product and services and how delivery is accomplished; business processes, goals, and objectives; how the data impacts divisions within and outside of the organization, and the provides data on the current state of the platform and the CAC.

			<ul style="list-style-type: none"> • Develops or assists business partners with conducting feasibility studies, requests for proposal, legislative and fiscal impacts, or budget development documents.
25%	N	E	<p>Shared Data Base Coordination, Systems Development, and Informational Resources</p> <ul style="list-style-type: none"> • Consults with user groups, other data processing professionals and agency management to define the organization's data requirements. • Studies feasibility of utilizing data base technology in new systems development and in conversion of existing systems. • Oversees the development of logical data models and physical database designs, defining the data to be included in databases, and establishing the organization, storage, and access methods to ensure efficient data management. • Negotiates data maintenance responsibilities for databases shared across organizational boundaries. • Designs, develops, and implements central repository of information concerning the organization's data. • Provides guidance to end users and data processing personnel on selecting appropriate regarding the correct choice of database software tools. • Reviews and evaluates logical and physical system design to ensure efficient, flexible, accurate, and maintainable databases and systems. Assists users to solve problems. • Develops and implements standards and procedures for backup, reorganization, recovery, security, and performance. • Authorize appropriate access to system resources and databases.
On-going	N	E	<ul style="list-style-type: none"> • 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.

			<ul style="list-style-type: none"> • Contributes to a positive, respectful, and productive workplace. • Regular attendance is an essential requirement of this position
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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, there are occasions when additional hours outside of the standard schedule are necessary, particularly during legislative sessions. occasionally, the role may require testifying before legislative subcommittees. This position is eligible for remote work on a part-time or full-time basis once the employee has demonstrated the ability to perform duties independently and with proficiency.

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?

- When consumers transition from an SBM-FP to an SBM, ensuring consumer inquiry, eligibility and enrollment data during transition, implementation and sustaining an SBM is accurate.
- Specifically, provide expert advice, based on data provided from OHA Medicaid division, Healthcare.gov data and the SBM.
- To account for and give weight to uncertainties about the data and other variables that affect long-range program performance.

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?
Marketplace Director, Marketplace Deputy Director, Marketplace Policy and Program team, Marketplace outreach team and Marketplace communications	In person/in writing, by phone, webinars, and virtual meetings	Develop strategies, policies, and goals for programs and services. Discuss communication, policy, and legal issues impacting the office.	Daily
OHA Medicaid Managers and Policy Team	In person/in writing, by phone, webinars, and virtual meetings	Discuss issues impacting the Health Insurance Marketplace, outreach, policy, and legal issues	Weekly
HPA Director, Deputy Director	In person/in writing, by phone, webinars, and virtual meetings	Discuss policy, legal, DOJ issues for HPA, and to provide/gain information on department/office communication issues.	Weekly
Media & members of the public	In person/in writing, by phone, webinars, and virtual meetings	Report on office activities, develop/maintain personal working relationships, respond to inquiries, writing provide information on programs and services.	Weekly
Other organizations involved in the healthcare industry	In person/in writing, by phone, webinars, and virtual meetings	Respond to inquiries.	Weekly
Other state and federal agencies	In person/in writing, by phone, webinars, and virtual meetings	Respond to inquiries, provide data if needed.	Weekly

SECTION 7. POSITION-RELATED DECISION MAKING

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

This position reviews, analyzes, and oversees data to determine data quality and assurance as the Marketplace transitions to an SBM in coordination with the Marketplace Business Process and Data Quality Manager.

This position must apply critical thinking and analysis to data requested and supplied by The Oregon Health Authority Medicaid division, HealthCare.gov and commercial insurers. In partnership with the Marketplace leadership team, this position will assist in establishing the reprioritization of data projects tailored to the office's needs. Present tasks and deliverables associated with the division's business systems improvement initiatives. Upon approval by leadership, this position is authorized to execute and oversee data projects for the office, including the interpretation and implementation of management policies and operational procedures. The work significantly impacts the division's business operations. This position will serve as a project consultant and provide expert advice to Marketplace leadership, contributing to long- and short-term business objectives.

The person in this role Decides how best to respond to and resolve issues with data systems. Inadequate decision-making may lead to data corruption, which can result in inaccurate information being supplied to business analysts and, ultimately, stakeholders or end-users. System functionality, response time, and availability may be negatively affected, resulting in decreased productivity of many end users or the public.

The individual in this role will Decides how best to elicit accurate business requirements from OHA staff based on the knowledge and style of the persons involved. If poor decisions are made, specifications may be incorrect resulting in work products delivered that may not meet the actual needs of the customer or achieve the project objectives.

The individual in this role will determine the most effective approach to gathering accurate business requirements from OHA staff, considering the knowledge and communication styles of the individuals involved. and database design standards. Inadequate decision-making in this area could lead to incorrect specifications, which may result in deliverables that do not fully address the actual needs of the customer or meet project objectives.

Based upon expertise and comprehensive

Analysis this position, in collaboration with IT business partners, makes effective recommendations on best IT solutions for Marketplace business data. Additionally, this role defines the scope and objectives of projects with proposed solutions typically accepted without significant modifications. Impact studies may encompass the primary systems of various divisions within the agency, including the Oregon Health Insurance Marketplace, Division of Health Policy and Analytics, Oregon Health Authority, and Department of Consumer and Business Services, Division of Financial Regulation.

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 Business Process and Data Quality Manager (Business Operations Manager 2)	TBD	PAF review	Quarterly	To monitor performance
		Touch base	Monthly	To obtain discuss any training issues and to determine program effectiveness and performance

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?

- | | |
|--|--|
| <input type="checkbox"/> Plan work | <input type="checkbox"/> Coordinates schedules |
| <input type="checkbox"/> Assigns work | <input type="checkbox"/> Hires and discharges |
| <input type="checkbox"/> Approves work | <input type="checkbox"/> Recommends hiring |
| <input type="checkbox"/> Responds to grievances | <input type="checkbox"/> Gives input for performance evaluations |
| <input type="checkbox"/> Disciplines and rewards | <input type="checkbox"/> 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.

- 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.
- Strong understanding of eligibility and the enrollment process regarding Medicaid application and Marketplace applications.
- Subject matter knowledge of the health insurance industry including Marketplace and Medicaid coverage.
- Expert proficiency with Microsoft Excel (pivot tables, data connections, charts, conditional formatting).
- Strong experience with various data mining, reporting, and reconciliation tools and methodologies.
- Advanced proficiency with database reporting and query writing and Microsoft Office applications (especially Access and Excel), SAS, SQL, and data warehousing.

- Good oral and written communication skills and comfortable presenting technical findings.
- Effective business and technical requirements gathering/documentation skills.
- Effective business rule writing.
- Ability to prioritize work among conflicting priorities and ability to meet imposed deadlines and completed duties.
- Extensive knowledge of state-of-the-art theory, principles, and technology in all phases of application systems development, project management, and information resource management fields of data processing.
- Extensive knowledge of current data management software technology.
- Extensive knowledge of cost/benefit analysis techniques including applying them to alternative business solutions.
- Extensive knowledge of the employing organization's business and service functions including a detailed knowledge of its current and future data requirements.
- Extensive knowledge of data modeling and data base design theory and techniques.
- General knowledge of state of Oregon procurement procedures.
- General knowledge in the use of the organizations chosen programming language(s).
- Skill in applying highly complex theory, principles, and techniques to practical business problems.
- Skill in applying sound project management techniques.
- Skill in monitoring and maintaining data bases.
- Skill in diagnosing and solving complex problems.
- Skill in communicating effectively with technical and non-technical personnel at all levels in both in state and private sectors.

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

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



07/21/2025

Appointing Authority Signature

Date