



STATE OF OREGON
Oregon Health Authority (OHA)
POSITION DESCRIPTION

Position Revised Date:
April 28th, 2025

Agency: Oregon Health Authority

Division: Health Policy & Analytics

☒ New ☐ Revised

This position is:

- ☒ **Classified**
☐ **Unclassified**
☐ Executive Service
☐ Mgmt Svc – Supervisory
☐ Mgmt Svc – Managerial
☐ Mgmt Svc – Confidential

SECTION 1. POSITION INFORMATION

- a. Classification Title: Learning and Development Specialist 2
- b. Classification No: 1339 c. Effective Date: 10/1/2025
- d. Position No: 2730403
- e. Working Title: Marketplace Training Coordinator
- f. Agency No: 44300
- g. Section Title: Oregon Health Insurance Marketplace
- h. Employee Name: _____
- i. Work Location (City — County): Salem/Marion
- j. Supervisor Name: Misty Rayas
- k. Position: ☒ Permanent ☐ Seasonal ☐ Limited Duration ☐ Academic Year
☒ Full-Time ☐ Part-Time ☐ Intermittent ☐ Job Share
- l. FLSA: ☐ Exempt If Exempt: ☐ Executive ☐ Professional ☐ Administrative
☒ Non-Exempt
- 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.

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
- 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 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:

The primary purpose of this position is to design, deliver, and evaluate complex training and development projects that facilitate group processes and instructs and informs transitioning and implementing a fully operational State-based Marketplace (SBM), a transition and implementation that is highly visible and is required by Senate Bill 972 (2023). This position will be responsible for training a contracted consumer assistance center that will support eligibility and enrollment year-round, training community-based organizations to become Marketplace certified application assisters, and certifying health insurance agents to enroll consumers into a Marketplace plan. This position will design and implement instructional strategies to help develop program goals, objectives, and action plans. This position will also deliver organizational development services by creating and bringing into effect strategies to improve organizational effectiveness. The person in this role will conduct quality assurance of all Marketplace trainings.

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	Development of Training Opportunities: <ul style="list-style-type: none"> Works independently and collaboratively with team members, other training experts, and manager to develop, design, and implement in-person and online training curriculum for the contracted consumer assistance center, community-based organizations, and health insurance agents, to ensure implementation of education, certification requirements, and process changes as it relates to the SBM. Develops training course objectives, lesson plans, course materials, and training evaluations. Collaborates with subject matter experts within the Oregon Health Insurance Marketplace, the Division of Financial Regulation, and the Medicaid teams to design course curricula and write instructional manuals for participants and trainers.

			<ul style="list-style-type: none"> • Ensures curricula conforms to CMS and the Affordable Care Act, as well as federal, state and department policy and regulations as appropriate. • Continually assesses training requirements to plan appropriate solutions to improve program effectiveness. • Formulates and updates training and development policies or procedures for the SBM. • Provides technical assistance and consultation to Marketplace staff. • Researches and responds to training inquiries and develops training as needed.
30%	N	E	Delivery of Training Opportunities: <ul style="list-style-type: none"> • Delivers high-quality educational opportunities to contracted Consumer Assistance Center (CAC), community-based organizations, and health insurance agents. • Provides trainings to groups of varying levels of experience and education in clear and engaging manner. • Provides training for Consumer Assistance Center (CAC), community-based organizations, and health insurance agents. • Ensures trainees are certified to help individuals with eligibility and enrollment into a Marketplace plan and that individuals understand their health insurance plan options within the Marketplace to minimize public risk of being uninsured.
20%	N	E	Organizational Development: <ul style="list-style-type: none"> • Collaborates with others to identify issues, generate alternatives, and develop solutions to help maintain program effectiveness and implement changes needed to ensure successful implementation of an SBM. • Facilitates quality improvement projects by researching ways to improve training. • Tracks training outcomes for community-based organizations, insurance agents, and CAC. • Advises management on methods to bring change into effect and recommends strategies to improve SBM. • Designs processes for and facilitates problem-solving meetings to ensure changes and process are updated in initial trainings. • Ensures the training evolves as the problems and solutions are identified and therefore corrected in training to ensure the eligible consumers are receiving the best options available to them regarding enrolling in the Marketplace. • Facilitates strategic planning sessions to coordinate with the Medicaid programs' trainings. • Advises managers on developing performance measures to obtain strategic objectives.

			<ul style="list-style-type: none"> • Identifies barriers to effective organizational change regarding training and support from partners. • Recommends strategies to bring into effect organizational change or improve systems and procedures to continue to provide health coverage options to the public during and after SBM transition. • Designs and assists management in executing organizational change strategies. • Facilitates quality improvement regarding Marketplace training, procedures, and policies as needed.
Ongoing	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 in order 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 in an effort 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.

This position is eligible for remote work part- or full-time once the incumbent has gained the proficiency to perform work independently. The person in this role incumbent may occasionally be asked to work from the office on an as-needed basis and may be required to offer in person training to contract vendors. May require work beyond the normal working hours and may include some overtime. Work is sometimes required outside normal hours, including evenings and weekends. Some assignments will have short timelines.

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
OregonHealthCare.gov
Oregon Insurance Code and Administrative Rules
Oregon Revised Statutes and Administrative Rules of other State agencies including the Motor Vehicle Code and Dept. of Human Resources Code
Principles of contract and tort law
Federal statutes relating to health and welfare programs, which include the Affordable Care Act (ACA)
National Association of Insurance Commissioner guidelines

b. How are these guidelines used?

To assist in formulating training, policies and establishing priorities and procedures and to establish the 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?
Marketplace Director, Marketplace Deputy Director, Marketplace Policy and Program team, Marketplace Business Process and Data team, Marketplace communications	In person/in writing, by phone, webinars, and virtual meetings	Policy direction Discuss training programs, assess training needs, and answer questions or concerns.	Daily
Healthcare providers, healthcare insurers, insurance agents, community partners.	In person/in writing, By phone, webinars, and virtual meetings	Discuss training programs, assess training needs, and answer questions or concerns.	Daily
Contracted Consumer assistance center	In person/writing, by phone, webinars, and virtual meetings	Discuss training programs, assess training needs, and answer questions or concerns.	Daily

SECTION 7. POSITION-RELATED DECISION MAKING

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

1. Educates, orients, and trains CAC, community-based organizations that employ community partners and health insurance agents.
2. Proposes resolution to management regarding identified concepts and trends that may have an adverse effect on the insurance-buying public.
3. Identifies conflicts between office policy, contract language, and fact situations. Resolves conflict through mediation.
4. Interprets and explains program rules, regulations, policies, and procedures to provide factual data and revise program procedures.

Inappropriate decisions/education may result in failure to protect the insurance-buying public.

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
Community Partner Liaison (Operation and Policy Analyst 4)	1020273	Work is reviewed regularly to determine if guidelines are being met.	Weekly	Verify content and training is accurate and completed timely to support Community Partners
Agent and Employer Liaison (Operation and Policy Analyst 4)	1020271	Work is reviewed regularly to determine if guidelines are being met.	Weekly	Verify content and training is accurate and completed timely to support Agents.
Marketplace Deputy Director (Health Policy and Program Manager 3)	1020264	PAF review Touch base	Quarterly Monthly	To monitor performance 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.

Extensive knowledge of:

- Current training and development trends and resources
- Instructional methods and training techniques, including curriculum design, learning theory, group, and individual techniques
- Organizational development and implementation strategies
- Testing and evaluation procedures
- Navigating a learning management system

General knowledge of:

- Policies and practices involved in health insurance
- Basic knowledge of Medicaid and the Oregon Health Insurance Marketplace eligibility and programs

Skill to:

- Operate a desktop computer and software applications to create documents, reports, and visual instructional material.
- Assess individual, program or organizational development needs, establish objectives and specify the strategies and actions to achieve these objectives
- Research training development trends and design curricula to achieve desired results
- Interpret rules, policies, and goals and communicate them to others
- Evaluate and monitor effectiveness of training techniques
- Provide group leadership to assist organizations to achieve strategic goals
- Apply group processes as they relate to training or informational process situations
- Establish and maintain effective working relationships with other employees, consultants, and training vendors
- Design training course objectives, lesson plans and course materials
- Communicate information and ideas clearly in speaking and in writing
- Read and understand information and ideas presented in writing
- Motivate, develop, and direct people

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

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

Date