



STATE OF OREGON
Oregon Health Authority (OHA)
POSITION DESCRIPTION

Position Revised Date:
09/29/26

Agency: Oregon Health Authority

Division: Medicaid

☐ 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: OPA3
- b. Classification No: C0872 c. REPR code: OAH
- d. Position No: 1002337
- e. Working Title: Children and Youth Behavioral Health Policy Analyst
- f. Agency No: 44300
- g. Section Title: Medicaid Policy; Medicaid Behavioral Health Policy
- h. Employee Name: Vacant
- i. Work Location (City — County): Salem/Marion or Portland/Multnomah; Hybrid
- j. Supervisor Name: Jennifer Poore (interim)
- 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.**

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 Medicaid 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:

Health Equity:

- Addressing the clinical and social conditions, as well as the historical and contemporary injustices, which undermine health, so everyone can reach their full health potential.
- Considering the diversity of Oregon’s communities as we make decisions about how policy and practice are developed, and how resources are distributed.
- Respecting diverse cultures, populations, histories, and health practices; ensuring a diverse workforce and inclusive work environment.

Service Excellence:

- Exceeding expectations and being committed to delivering responsive, efficient, and effective solutions.

Integrity:

- Being accountable for maintaining the highest standards and outcomes in all aspects of our work; being a good steward of public trust and resources.
- Ensuring decisions are informed, fiscally responsible, open, and easily understood.

Leadership:

- Ensuring every employee has the ability and opportunity to help make changes that improve health and transform health care.
- Leading improvement in health through innovative strategies and creative solutions.

Partnership:

- Seeking out, listening to, and collaborating with partners across diverse communities; respecting internal and external ideas and opinions.
- Working with key invested partners and communities to protect and promote the health of all people in Oregon.

Innovation:

- Not being satisfied with the status quo and seeking new and better ways to meet the needs of the people we serve with creativity and openness.
- Pursuing opportunities to develop new evidence to evolve our practices.

Transparency:

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

Medicaid Division description:

OHA is home to most of the state's publicly supported health programs. OHA divisions include Behavioral Health, Equity and Inclusion, Fiscal and Operations, Health Policy and Analytics, Medicaid, Public Health, and the Oregon State Hospital.

The Medicaid Division is responsible for the design, development, implementation, monitoring, evaluation, and improvement of publicly funded Medicaid programs and related health programs, which includes the Oregon Health Plan (OHP), Healthier Oregon, the OHP-Bridge Program, and initiatives under 1115 demonstration waivers, state plan authorities, and 1915 home and community-based services waivers. The Division is the Single State Medicaid agency authorized to enter into agreements with the federal government for the state of Oregon. The division defines and manages the Oregon Administrative Rules divisions that govern OHP-covered health care services, eligible fee for service health care providers and participating managed care plans, including Coordinated Care Organizations (CCOs), to ensure programs and services are delivered effectively, equitably, and in compliance with state and federal regulations.

Medicaid, and the related health programs the division oversees, provides coverage for health care and related services for Oregonians with low income. Currently, one out of every three Oregonians receive healthcare through Medicaid programs. These programs play a crucial role in improving health care access, promoting health equity, and reducing disparities across the state. The collective and collaborative effort of division management and staff are essential in helping OHA achieve its vision and aim to produce better and more equitable health outcomes and move closer to our strategic goal to eliminate health inequities by 2030.

Unit/Program Description:

Medicaid Behavioral Health Policy unit writes administrative rules (OAR), directs coverage policy, directs provider enrollment and provider billing policy, issues guidance, leads rate setting and provides subject matter expertise and FFS program leadership for the following areas within OHP: American Rescue Plan Act initiatives; Applied Behavioral Analysis; Assertive Community Treatment; Behavior Rehabilitation Services; Care Coordination services; Clinical Decisions regarding Medical Necessity and Medical Appropriateness of residential services; Co-Occurring Disorder treatment; Crisis Respite, Crisis Receiving and Stabilization Centers;; Institutions for Mental Diseases; Mobile Crisis and Stabilization Services; Maintaining the Behavioral Health Fee schedule; Personal Care Attendant and HCBS in home PCA programs (including Agency with Choice); Problem Gambling; Secure Treatment/Inpatient Services; and Substance Use Disorder Services.

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 lead the development, interpretation, and implementation of Medicaid behavioral health policy for children and youth by conducting complex policy analysis, directing program operations, and advising senior leadership on strategic direction. The role determines how federal and state requirements, clinical practices, and system trends shape Oregon's Medicaid behavioral health services for children and youth, including where policy or operational guidance is not yet defined, and it provides specialized policy leadership across high-acuity service areas such as Psychiatric Residential Treatment

Facilities (PRTFs), residential and subacute programs, Oregon State Hospital (OSH) transitions, and the associated prior authorization (PA) and certificate of need (CON) processes. By overseeing Oregon Administrative Rule (OAR) development, clinical criteria, program guidelines, and system requirements, the position ensures that policies are applied consistently and effectively, and that statewide program decisions align with broader agency goals. Through legislative coordination, cross-system collaboration, and high-impact policy planning, the role ensures Oregon’s children and youth behavioral health system is responsive, equitable, compliant, and strategically positioned to meet evolving needs.

The primary purpose of this position is also to ensure the quality, compliance, and performance oversight of children and youth behavioral health programs by evaluating Medicaid data, identifying operational risks, monitoring system outcomes, and determining improvement strategies that promote access, accountability, and service integrity. This includes directing quality assurance and program evaluation activities across the full continuum of children and youth behavioral health services and leading system-level improvements in collaboration with clinical staff, providers, internal and external partners. Additionally, the position serves as a key technical advisor for complex service areas – providing expert guidance on Medicaid policy, billing and related system adjustments, authorization processes, provider enrollment, and regulatory expectations – to help partners correctly implement policies and resolve operational barriers. By translating policy into practice and guiding partners through highly specialized behavioral health requirements, the role ensures accurate, consistent, and effective implementation of Medicaid behavioral health services for children and youth.

This position will factor in the perspectives of diverse populations most harmed by social injustice and inequities including communities of color, immigrant groups, the disability and neurodivergent communities, veterans, older adults, individuals identifying as LGBTQIA+ and other communities that have been traditionally marginalized.

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	R	E	Align Conduct with OHA’s Values and 2030 Strategic Goal - Demonstrate awareness, understanding and alignment in service delivery with the OHA Core Values of Health Equity, Service Excellence, Integrity, Leadership, Partnership, Innovation, and Transparency. - In addition to the cultivation of equitable practices across all aspects of the position description, learn and apply knowledge and skills to interrupt systemic racism and

			oppression of groups most impacted by historical and contemporary racism and social injustices. • Demonstrate recognition of the value of individual and cultural difference; demonstrate evidence of ongoing development of personal cultural awareness and humility; contribute to an inclusive work environment that is respectful and accepting of diversity and where talents and abilities are valued. • Contribute to a positive and productive work environment; maintain regular and punctual attendance; perform all duties in a safe manner; and comply with all policies and procedures. • Model professional behavior. Interrupt and report inappropriate behaviors, especially those in violation of policy. • Promote and actively participate in OHA's 2030 goal of eliminating health inequities. • Hold awareness and be attentive to the direct and indirect accountabilities and opportunities within the Medicaid Division to positively impact and influence the goals, strategies, actions, and measures outlined in OHA's strategic plan (2024-2027). • Use language that promotes equity, engagement, asset-framing, and power-sharing; when crafting written content or correspondence, reference and adhere to equity-centered communication guidelines outlined in the OHA/ODHS Writing Style Guide and OHA Graphic Standards Manual.
35%	R	E	Policy Analysis and Program Management: • Analyze, interpret and apply state and federal laws/regulations, current trends in children and youth behavioral health (inclusive of mental health and substance use disorder treatment), and agency policies and strategies to advise senior management on setting policy directions. • Provide subject matter expertise, develop and inform recommendations, and coordinate and collaborate on planning and decision making on SPAs, waivers, rate changes, rule changes, provider guidance, contracts, interagency agreements, IT systems business requirements as it relates to Medicaid Behavioral Health children and youth policy and operations. • Prepare comprehensive policy briefs, issue analyses, and strategic recommendations for senior leadership, other state agencies, and external health care entities to inform decision-making and guide Medicaid Behavioral Health children and youth policy and operations.

			• Evaluate the impact of incorporating the programs, practices or policies of other states or health entities into Oregon Medicaid as it relates to Medicaid Behavioral Health children and youth policy and operations. • Provide dedicated administrative and policy support for Psychiatric Residential Treatment Facility (PRTF) Prior Authorizations (PA) and Certificates of Need (CON); ensure comprehensive oversight of PA/CON processing for youth requiring residential or inpatient behavioral health services to prevent delays or backlogs in PRTF access. • Serve as the lead policy and analytical resource supporting Behavioral Health Management Committee (BHMC) review of recommended adverse determinations made by the Independent & Qualified Agent (IQA) for Open Card members or services carved out of CCOs as it relates to Medicaid Behavioral Health children and youth services. • Develop Medicaid program guidelines to ensure effective policy implementation, including clinical assessment criteria used by the clinical staff to approve or deny requested services pursuant to the CMS regulation and state administrative rules. • Serve as subject matter expert, write, and revise Medicaid behavioral health services administrative rules (Medical Assistance Programs Chapter 410, Division 172) based on changes to policy, state statutes or federal laws/regulations. Lead in the adoption and revisions of administrative rules, including coordination and consultation with the Behavioral Health Division, by working with the rules coordinator who manages the administrative rules process. • Provide policy direction during the interim period before the adoption of administrative rules. • Ensure OHA meets federal CMS Interoperability Final Rule requirements specifically as they apply to timely review and processing of prior authorizations for children and youth behavioral health services. Monitor operational risks tied to interoperability (e.g., inconsistent PA data exchange, missing documentation, follow-up delays) and develop mitigation strategies.
15%	R	E	Compliance, Quality Assurance & Program Evaluation: • Lead quality assurance and continuous quality improvement activities across the continuum of behavioral health services for children and youth. • Analyze Medicaid claims and encounter data using Medicaid Management Information Systems and data pulled from Web Intelligence Rich Client.

			• Conduct data validation, trend analysis, and performance measurement to evaluate program compliance with state and federal requirements, to ensure programs are operating within the budgetary constraints, and to identify opportunities for system improvement. • Evaluate and monitor the implementation of adopted policy changes to assess the level of improvement in program and processes. • Plan and oversee system-wide operational improvement projects, including defining project scopes, budgets, resource needs, deliverables, and success criteria; adjust project plans in response to emerging risks or unexpected findings. • Develop and manage organization-wide data collection processes, including surveys, studies, monitoring tools, and reporting mechanisms; interpret findings to recommend operational or policy changes. • Collaborate with information systems teams (e.g. MMIS) to initiate system changes to meet new program requirements, enhance program performance, or make adjustments and corrections to assure compliance, access, and quality program outcomes.
15%	R	E	Technical Consultation and Advice: • Engage and provide technical assistance to internal and external partners to implement behavioral health policy changes impacting youth. • Provide subject matter expertise for youth behavioral health services. Offer training on federal and state regulations, state expectations and provide technical assistance to members and providers. • Provide technical assistance to internal and external partners for Medicaid payment to providers. • Write provider FAQ's and technical assistance documents. • Develop billing guidelines and provide consultation to Medicaid Provider Enrollment to clarify and correct provider specialty types to support accurate enrollment and billing and to mitigate claim denials, payment delays, inaccurate provider records, overpayments, underpayments, and unnecessary administrative burden, potentially affecting provider participation and continuity of services. • Provide technical assistance and consultation on administering project contracts, and monitoring and evaluating contractor performance as it relates to Medicaid Behavioral Health children and youth policy and operations.

15%	R	E	Project Management: • Develop workplans to identify, track and report on timelines, desired outcomes, milestones, and status updates on planning and implementation responsibilities as it relates to Medicaid Behavioral Health children and youth policy and operations. • Advise Medicaid and OHA agency leadership on project risks, performance concerns, and strategic interventions needed to maintain progress and achieve Medicaid Behavioral Health children and youth policy and operational objectives. • Prepare high level project reports, analyses, and briefings for Medicaid and OHA agency leadership, other state agencies (Oregon Department of Human Services and Oregon Youth Authority), and – when appropriate – federal partners to support informed decision making and oversight. • Provide training and technical assistance as necessary to support internal and external partners to collect and manage feedback and metrics as it relates to Medicaid Behavioral Health children and youth policy and operations. • Participate in training and cross-training to support the development, maintenance, monitoring, and administration of Medicaid and Oregon Health Plan contracts and agreements.
10%	R	E	Legislative Coordination: • Monitor federal or state legislation, evaluates programmatic impact, and initiates or coordinates legislative changes to support policy options, or plan changes to systems, operations, or procedures in response to legislation as it relates to Medicaid Behavioral Health children and youth services. • Evaluate legislation affecting children and youth behavioral health services for fiscal and programmatic impact including potential impacts to access, services delivery, program operations, and implementation, and develop legislative concepts with internal and external partners. • Research and lead development of legislative concepts affecting children and youth behavioral health programs; develop suggested bill language and write or coordinate reports describing the impacts of legislative proposals on agency operations, programs, and the populations served. • Prepare legislative reports, analyses, and background materials describing anticipated impacts of legislative

			proposals; advise leadership on recommended actions, risks, and strategic considerations. • Lead and contribute subject matter expertise to state legislation bill analyses to ensure policy, programmatic, operational, and equity risks, impacts and possibilities are clearly outlined and considered; Recommend amendments and validate fiscal impact statements considering effects on budgets, operations, contracts, staffing, service delivery, and partner agencies. • Translate legislative requirements into operational plans, including contract standards, program goals, implementation timelines, and cross-system procedures needed to meet statutory obligations.
5%	R	E	Cross-Agency Coordination & Partner Engagement: • Provide subject matter expertise and coordinate with internal partners to prepare, vet, and validate state plan amendments or waiver requests for assigned programs. • Develop and maintain relationships with local, state, and national partners focused on Medicaid and children and youth behavioral health policies. • Convene and lead meetings with internal and external partners and advisory committees to discuss the impact of possible legislation or potential policy and to gather their input and advice. • Respond orally and in writing to external partners to address legislative and policy changes. • Convene and conduct community engagement and/or Rules Advisory Committees to ensure partner input into updating Oregon Administrative Rules.
5%		NE	• Other duties as assigned.

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.

The person in this position will work a professional work week, Monday through Friday. Some evening and/or weekend work may be required, especially during legislative session.

The job requires frequent preparation, presentation, and/or response to technical and professional material against assigned deadlines. Work product can be highly visible, and of significant interest to legislative representatives, multiple partner groups and/or state agencies and associations. Workload and priorities fluctuate and can involve highly complicated, sensitive, and/or political issues. May experience stressful situations due to unchangeable project and program timelines.

This professional collaborative position relies upon positive, productive, and respectful engagement with leadership and subject matter experts within the Division, across the Agency / state agencies, representatives of local government / governor's office, and with key invested members, partners, and providers within Oregon communities.

Occasional in-state travel may be required. This is a hybrid role that will require occasional in-person time, usually at one of OHA's state office buildings.

This work may be performed remotely (unless the agency's business and operational needs require in-person) within the defined workweek.

When working remotely, the current structure relies upon Division issued equipment, utilizing the employee's internet network and activation of secure network software to connect to OHA's Virtual Private Network, and utilizing on camera virtual meetings.

Frequent contact and work with a variety of staff, colleagues, and partners in a variety of office, virtual and meeting room settings is expected. Open office environment or virtual environment with frequent interruptions while working on multiple projects simultaneously. Continuous use of computer and communication devices/ applications. Multiple communication streams including email, instant message, and cell phone. These are daily conditions.

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:

- Federal Regulations (including but not limited to Medicare and Medicaid regulations and Health Insurance Portability and Accountability Act)
- National best practices and fidelity models promoted by key federal agencies
- Oregon Revised Statutes
- Oregon Administrative Rules
- Billing codes and practices, including HCPCS and CPT procedural codes, ICD-9 and -10 CM

diagnosis codes, NDC codes as applicable, DSM-5, DC:0-5, and National Correct Coding Initiative

- Program budget, expenditure and utilization reports, program operations claim status and error reports related to assigned medical program and service areas
- OHA/Coordinated Care Organization Contracts
- State laws, rules, and contract requirements relating to Medicaid services
- Oregon Procurement Laws and Guidelines
- OHA/ODHS Writing Style Guide
- OHA Graphic Standards Manual
- OHA Human Resource policies and procedures
- Oregon Department of Administrative Services (DAS) policies and procedures
- Departmental and office policies and procedures
- Collective Bargaining Agreement
- Local requirements as appropriate
- OHA Tribal Consultation & Urban Indian Health Program Confer Policy
- Trauma Informed Approaches
- Organizational Effectiveness strategies
- Continuous Improvement strategies

b. How are these guidelines used?

As parameters and reference to perform as an expert and to effectively consult and act as a liaison with leadership and staff in shaping, defining and prioritizing activities and priorities.

As parameters and reference to assure compliance with best practice and applicable laws, rules, policies and regulations and cost allocation. May also serve to guide strategic planning. The work of OHA is governed and administered within the context of these laws, rules and policies.

These guidelines provide basic data for ongoing management and establishing, monitoring, and coordinating program policies and procedures for the assigned programs within the legislatively approved budget.

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?
OHA Senior Management; Other State Agency Senior	In-person; Virtual (e.g. MS Teams, Zoom); Written (e.g.	Collect, provide and discuss information and data; collaborate and coordinate on policies and programs; provide and receive direction or consultation; answer	Daily, as needed

Management (ODHS, OYA, ODE, etc.)	email, letter/memo, report); Phone	questions; gather input; enforce policies, regulations and contracts; negotiate agreements	
OHA Staff; Other State Agency Staff	In-person; Virtual (e.g. MS Teams, Zoom); Written (e.g. email, letter/memo, report); Phone	Collect, provide and discuss information and data; collaborate and coordinate on policies and programs; provide and receive direction or consultation; provide technical assistance; answer questions; gather input; enforce policies, regulations and contracts; negotiate agreements	Daily, as needed
Department of Justice (DOJ)	In-person; Virtual (e.g. MS Teams, Zoom); Written (e.g. email, letter/memo, report); Phone	Collect, provide and discuss information and data; provide and receive direction or consultation as it relates to regulations, rules, contracts and the implications of policy or program actions or activities	As needed
OHP recipients and persons with lived experience	In-person; Virtual (e.g. MS Teams, Zoom); Written (e.g. email, letter/memo, report)	Listen and engage to identify opportunities, co-design solutions, reconcile concerns with commitment to improve services, supports, programs and policies	Weekly, as needed
Community Based Organizations; Culturally specific Organizations	In-person; Virtual (e.g. MS Teams, Zoom); Written (e.g. email, letter/memo, report); Phone	Collect, provide and discuss information and data; collaborate and coordinate on policies and programs; provide and receive direction or consultation; provide technical assistance; answer questions; gather input	Weekly, as needed
Providers, including treatment service providers / professionals, CCOs, Tribal providers, local and county programs)	In-person; Virtual (e.g. MS Teams, Zoom); Written (e.g. email, letter/memo, report); Phone	Collect, provide and discuss information and data; collaborate and coordinate on policies and programs; provide and receive direction or consultation; provide technical assistance; answer questions; gather input; enforce policies, regulations and contracts	Weekly, as needed
Tribal governments	In-person; Virtual (e.g. MS Teams, Zoom); Written (e.g. email, letter/memo, report); Phone	Collect, provide and discuss information and data; collaborate and coordinate on policies and programs; provide and receive direction or consultation; provide technical assistance; answer	Weekly, as needed

		questions; gather input; enforce policies, regulations and contracts	
Centers for Medicare and Medicaid Services (CMS); Federal Agencies	In-person; Virtual (e.g. MS Teams, Zoom); Written (e.g. email, letter/memo, report); Phone	Provide and discuss information and data; receive direction or consultation; receive technical assistance and discuss issues; respond to request for information; review policy changes, interpretations, and implications	Weekly, as needed
Legislators, their offices and legislative staff; Governor's Office and staff	In-person; Virtual (e.g. MS Teams, Zoom); Written (e.g. email, letter/memo, report); Phone	Collect, provide and discuss information and data; provide and receive direction or consultation; provide technical assistance; answer questions; gather input; provide bill analysis; prepare hearing testimony	Weekly, as needed

SECTION 7. POSITION-RELATED DECISION MAKING

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

Always determine the impact of programs, policies, operations, budgets, and all other aspects of the program on health equity.

Ensure decisions prioritize the equitable distribution or redistribution of resources and power and recognize, reconcile and rectify historical and contemporary injustices.

Determine Medicaid behavioral health policy direction for children and youth by analyzing laws, regulations, system trends, and operational impacts to guide program strategy and senior-level decisions.

Evaluate compliance, quality, and performance of children's behavioral health programs by interpreting Medicaid data, identifying systemic risks or gaps, and deciding on corrective actions or improvements that ensure regulatory alignment and service access.

Direct the development, revision, and implementation of administrative rules, clinical criteria, program guidelines, and system requirements that shape how Medicaid behavioral health services for children and youth are authorized, delivered, and monitored.

Decide on the technical guidance, training, and consultative support needed by internal teams and external partners to correctly implement behavioral health policy changes, resolve operational barriers, and ensure accurate billing, provider enrollment, and service authorization in the children and youth Medicaid behavioral health system.

The decisions in this position require a high degree of complicated conceptual, critical, and analytical thinking as well as knowledge of medical/health programs, practices, standards and budgets. The person in this position must apply these skills and knowledge within the limitations and opportunities extant in state and federal law, rule, and guidance. These decisions significantly influence the

management of expenditures and access to quality medical care for the 1.4 million recipients of medical assistance in Oregon.

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
Health Policy & Program Manager 2 (HPPM2)	1013901	Virtually, In person, Phone, Email, written form	Daily to Weekly, and as needed	Communicate updates on progress of major tasks and projects; Ensure project and program decisions meet federal, agency and user requirements; Promote quality assurance, strategic plan alignment, and equitable outcomes; Discuss and review goals, performance, expectations and training needs; Promote problem-solving and solution-seeking

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 | ☐ Coordinates schedules |
| ☐ Assigns work | ☐ Hires and discharges |
| ☐ Approves work | ☐ Recommends hiring |
| ☐ Responds to grievances | ☐ Gives input for performance evaluations |
| ☐ Disciplines and rewards | ☐ 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.

1. Experience leading the development and implementation of policies and programs at the community, state, and/or national level that advance health equity (address systemic health disparities, expand culturally responsive and inclusive services, factor in social determinants of health) and elevate the voice of community and those with lived experience.
2. Knowledge of health services delivery systems, particularly the Oregon Health Plan/ Medicaid administration in Oregon, including experience working with Coordinated Care Organizations, social safety net programs, health service providers (including hospitals, post-acute treatment facilities, long-term care facilities, and adult foster home, Community Mental Health Programs and other behavioral health service providers), or community-based organizations.
3. Knowledge and experience developing, implementing, and refining policies included in the Medicaid state plan or other waiver authorities with Centers for Medicare and Medicaid Services (CMS).
4. Knowledge of legislative and regulatory processes; experience analyzing, applying and advising on relevant federal and state Medicaid laws and regulations as well as legislative concepts/bills; specific knowledge of Oregon Administrative Rules and Oregon Revised Statutes is valued.
5. Ability to foster inter-and cross-agency collaboration and to facilitate coordination of community centered policies, programs, and continuous (performance / quality / process) improvement strategies.
6. Strong oral and written communication skills across a variety of forums; experience communicating qualitative and quantitative information, verbal and written, that are accessible to and understood by audiences with different levels of comprehension or interest and that are culturally responsive, inclusive, and appropriate.
7. Experience and knowledge evaluating and synthesizing quantitative and qualitative data to analyze and measure the effectiveness, efficiency, and impact of administrative and technical programs within the context of health policy / healthcare services.
8. Experience presenting and articulating the value and relevance of research and evaluation data to facilitate quality assurance, strategic planning, and decision-making.
9. Demonstrated project management experience, including ability to effectively manage multiple project timelines and priorities and promote human-centered change management.
10. Knowledge and understanding of the full continuum of behavioral health care, with specific understanding of the cross section between medical/physical needs co-occurring with mental health, substance use disorder, community criminal legal system and systemic racism.
11. Knowledge about contracts/interagency agreement administration, procurement within the context of Oregon state government (e.g. OHA/ODHS) or other complex health services delivery organizations.

12. Knowledge of Medicaid Management Information System (MMIS) relevant functions, processes, and interfaces.
13. Ability to demonstrate advanced Microsoft Excel, Word, PowerPoint, Visio and Outlook skillset; and skilled use of collaboration tools such as Microsoft Teams, SharePoint, and Smartsheet.

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