

Title: Supervisory Health Insurance Specialist
Pay plan, Series, Grade: GS-107-15
Administrative Code: FCNA
Position Description No: 40085S

INTRODUCTION

This position is located in the Data and Policy Analytics Group (DPAG), Office of Minority Health (OMH), at the Centers for Medicare and Medicaid Services. The Centers for Medicare and Medicaid Services, Office of Minority Health (OMH) is responsible for providing leadership, vision and direction to address HHS and CMS Strategic Plan goals and objectives related to improving minority health and eliminating health disparities, developing an Agency-wide data collection infrastructure for minority health activities and initiatives, implementing activities to increase the availability of data to monitor the impact of CMS programs in improving minority health and eliminating health disparities, and consulting with HHS Federal agencies and other public and private sector agencies and organizations to collaborate in addressing health equity.

The incumbent of this position will serve as the Director of the Data and Policy Analytics Group (DPAG) and work with the OMH Director and Deputy Director in support of the work of the Office and Agency. The incumbent coordinates and manages the improvement of data availability, and the development and execution of data analyses, research, evaluations and initiatives to improve coordination, quality, access, outcomes and cost of care for vulnerable populations. The incumbent is responsible for directing, planning and overseeing data analysis, research and evaluation activities to monitor the impact of CMS programs and inform programmatic and strategic policy related to improving minority health and eliminating health disparities. The incumbent directs and manages major cross-cutting operational activities for OMH that relate to minority health and disparities elimination including the development of new programs and initiatives and the evaluation of existing programs and initiatives. Serves as an expert and the principle source of advice and guidance to OMH leadership on health disparities, data analysis, and research and evaluation.

FACTOR 1 – PROGRAM SCOPE AND EFFECT

SCOPE

Plans, directs and manages the work of a highly skilled and multi-disciplinary professional staff in a variety of program analyses and data research related activities.

Plans, directs, coordinates and oversees efforts to develop systems, mechanisms and/or processes to improve data collection, analysis and reporting by race, ethnicity, primary language, disability, and gender, as well as other categories impacting vulnerable populations.

Plans, directs and oversees data integration, data sharing, and research/analytical studies to improve the CMS and HHS programs as relates to vulnerable populations, including data

collection and reporting, analytical techniques, decision support capabilities and systems, operating policies and procedures, program guidance and instructions, and business and communication processes.

Plans, directs and oversees the direction and management of data analyses, research evaluations and program related studies impacting disparities elimination, quality of care, utilization of program services, and analysis of policy issues related to vulnerable populations to provide policy decision makers with quantitative and qualitative data and analysis for making logical and intelligent decisions. Assures staff consider various implications of policy options and their economic viability, technical feasibility and political indications.

Serves as a technical expert and resource to internal and external stakeholders on issues related to minority health and disparities elimination.

Maintains contacts and working relationships with counterparts in other government agencies, universities, private research institutions and other CMS components who are working in the related field and interprets CMS research concerns and findings for them.

Plans and oversees efforts to develop, evaluate and implement programs, policy and data analyses including cross-component, cross-agency collaborations to monitor and improve care transitions, quality of care, care access, beneficiary satisfaction and payment and service delivery reform for vulnerable populations.

Plans and directs the coordination and management of federal analyses, review, decision making and/or input related to ongoing program and policy proposals to (1) identify and prioritize issues of importance to the federal government; (2) assess the impact on current federal (within CMS and DHHS and external to CMS and DHHS) program and policies; (3) discern budgetary and fiscal implications for the federal government; and (4) assess impact and/or relationship to federal legislative, policy and program initiatives.

Plans, organizes and directs the development and administration of new initiatives and/or modifications to existing programs and strategies to reduce health disparities and costs, better integrate services, improve beneficiary experience, and improve quality, coordination and access to care for vulnerable populations.

Attends high-level meetings related to areas of responsibility for or with the Director/Deputy to not only represent OMH, but to negotiate with others on initiatives to advance health, access and quality of care for vulnerable beneficiary populations. Arranges for the presence of high-level technical staff to support the Director/Deputy as needed. Provides advice and assistance to leadership and management within OMH and CMS in carrying out their responsibilities as they impact and relate to the incumbent's areas of responsibilities.

Acts as a confidential consultant and advisor to the Director and Deputy Director on programmatic and policy decisions, and critical issues that have a major impact on vulnerable populations. Resolves emerging complex issues, advising leadership of potential and emerging problem areas including formulating recommendations for appropriate program responses.

Works with OMH leadership to identify gaps in knowledge and research needs related to Office and Agency priorities.

Represents the Director and Deputy Director at inter-Agency and intra-Agency meetings regarding the justification and approval of specific initiatives. Provides authoritative information on various aspects of policy areas that impact and relate to the incumbent's areas of responsibility.

Responsible for interacting with and negotiating with high ranking state, federal and private sector officials on issues related to the development and implementation of programs and policies to better serve vulnerable populations.

Plans, directs and oversees the initiation and development of ongoing productive working relationships with relevant entities, including Congress, other federal agencies, states, other oversight agencies, contractors, providers, professional groups and CMS components/regional offices related to various aspects of the work and mission of OMH.

Serves as an advisor to the Office Director and Deputy Director and executives of various CMS components in the preparation of short, immediate and long-range plans for improvement of CMS programs as they related to minority health and health disparities.

Plans, directs and oversees the preparation of a variety of written products, including briefing documents, correspondence, contractor performance evaluations, research/pilot/demonstration evaluations and reports and issue papers.

EFFECT

The program segment that is directed impacts a major segment of CMS programs and operations of all CMS components, DHHS components, OMB, State Medicaid Agencies and other relevant federal and private sector partners by evaluating and identifying areas for improving health outcomes and eliminating health disparities for vulnerable populations across CMS and HHS programs and informing CMS and DHHS policies and procedures for these populations. Responsibilities include directing the development and execution of acceptable research and demonstration methodologies, analytical studies and other related initiatives designed to improve quality, access and cost of care for vulnerable populations. Also responsible for having expert knowledge in the area of health disparities and providing authoritative information and recommendations related to vulnerable populations that aid OMH, CMS and DHHS program improvements.

FACTOR 2 – ORGANIZATIONAL LOCATION

Works under the administrative supervision of the Director of the Office of Minority Health who provides direction on broad program policies and objectives. Activities are performed independently and are reviewed in terms of overall adequacy in attaining the objectives of the Office and the Agency.

FACTOR 3 – SUPERVISORY AND MANAGERIAL AUTHORITY EXERCISED

Supervises individuals in positions of various levels of skill and experience in achieving Group and Office goals, including planning, managing and directing subordinate work. Promotes teamwork, skills acquisition and enhancement, as well as short and long-term career growth and goals of staff. Manages and prioritizes administrative, budget and staff resources in a fast-paced environment of a new office with multiple initiatives. Ensures Office Director and Deputy Director are apprised of key issues as well as consulted on key strategic recommendations.

Plans the overall workload distribution, sets priorities, and prepares schedules of time frames for completion. Based on these priorities, assigns work considering the relative difficulty of the assignment and the varying capabilities of employees, fully empowering staff to produce required work independently.

Utilizes technical specialists and team leaders to coordinate work of the unit. Assures workload and resource equity among staff.

Evaluates the performance of subordinate employees. Recommends awards and/or bonuses for all employees subject to performance review.

Identifies the need for and provides for scheduled training for employees, as necessary.

Interviews candidates for positions located in the unit and makes recommendations for appointments, promotions or reassignments of employees.

Hears and resolves complaints from employees. Gives advice, counsel and instructions to employees on work and administrative matters. Hears group grievances and serious unresolved complaints and refers such issues to the office Director for a decision, as needed.

Responsible for interacting with officials from other work units and providing recommendations to managers at higher levels in the organization.

Fosters a supportive work environment. Ensures that the principles of quality management are assimilated into the work environment by identifying work barriers and developing ways to reduce them, promoting team building and improving work processes.

Furtheres equal employment opportunity by demonstrating fairness in selections, encouraging and recognizing achievements, exercising fair treatment of minority group employees and demonstrating sensitivity to the development needs of all employees, including consideration of the knowledge and skills needed to perform job functions.

FACTOR 4 – PERSONAL CONTACTS**NATURE OF CONTACTS**

Contacts are with other Directors, CMS and HHS leadership, State leadership, subordinates, high ranking officials, representatives of provider organizations, beneficiary advocacy groups, and other groups external to CMS including a wide variety of individuals or groups outside state and federal government. Contacts often take place in formal or informal settings including presentations at conferences, seminars, and workshops attended by a variety of audiences both internal and external to state and federal government.

PURPOSE OF CONTACTS

Contacts are for the purpose of coordinating projects, planning activities and providing oversight and leadership for the CMS program group that is directed. Represents and negotiates the Office and Group viewpoint. The purpose of contacts is to collect information, communicate Office and Group priorities, and collaborate on strategies to improve the lives of vulnerable populations. The incumbent may be required to justify, defend, negotiate or settle matters involving significant or controversial program issues. The incumbent must influence supervisors and other officials with diverse goals and viewpoints to understand, accept, and implement findings and recommendations.

FACTOR 5 – DIFFICULTY OF TYPICAL WORK DIRECTED

At least 50% of the workload supervised is at the GS-13 level or above.

FACTOR 6 – OTHER CONSIDERATIONS

The incumbent has expert knowledge in the area of health disparities and is required to direct activities that depend upon creating collaborative relationships with multiple parties with specific organizational goals and objectives of their own. The incumbent must orchestrate a careful process of bridge-building with internal and external organizations with limited resources that require the incumbent to leverage the good will and resources of other organizations and maximize the technical and relational skills of his/her staff.

The incumbent is responsible for analyzing data, programs and policy changes to assess the impact on CMS operations, vulnerable populations and assigned workloads. Incumbent's recommendations are frequently used to form the basis for policies, procedures, and actions of federal officials and policy makers and to meet the needs of health care researchers and other customers. The incumbent directs and monitors the planning, development and implementation of varied and complex demonstrations, studies and analyses assigned to the unit. The incumbent is responsible for integrating the work of assigned work area and ensuring compatibility and consistency of workload directed and the accurate reflection of Federal and Agency guidelines and procedures.

The incumbent is required to:

- Work with OMH leadership on the development of long range strategic planning for the Office.
- Direct time and resources to effectively and strategically develop and execute the mission and functions of the work unit.
- Manage and coordinate the objectives and approach related to the design, implementation and evaluation of staff projects.
- Be responsible and accountable for policy relevance, quality and timeliness of staff products.
- Facilitate team building and team work within and across the Group and Office.
- Analyze proposed legislative and policy changes to assess impact on CMS operations and assigned workloads.
- Provides leadership for organizational cultural development.
- Provides leadership for continual professional development of staff.

Core Competencies and Skills Required:

- Thorough knowledge of epidemiological and public health research and evidence based principles.
- Thorough knowledge of health equity issues, disparities research methods and existing programs and interventions to address health disparities.
- Expert knowledge of data collection methods, program analytic theories and techniques and use of statistical software packages for statistical and/or economic research.
- Skill in analyzing and developing/presenting facts and recommendations or solutions in clear, concise and logical terms, both orally and in writing.
- Skill in planning, designing, carrying out and reporting graphically on program analytical studies.
- Skill in managing large scale research and demonstration projects, e.g., negotiating, organizing and coordinating related cooperative efforts of staff in other CMS components and other federal governmental units, as well as members of the public, advisory committees or private organizations.
- Thorough knowledge of the impacts of payment systems on the health care delivery system. Includes understanding of the relationships between Medicare, Medicaid and CHIP payment and access to care, quality of care, and cost of care for all populations. Also includes knowledge of the interrelationships between Medicare/Medicaid/CHIP and private reimbursement systems.
- Experience working with local and/or national groups and community organizations to address health disparities.
- Experience with and history of publishing in peer reviewed journals.
- Familiarity with CMS programs and databases.