

POSITION DESCRIPTION

This position description serves as the official classification document of record for this position. Please complete the information as accurately as you can as the position description is used to determine the proper classification of the position.

2. Employee's Name (Last, First, M.I.)	8. Department/Agency MDHHS-COM HEALTH CENTRAL OFF
3. Employee Identification Number	9. Bureau (Institution, Board, or Commission) Medicaid Operations, Policy and Actuarial Services
4. Civil Service Position Code Description DEPARTMENTAL SPECIALIST-2	10. Division Rates, Encounter Data & Analytics Division
5. Working Title (What the agency calls the position) Encounter Data Specialist - Special Reporting	11. Section Managed Care Rates & Analytics Section
6. Name and Position Code Description of Direct Supervisor HENIKA, CIERA A; STATE ADMINISTRATIVE MANAGER-1	12. Unit
7. Name and Position Code Description of Second Level Supervisor PARKER, CHRISTOPHER E; STATE DIVISION ADMINISTRATOR	13. Work Location (City and Address)/Hours of Work 400 S PINE ST; LANSING, MI 48933 / 8:00 AM - 5:00

14. General Summary of Function/Purpose of Position

This position serves as the state's specialist for Performance Monitor Reporting and the Encounter Quality Initiative for Medicaid Health Plan Encounter reporting. This individual is responsible for specialized complex analyses of data from various MDHHS databases, and the MDHHS CHAMPS data warehouse, with particular focus on Medicaid encounter data. These analyses are specifically used to monitor quality of data; health plan reporting and determining utilization patterns and access to care for Medicaid recipients; provide data and specific detailed complex analyses for research projects essential in providing information for administrative and policy decisions. This individual is responsible for monitoring the submission and quality of data from managed care entities; on-site health plan visits; preparing and presenting analytical findings; and compiling, manipulating, and analyzing large data sets. Encounter data currently drives billions in annual capitation payments and will increase significantly as more Medicaid programs and providers enter Managed Care contracts with the department.

15. Please describe the assigned duties, percent of time spent performing each duty, and what is done to complete each duty.

List the duties from most important to least important. The total percentage of all duties performed must equal 100 percent.

Duty 1

General Summary:

Percentage: 35

Manage the Encounter Quality Initiative through extensive contacts with the Managed Health Care Plans, MDHHS data warehouse and the State's Medicaid Actuary. Provide and analyze complex, detailed information to ensure the accurate submission of quality data and assess data timeliness and completeness of the data using advanced data analytic tools.

Individual tasks related to the duty:

- Develop and maintain complex procedures that involve understanding specific data elements required for submission by the Medicaid Health Plans in their encounter data.
- Understand the encounter edits and communicate those findings to the health plans and assist in technical corrections.
- Track and maintain a lot of all questions and responses between the managed care plans and the State, as well as questions and responses to and from Milliman regarding the EQI process, EQI methodology and DRIVE tool.
- Hold regular meetings with internal encounter quality team to review EQI methodology, question and answer log, outstanding issues and other EQI related concerns.
- Communicate EQI schedules, deadlines, and data requests between MHP's, Milliman, and internal team.
- Analyze Milliman findings using the State Data Warehouse and Milliman's Drive Tool. This requires the ability to create queries using Bi-Query or SQL to identify, evaluate and analyze encounter data.
- Use Milliman's DRIVE tool to find variances and assist others with its use.
- Monitor corrective action plans for Medicaid Health Plans (MHPs) and track information required for EQI performance bonus.
- Conduct site visits to all the contracted managed care plans explaining the complexities of the reporting, the findings and differentials between the health plan data systems and Medicaid encounter submissions.
- Coordinate implementation of new EQI program processes as needed, including but not limited to methodology, data requirements for Milliman and the participating plans.

Duty 2

General Summary:

Percentage: 25

Serves as a resource for MDHHS and external staff and health plans regarding complex encounter and financial payment data issues; participates in workgroups and discussions on maintenance of encounter and financial stored in the data warehouse as well as complex business questions.

Individual tasks related to the duty:

- Serves as a specialized resource for state staff on matters relating to the CHAMPS relational database and ad hoc query software, such as Bi-Query or SQL as it relates to encounter and financial payment information
- Prepares and presents analyses and reports to MDHHS administrators and managers.
- Prepares and presents processes, reports and analyses to MDHHS and Medicaid Health Plan staff.
- Participates in and facilitates workgroup meetings, i.e., BI/Query User Group, Monthly Medicaid Health Plan Meetings, actuarial/rate-setting meetings, and Encounter Quality Initiative (EQI) meeting.
- Serves as a resource for MDHHS and external staff on matters related to encounter and fee-for-service data, and data issues resulting from implementation of rules and regulations
- Assist other departments by reviewing questionable encounters and working with managed care plans in getting data corrected if necessary.

Duty 3

General Summary:

Percentage: 25

Responsible for securing, integrating, and analyzing complex healthcare and managed care datasets in support of the Managed Care Division, Quality Improvement and Program Development Section and other program areas. This work involves the development and execution of advanced multi-layer queries pulling high-volume clinical and administrative data such as diagnosis codes and managed care payments. .

Individual tasks related to the duty:

- Compile, manipulate, and analyze extremely complex large encounter and financial data sets
- Simplify the complex information into layman's terms for ease of translation to program staff and external stakeholders
- Lead and contribute to planning and design of encounter-based analytical and financial research and studies.
- Participate in cross-functional workgroups to define, refine, and validate data requirements supporting quality measurement initiatives, ensuring alignment with program objectives and performance standards. Participate in Manage Care Plan staff and external Milliman meetings presenting material and evaluation of the data submitted by the plans.
- Advanced knowledge of the MDHHS CHAMPS data warehouse, understanding how to query using Bi-Query or SQL tools and producing actionable results.
- Ability to use Excel spreadsheet, Power BI, and other complex analytical tools and functions
- Based on research, suggest new metrics for process improvements, new edits and/or system improvements as warranted by findings.

Duty 4

General Summary:

Percentage: 15

Develop and maintain internal toolkits and review processes to support the managed care rates and analytics team in monitoring encounter, capitation, and other payment trends. Ensure ongoing validation of data quality across financial and encounter datasets by designing or leveraging established queries across programs/plans, enabling consistent monitoring of rate accuracy, payment integrity, and reporting reliability

Individual tasks related to the duty:

- Develop and maintain a suite of standardized queries to identify trends, anomalies, and potential issues across encounter, capitation and rate-related data.
- Add, modify, or remove items from internal monitoring tools and systems as needed based on encounter experience, State policies, system expectations, etc.
- Monitor and track encounter metrics and establish program benchmarks to ensure quality data, payment accuracy, and overall managed care rate integrity
- Develop and propose additional or alternative methods for evaluating encounter and payment quality.
- Report results of quality measures to management and relevant stakeholders

16. Describe the types of decisions made independently in this position and tell who or what is affected by those decisions.

Developing or conducting analyses of complex data, preparing reports, and resource information; setting priorities in performing these activities; developing work plans and processes for change and improvements, developing complex relational database applications to compile, manipulate, query, report and analyze large data sets; monitoring data submissions, and evaluating managed care entity encounter and financial data quality.

17. Describe the types of decisions that require the supervisor's review.

Approval of methodologies for complex data analysis to assure it addresses management's needs. Issues or problems that have program-wide implications or impact areas other than the specific assigned area of responsibility. Final authorization allowing managed care entities to submit production encounter data.

18. What kind of physical effort is used to perform this job? What environmental conditions in this position physically exposed to on the job? Indicate the amount of time and intensity of each activity and condition. Refer to instructions.

Most of the work is performed in an office setting and requires use of computer equipment at least 75% of the time. There will be some travel for on-site visits, meetings, and attending seminars as appropriate.

19. List the names and position code descriptions of each classified employee whom this position immediately supervises or oversees on a full-time, on-going basis.

Additional Subordinates

20. This position's responsibilities for the above-listed employees includes the following (check as many as apply):

- | | |
|---|--|
| <input type="checkbox"/> Complete and sign service ratings. | <input type="checkbox"/> Assign work. |
| <input type="checkbox"/> Provide formal written counseling. | <input type="checkbox"/> Approve work. |
| <input type="checkbox"/> Approve leave requests. | <input type="checkbox"/> Review work. |
| <input type="checkbox"/> Approve time and attendance. | <input type="checkbox"/> Provide guidance on work methods. |
| <input type="checkbox"/> Orally reprimand. | <input type="checkbox"/> Train employees in the work. |

22. Do you agree with the responses for items 1 through 20? If not, which items do you disagree with and why?

Agree.

23. What are the essential functions of this position?

Performing complex and specialized analyses of encounter, fee-for-service, and other financial data, with particular emphasis on encounter data, capitation payments, and financial reports, and monitoring quality of encounter and financial data in the MDHHS Data Warehouse. Servicing as the primary Encounter Quality Initiative (EQI) subject matter expert required to ensure accurate encounter data needed for effective rate-setting activities.

24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.

n/a

25. What is the function of the work area and how does this position fit into that function?

MDHHS has established a data collection process to support the management of its Medicaid managed care program. Managed care entities submit data into the State Data Warehouse, which also houses numerous MDHHS databases. This position lies with the Managed Care Rates and Data Analytics Section and is responsible for performing complex analytic tasks related to use of encounter, fee-for-service, and other MDHHS data stored in the warehouse. The section and position are responsible for analyzing encounter and financial data from all managed care entities including mental health, substance abuse, Medicaid managed care plans, county health plans, MICHild, and other programs.

26. What are the minimum education and experience qualifications needed to perform the essential functions of this position.

EDUCATION:

.Possession of a bachelor’s degree in any major.

A degree in a health-related field, engineering, statistics, health informatics, data or computer science is preferred.

EXPERIENCE:

Departmental Specialist 13 - 15

Four years of professional experience, including two years equivalent to the experienced (P11) level or one year equivalent to the advanced (12) level.

KNOWLEDGE, SKILLS, AND ABILITIES:

As listed on the Civil Service job specification. In addition:

- High attention to detail
- Ability to handle multiple tasks simultaneously
- Strong communication skills – both oral and written

The MDHHS mission is to provide opportunities, services, and programs that promote a healthy, safe, and stable environment for residents to be self-sufficient. We are committed to ensuring a diverse workforce and a work environment whereby all employees are treated with dignity, respect and fairness.

CERTIFICATES, LICENSES, REGISTRATIONS:

None.

NOTE: Civil Service approval does not constitute agreement with or acceptance of the desired qualifications of this position.

I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.

Supervisor

Date

TO BE FILLED OUT BY APPOINTING AUTHORITY

Indicate any exceptions or additions to the statements of employee or supervisors.

none

I certify that the entries on these pages are accurate and complete.

Appointing Authority

5/11/2026

Date

I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.

Employee

Date