

**STATE OF WISCONSIN
CLASSIFICATION SPECIFICATION
HEALTH CARE SUPERVISOR**

I. INTRODUCTION

A. Purpose of This Classification Specification

This classification specification is the basic authority under Wis. Admin. Code ER 2.04 for making classification decisions relative to present and future professional supervisory positions located within the Department of Health Services, Division of Health Care Access and Accountability, which function as Health Care Supervisors. This classification specification is not intended to identify every duty which may be assigned to positions, but is intended to serve as a framework for classification decision making in this occupational area.

Classification decisions must be based on the “best fit” of the duties within the existing classification structure. The “best fit” is determined by the majority (i.e., more than 50%) of the work assigned to and performed by the position when compared to the class concepts and definition of this specification or through other methods of position analysis. Position analysis defines the nature and character of the work through the use of any or all of the following: definition statements; listing of areas of specialization; representative examples of work performed; allocation patterns of representative positions; job evaluation guide charts, standards or factors; statements of inclusion and exclusion; licensure or certification requirements; and other such information necessary to facilitate the assignment of positions to the appropriate classification.

B. Inclusions

Positions included are professional supervisory positions located in the Department of Health Services, Division of Health Care Access and Accountability, which function as Health Care Supervisors and meet the statutory definition of supervisor contained in s. 111.81(19), Wis. Stats. Positions in this classification are responsible for program planning, policy, and procedure input and development, budget development, and supervision of staff within their respective program area(s).

C. Exclusions

Excluded from this classification are the following types of positions:

1. Positions which do not meet the statutory definition of “supervisor” as defined in s. 111.81(19), Wis. Stats., as administered and interpreted by the Wisconsin Employment Relations Commission.
2. Positions located outside of the Department of Health Services, Division of Health Care Access and Accountability.
3. Positions which do not function as a Health Care Supervisor for the majority of time (more than 50%).
4. All positions which are more appropriately identified by other classification specifications.

D. Entrance Into This Classification

Employees enter positions within this classification by competition.

II. DEFINITION

HEALTH CARE SUPERVISOR

Positions included are professional supervisory positions located in the Division of Health Care Access and Accountability with program responsibilities in the areas of medical assistance (Medicaid), chronic disease aids, insurance programs, or general relief programs. Responsibilities in these program areas include designing, developing, coordinating, and monitoring the implementation and operation of program(s), policies, regulations, and systems; serving as the primary program liaison with other sections, divisions, state agencies, providers, fiscal agents, insurance companies, county agencies, legislators, attorneys, the federal Health Care Financing Administration, etc.; managing and directing the development and analysis of fiscal and programmatic issues; monitoring expenditures; and developing and reviewing budget spreadsheets, issue papers, DIN's, cost estimates and information requests. Duties may also include developing outreach plans and assuring implementation through contract development and implementation; developing, negotiating, awarding and evaluating multiple contracts and memoranda of understanding; directing, coordinating, and managing the preparation of the biennial and annual budget requests for Medicaid benefits; monitoring monthly Medicaid expenditures; developing broad-scale reimbursement methodologies for all non-institutional, fee-for-service, primary and acute health care services provided, and institutional services; preparing analyses of legislative proposals and requests; developing programs and payment policy for all community-based health care services; directing and coordinating the research and development activities for the Medicaid Assistance Program biennial budget; evaluating all HMO contracts; developing and monitoring the statewide enrollment broker contract and outreach; or ensuring consistency among provider types, conformance with state and federal laws and regulations, and promotion of executive and departmental policy objectives.

Representative Positions:

Bureau of Fiscal Management, Rate Setting Section Chief: This position has major responsibility for the analysis, development and implementation of all capitation-based payment methodologies for all managed care providers (19 HMOs and 7 other managed care organizations), impacting 250,000 eligible persons per month at a cost of over \$400 million per year. This position directs and oversees activities for all Bureau contracted actuarial services in the Rate Setting Section in researching, developing, implementing and refining approaches to capitation rate setting. This position is also responsible for working with other sections in the Bureau in developing new innovative payment systems and cost containment and policy initiatives to promote cost effective service delivery.

Bureau of Operation Coordination, Administrative Services Unit Section Chief: This position has primary responsibility for providing staff services to the Division of Health Care Access and Accountability (DHCAA) in a variety of areas. These services include directing and overseeing the division's administrative financial operations, personnel transactions, Affirmative Action program, data reporting and statistics, and the training and development program. Another critical portion of this position is providing leadership within DHCAA for IT hardware and software purchasing and procurement, website planning, and serving as Web Liaison to DHS and the Medicaid Fiscal Agent. This includes providing business and technical assistance to division management on issues of purchasing, budget management and operations. The position is also responsible for coordinating with Department level staff to ensure that program specific needs are met at the enterprise level. In addition, this position is responsible for the management and supervision of approximately 13 staff of various professional classification and responsibilities.

Bureau of Program Integrity, Recipient Program Integrity Section Chief: This position has major responsibility for supervision of section staff and for coordination of program monitoring and evaluation functions. Job duties include developing, implementing and directing effective Medicaid and Food Stamp monitoring and evaluation processes - primarily, Food Stamp quality control reviews, Medicaid quality assurance projects, local agency management reviews and other administrative monitoring and evaluation functions. This position is also responsible for analyzing and resolving fiscal and programmatic issues related to contract compliance, audits and Food Stamp payment accuracy.

Milwaukee Enrollment Services Section Chief: This position is responsible for developing and implementing effective policy options and strategies for the daily administration of economic support programs, including Wisconsin Shares, BadgerCare Plus, Medical Assurances, FoodShare and Caretake Supplement. This position also required advanced expertise in, and provides technical and programmatic guidance related to, the Client Assistance for Re-employment and Economic Support (CARES) system, a highly complex application operated by the Department of Workforce Development (DWD) to determine Medicaid eligibility. Other responsibilities include managing and directing quality improvement activities and other monitoring efforts intended to achieve the Division's/Department's program priorities, identifying standards of performance, and establishing priorities to ensure intra-divisional coordination.

III. QUALIFICATIONS

The qualifications required for these positions will be determined at the time of recruitment. Such determinations will be made based on an analysis of the goals and worker activities performed and by an identification of the education, training, work, or other life experience which would provide reasonable assurance that the knowledge and skills required upon appointment have been acquired.

IV. ADMINISTRATIVE INFORMATION

The Health Care Financing Supervisor classification was abolished and the Health Care Supervisor classification created effective September 13, 2009 and announced in Bulletin OSER-0250-CLR/SC to accommodate the renaming of the Department of Health & Family Services to the Department of Health Services, the Division of Health Care Financing to the Division of Health Care Access and Accountability and various bureaus within the division. The representative position descriptions were modified.

The Health Care Financing Supervisor classification was created effective March 12, 2000 and announced in Bulletin CLR/SC-109 as a result of Phase Two of broadbanding non-representative positions to describe supervisory positions responsible for health care financing program areas.

These positions were formerly classified as Health Care Financing Supervisor which was created effective August 7, 1994 and announced in Bulletin CC/SC-25, to describe positions formerly classified as Administrative Officer. This classification specification was modified effective May 10, 1998, and announced in Bulletin CC/SC-85 to include the position which functions as the Chief, Provider Audit Unit, as a result of the Professional Program Support Personnel Management Survey. The Chief, Provider Audit Unit position was formerly classified as Administrative Officer 2-Supervisor. The one-level Health Care Financing Supervisor classification was abolished and the Health Care Financing Supervisor 1 and 2 classification series was created effective April 11, 1999, and announced in Bulletin CLR/SC-98 as a result of the Professional Program Support Survey. The two-level classification series included positions which were formerly classified as Health Care Financing Supervisor and Administrative Officer 1 – Supervisor.