



**OFFICE OF THE HEALTHCARE ADVOCATE/STATE INNOVATION MODEL UNIT**  
**JOB OPPORTUNITY**  
**STATE INNOVATION MODEL SPECIALIST**  
**Re-post – extend closing date**

**[PLEASE FOLLOW THE SPECIFIC APPLICATION FILING INSTRUCTIONS AT THE BOTTOM OF THIS PAGE!](#)**

**Open To:** The Public

**Location:** 450 Capitol Avenue, Hartford, CT

**Job Posting No:** 113083

**Hours:** Full-time 40 hours week

**Salary:** (AR 26) \$76,373 - \$98,224 (please note, new hires start at the minimum salary range)

**Closing Date:** Thursday, February 11, 2016

The State Innovation Model Unit (Quality Measure Alignment) within the Office of the Healthcare Advocate is seeking a State Innovation Model Specialist to be responsible for specific deliverables which may include but are not limited to: Lead the development and implementation of a multi-payer quality measurement set for use by commercial health plans and Medicaid [and Medicare Advantage] for value-based payment and a public common scorecard; Activities and deliverables include cross-functional collaboration with both internal and external stakeholders, review of program objectives, metric selection/design, implementation and reporting plans and operations; Monitor changes in measures and the introduction of new measures by national measure developers as well as National Quality Foundation measure endorsements; represent the PMO in the national Alternative Payment Model Learning Network and monitor developments in quality measure alignment; implement changes in the quality measure alignment policies (e.g., core measure set) and initiatives (e.g., common scorecard) as appropriate; Serve as lead facilitator and subject matter expert for the Quality Council; Prepare agendas and meeting materials in consultation with Quality Council executive team; Ensure adherence to all freedom of information act requirements related to meeting administration; Oversee the development of the SIM care experience survey in conjunction with external contractors; Procure care experience survey administration contractor and oversee the conduct of annual care experience surveys, performance ranking and performance reporting to health plan and state agency partners; Develop and implement communications and public relations strategies and methods as it pertains to SIM quality measure alignment activities and public performance reporting; Maintain and update the operational plan and quarterly reporting as it pertains to quality measurement; Participate in the oversight of the evaluation contract, performance reporting and continuous improvement processes. Performs related duties.

**Knowledge, Skills and Abilities:** Considerable knowledge of [local, state and] federal laws and regulations pertaining to the healthcare industry, healthcare delivery, healthcare policy and reform, and insurance; knowledge of healthcare delivery and payment reform and practice transformation, knowledge of clinical and community integration; knowledge of legislative policy process; knowledge of planning, program and, project management principles; knowledge of process improvement or re-engineering to include measurement, analysis, improvement and control; considerable oral and written communication skills; ability to lead working groups to achieve goals; ability to plan and implement on time and within budget; ability to utilize computer software; some supervisory ability. from the Class Specification)

**General Experience:** Seven (7) years of professional experience in a healthcare program, health services agency or other health care organization to include program and or project administration.

**Special Experience:** One (1) year of the General Experience must have been performing formal program planning, development, process improvement and evaluation.

**Substitution Allowed:** 1. College training in healthcare management, health policy and management, or other closely related field may be substituted for the General Experience on the basis of fifteen (15) semester hours equals six (6) months of experience to a maximum of four (4) years for a Bachelor's degree. 2. A Master's degree in healthcare management, health policy and management or other closely related field may be substituted for one (1) additional year of the General Experience.

**Note:** The filling of this position will be in accordance with reemployment, SEBAC, transfer, promotion and merit employment rules, if applicable.

**\*Application Instructions:** Interested and qualified candidates who meet the above requirements should submit a cover letter, a resume, and a fully completed Application for Employment (Form CT-HR-12) which is available at: [Department of Administrative Services website](#) State Employees to submit copies of their last two (2) service ratings. **Incomplete, blank or late applications will NOT be considered. We are unable to confirm receipt of applications. Please send completed application package by closing date noted above to:**

Connecticut Insurance Department  
Human Resources Division  
P.O. Box 816  
Hartford, CT 06142-0816  
Attn: Carmen Rivera, HR Assistant

Your application package may also be dropped off between the hours of 8:30 a.m. and 4:30 p.m. on business days at the Connecticut Insurance Department located at 153 Market Street, 7<sup>th</sup> Floor, Hartford, CT.

**AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER**

The State of Connecticut is an equal opportunity/affirmative action employer and strongly encourages the applications of women, minorities, and persons with disabilities.