

**Duty Statement**  
**Department of Managed Health Care**

<b>OFFICE:</b> Help Center	<b>EFFECTIVE DATE:</b>
<b>CLASSIFICATION:</b> Health Program Specialist I	<b>DATE APPROVED:</b> June 4, 2026
<b>POSITION:</b> 409-173-8338-021	<b>TELEWORK DESIGNATION:</b> Remote-Centered
<b>WORKING TITLE:</b> Data Standards Specialist	

**DEPARTMENT OBJECTIVE:**

The mission of the Department of Managed Health Care (DMHC) is to ensure health plan members have access to equitable, high-quality, timely, and affordable health care within a stable health care delivery system. The DMHC accomplishes its mission by ensuring the health care system works for members. The Department protects the health care rights of 30.2 million Californians by regulating health care service plans, assisting members through a member Help Center, educating members on their rights and responsibilities and preserving the financial stability of the managed health care system.

**PROGRAM OBJECTIVE:**

The DMHC Help Center educates members about their health care rights and resolves complaints against health plans to ensure a stable and accessible health care delivery system.

**GENERAL DESCRIPTION:**

Under the direction of the Research Data Supervisor II (RDSup II) over the Help Center’s Data Analytics Section (DAS), the Health Program Specialist I (HPS I) will serve as a Data Standards Specialist. The HPS I will act as a technical program consultant for Help Center data and coordinate with multiple program areas to establish data standards and drive data quality. The HPS I will establish and maintain data standards, audit data, and identify and address upcoming trends, work with Help Center program areas drive continuous improvements to Help Center’s data entry processes, and serve as the administrator for the Help Center’s Data Quality Committee.

**TYPICAL DUTIES:**

Employee must be able to perform the following duties with or without reasonable accommodation:

**PERCENTAGE**      **JOB DESCRIPTION**

Essential (E)/Marginal (M)

**DUTY STATEMENT**

DMHC 62-137 New: 12/04 Rev: 10/2025

- 35% (E)** Develop, evaluate, and research agency, state, and federal policy on health data standards for Help Center complaint data to ensure consistency, improve data quality, and promote interoperability with other health agencies. Coordinate with Help Center health program areas to implement and maintain consistent data entry processes. Using Word and PowerPoint, create, maintain, present, and disseminate reference materials for data value definitions and data entry processes, including complaint, demographic, and health data, such as treatment data (using Current Procedural Terminology codes and the Healthcare Common Procedure Coding System as references) and diagnosis data (using the International Classification of Diseases as a reference). Ensure reference materials are reader accessible in accordance with Government Code 11135.
- 35% (E)** Perform data validation and audit Help Center data to ensure accurate data is entered into the CRM system, including complaint, demographic, and health data. Using the experience from the data auditing process, document commonly occurring data entry errors and suggest improvements to the RDSup II on the data entry process or the CRM system's user interface to improve data quality. Clean up data errors resulting from the Help Center data auditing process or as requested to ensure data quality. Using SQL, identify common data errors and make suggestions to the RDSup II on updates to data validation rules to identify trends in data entry errors. Propose updates to Help Center data value definitions or propose new data values to ensure data quality.
- 15% (E)** Working with Help Center program areas, continuously identify and drive opportunities to improve Help Center data entry processes. Using Word and SharePoint, create and maintain policies and procedures and best practices for data entry for program areas to improve data quality, including complaint, demographic, and health data. Using PowerPoint, hold regular presentations on data entry for program areas based on the data audits, best practices, and new data values.
- 10% (E)** Serve as the administrator of the Help Center's Data Quality Committee to update data standards, values, and definitions for complaint, demographic, and health data related to the Help Center complaint and IMR processes. Regularly analyze proposed and newly implemented Agency, state, and federal policy on health data standards and their applicability and impact to the Help Center and make recommendations on their adoption. Work with Help Center program areas to apply adopted changes in health data standards and policies. Represent the Department in agency work groups related to data standards and data quality.

**DUTY STATEMENT**

DMHC 62-137 New: 12/04 Rev: 10/2025

**5% (M)** Assist the Help Center's Data Analytics Section in identifying and retrieving information relevant to data requests and California Public Records Act requests. Test system issues and enhancements with the CRM system.

**SUPERVISION EXERCISED OVER OTHERS:**

Does not supervise others but may act in a lead capacity.

**KNOWLEDGE, ABILITIES AND ANALYTICAL/SUPERVISORY REQUIREMENTS:**

The employee should be familiar with DMHC mission, goals, organizational structure and major work programs. The employee must also have a demonstrated positive attitude and a commitment to conduct business in a professional manner in dealing with the public and department clients and provide quality customer service to all customers, and be able to deal tactfully, professionally and confidentially with all internal and external customers and contacts. In addition, the employee must:

Have the ability to reason logically and use analytical techniques to solve difficult problems; research, understand, interpret and articulate applicable laws, rules and regulations; analyze and apply legal principles and precedents to particular sets of facts; provide clear, concise, and effective written documentation and oral presentation.

Knowledge of: Public health, mental health and health care services programs and trends; problems and procedures involved in establishing community relationships and assessing community health program needs and resources; preparation and planning for coordinated programs with local and Federal agencies, private agencies and health care providers; principles and methods of public administration including organization, personnel and fiscal management; methods of preparing reports; research and survey methods; methods and principles of medical care administration, disease and disability prevention, health promotion and medical rehabilitation; procedures, planning, implementation and monitoring of programs; design and plan for coordination of programs with Federal and local agencies; legislative processes.

Ability to: Assist in development of public health and health care projects; apply health regulations, policies and procedures; participate in monitoring and evaluating health programs and projects; gather, analyze and organize data related to health programs; analyze administrative problems and recommend effective action; speak and write effectively; act as program liaison with staff in other programs at the Federal, State, and local level; assist in planning, conducting and evaluating of field projects; recommend and take actions on a variety of health programs, project activities, staffing and budgetary processes; analyze proposed legislation, regulations and health program standards; provide consultation and technical assistance to local agencies; serve on task forces and committees as a program representative.

**CONSEQUENCE OF ERROR/RESPONSIBILITY FOR DECISIONS:**

The employee may have access to very sensitive and confidential information. Careless, accidental or intentional disclosure of information to unauthorized people can have far-reaching effects, which may result in civil or criminal action against those involved.

**PHYSICAL, MENTAL AND EMOTIONAL REQUIREMENTS:**

Employees may be required to sit for long periods of time using a keyboard and video display terminal or traveling in a vehicle to other locations; must be able to organize and prioritize their work under deadline situations and adapt behavior and work methods in response to new information, changing conditions or unexpected obstacles; will be involved with sustained mental activity needed for analysis, reasoning and problem solving; must be able to develop and maintain cooperative working relationships, recognize emotionally charged issues, problems or difficult situations and respond appropriately, tactfully and professionally; and must be able to work independently. The employee must be able to create/proactively support a work environment that encourages creative thinking and innovation; understand the importance of good customer services and be willing to develop productive partnerships with managers, supervisors, other employees, and, as required, control agencies and other departments.

**WORK ENVIRONMENT:**

The DMHC utilizes a hybrid telework model to provide all employees with an avenue to telework while ensuring business and operational needs are met.

Remote-Centered employees are expected to maintain a safe and distraction free work environment at the approved alternate work location. Remote-Centered employees agree to adhere to the state telework policy, the DMHC's telework policy, and conditions cited in the Telework Agreement (STD 200).

Office-Centered employees are expected to maintain a dedicated workstation at a DMHC official worksite. Office-Centered employees are expected to work in a climate-controlled office or cubicle under artificial lighting.

**POSITION REQUIREMENTS:**

This position requires the incumbent maintain consistent and regular attendance; communicate effectively (orally and in writing if both appropriate) in dealing with the public and/or other employees; develop and maintain knowledge and skill related to specific tasks, methodologies, materials, tools and equipment; complete assignments in a timely and efficient manner; and, adhere to departmental policies and procedures regarding attendance, leave, and conduct.

Note: Any business travel reimbursements will be made in accordance with the approved applicable Memorandum of Understanding (MOU).

**ADDITIONAL REQUIREMENTS:**

This position is required under the DMHC's Conflict of Interest Code to complete and file a Form 700 within 30 days of appointment and annually thereafter.

**SIGNATURES:**

**The statements contained in this duty statement reflect details as necessary to describe the principal functions of this job. It should not be considered an all-inclusive listing of work requirements. Individuals may perform other duties as assigned, including work in other functional areas to cover absence of relief, to equalize peak work periods or otherwise to balance the workload.**

**Employee:** I have read and understand the duties listed above and can perform them with/without Reasonable Accommodation (RA). *(If you believe you may require Reasonable Accommodation, please discuss this with the hiring supervisor. If you are unsure whether you require Reasonable Accommodation, inform the hiring supervisor, who will discuss your questions and/or concerns with the RA Coordinator.)*

**Supervisor:** I have discussed the duties with and provided a copy of this duty statement to the employee named above.

EMPLOYEE NAME (PRINT)		SUPERVISOR NAME (PRINT)	
Employee's Signature	Date	Supervisor's Signature	Date