

Duty Statement

Department of Managed Health Care

OFFICE: Office of Plan Monitoring	EFFECTIVE DATE:
CLASSIFICATION: Attorney III (Limited Term)	DATE APPROVED: October 12, 2026
POSITION: 409-572-5795-921	TELEWORK DESIGNATION: <i>Remote-Centered</i>
WORKING TITLE: Senior Networks Attorney	

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 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 Office of Plan Monitoring (OPM) is responsible for evaluating and ensuring health care service plan regulatory compliance, quality improvement, and network adequacy as related to provision of managed health care services. The Division's public health and legal professionals plan and conduct routine and non-routine evaluations of licensed health plans and review service delivery filings for legal adequacy in order to ensure enrollees receive appropriate, sufficient, and timely care.

GENERAL DESCRIPTION:

Under the general supervision of the Attorney, Assistant Chief Counsel, Division of Provider Networks, the incumbent performs the more sensitive and complex legal services for the DMHC relating to health care service plans regarding network adequacy. Duties include: providing direction and leadership pertaining to filings for License Applications, Material Modifications and Amendments which entails reviewing complex legal matters and conducting legal research in connection with the administration and regulation of persons licensed pursuant to the Knox-Keene Health Care Service Plan Act of 1975 (the "Act") and the implementation of Federal Health Care Reform. Provide expert legal advice to both OPM division and DMHC management on rapidly-evolving issues in health care and perform work relative to commercial and specialized plans and other special projects as required.

TYPICAL DUTIES:

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

PERCENTAGE JOB DESCRIPTION

Essential (E)/Marginal (M)

- | | |
|----------------|---|
| 50% (E) | Engage in complex legal analysis in the development and implementation of network adequacy regulations and methodologies. Engage in complex legal analysis to determine when existing legal requirements must be amended and assist in the development of new legal requirements and methodologies. Engage with industry leaders regarding network adequacy legal requirements. Communicate with expert clinicians to understand facts surrounding areas of new legal development. Collaborate with expert statistical consultants to develop appropriate measurements. Develop and implement regulatory standards for timely access and annual network review. Serve as a legal adviser to, and representative of, the DMHC on complex and significant legal and policy matters concerning network adequacy issues affecting the DMHC. |
| 15% (E) | Ensure compliance with, and implementation of, requirements of the Act, regulations, and federal law pertaining to complex network issues and timely access in health plan operations filed with the Department. Conduct complex and comprehensive legal analysis of Block Transfer filings, enrollee transfer notices, and enrollee transfer notice waiver requests filed by health plans licensed pursuant to the Act. Conduct in-depth reviews of new license applications filed by entities pursuant to the Act and review rules concerning network adequacy compliance. Conduct comprehensive reviews of amendments and notices of material modifications filed by health plans licensed pursuant to the Act for compliance with or implementation of requirements of the Act. |
| 15% (E) | Perform in-depth legal analysis of federal/state laws and regulations regarding the Department's administration of the Act, Federal and California law pertaining to complex network adequacy issues and prepare findings. Implement state and federal law pertaining to complex network issues and timely access compliance. Compose communication to division managers and colleagues, external stakeholders or persons seeking licensure pursuant to the Act and Rules. |
| 10% (E) | Act as a lead to Division of Provider Networks Legal Attorneys in resolving the most complex and time-sensitive Annual Network Review and Timely Access issues. Mentor and guide the work of Attorneys. |
| 5% (E) | Advise health analysts and managers concerning possible violations by health plans of the Knox-Keene Act, and prepare factual and legal analyses in support of referrals of health plans to the Office of Enforcement (OE) for administrative action. Prepare factual and legal analyses in support of requests for legal opinions by the Office of Legal Services (OLS) when requested by the Director, Chief Deputy Director, Deputy Director or Attorney, Assistant Chief Counsel. Assist in the preparation and implementation of Legislative Analysis. |

5% (M) Attend meetings, training courses, seminars, travel, and perform other job-related duties as needed.

SUPERVISION EXERCISED OVER OTHERS:

This position does not supervise others; may act in a lead capacity on complex matters or special projects.

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:

Knowledge of: Legal research methods and performing research; legal principles and their application; scope and character of California statutory law and of the provisions of the California Constitution; federal and state statutes and rules; rules of professional conduct; principles of administrative trial and hearing procedure and rules of evidence; court procedures; legal terms and forms in common use; statutory and case law literature and authorities; professional and ethical rules as they relate to the practice of law; appellate proceedings; rules of evidence and conduct of proceedings in trial and appellate courts of California and the United States and before administrative bodies; and provisions of laws and Government Code sections administered or enforced.

Ability to: Research; analyze, appraise, and apply legal principles, facts, and precedents to legal problems; analyze situations accurately and adopt an effective course of action; prepare and present statements of fact, law, and argument clearly and logically in written and oral form; prepare correspondence and memoranda involving the explanation of legal matters; draft opinions, pleadings, rulings, regulations, and legislation; negotiate effectively and conduct crucial litigation; work cooperatively with a variety of individuals, organizations and maintain the confidence and respect of others; independently present difficult and complex cases before Administrative Law Judges; prepare, present, and handle legal cases; direct the work of clerical and professional assistants; edit written documents written by oneself, as well as those produced by others, for accuracy and effectiveness; analyze situations accurately and adopt an effective course of action; reason logically; exercise good judgment; effectively plan and engage in discovery, including depositions and interrogatories, and to compel production or attendance of/at same; independently prepare and present difficult and complex cases before boards, commissions, trial courts, and appellate courts; independently present difficult and complex cases before administrative bodies.

DUTY STATEMENT

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

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 persons 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 done 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

Duty Statement Department of Managed Health Care

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GENERAL DESCRIPTION:

Under the direction of the Attorney, Assistant Chief Counsel, Division of Provider Networks, the Attorney in the Office of Plan Monitoring performs sensitive and complex legal work of the Department of Managed Health Care relating to adequacy of provider networks maintained by health care service plans. Duties include reviewing legal matters and conducting legal research and analysis in connection with the administration and regulation of persons licensed pursuant to the Knox-Keene Health Care Service Plan Act of 1975 (the "Act") and the implementation of Federal Health Care Reform. Also performs work relative to commercial, government, and specialized plans and other special projects as required.

TYPICAL DUTIES:

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

PERCENTAGE **JOB DESCRIPTION**

Essential (E)/Marginal (M)

- | | |
|----------------|--|
| 50% (E) | Assists senior counsel in the development of regulation related to network adequacy standards and methodology. Reviews stakeholder feedback on regulatory proposals. Communicate with expert clinicians to understand facts surrounding areas of new legal development. Collaborate with expert statistical consultants to develop appropriate measurements. Assist in the drafting regulatory standards for timely access and annual network review. Assist in the preparation of documents for regulatory review, prepare communications to internal and external stakeholders related to regulation. |
| 30% (E) | Conducts review of amendments, notices of material modifications, or reports filed by licensed health plans for compliance with or implementation of the requirements of the Act, implementing regulations, and Federal Health Care Reform pertaining to network issues and timely access compliance. The filings entail review of all full service and mental health plan networks (mental health providers, primary care providers, specialty care physicians, hospitals and ancillary providers) for adequacy. Conducts review and issues decisions on health plan contract terminations filed as notices of block transfers pursuant to the Act. Determines whether the health plan's proposed termination and notice to enrollees meets the requirements of the Act and implementing regulations. |
| 10% (E) | Identifies provider network statutes, regulations, and contractual requirements via interpretation of the Health and Safety Code, Welfare and Institutions Code, the California Code of Regulations, and Department of Health Care Services (DHCS) health plan contracts. Performs legal analysis of federal and state laws and regulations regarding the Department's administration of the Act along with Federal and California Health Care Reform regarding network adequacy issues, prepares findings of that research, and communicates with division managers and colleagues, external stakeholders or persons seeking licensure pursuant to the Act and Rules. |
| 5% (E) | Advise senior counsel, health analysts, and managers concerning possible violations by health plans of the Knox-Keene Act, and prepare factual and legal analyses in support of referrals of health plans to the Office of Enforcement (OE) for administrative action. Prepare factual and legal analyses in support of requests for legal opinions by the Office of Legal Services (OLS) when requested by the Attorney, Assistant Chief Counsel. Assist in the preparation and implementation of Legislative Analysis. |
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Knowledge of: Legal research methods and performing research; legal principles and their application; scope and character of California statutory law and of the provisions of the California Constitution; federal and state statutes and rules; rules of professional conduct; principles of administrative trial and hearing procedure and rules of evidence; court procedures; legal terms and forms in common use; statutory and case law literature and authorities; professional and ethical rules as they relate to the practice of law; appellate proceedings; rules of evidence and conduct of proceedings in trial and appellate courts of California and the United States and before administrative bodies; and provisions of laws and Government Code sections administered or enforced.

Ability to: Research; analyze, appraise, and apply legal principles, facts, and precedents to legal problems; analyze situations accurately and adopt an effective course of action; prepare and present statements of fact, law, and argument clearly and logically in written and oral form; prepare correspondence and memoranda involving the explanation of legal matters; draft opinions, pleadings, rulings, regulations, and legislation; negotiate effectively and conduct crucial litigation; work cooperatively with a variety of individuals, organizations and maintain the confidence and respect of others; independently present difficult and complex cases before Administrative Law Judges; prepare, present, and handle legal cases; direct the work of clerical and professional assistants; edit written documents written by oneself, as well as those produced by others, for accuracy and effectiveness; analyze situations accurately and adopt an effective course of action; reason logically; exercise good judgment; effectively plan and engage in discovery, including depositions and interrogatories, and to compel production or attendance of/at same; independently prepare and present difficult and complex cases before boards, commissions, trial courts, and appellate courts; independently present difficult and complex cases before administrative bodies.

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