

## **Exploring the Pathways to Medicaid Leadership**

#### **TAKEAWAYS**

- Medicaid leaders are responsible for operating a health coverage program that serves over 80 million individuals and administering more than \$600 billion in state and federal funds. There are few opportunities at the state and territory-level, however, for ensuring a robust pipeline of strong and diverse leadership to oversee this vital health coverage program.
- To understand the pipeline to Medicaid leadership positions and uncover opportunities to strengthen the leadership pipeline, the Center for Health Care Strategies (CHCS), with support from the Robert Wood Johnson Foundation, conducted an analysis of publicly available literature, interviews with Medicaid leaders, and a survey of Medicaid leaders.
- This analysis aimed to answer: (1) What are the current pathways to Medicaid leadership positions?; (2) How can Medicaid agencies support more diversity in the pipeline of future Medicaid leaders?; and (3) What are the skills and competencies that Medicaid leaders need to succeed in their roles?

#### **LEARN MORE**

To read the full report, visit: <a href="https://www.chcs.org/medicaid-pathways">www.chcs.org/medicaid-pathways</a>.

hrough a national analysis, the Center for Health Care
Strategies identified common pathways to Medicaid leadership
positions, challenges and opportunities for developing a
stronger pool of future Medicaid leaders, and the skills needed to
succeed in these roles. Following are highlighted findings:

### **Medicaid Leadership Recruitment**

- Most current Medicaid leaders rose to their position from
  within the Medicaid agency. This is reflected in the most common
  sources of recruitment for Medicaid leadership positions, which
  include internally from within the Medicaid agency or externally
  from another health and human services agency (county, state, or
  federal).
- Medicaid-specific skills and professional experiences are highly valued in recruitment. Examples include Medicaid financing, contract oversight, and personnel management.
- Personal/lived experience with Medicaid or another public assistance program, like SNAP or TANF, was not prioritized as a top experience but can be an asset for increasing understanding and empathy for the enrollee perspective.
   Further, commitment to Medicaid's mission and the ability to connect policy decisions to the enrollee experience are important qualities that contribute to the success of a Medicaid leader and carry weight during the recruitment process.
- Most Medicaid agencies struggle with a limited pool of qualified applicants. The most significant barrier identified is public sector salaries, which are lower than similar positions in the private sector.
- Encouraging strong internal candidates to apply for
  positions is a top way to increase the pool of qualified
  applicants. Updating job descriptions to reflect a position more
  accurately and/or remove requirements (e.g., education), in
  addition to using "word-of-mouth" recruitment, were also
  identified among top opportunities.

### **Diversity in Medicaid Leadership**

- There are examples of racial and ethnic diversity among Medicaid leaders and especially among frontline staff (i.e., individuals who work directly with Medicaid enrollees). This may, however, vary by geographic region. For example, Medicaid agencies that are physically located in a geographic region with more racial and ethnic diversity may be more likely to have diversity, particularly among leadership.
- There are few individuals with disabilities in Medicaid leadership, and, more generally, lived or personal
  experience is uncommon for leaders in Medicaid agencies. Some individuals may have lived or personal
  experience with Medicaid but would not consider this to be unique or an identifying attribute to note to others.
   Additionally, there is no way to know if someone has lived Medicaid experience unless they share that information
  broadly, and the likelihood of sharing this information depends on the individual and the agency's culture.
- Limited leadership development for diverse internal candidates and limitations of the human resource system and structure are the primary barriers to diversifying the experiences and perspectives of people within the Medicaid leadership pipeline. Of note, survey respondents and interviewees also reported that fostering diverse "rising stars" internally through leadership development, job/skills training, and mentorship programs are important opportunities for supporting more diversity in the leadership pipeline.

### **Leadership Skills and Competencies**

Medicaid leadership requires mastery of a range of skills to effectively lead a complex organization. There is
no one specific skill or skillset, but rather a range of skills that contribute to the success of Medicaid leaders. Key
skills include: communicating; managing change; and developing, directing, and delegating to others.

### **Opportunities to Take Action**

Medicaid agencies can improve their long-term leadership pipeline using high-level strategies in three key areas, with specific opportunities for improvement:

#### 1. Reinforce the internal pipeline

- Development planning
- Leadership development programs
- Mentorship
- Succession planning

### 2. Build staff leadership skills

- Develop agency-specific leadership skills list
- Provide job shadowing or rotations
- Implement skills building initiatives

#### 3. Bolster recruitment efforts

- Clarify job descriptions
- Diversify and expand dissemination strategies

# ABOUT THE CENTER FOR HEALTH CARE STRATEGIES

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