

Layla Cole

Management Analyst IV, Medicaid Managed Care Operations

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STRENGTHS

- 🔗 **Cross Functional Coordination**
Aligned finance, operations, legal, technology, and vendor teams around ownership, milestones, and decisions during complex changes.
- 🔍 **Operational Analysis**
When recurring workflow issues surfaced, researched records and policy sources until root causes became clear and usable recommendations followed.
- ♥️ **Change Readiness**
Built readiness plans around stakeholder effects, communications, training needs, and dependencies so new processes entered service with context.
- ✅ **Compliance Oversight**
Tracked MCO and DMO evidence, raised risks early, and helped contract teams shape corrective actions that leadership could support.
- 💬 **Executive Communication**
Turned dense policy, financial, and operational findings into concise reports and presentations that gained confidence from varied audiences.

SKILLS

Medicaid Managed Care	CHIP
MCO Oversight	DMO Oversight
Project Management	
Contract Monitoring	
Legislative Analysis	
Impact Assessment	
Change Management	
Process Improvement	

SUMMARY

Senior management analyst with nine years supporting Medicaid, CHIP, and **public sector health programs**. Leads **cross functional initiatives** that convert legislative, regulatory, contract, financial, and system changes into practical **implementation plans**, milestones, ownership, and status reporting. Coordinates **MCO and DMO oversight**, contract monitoring, corrective action planning, audit support, policy analysis, and sensitive operational deliverables. Uses policy research, operational data, workflow evidence, and stakeholder feedback to identify root causes and recommend workable improvements. Partners with finance, operations, legal, technology, vendors, and leadership teams to assess impact, plan communications, identify training needs, and strengthen readiness. Prepares concise reports and presentations for varied audiences, helping teams prioritize resources, resolve issues, and deliver compliant program changes.

EXPERIENCE

Senior Management Analyst, Medicaid Managed Care Operations

Lone Star Health Policy Collaborative 📅 July 2023 - Present 📍 San Marcos, TX

Leads complex **Medicaid managed care** initiatives across provider finance, operations, legal, technology, and vendor teams. Coordinates implementation planning, compliance monitoring, legislative deliverables, change readiness, and executive reporting while protecting sensitive program information.

- Directed Medicaid **contract changes** across finance, operations, legal, technology, and vendor teams, clarifying ownership.
- Converted enacted legislation into impact assessments, workplans, briefings, and documentation for program leaders.
- Monitored MCO and DMO milestones, escalated compliance risks, and recommended **corrective actions** with contract staff.
- Led root cause reviews using contract terms, policy records, workflow evidence, and program data.
- Coordinated review cycles for **legislative reports**, memoranda, and critical deliverables through final approval.
- Facilitated change planning by identifying stakeholder impacts, **communication needs**, **training requirements**, and readiness dependencies.

Management Analyst III, Medicaid and CHIP Operations

Hill Country Medicaid Solutions 📅 May 2020 - June 2023 📍 Austin, TX

Managed cross functional Medicaid and CHIP projects involving operational changes, vendor coordination, **performance measures**, contract reviews, and **executive reporting**. Improved issue intake and decision practices so teams could define scope, assess risk, and sustain implementation follow through.

- Managed **Medicaid** and **CHIP** projects with schedules, milestone reports, risk logs, and leadership updates.
- Analyzed system, financial, policy, and **contract changes**, documenting downstream workflow effects and decisions.
- Built performance indicators with operations and vendors, clarifying definitions and reporting expectations.
- Reviewed vendor deliverables against contract requirements, documented gaps, and coordinated follow up actions.
- Prepared reports and presentations that translated regulatory, operational, and financial findings for varied audiences.
- Redesigned issue intake practices, standardizing scope definition, root cause research, approval routing, and follow through.

Program Analyst II, Public Health Administration

Root Cause Analysis

Performance Measures

Audit Support Executive Reporting

Stakeholder Management

LANGUAGES

English Native

Spanish Intermediate

MY CAREER



● Senior Management Analyst, Medicaid Managed Care Operations at Lone Star Health Policy Collaborative (3.2 Years)

● Management Analyst III, Medicaid and CHIP Operations at Hill Country Medicaid Solutions (3.1 Years)

● Program Analyst II, Public Health Administration at Central Texas Community Health Administration (2.1 Years)

● Program Analyst, Public Program Operations at Rio Vista Public Program Services (4 Months)

Central Texas Community Health Administration

📅 March 2018 - April 2020 📍 New Braunfels, TX

Supported Medicaid and CHIP administration through policy evaluation, workgroup coordination, audit preparation, **legislative analysis**, operational research, and **status reporting**. Produced decision ready findings that helped managers address dependencies, risks, and implementation needs.

- Evaluated **Medicaid** and CHIP procedures against state and federal requirements, recommending guidance updates.
- Coordinated workgroups addressing provider and managed care issues, organizing decisions, owners, and follow up.
- Researched rules, **contracts**, records, and **operational data** to isolate causes of service problems.
- Supported **third party audits** by assembling evidence, review questions, requests, and approved scope records.
- Assessed legislative changes and summarized effects on processes, vendor duties, training, and communications.
- Developed status reports and briefings that highlighted dependencies, implementation risks, and pending decisions.

Program Analyst, Public Program Operations

Rio Vista Public Program Services 📅 October 2017 - February 2018 📍 Georgetown, TX

Supported public health program operations through **policy research**, contractor monitoring, workflow analysis, performance measure development, and implementation documentation. Converted complex discussions and proposed administrative changes into organized evidence for senior analysts and program managers.

- Maintained project documentation and organized implementation activities across public health functional teams.
- Analyzed workflow records and stakeholder feedback, preparing findings on recurring process breakdowns.
- Tracked contractor milestones and evidence, flagging incomplete submissions for monitoring reviews.
- Drafted meeting summaries, issue logs, and reports that clarified decisions, owners, and next actions.
- Helped define **performance measures** by documenting data sources, calculation logic, and reporting expectations.
- Prepared research packets on proposed **rules** and administrative changes for impact discussions and planning.

PROJECTS

Medicaid Managed Care Legislative Implementation 📅 2024

Converted legislative and regulatory requirements into impact assessments, implementation workplans, stakeholder communications, training needs, and milestone reporting for coordinated program delivery.

MCO and DMO Compliance Review 📅 2023

Structured milestone monitoring, evidence review, risk escalation, and corrective action recommendations for managed care initiatives involving contracted organizations.

Cross Functional Change Readiness Framework 📅 2022

Created a practical review framework for scope definition, stakeholder impact, communications, training requirements, readiness dependencies, and leadership decisions.

LEADERSHIP & AWARDS

- Recognized by program leadership for clear analysis supporting complex Medicaid policy implementation decisions.
- Selected to coordinate high priority legislative reports, memoranda, and cross functional operational deliverables.
- Trusted by peers as a go to resource for root cause research and contract monitoring questions.

EDUCATION

Bachelor's Degree in Public Administration

Texas State University 🎓 GPA: 4.0 📅 2017 📍 San Marcos, TX

Coursework: Public policy, health care administration, financial management, administrative law, program evaluation

CERTIFICATIONS

- Prosci Change Management Practitioner 📅 2024
- Project Management Professional 📅 2022

TECHNICAL SKILLS

- **Medicaid Programs:** Medicaid, CHIP, managed care
- **Managed Care Oversight:** MCO monitoring, DMO monitoring, compliance reviews
- **Policy and Regulation:** legislative analysis, administrative rules, federal requirements
- **Contract Management:** contract monitoring, vendor deliverables, scope of work
- **Project Management:** milestone plans, risk logs, status reporting
- **Change Management:** Prosci, impact assessment, readiness planning
- **Audit Practices:** third party audits, evidence requests, audit scopes
- **Operational Analysis:** root cause analysis, workflow research, data interpretation
- **Performance Management:** performance indicators, measure definitions, reporting logic
- **Communication Tools:** executive briefings, legislative reports, memoranda
- **Public Administration:** health administration, public policy, program operations
- **Stakeholder Coordination:** cross functional workgroups, vendor partnerships, training needs

PROFESSIONAL AFFILIATIONS

- Public administration and health policy professional community participant.
- Medicaid managed care operations and compliance learning network participant.

ADDITIONAL INFORMATION

Work Status : Authorized to work in United States. No sponsorship required.

REFERENCES

AVAILABLE ON REQUEST