



Driving and Delivering Results: A Conversation with Public Sector Leaders

The public health emergency stands as a singularly instructive challenge through which public sector leaders have navigated programming and their enterprise. The protracted crisis paired with standard operating expectations demanded innovation and a commitment to deliver high quality care for Medicaid beneficiaries.

As part of the Public Sector Leadership Consortium's [Leadership Forward](#) series, NAMD spoke with **Cindy Beane**, Commissioner, West Virginia Bureau for Medical Services, and **Sue Birch**, Director, Washington State Health Care Authority, about leadership strategies implemented during the public health emergency.

Edited for clarity.

Q: How have you connected your personal experiences serving people and preserved that as a guiding principle while driving your teams to deliver results?

Birch: As a nurse, I was trained in whole-person and person-centered care. I am also from an immigrant family, and I think that I always understood that health is so far beyond health care. We have a duty to always keep our members in mind. We have to constantly be aware of the economic, social, and environmental impacts that are hitting them. And unless we can blend that into our work and help our teams understand that interplay, we won't really gain on the complex challenges that we face. We need all of our cross-sector partners — whether it's transportation or natural resources or our human service partners — to engage in cross systems thinking to rise to these complex challenges.

Beane: I started my career as a school teacher, and then quickly took on a job with the local community health association. And then 15 years ago I started working at Medicaid, and I think that grounding of working with Medicaid members from early in my career helps me in my leadership role when I make hiring decisions. You really want to pick individuals who have the same values and empathy for the members we serve. I think it helped me tremendously as a leader to make sure that the members of my team see everybody as individuals and as humans who are worthy of the best care no matter their situation.

Q.: How have you balanced the disproportionate impacts of COVID-19 on communities? And how have you seen opportunities to innovate around underlying issues you were working on pre-COVID-19 while responding to the pandemic?

Birch: We made a commitment to utilize Zoom, and then realized that we have communities without broadband, or where members and their families needed phones. So, we dispersed 5,000 phones through partnership with Verizon, FEMA, and our military partners. Then, we stood up a variety of broadband capabilities because the equity issues around access were so profound during all of this.



I'll also say that Washington has 29 tribes, and we ran into some pretty significant needs around communications and tailoring them appropriately. The communications in this arena are really critical and you have to get creative and work with your partners. Our tribal partners were really great, particularly around how we customized a lot of the communications that they needed.

Beane: One of our huge initiatives is our 1115 SUD waiver to address the opioid epidemic in West Virginia. We lessened our restrictions on the counseling requirements for medication assisted therapy because we didn't want people to feel that they had to come into offices. But what we did see as we continued to monitor all of our programs during the pandemic was a spike in overdose deaths because of the isolation of people being at home and not being able to interact with their supports. We partnered with the Office of Drug Control Policy, Bureau for Behavioral Health, and Office of Public Health to do a Naloxone distribution campaign.

The COVID-19 pandemic has been like a fire hose coming at us since March, but at the same time, we have to keep everything else running. You have to really support your teams who are doing their day-to-day work and monitoring to make sure nothing's falling apart while you're concentrating on the urgent needs of the pandemic. You're really asking so much of your team members.

This interview is a portion of a larger conversation found in an accompanying podcast available in the [Apple Podcast store](#), or wherever you download your podcasts.

Topics discussed in this article align with [Framework for Public Sector Leadership](#) domain, Driving and Delivering Results. Core competencies of the domain include: managing work, measuring performance, improving health outcomes and equity, balancing organizational perspective, and leading innovation.

The framework is product of the Public Sector Leadership Consortium whose partners, NAMD, the [Center for Health Care Strategies](#) and the [Milbank Memorial Fund](#), work to strengthen the capacity of public sector leaders, particularly those in state government.