

Kentucky Medicaid Advisory Committee (MAC) and Beneficiary Advisory Council (BAC)

Forum & Survey Responses

February 18, 2025

A business of Marsh McLennan



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Agenda

MAC/BAC Webinars



MAC/BAC Webinars

New federal rules require that all Medicaid agencies create a Beneficiary Advisory Council (BAC) and a Medicaid Advisory Committee (MAC) by **July 2025**. These groups will help make sure that people who currently use or have used Medicaid can share their thoughts and experiences.

Forum Meeting Dates:

**Session 1: Monday, December 16,
2024, at 1:30 – 3:00PM Eastern**

- Number Registered: 412
- Number Attendees: 199

**Session 2: Wednesday, December
18, 2024, at 1:30 – 3:00PM Eastern**

- Number Registered: 313
- Number Attendees: 152

MAC/BAC Survey

2

MAC/BAC Online Survey

Survey Invitation & Outreach

Survey Available 12/16/24 – 12/30/24 (14 Days)

Survey invitations were distributed to **500,420** recipients via email, with **94%** of those invitations successfully delivered. Of those:

117,528

Recipients Opened the
e-mail Invitation

23.4% of
Total Recipients



3,131

Clicks of Survey Link in
the e-mail Invitation

2.6% of
Recipients who
Opened e-mail



668

Total Survey
Responses

21.3% of
Recipients who Clicked
the Survey Link

MAC/BAC Online Survey

Social Media Survey Invitation & Outreach

Facebook Post Analytics

Post 1: 12/19/24



26% Non-Followers
74% Followers

7 Interactions

Post 2: 12/23/24



23% Non-Followers
77% Followers

5 Interactions

LinkedIn Post Analytics

Post 1: 12/19/24



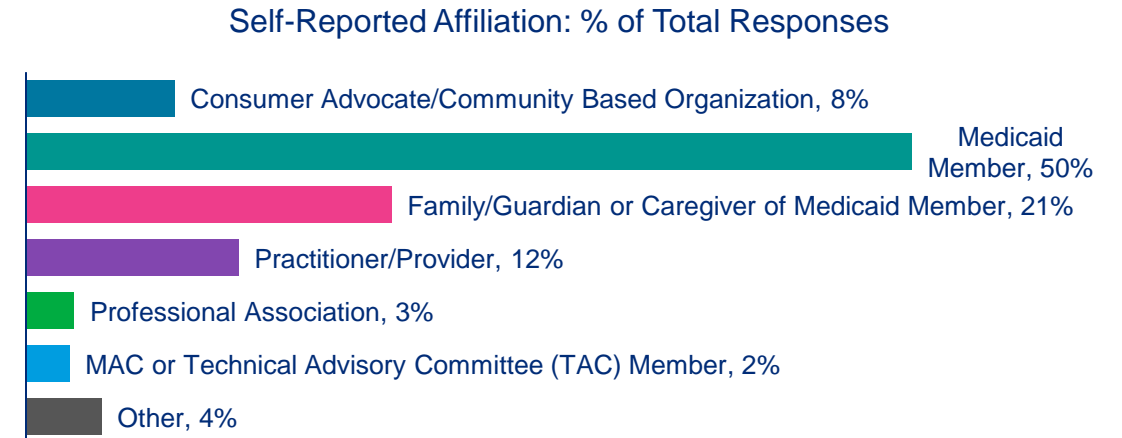
9 Engagements

16 Interactions

Survey Results

Survey Responses: Affiliation

Question 4: Affiliation	Count
Consumer Advocate/Community Based Organization	65
Medicaid Member	388
Family/Guardian or Caregiver of Medicaid Member	160
Practitioner/Provider	93
Professional Association	21
MAC or Technical Advisory Committee (TAC) Member	19
Other	33



Number of Affiliations Selected	Count
1 Affiliation	528
2 Affiliations	120
3 Affiliations	16
4 Affiliations	5
5 Affiliations	1
Total	668

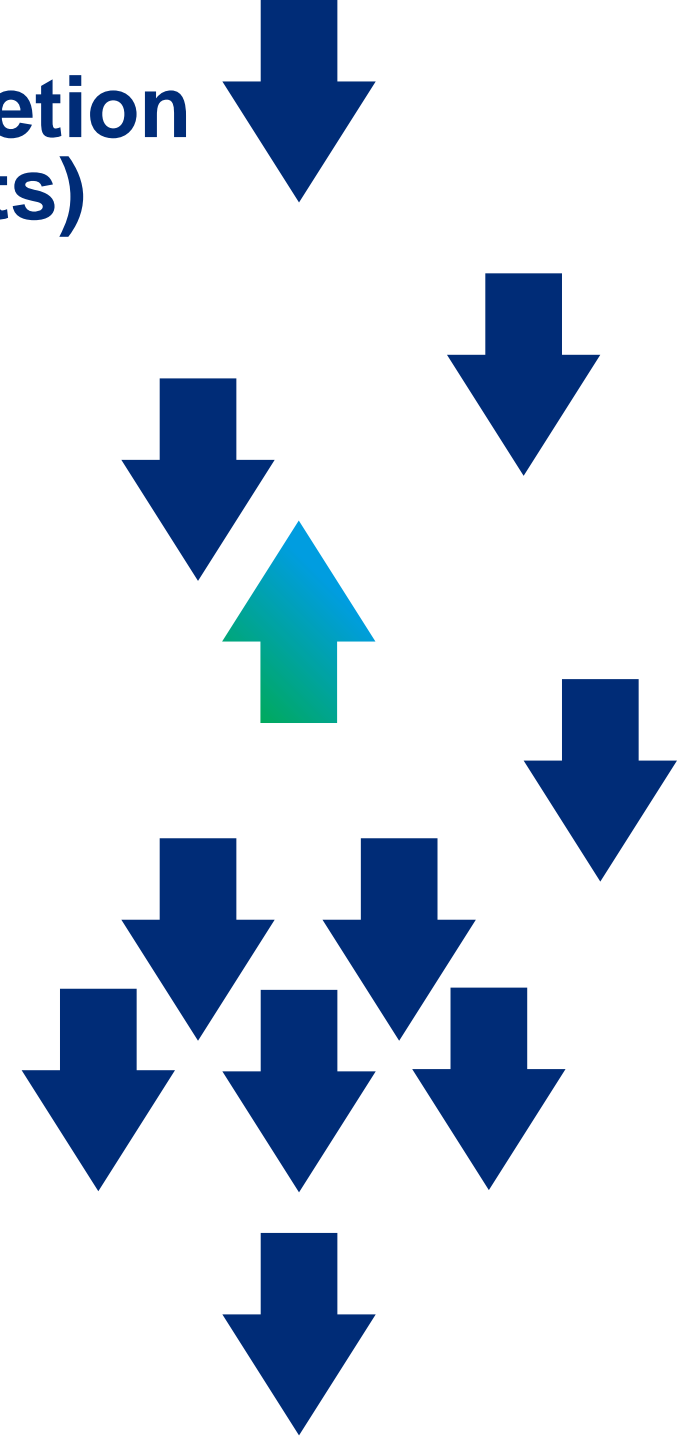
Virtual Forum & Survey Responses

3

Areas Where States DO NOT Have Discretion to Make Decisions (Federal Requirements)

Unless stated otherwise, requirements are for both BAC and MAC

1. **Meeting Format:** Meetings must have different ways to attend (in-person, hybrid, phone).
2. **Meeting Frequency:** Meetings must be at least quarterly, and some must be public. The BAC must meet before the MAC.
3. **Transparency:** Bylaws, meeting schedules, agendas, minutes and membership lists must be posted on the agency website (BAC members may opt not to have their names listed). The MAC must produce an annual report.
4. **Meeting Topics:** Covered services, coordination of care, quality of services, eligibility and enrollment, communications, cultural competency, language access, health equity and other issues impacting health.
5. **Members Selection Process:** Commissioner has final say in selecting members, there is discretion for the nomination or applications process. People cannot serve back-to-back appointments.
6. **Membership and BAC crossover on the MAC:** BAC members must be current or former Medicaid beneficiaries, family members, or caregivers. The MAC must have at least one representative that is from: health care provider, a Medicaid managed care organization, a community-based group and another state agency that work with Medicaid beneficiaries. At least 25% of MAC members must be on the BAC.
7. **Agency Support:** State agencies must provide staff to support the committees.



Survey & Forum Feedback

Survey & Forum Responses:

- **Survey:** asked a series of open-ended questions designed to address the areas where States do have some discretion.
 - Respondents were asked to highlight things are working well currently, areas for improvement on the current structure, and to ask for feedback on how the Department should develop the new advisory groups in compliance with the federal rules.
- **Forums:** targeted questions were asked about the areas where regulations allow for some decision making by States in designing the new committees.
- We received feedback on these key areas:



1. BAC and MAC Membership



2. BAC and MAC Size



3. BAC and MAC Length of Appointment



4. Selection and Appointment Process



5. Additional Subject Matter Expertise



6. Meeting Frequency and Format



7. MAC and BAC Member Supports

Survey & Forum Feedback

Unless stated otherwise, feedback and was for both BAC and MAC.



1. BAC and MAC Membership

MAC:

- Behavioral Health
- Children with Special Needs
- Individuals with Disabilities
- Federally Qualified Health Centers
- Rural Health Clinics
- Community Mental Health Center
- Inclusion of Social Workers/Case Managers
- Current Members/Lived Experience
- Variety of Geographic Representation
- Dental
- Chiropractors
- Dialysis Providers
- Legal Aid
- Providers who have most engagement with Medicaid members

BAC:

- Broad representation
- Suggestions on split between Medicaid members and caregivers (e.g.: 50/50, 60/40).
- Individuals with different experiences with Medicaid (e.g., those on a waiver program, those using specific services, or those eligible for both Medicare and Medicaid) should be included.
- It's important that behavioral health is represented (e.g., those with lived experience accessing services).

Survey & Forum Feedback

Unless stated otherwise, feedback and was for both BAC and MAC.

2. BAC and MAC Size



- **MAC:** Input on size of committees varied greatly; between 15 to 30 members. Many said the current size of the MAC works well.
- **BAC:** Recommendations ranged from 13 to 19.

3. BAC and MAC Length of Appointment



- Varied, from 2 – 6 years.
- Feedback noted it can take time to learn Medicaid, shorter terms could mean people are rotating off just as they are getting up to speed.
- Shorter terms would allow for broader participation.

Survey & Forum Feedback

Unless stated otherwise, feedback and was for both BAC and MAC.

4. Selection and Appointment Process

- **MAC:** Current nomination process by professional or advocacy groups works well, and Commissioner selects from the nominations.
- **BAC:** Application should be available in multiple formats and individuals should have access to assistance to complete application.

5. Additional Subject Matter Expertise

- Subcommittees can help focus on specific topics and ensure many voices are heard.
- Some cautioned that using subcommittees may distort voices heard.
- One individual suggested a refocus of subcommittees to five that are broad in focus: Regulatory, Reimbursement, Advocacy, Education, and Access as these areas impact the entire system.

Survey & Forum Feedback

Unless stated otherwise, feedback and was for both BAC and MAC.



6. Meeting Frequency and Format

Frequency

- Suggestions on how often the MAC and BAC should meet varied. Some suggestions included:
 - Monthly
 - Every Other Month
 - As Needed (Dependent on Urgency/Need to Convene)
 - Quarterly
- However, a majority of respondents felt the current cadence of meeting every other month for the MAC was appropriate.
- ****Please note that keeping the cadence of meeting every other month would require BAC members to meet every other month (or twice within a month) to meet the Federal requirements that state the BAC must meet before the MAC).*

Timing

- A recurring suggestion was that meetings should be held outside of normal working hours to accommodate Medicaid members on the committee who work or require childcare.

Duration

- The current MAC meetings are 3 hours long.
- Respondents mostly felt that the length of the meetings are appropriate and recommend not making changes to the duration of the MAC Meetings.

Participation Options

- Participation via Zoom or phone helps include people across the state, or those with transportation/access issues.

Survey & Forum Feedback

Unless stated otherwise, feedback and was for both BAC and MAC.



7. MAC and BAC Member Supports

MAC & BAC:

- Orientation
- Training
- Supports prior to first meeting
- Sharing agendas and information in advance
- Holding pre- and post-meetings to provide context and answer questions
- Meetings outside of normal working hours
- Dedicated policy staff

BAC:

- Stipends
- Transportation
- Childcare
- Caregivers
- Interpreter Services
- Meeting transcripts
- Webinars
- Virtual Meetings
- Website materials (e.g. FAQs, Surveys, Questionnaires)

Public Engagement & Member Engagement

Many respondents mentioned additional opportunities to provide their feedback and asked for more information related to the MAC and BAC meetings.



Publicly Availability Information

- Allow meetings to be open to public
- Notice of when meetings occur
- Make meeting minutes available
- Keep information on website updated
- Post meeting agendas ahead of time



Member Engagement

- Public forums/meetings
- Mail-in surveys/questionnaires
- Online surveys/questionnaires
- Surveys about services provided; emails or alerts to let us know about new policies that may affect our family member receiving Medicaid

Consumer Rights and Client Need TAC Recommendations



Recommendations for BAC

Membership	Term and Selection & Appointment Process	Meeting Frequency	Member Supports
<ul style="list-style-type: none"> BAC should include a minimum of 25 members with seven nominated by the existing organizations that make up the Consumer Rights and Client Need TAC. The additional 18 members should include a diverse range of representation based on: <ul style="list-style-type: none"> Geography, age, race and ethnicity, sex and gender, LGBTQ+, disability, language, and physical, behavioral, and oral health needs 	<ul style="list-style-type: none"> DMS collaboration with the Consumer Rights and Client Need TAC to create a nomination process for selecting BAC members. The BAC should have staggered terms of 3-6 to allow members to develop and share expertise. BAC members selected to serve on the MAC should have extended terms. 	<ul style="list-style-type: none"> Public meetings at least 4 times a year but exempt from public meeting laws to allow flexibility for planning meetings and technical assistance. The BAC and MAC should adopt a formal policy on accessibility and accommodations, including: <ul style="list-style-type: none"> Language services, personal assistance, communication supports, and other supports as needed. 	<ul style="list-style-type: none"> Reimbursement for expenses and compensation for their time, modeled after Standard Boards and Commissions. DMS should provide dedicated staff support with one or more policy staff to provide technical assistance to members between meetings.



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