

### CABINET FOR HEALTH AND FAMILY SERVICES

#### Restructuring Medicaid Advisory Framework

Consumer Rights Technical Advisory Committee
October 15, 2024



## Medicaid Advisory Committee and Beneficiary Advisory Council (42 CFR 431.12)

- New federal requirements for a Medicaid Advisory Committee (MAC) and Beneficiary Advisory Council (BAC).
- Brings consistency across all state Medicaid programs in how external partners, including individuals with lived experience, provide ideas and suggestions on policy development and effective administration of the program. Focus areas include:
  - Coordination and access to care, quality of services, and additions or modifications to benefits
  - Eligibility, enrollment, and renewal processes
  - Beneficiary and provider communications by the state and managed care organizations (MCOs)
  - Health disparities, health equity, and cultural competency
- In collaboration with external partners, states have some flexibility in composition within federal requirements.
  - Per regulation, the state Medicaid Director responsible for selection of members for the MAC and BAC.
  - State agency also responsible for the development of governance documents and planning and facilitation of meetings.



#### Key Elements of the MAC and BAC

**Composition:** At least 1 representative from: advocacy group, clinical providers, MCOs, other State agency (non-voting). **BAC crossover** — 10% (7/2025), 20% (7/2026), 25% (7/2027–onward). Size to be determined by DMS.

**Term:** Participation is for one term and cannot be consecutive; duration to be determined by DMS.

**Meetings:** At least quarterly, with at least two MAC meetings available to the public.

**Responsibilities:** Submit annual report to CMS describing activities, recommendations, incorporation of BAC input, and DMS responses to recommendations. First report due July 2026.



**Composition:** Current and former Medicaid beneficiaries, family members, and caregivers. May come from existing beneficiary advisory groups. Size to be determined by DMS.

**Term:** Participation is for one term and cannot be consecutive; duration to be determined by DMS.

**Meetings:** At least quarterly; BAC meetings do not need be public, and the BAC must meet prior to the MAC.

**Responsibilities:** Advise DMS independently and through MAC on policy development and administration of the Medicaid program.



#### Overview of MAC and BAC Implementation Process





# QUESTIONS and/or Comments?

