

Idaho Medical Care Advisory Committee (MCAC) BYLAWS

Article I - Name and Location

The name and location of this committee will be the Idaho Medical Care Advisory Committee (MCAC). Its principal office and address will be the Idaho Department of Health and Welfare, Division of Medicaid, 3232 Elder St. P.O. Box 83720 Boise, Idaho, 83720-0036.

Article II - Legal Authority

The authority for establishing the MCAC is derived from Section 1902 of the Social Security Act and the Code of Federal Regulations (42 CFR 431.12).

Article III – Purpose

The Idaho MCAC's purposes are:

(A) To review and make recommendations about the quality and quantity of the services provided to recipients under the Medicaid program and make recommendations for change to the director of the Medicaid Agency.

(B) To provide a two-way channel of communication with the individuals, organizations, and institutions in the State that, with the Medicaid Agency, receive, provide, and/or pay for medical care and services.

(C) Work with the Medicaid Agency to ensure that state services meet the needs of the people served at a reasonable cost to the taxpayer.

(D) Review concepts about new ideas, programs, or services and provide advice regarding continuance of existing services or development and implementation of new services.

(E) To provide impartial, independent analysis of Medicaid proposals and make recommendations and to publicly support associated activities and legislative action designed to meet the needs of the people served at a reasonable cost to the taxpayers. Communication of the MCAC's position shall be handled by the MCAC chairperson or his/her designee at the request of the Medicaid Agency.

(F) To formulate position statements on administration of the program or policy issues.

(G) To review and make recommendations about proposed amendments to the Medicaid plan.

(H) To work with the Medicaid Agency to ensure the Medicaid plan is coordinated with the other programs providing assistance to the same population.

Article IV - Committee Composition

Section 1 Composition. The composition of the MCAC is designed to achieve balance and accommodate diversity of opinion and to promote effective recommendations. The MCAC should be interdisciplinary particularly in the areas of concern to the MCAC to contribute a variety of perspectives to the MCAC's development of recommendations.

Section 2 Number of Members and Representation. The total number of members shall be nineteen (19) and shall consist of representatives of health care providers, recipients of services, advocates, the public, the American Indian tribes located in whole or in part in the State of Idaho, and the legislature. The membership shall be comprised of seven (7) providers, seven (7) consumers, one (1) agency official, one (1) representative of the American Indian tribes, one (1) board certified physician, and two (2) ex officio legislators.

(A) There shall be seven (7) provider members. Representatives from hospitals, nursing facilities, and physician groups must be included in the provider membership. These three (3) appointments shall be considered fixed seats consistent with Article V, Sections (3) – (4). Other providers may be, but are not limited to pharmacists, dentists, home health care administrators, nurses, community care service providers, optometrists, health maintenance organization administrators, intermediate care facilities for the intellectual disabled, case management agencies, and other providers who are familiar with the medical needs of low a low income population. These remaining provider seats may rotate each three (3) years to an organization other than that which previously held the seat.

(B) There shall be seven (7) consumer members. The consumer membership must include a Medicaid recipient, and individual from an advocacy group representing Idahoans with disabilities (selected with coordination efforts by the State Independent Living Council to assure fair representation of persons with disabilities), and a representative from the Idaho Commission on Aging. These three (3) appointments shall be considered fixed seats consistent with Article V, section (3) – (4). The remaining consumer members shall be representatives of minority populations, senior citizens, citizens with a disability, legal aid, local government (a representative of a city or county), community action programs, clergy, and others interested in Medicaid services to low income groups. These remaining consumer seats may rotate each three (3) years to a categorical representative other than that which previously held the seat.

(C) There shall be one (1) administrator from the Department of Health and Welfare, either the administrator of public welfare or of public health, neither of whom is the Medicaid Agency director.

(D) There shall be one (1) representative of the American Indian Tribes located in whole or in part in the State of Idaho which have members participating in the Idaho Medicaid Program either as recipients or providers or both.

(E) There shall be one (1) board-certified physician.

(F) There shall be two legislators, one each from the House of Representatives and the Senate Health and Welfare Committees. These members shall serve as ex-officio members without a vote.

Article V – Appointments and Terms

Section 1 Membership Recruitment. The Department of Health and Welfare may contact providers, consumers, and community organizations for potential appointees. Potential appointees and specific recommendations shall also be solicited from MCAC members.

Section 2 Application. Appointment to the MCAC shall be by the director of the Medicaid Agency. A written application and an interview with the agency director may also be required.

Section 3 Terms.

(A) Individual permanent provider members required by Article IV, Section 2 (A), representing physicians, hospitals and nursing facilities, may serve for two (2) consecutive three (3) year terms. Upon completion of the second term, someone other than the individual completing the second term may be appointed to a new three-year term, thus allowing the representing organization to select their individual provider representative.

(B) Individual rotating provider members required by Article IV, Section (2)(A), other than those listed in Article V, Section 3 (A) above, may serve for a single three-year term. Upon completion of the three (3) year term, the seat may be reconsidered for additional terms or may rotate to a different organizational representative.

(C) Individual permanent consumer members required by Article IV, Section 2 (B), representing a Medicaid recipient, an individual from an advocacy group to represent Idahoans with disabilities, selected with coordination efforts by the State Independent Living Council to assure fair representation of persons with disabilities, and a representative from the Idaho Commission on Aging, may serve for two (2) consecutive three (3) year terms. Upon completion of the second term, someone other than

the individual completing the second term may be appointed to a new three-year term, thus allowing the representing organization to select their individual representative.

(D) Individual rotating consumer members required by Article IV, Section 2 (B), other than those listed in Article V, Section 3 (C) above, may serve for a single three (3) year term. Upon completion of the three (3) year term, the seat may be reconsidered for additional terms or may rotate to a different organizational representative.

Section 4 Appointments. Appointments shall be staggered to maintain membership continuity.

(A) The American Indian representative shall be (i) a member of a tribe located in whole or in part in the State of Idaho which has members participating in the Idaho Medicaid Program either as recipients or providers or both and (ii) a resident of the State of Idaho. The American Indian representative position shall rotate among the eligible tribes as determined by the tribes. Article V, Section 2 does not apply.

(B) The chairs of the Senate and House Health and Welfare Committees or their designees shall be appointed to the MCAC for two- two (2) year terms. Article V, Section 2 does not apply.

Article VI - Qualifications and Responsibilities

Section 1 Qualifications. Members shall be chosen for the following:

- (A) Demonstrated interest in the health care of Idahoans; and
- (B) Commitment and ability to place interests of the Department's total clientele above special interests; and
- (C) Interest, willingness, and time to work in the program area of concern to the MCAC; and
- (D) Impartiality and ability to judge and act objectively; and
- (E) Current or recent experience in the profession or group to be represented; and
- (F) Ability to analyze problems and to express ideas clearly; and
- (G) Ability to explore and incorporate new and varied points of view.

Section 2 Responsibilities. Responsibility shall include:

- (A) Review of the MCAC agenda and information before meetings and prepare comments or questions so as to actively participate in discussions; and
- (B) Confer with providers, advocates, interest groups, and others as necessary to explore Medicaid-related issues and bring pertinent information/issues to the attention of the MCAC; and
- (C) Attendance at each meeting of the MCAC.

Section 3 Attendance at Meetings. To maintain the continuity, integrity and consistency of work performed by the MCAC, every member is expected to attend every meeting. It is recognized that circumstances may prevent a member from attending. Therefore, substitutes will be allowed for up to two (2) meetings per year.

(A) Each member may designate a substitute who, in the absence of the member shall have the same rights, privileges and obligations as the member. Designated substitutes are encouraged to attend all meetings.

(B) If a member is unable to attend any meeting of the MCAC, it is the member's responsibility for notifying their alternate and provide background information that will allow the alternate to perform the responsibilities of the appointed member, including voting. The member is also responsible for notifying

the vice chairperson or MCAC manager at least one (1) day prior to the scheduled meeting and provide the substitute's name.

Section 4 Replacement of Member. In the event of death or resignation, or failure of a member to attend or designate a substitute to attend two (2) consecutive meetings, the vice-chair person shall notify the Medicaid Agency director who shall have the discretion to appoint a replacement representing the same or a different category/organization or the vacating person's substitute, to complete the term of office consistent with the requirements of Article IV, Section 2(A) and (B). If the substitute is appointed, another substitute shall be designated according to the bylaws.

Section 5 Orientation. The Medicaid Agency will provide orientation materials and information to newly-appointed MCAC members prior to attendance at their first meeting.

Article VII - Officers and Organization

Section 1 Designated Officers. Officers shall consist of a MCAC chairperson and vice chairperson, both elected by a majority vote of the MCAC members present and constituting a quorum at the last meeting of the state fiscal year (before July 1). The newly-elected officers shall assume their offices at the first meeting of the state fiscal year (after July 1).

Section 2 Term of Office. The chairperson and vice chairperson shall serve a one-year term and may not serve consecutive terms of office.

Section 3 Appointment of Ad Hoc Committees. The chairperson, with consent of the MCAC, may appoint individual members or ad hoc committees as deemed necessary for short term work on specific issues.

Section 4 Other Duties of Chairperson. Other duties of the chairperson shall be the following:

- (A) Act as liaison between the Medicaid Agency Director and MCAC membership; and
- (B) Develop the agenda for each meeting in consultation with the vice chairperson and the MCAC manager; and
- (C) Preside over and conduct all meetings; and
- (D) Determine acceptability of the format and completeness of any resolution or motion prior to MCAC action; and
- (E) Unless delegated, act as the liaison in coordination with the director of the Medicaid Agency between the MCAC and the public, special interest groups, other state agencies, the legislature, and other public entities.
- (F) Conduct elections of the officers of the MCAC as set out in these bylaws.

Section 5 Duties of Vice Chairperson. The vice chairperson shall assume all responsibilities and duties of the chairperson in his/her absence, or as delegated by the chairperson. The vice chairperson shall also:

- (A) Assist the chairperson and the MCAC manager in development of each meeting agenda; and
- (B) With the secretary, record attendance at each meeting and keep a record of absences and the use of substitutes, and after consultation with the chair, provide notification to the agency as set out in these bylaws; and
- (C) Work with the manager to develop and present orientation materials and/or workshops for new members about the MCAC.

Section 6 **Officer Vacancy and Replacement.**

(A) Chairperson. In the event the chairperson resigns or is removed, the vice chairperson shall become the chairperson for the balance of the term of the vacant officer. The vice chairperson shall assume all duties of the chairperson. Time served as an interim chairperson shall not count toward limitations to serve as the chairperson. The interim chairperson may choose to seek a full term as chairperson according to these bylaws.

(B) Vice Chairperson. In the event the vice chairperson either resigns or is removed, the chairperson shall appoint a member to serve the balance of the vacant vice chairperson's term. The newly appointed vice chairperson shall assume all duties of the vice chairperson. Time served as an interim vice chairperson shall not count toward limitations to serve as the vice chairperson. The interim chairperson may choose to seek a full term as vice chairperson according to these bylaws.

Article VIII - Financial and Staff Assistance

Section 1 **Expenses**. Financial arrangements for reasonable expenses shall be made by the agency for members of the MCAC as necessary to ensure full membership participation. Expense limits shall be those set by the Board of Examiners.

Section 2 **Member Compensation**. If participation presents a financial burden to a consumer member or prohibits them from participating in MCAC activities, the Medicaid Agency director may authorize an honorarium or compensation according to Section 59-509, Idaho Code.

Section 3 **Staff Support**. Department personnel shall be assigned to staff the MCAC. Staff shall be:

(A) A manager shall be assigned to provide support to the members and the officers, and work with the vice chair to provide orientation for new members; and

(B) A secretary responsible for minutes, packets, mailings, secretarial support for the MCAC, and distribution of materials including agendas; and

(C) Upon approval of the Medicaid Agency director, other staff may be requested by the chair to provide technical assistance to the MCAC.

Article IX - Meetings, Agenda, and Materials

Section 1 **Notice of Meetings and Materials**. Date, time, and location of each meeting of the MCAC, and the agenda with supporting material will be sent to members for their review two (2) weeks prior to the scheduled meeting time so that members may be better informed.

Section 2 **Meeting Frequency**. The MCAC will be convened quarterly as necessary.

Section 3 **Agenda**. MCAC members may request to add items to the agenda prior to the scheduled meeting by contacting the chairperson in advance of the meeting. The chairperson and the MCAC staff person shall determine if time permits to add the item to the agenda.

Section 4 **Minutes**. Meeting minutes of immediate past meetings shall be mailed to all MCAC members at least two (2) weeks prior to the next scheduled meeting.

Section 5 **Materials**. Materials supporting the agenda for any meeting shall be compiled and distributed to members at least two (2) weeks prior to the next scheduled meeting.

(A) The chairperson and the MCAC manager shall determine the detail of the material that must be prepared for the purpose of informing MCAC members.

(B) Requests by MCAC members for reasonable accommodations and/or communication access shall be made to the vice chair person. The vice chair person shall work with the MCAC manager to arrange for the requested services.

Section 6 **Meeting Notification.** The chairperson and the manager shall develop and maintain a means to notify interested parties about the meetings of the MCAC.

(A) A mailing list will be established that contains names and addresses of persons or organizations represented on the MCAC and will receive a copy of each meeting's agenda.

(B) All agendas as mailed to the members will be posted on the Internet no less than two (2) weeks prior to the meeting. A notice shall also be sent to a local newspaper for publication.

Article X - Parliamentary Authority

Section 1 **Rules of Order.** The rules contained in the current edition of Robert's Rules of Order Newly Revised shall govern the MCAC in all cases to which they are applicable and in which they are not inconsistent with these bylaws and any special rules of order the Board may adopt.

Section 2 **Quorum.** A quorum shall be a simple majority of MCAC members.

Section 3 **Majority Vote.** A simple majority of those present and voting shall constitute a decision or recommendation by the MCAC, and the vote shall be reported to the agency director.

Section 4 **The Votes.** The chairperson shall not vote except in the event of a tie.

Article XI - Amendments to the Bylaws

Section 1 **Adoption.** Amendments to the bylaws shall be developed in coordination with the Medicaid Agency and shall be approved by two-thirds majority vote, provided a quorum of the membership is present.

Section 2 **Presentation.** Proposed amendments to the bylaws must be in writing and be presented to the membership at least two (2) weeks prior to the meeting at which review of and action on the amendments are scheduled.

Section 3 **Effective.** Unless otherwise noted, all amendments shall become effective immediately upon adoption and upon signature of the Director of the Medicaid Agency.

// Richard M. Armstrong // Signature June 25, 2010
MEDICAID AGENCY DIRECTOR DATE