

Medicaid Advisory Committee Bylaws

**BYLAWS OF THE
MEDICAID ADVISORY COMMITTEE**

New Mexico Human Services Department
Santa Fe, New Mexico

ARTICLE I. STATEMENT OF PURPOSE

Federal regulations (42CFR431.12) (Addendum A) require the state to establish a committee to advise the state Medicaid agency about health and medical care services. The Medicaid Advisory Committee (MAC) fulfills this purpose by acting as an advisory body to the Secretary of the Human Services Department (HSD) and the Medical Assistance Division Director on policy development and program administration for the health and medical care services provided by the New Mexico Medicaid program. The MAC represents and encourages the participation of health professionals, consumers and consumer associations or groups, advocates, public health entities, and other stakeholders concerned or involved with the New Mexico Medicaid program

ARTICLE II. MEETINGS

Section 1: Regular Meetings. Regular meetings are open and will be held quarterly, based on the State's fiscal year which begins on July 1st, and are scheduled for the third (3rd) Monday of the month; however, such regular meetings may be held within two (2) weeks of the scheduled date, provided that adequate notice is given to the MAC and the public.

Section 2: Special Meetings. The Medicaid Director or the Secretary of HSD may call Special meetings when and if needed. Notice of Special Meetings shall be provided to MAC members and the public at least forty-eight (48) hours prior to the Special Meeting.

Section 3: Place of Meetings. Regular meetings will be held in Santa Fe. Special meetings will be scheduled in the most appropriate or convenient location.

Section 4: Notice of Meetings. A tentative annual meeting calendar will be distributed in the last regular meeting of each year. Updates will be distributed as necessary. A reminder will be sent to members, at least one week prior to each meeting, along with a tentative agenda and agenda materials. Meetings are not subject to the Open Meetings Act.

Section 5: Work Topics. The purpose of the MAC is to advise the Secretary of HSD and the Medicaid Director on policy development and program administration relating to health and medical care services that the Medicaid program delivers. A tentative schedule of topics for the upcoming year will be distributed to Members at the last regular meeting of the current year for discussion. Members may comment on proposed topics and/or suggest additional topics. The schedule of topics and the topics themselves may change due to other priorities that may arise during the year.

Section 6: Minutes. Minutes will be kept for all MAC meetings, including regular, special, subcommittee, and work group meetings. The minutes will be distributed to the members of the respective group or committee at least one week prior to the subsequent meeting. Minutes shall be posted on HSD's website after they are approved by the committee.

Section 7: Quorum. A majority of the membership, or their pre-approved alternatives, shall constitute a quorum. Once a quorum is established it will remain throughout the meeting. Absent committee members must notify the Medicaid Director or MAC Chair at least one (1) week prior to the scheduled meeting and may suggest an alternate. Alternates must be approved by the Medicaid Director and announced at the beginning of the scheduled meeting.

Section 8: Attendance. Regular participation is expected of all members. If more than two regular meetings are missed in succession, even if an alternate has been approved by the Medicaid Director, the member is subject to replacement by the HSD Secretary upon recommendation by the Medicaid Director.

ARTICLE III. MEMBERSHIP

Section 1: Representation.

A. As described by Federal Regulations at 42 CFR 431.12, at a minimum the committee must include:

- (1) Board-certified physicians and representatives of other health professions who are familiar with the medical needs of low-income population groups and with the resources available and required for their care;
- (2) Members of consumer groups, including Medicaid recipients, consumer organizations such as labor unions, cooperatives, consumer-sponsored prepaid group practice health plans, and others;
- (3) The Director of the Public Health Division of the New Mexico Department of Health.

B. In addition, there will be representation from various health care associations, such as long term care agencies, hospitals, home health agencies, dental agencies, pharmacy agencies, consumers and consumer associations or groups, school districts, families, American Indian agencies, businesses, etc., as determined by the HSD Secretary or the Medicaid Director.

Section 2: Term of Office. The members of the committee will be appointed by the Medicaid Director with approval by the HSD Secretary. Members shall be appointed for one (1) year, unless otherwise designated by the Medicaid Director with approval by the HSD Secretary. Members may be reappointed.

Section 3: Chairman of Committee. A chair will be appointed by the HSD Secretary to serve a one-year term, commencing in July, which is the start of the State's fiscal year. The chair shall advise the Medicaid Director and HSD Secretary on MAC business. The chair shall consult with and advise the Medicaid Director on the development of the MAC meeting agenda. The chair may succeed him/herself in office, if so appointed by the HSD Secretary. Appointments will occur annually in May.

Section 4: Vacancies. The Medicaid Director, with the approval of the HSD Secretary, will make appointments to fill unexpired terms.

Section 5: Compensation. MAC members are eligible for reimbursement pursuant to State Procurement Regulations. Eligible members will receive reimbursement forms and DFA policies. Refer to Addendum B.

ARTICLE IV. SUBCOMMITTEES

Section 1: Purpose. At the discretion of the HSD Secretary, Medicaid Director and MAC Chair, the committee may be divided into subcommittees to address specific issues relating to the State's Medicaid program. Subcommittees can be created for individual topics and/or can last for less than a full-year.

Section 2: Membership – Membership of subcommittees shall consist of members of MAC as well as additional and appropriate members from any area of the health care fields, advocates, providers, consumers, businesses or others, as appropriate. Appointments to the subcommittees and work groups shall be made by the HSD Secretary or his/her designee. The Chair of a subcommittee or work group must be an appointed MAC member. Individuals from HSD will also be assigned to each subcommittee to serve as subcommittee Co-chairs.

Section 3: Meetings – Subcommittee meetings are not subject to the Open Meetings Act and will be called by the subcommittee or workgroup Chair or Co-chair at convenient times and places to address current initiatives. Appropriate staff from the Medical Assistance Division will be present at meetings to assist as needed.

Section 4: Work Plan. Each MAC subcommittee, in conjunction with MAD, shall, at its first meeting, develop a work plan that addresses the specific topic(s) being assigned to the subcommittee, such work plan to be implemented upon approval by the HSD Secretary.

Section 5: Minutes – Minutes will be prepared and distributed by staff from the Medical Assistance Division.

ARTICLE V. AMENDMENTS

These bylaws may be altered, amended or repealed and replaced with new bylaws or amendments upon approval of the HSD Secretary. MAC membership shall have an opportunity to review and provide comment on new bylaws and amendments prior to final approval by the HSD Secretary.

ARTICLE VI. APPROVAL

Sidonie Squier

Sidonie Squier, Secretary
Human Services Department

9/13/11

Date

Julie Weinberg

Julie Weinberg, Medicaid Director

9/6/2011

Date

Addendum A

**Centers for Medicare and Medicaid Services
Department of Health and Human Services
Code of Federal Regulations
(42CFR431.12)**

[Home Page](#) > [Executive Branch](#) > [Code of Federal Regulations](#) > [Electronic Code of Federal Regulations](#)

Electronic Code of Federal Regulations

e-CFR

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e-CFR Data is current as of September 1, 2011

Title 42: Public Health

PART 431—STATE ORGANIZATION AND GENERAL ADMINISTRATION

Subpart A—Single State Agency

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§ 431.12 Medical care advisory committee.

(a) *Basis and purpose.* This section, based on section 1902(a)(4) of the Act, prescribes State plan requirements for establishment of a committee to advise the Medicaid agency about health and medical care services.

(b) *State plan requirement.* A State plan must provide for a medical care advisory committee meeting the requirements of this section to advise the Medicaid agency director about health and medical care services.

(c) *Appointment of members.* The agency director, or a higher State authority, must appoint members to the advisory committee on a rotating and continuous basis.

(d) *Committee membership.* The committee must include—

(1) Board-certified physicians and other representatives of the health professions who are familiar with the medical needs of low-income population groups and with the resources available and required for their care;

(2) Members of consumers' groups, including Medicaid recipients, and consumer organizations such as labor unions, cooperatives, consumer-sponsored prepaid group practice plans, and others; and

(3) The director of the public welfare department or the public health department, whichever does not head the Medicaid agency.

(e) *Committee participation.* The committee must have opportunity for participation in policy development and program administration, including furthering the participation of recipient members in the agency program.

(f) *Committee staff assistance and financial help.* The agency must provide the committee with—

(1) Staff assistance from the agency and independent technical assistance as needed to enable to make effective recommendations; and

(2) Financial arrangements, if necessary, to make possible the participation of recipient members.

(g) *Federal financial participation.* FFP is available at 50 percent in expenditures for the committee's activities.

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