DMAS Medicaid Beneficiary Advisory Council (BAC)

Frequently Asked Questions (FAQs)

Part 1: All About the BAC

What is the purpose of the Medicaid Beneficiary Advisory Council (BAC)?

The Medicaid Beneficiary Advisory Council serves in an advisory capacity to the Director of the Department of Medical Assistance Services ("DMAS"). The council was previously referred to as the, Medicaid Member Advisory Committee (MAC). Due to the hard work and dedication of the previously established "MAC", DMAS is in a strong position to deliver on new federal requirements outlining the Beneficiary Advisory Council.

The BAC provides a formal method for members' voices to be included in the DMAS decision-making process and to inform DMAS change-management strategies. The Council is made up entirely of current and former Medicaid-enrolled individuals and authorized representatives of enrollees. The Council members examine and provide input on the impact of DMAS services and programs. The purpose is to obtain the insight and recommendations of Virginia's Medicaid enrollees to help DMAS improve the overall experience for all Virginia Medicaid applicants and enrollees. DMAS staff provides administrative support and schedules relevant presentations by DMAS staff and others.

DMAS is committed to examining its programs and services to ensure the best results are achieved for the Medicaid members.

Does law or policy require the establishment of the Beneficiary Advisory Council?

Yes! The "Ensuring Access to Medicaid Services (CMS-2442-F)" (Access Final Rule, CMS 2442-F) requires a BAC. This final rule takes a comprehensive approach to improving access to care, quality, and health outcomes, and better addressing health equity issues in the Medicaid program across feefor-service (FFS), managed care delivery systems, and in-home and community-based services (HCBS) programs.

This rule replaces previous Medical Care Advisory Committee (MCAC) requirements with a committee/council framework designed to ensure the proper and efficient administration of the Medicaid program and to better ensure that services under the Medicaid program will be provided in a manner consistent with the best interests of the beneficiaries. These updates include requirements for two committees, the Medicaid Advisory Committee (MAC) and the Beneficiary Advisory Council (BAC). To read more about this federal policy, take a look at this federal policy cheat sheet from the Center for Healthcare Strategies.









What is the anticipated impact or result(s) for the Beneficiary Advisory Council?

DMAS believes that Medicaid enrollees are uniquely positioned to be able to share their experiences. By listening to the enrollees' perspective, DMAS will improve the experience of individuals and families who receive Medicaid services. DMAS looks forward to working with the individuals and families that we are privileged to serve.

Are the recommendations of the Beneficiary Advisory Council binding on anyone?

The decisions of the Council are not binding upon anyone. However, the perspectives and observations of Medicaid members are a very valuable consideration in the development of policy, procedures, services, and treatment provided by or through DMAS. Council recommendations will be reviewed by the DMAS Director and forwarded to the State Board of Medical Assistance Services for consideration.

What guidelines will govern the Council's meetings?

The Council is governed by federal and state policies and procedures as well as the agreed-upon BAC bylaws and policies, which are available at https://www.dmas.virginia.gov/for-members/beneficiary-advisory-council/.

How can the general public and/or other Medicaid members participate with the Beneficiary Advisory Council ?

Public notice is provided for all MAC meetings. The public meeting dates can be found on Virginia Town Hall meetings page (http://www.townhall.virginia.gov/). A comment period will be included in each public meeting. Public comment will be limited to the purpose of the meeting: the Medicaid enrollee perspective and considerations.

The public may also comment via e-mail or write to:



Beneficiary Advisory Council (BAC) bac@dmas.virginia.gov



Beneficiary Advisory Council (BAC) Virginia Department of Medical Assistance Services 600 East Broad Street, Richmond, Virginia 23219

How often does the council meet?

The Medicaid Beneficiary Advisory Council (BAC) meets four times per year. Additional meetings can be scheduled at the discretion of the Director or their designee. Meeting information is published on the Virginia Town Hall at https://townhall.virginia.gov/l/meetings.cfm. Type "Beneficiary Advisory Council (BAC) Meeting" into "Meeting Title Partial Match" for all past and future scheduled meetings.









Part 2: Members and Representatives Interested in Serving on the BAC

Who serves on the Beneficiary Advisory Council (BAC)?

The Council is made up of current and former Medicaid enrollees and/or their authorized representative(s). The Director of DMAS also designates a DMAS staff member to serve on the Council.

How is membership determined?

DMAS works with state, local, and community-based stakeholders and partners, as well as current BAC members, to identify current and/or former Medicaid members who might be interested in participating on the Council. DMAS considers demographic (such as age, race, geographic region, and Medicaid aid category) and other information when selecting members in order to arrive at a diverse membership.

How long do individuals serve on the Council?

Members are asked to serve for one year. While DMAS seeks to rotate membership, it is possible for members to serve a second one-year term at the discretion of the agency and its designated staff.

How does someone apply to be on the BAC?

The Medicaid BAC Application interest form is available on the DMAS website at the BAC webpage. Interested parties should submit an interest form for consideration. Applications are open from October 1st to November 1st every year. Once the interest in application has been submitted, an automated message will alert the applicant that it has been received. Due to the volume of applicants, we will only contact individuals if they are being considered for a vacant seat. If selected, DMAS will reach out to the applicant for an informal interview and explanation of duties. DMAS considers demographic information such as age, race, gender, geographic region, Medicaid aid category, etc when selecting members in order to arrive at a diverse membership. This is a federal requirement to ensure membership reflects the community we serve.

What are the requirements for the BAC members?

BAC members must be able to attend all scheduled meetings in-person (or with approval to attend virtually in accordance with the BAC Electronic Meetings Policy). Travel and parking costs for in-person meetings will be covered according to state policies. There may be occasional work outside of the council meetings.









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Where do you find the information about past and upcoming meetings?

The past and upcoming dates and agendas for Medicaid BAC (formerly MAC) meetings are posted on http://www.townhall.virginia.gov/. Minutes for past meetings are posted on the DMAS website at the BAC webpage. Click the year in which the meeting took place under "Member Advisory Committee" or "Beneficiary Advisory Council" to gain access to information. Reminder that this group was called the Member Advisory or MAC up until August, 2025.

Where can you find more information about the Medicaid BAC?

Documents about the council, what it has discussed, and how it operates can be found at <u>the BAC</u> webpage.

- BAC Pact
- BAC Glossary
- Frequently Asked Questions
- Apply to Be a Member/Application
- Annual Reports
- Materials per meeting: Draft Meeting Minutes, Agenda, and Presentation

What is the best way to contact the BAC DMAS staff representatives?

Please send your questions or comments to bac@dmas.virginia.gov.







