

Medicaid Advisory Committee (MAC) Participant Guide

Welcome committee members! We are excited to have you join the Medicaid Advisory Committee (MAC) for the next 3 years of work. This guide gives you some background about being in this council.

About the Participant Guide

This participant guide describes how the MAC works together to advise the Medicaid Director about key initiatives that impact the Medicaid program and its members. This document explains how the MAC works as a group and runs its meetings and business. The participant guide also serves as the Bylaws for the MAC as required by federal law ([42 CFR 431.12\(f\)\(1\)](#)). With suggestions from any MAC members or the Medicaid Director, the MAC may vote to change this guide at any time.

Why was the MAC created?

The primary goal is to advise the Medicaid Director and provide input in designing and administering policies and services that meet the needs of Wisconsin's Medicaid members.

All states have groups like the MAC, previously known as Medical Care Advisory Committee. The federal Centers for Medicare & Medicaid Services (CMS) required it in [42 CFR 431.12](#). In addition, the Wisconsin MAC fulfills the requirements in federal law at [447.203\(b\)\(1\)](#) for an Interested Parties Advisory Group.

The Wisconsin Department of Health Services (DHS) established the MAC in February 2021. MAC members discuss and make recommendations on issues that impact Medicaid and its members.

How are MAC members chosen?

When there is an open spot on the MAC, DHS will ask for applications and spread the word through email, our website, our partners, and social media. Professionals with experience working with Medicaid members can submit their application online, over email, or through the mail. DHS staff review the applications and recommend candidates. The Medicaid director selects the committee member(s).

The MAC will have no more than 25 members who are familiar with the needs of Wisconsin's Medicaid members, including:

- Medicaid members or caregivers of Medicaid members who also serve on the Medicaid Member Experience Council (MMEC). Medicaid members will comprise at least 25% of the MAC.
- Professionals from each of the following categories:
 - State or local consumer advocacy groups or other community-based organizations who provide direct service to Medicaid members.

- Clinical providers or administrators who are familiar with the health and social needs of Medicaid members and have the resources available and required for their care, including primary care, specialty care, and long-term care.
- Representatives from a Medicaid managed care organization or a health plan association.
- Other state agencies that serve Medicaid members, who serve as non-voting members.
- Experts on relevant and timely topics, serving in a limited-term capacity as necessary and appropriate.

The Wisconsin MAC members will represent the people of Wisconsin and these priority perspectives, which may change over time:

Member type	Representation and perspectives
Medicaid members	<ul style="list-style-type: none"> ● Members age 65 years or older or their caregiver ● Members with disabilities or their caregiver ● BadgerCare members or their caregiver
Clinical providers and administrators	<ul style="list-style-type: none"> ● Primary care provider ● Behavioral health provider ● County health and human services director ● Tribal health director or clinic representative ● Federally qualified health center (FQHC) representative ● Hospital administrators
Health professionals who directly provide services to members for medical, behavioral, and/or long term care	<ul style="list-style-type: none"> ● Clinical and health related social needs support workers: Case managers, care coordinators, social workers, nursing assistants ● Access and enrollment support workers: Enrollment assisters, income maintenance, financial assisters <p>Long term care direct care worker: nurses, therapists, assistants, social workers, personal care aides, activities staff</p>
Health plan professional	Operational or clinical role: case manager, care coordinator, quality manager
Other experts	<ul style="list-style-type: none"> ● Academic expert in a field directly associated with the goals of the Medicaid program, including social work, health care administration, or public administration ● Health equity expert
Other state agencies	Division of Public Health administrator

What are the MAC's goals?

The goals for the MAC are to keep Wisconsin Medicaid focused on members and to make Wisconsin Medicaid the best it can be. The MAC advises the Medicaid Director and the DHS team.

The MAC will discuss and make recommendations on issues that impact Wisconsin Medicaid and its members. Agenda topics will be based on high priority issues, challenges, opportunities, and policy and programmatic decisions. We will talk about things like Medicaid services, eligibility, and enrollment. We'll also talk about access to services, how members get information, and other issues affecting member health.

The MAC will also collaborate with the MMEC to ensure Wisconsin Medicaid is designed and administered in ways that meet members' needs. Find more information on the [MMEC webpage](#).

Member roles and responsibilities

Each member is an expert because of their professional and personal experience serving the Medicaid population. Everyone will bring something different and unique. Here are some ways that every member can contribute to the committee:

- Share their experiences and suggestions and help create solutions to improve Medicaid.
- Advise the Medicaid director about effective policy development and program administration of Medicaid and the Children's Health Insurance Program (CHIP), including eligibility and enrollment, acute and primary health care, long term care services, pharmacy benefits, dental, and behavioral health programs.
- Attend quarterly MAC meetings online or in person. These meetings are usually two or three hours.
- Identify any conflicts of interest. If you or someone from your family could directly benefit from a decision we make, it's helpful to share this information. Find more information about conflicts of interest in the [Resources](#) section).
- Be committed to collaboration and respecting other viewpoints.
- Take part in the committee for three years.

Chairperson and vice chairperson

The chairperson is the official representative of the MAC. They may delegate this responsibility when appropriate or necessary.

The committee may also select a vice chairperson. The vice chair serves as the chairperson's delegate and provides leadership support to MAC members, the chairperson, and the DHS team.

A MAC member is eligible to serve as the vice chair after the first year of their term. MAC members vote to recommend the vice chairperson as their representative. Most often, the vice chairperson will then serve as the chairperson in the third year of their term.

The Medicaid director selects the MAC chairperson and vice chairperson.

The chairperson's responsibilities include:

- Meeting with the Medicaid director to provide advice and guide the MAC's effectiveness.
- Facilitating effective meetings in line with the committee's vision, purpose, and processes.
- Developing meeting agendas with the Medicaid director.
- Ensuring meeting minutes and other relevant committee records are available to the public.
- Ensuring necessary follow up on all actions taken at meetings.
- Recommending committee member appointments to the Medicaid director.

- Welcoming new committee members.
- Finalizing the annual report on MAC activities to the Medicaid director.

Length of service

When their term ends (3 years), MAC members cannot immediately volunteer for another term. Members can return to the MAC after a break that is two years or longer. During their time away from the MAC, members can join MAC meetings as non-participating members of the public. DHS may ask former MAC members to support new members.

Members can leave the council at any time for any reason. For example, a member may need to leave the council if they cannot attend at least three meetings every year. MAC members should let DHS know if they need to end their term early. They must give DHS a written note that includes their last day on the MAC. Also, DHS may end a MAC member's term with the committee for any reason. DHS will share a written note with the member's last day on the council.

If a MAC member changes their employment, they should contact DHS and will likely not be able to continue to serve on the MAC for the rest of their term. DHS will review this on a case-by-case basis. MAC members are required to be in a profession serving Medicaid members.

A new member can be recruited to complete a vacated position mid-term and may renew for a full term, depending on total length of service.

To ensure continuity, terms will be staggered so only one-third of the committee will have terms that end during any given year.

Meetings

MAC members will attend four meetings each year. Meetings will be two or three hours long. Agendas will be shared ahead of time.

The MAC will choose meeting days, times, and locations that allow the most attendance possible. The group will hold many meetings online, but some may be in person. All meetings will have a virtual and phone dial-in option. The chairperson or the Medicaid director may schedule ad hoc meetings as necessary and appropriate. Meeting dates and times may be adjusted to accommodate conflicts.

MAC meetings are open to the public. This means that members of the public can join the meeting to listen. MAC meetings also reserve time for members of the public to offer comments. Meetings will not be recorded.

Meeting agenda

The MAC and DHS team will collaboratively determine what topics to include on meeting agendas. Both DHS and MAC members can propose topics. Sometimes CMS will require topics. Topics will include high priority issues, challenges, and policy and programmatic decisions, including:

- Federal approvals for Medicaid policies and administration (state plan amendments, waivers, and rules).
- Legislative action from the state and federal governments.
- Public comment.
- Conflict of interest.
- The quality and effectiveness of Medicaid policies, programs, services, and processes.
- Issues that impact the delivery or outcome of Medicaid health care services, including:
 - New or changing Medicaid services or programs.
 - Quality of Medicaid services.
 - Access to Medicaid services.
 - Coordinating care for Medicaid members.
 - Eligibility, enrollment, and renewal processes.
 - How Medicaid communicates with members, providers, and partners.
 - How to make Medicaid more helpful for Wisconsin's diverse cultures.
 - Using Medicaid when you speak languages other than English.
 - Problems in Medicaid operations or policies that negatively impact members, including small populations.
- Topics the MAC is required by federal law to advise Medicaid on, including:
 - Marketing activities [438.104 \(c\)](#).
 - The required managed care report [438.66 \(e\)](#).
 - Medicaid Managed Care Quality Rating System [438.334\(c\)](#).
 - Managed Care State Quality Strategy [438.340\(c\)](#).
 - Section 1115 Demonstrations Waiver Monitoring and Compliance [431.420](#).
 - Fee-for-service rates paid to direct care workers [447.203\(b\)\(1\)](#).

Public comment

The committee will set aside time on each agenda for public comments. The purpose of the public comment period is for members of the public to inform the MAC and the Medicaid director about their views and suggestions. Input from the public during the MAC meeting is limited to the public comment period. The MAC chairperson will facilitate public comment with help from the DHS team.

Members of the public may submit comments verbally, during the meeting comment period, or in writing. They may contact DHS in advance to register to provide comment, or they may make public comment during the meeting without registering in advance. Speakers will have three minutes per person for their comment. All public comment will be recorded in the official meeting notes. The chairperson, MAC members, and DHS team will make every effort to respect individuals from the public, while keeping input brief and to the point. The committee will listen to and consider each comment, though they will not resolve any issues during this portion of the agenda. The committee may request further clarification, follow up, or resolution.

- All individuals wishing to address the MAC will be asked to identify themselves with their name, the name of their organization, and any conflicts of interest.
- The MAC may solicit written public comments on specific topics, and may choose to respond to written public comment as it deems necessary and appropriate.

If there are no public comments during the meeting, the committee will move to the next agenda item.

Agendas will be posted ahead of time to the:

- [MAC webpage](#)
- [Public Meetings website](#)

Meeting schedule

At a minimum, the MAC meets quarterly during the following months or when your schedule allows.

- March
- June
- September
- December

Meeting support

The MAC is your group, and the DHS team is here to support you. DHS will provide support so each attendee feels welcomed and can fully participate:

- DHS will help with meeting logistics. We will help the MAC choose meeting dates, times, and locations.
- DHS will reschedule or cancel a meeting if fewer than half of the MAC can attend.
- DHS will help with meeting materials and will post the agenda before each meeting.
- DHS will take attendance and meeting notes and will share copies after each meeting.
- DHS will provide virtual meeting and phone dial-in logistics, as well as collaboration tools like surveys and whiteboards for brainstorming and decision making. Closed captioning is available for all virtual meetings.
- DHS will provide accommodations and translation as needed. MAC members should let DHS know what they need at least two weeks in advance so they can prepare the needed resources.
- DHS will pay back MAC members for any costs they pay to attend meetings. For example, travel costs like gas and meals to get to and from an in-person meeting.
- DHS will help the MAC organize around making decisions. The goal is to make decisions everyone feels good about, in a way that everyone feels good about. That might mean voting on decisions, talking things through, or exploring options together.

Annual report

Each year, the MAC will collaborate with DHS staff to produce an annual report. DHS staff will be responsible for drafting the report. The MAC will provide final review, edits, and approval. This brief report should summarize:

- Key themes from meeting discussions during the year.
- Recommendations made by the MAC and MMEC.
- Progress or accomplishments made during the year.

Goals or priorities identified for the upcoming year.

The report must be approved by an official vote of the MAC before it is considered final.

Resources

1. [**Medicaid Advisory Committee webpage**](#): Learn about the MAC, see upcoming and past meetings, find meeting materials, and see a list of members. The MAC gives feedback and advice about Medicaid in Wisconsin.
2. [**Medicaid Member Experience Council webpage**](#): Learn about and find updates about the council, including the council charter, meeting schedules and notes, special projects, and the annual report (available starting July 2026).
3. **Meeting expenses**: DHS will repay MAC members for their expenses to attend meetings. This includes things like mileage and meals. Use the [Travel Reimbursement Request Non-State Employee, F-80190](#). Wisconsin law considers the MAC an advisory board. This means DHS cannot pay members for their participation—
[\(https://docs.legis.wisconsin.gov/statutes/statutes/15/i/04/1/c\)15.04\(c\).](https://docs.legis.wisconsin.gov/statutes/statutes/15/i/04/1/c)15.04(c).)
4. **Conflict of interest**: MAC members might be asked to make decisions where the outcome directly benefits them or their family. These can be clear and obvious benefits, or less direct. Anything that might influence your thinking about a decision the MAC makes could be called a *Conflict of interest*. Conflicts of interest might make it hard to have an unbiased opinion on a topic.

It is important for members to share honestly about how topics influence them. If a MAC member thinks they have a conflict of interest, they can reach out to DHS staff before the meeting for help.

We may determine there is a conflict of interest. The MAC member and DHS staff can discuss how the member should handle the conflict of interest. We may also ask other MAC members for their thoughts. The solution might look different each time. Possible solutions might include:

- The member sharing their ideas on a topic but not voting on a decision.
- The member listening to a discussion but not contributing as much.
- The member informing the group about their conflict of interest and then participating as they normally would.

Revisions

The MAC will review and update this guide every three years or sooner, as needed.

Effective/Revision Date	Amendment	Author
December 2025	Initial Release	Amanda Dreyer, Gladys Martens, Cheryl Jatczak-Glenn, Allie Merfeld, Laura Grulke-Rueter