



Council Updates

**Janae Carter, Medicaid Rules
Officer**

March 13, 2025

Hawki

Hawki

Background:

- SF 2385 (Session 2024) dismantled the Hawki board and mandated that Hawki board duties be absorbed by MAC.

Hawki Implementation

- ▶ What have we done so far?
 - Two previous members of the Hawki board are voting members on MAC.
 - 2024 Hawki Board Report has been submitted
- ▶ What do we need to do?
 - Will be incorporating Hawki agenda items
 - Broadening MCO & PAHP updates to cover Hawki/CHIP
 - Look into adding more former Hawki board members to MAC as non-voting members.

Beneficiary Advisory Council

Beneficiary Advisory Council (BAC)

- ▶ Will consist of individuals who are or have been Medicaid beneficiaries and individuals with direct experience supporting Medicaid beneficiaries.
- ▶ BAC will advise the MAC regarding:
 - Their experience with the Medicaid program
 - Matters of concern related to policy development
 - Matters related to the effective administration of the Medicaid program.

Member Selection

Member Selection

- Member interest form went out to stakeholders on Monday, February 28th. We will be accepting forms until Monday, March 24th.
- Medicaid staff, along with Medicaid leadership will review the interest forms and make final selections for the council
- When making selections the department wants to ensure that we have a wide variety of experiences.
- A stipend will be paid to BAC members for their participation.

Participation & Scope

Participation and Scope

Requirements for BAC crossover to MAC:

- July 2025 through July 2026, 10 percent of the MAC members must come from the BAC.
- July 2026 through July 2027, 20 percent of the MAC members must come from the BAC.
- Thereafter 25 percent of MAC members must come from the BAC.

The BAC must meet separately from the MAC, on a regular basis, and in advance of each MAC meeting to ensure BAC member preparation for each MAC meeting.

BAC members will serve on MAC in a rotation. This rotation will be decided at the first BAC meeting of the fiscal year.

Examples of topics for discussion:

- ▶ Additions and changes to services
- ▶ Coordination of care
- ▶ Quality of services
- ▶ Eligibility, enrollment, and renewal processes
- ▶ Beneficiary and provider communications by State Medicaid agency and Medicaid MCOs, PIHPs, PAHPs, PCCM entities or PCCMs
- ▶ Cultural competency, language access, health equity, and disparities and biases in the Medicaid program
- ▶ Access to services
- ▶ Other issues that impact the provision or outcomes of health and medical care services in the Medicaid program as determined by the MAC, BAC, or State



Questions

Janae Carter
Medicaid Rules Officer
Janae.carter@hhs.iowa.gov

MedicaidMAC-BAC@hhs.iowa.gov



Health and
Human Services