



## **NC MEDICAID BENEFICIARY ADVISORY COUNCIL BYLAWS**

All prior bylaws are hereby repealed, and the bylaws contained in this document are approved and adopted by the Beneficiary Advisory Council on December 2, 2025.

- I. ARTICLE I NAME AND LOCATION
- II. ARTICLE II AUTHORITY
- III. ARTICLE III PURPOSE AND ROLE
- IV. ARTICLE IV COMPOSITION
  - A. Committee Structure
  - B. Qualifications
  - C. Responsibilities
  - D. Terms of Membership
  - E. Officers
- V. ARTICLE V APPOINTMENTS
- VI. ARTICLE VI LIABILITIES
- VII. ARTICLE VII MEETINGS
  - A. Regular
  - B. Special
  - C. New Member Orientation
  - D. Notice of Meetings
  - E. Quorum
  - F. Attendance
  - G. Removal
- VIII. ARTICLE VIII CONFLICT OF INTEREST
- IX. ARTICLE IX GUIDELINES FOR REIMBURSEMENT
- X. ARTICLE X AMENDMENTS TO BYLAWS

BYLAWS of  
**NC MEDICAID BENEFICIARY COUNCIL**  
DECEMBER 2, 2025

**ARTICLE I**

**NAME & LOCATION**

Section 1

The name of the council shall be the NC Medicaid Beneficiary Advisory Council.

Section 2

The mailing address shall be:

NC Medicaid  
Attention: Communications & Engagement  
2501 Mail Service Center  
Raleigh, NC 27699-2501

**ARTICLE II**

**AUTHORITY**

The NC Medicaid Beneficiary Advisory Council (BAC) is mandated in accordance with [§ 431.12 Medicaid Advisory Committee and Beneficiary Advisory Council](#).

**ARTICLE III**

**PURPOSE AND ROLE**

The purpose of the Beneficiary Advisory Council is to advise the State regarding their experience with the Medicaid program, identify key issues to bring to the NC Medicaid Advisory Committee (MAC) on matters of concern and advise the state directly on Medicaid policy and administration.

**ARTICLE IV**

**COMPOSITION**

A. Committee Structure

The BAC shall be composed of no more than 20 members with members selected from the 14 congressional districts and four additional at-large members. The BAC must consist entirely of individuals who are or have been either:

- Medicaid beneficiary
- Family member
- Caregiver (including paid caregivers)

#### B. Subcommittees

- The BAC can provide standing and ad hoc subcommittees focusing on specific areas of concern.
- There shall be a Medicaid Advisory Committee (MAC) and Beneficiary Advisory Council Executive Committee composed of:
  - The Chair and Vice Chair of the MAC and BAC
  - Chair and Vice Chair of established subcommittees as applicable and approved by the membership

The Executive Committee shall meet regularly as determined by the committee.

#### C. Responsibilities

The BAC will advise on a broad range of topics including:

- Additions and changes to covered services
- Coordination of care
- Quality of services
- Eligibility, enrollment and renewal processes
- Beneficiary and provider communications
- Cultural competency, language access and health disparity
- Access to services
- Other issues that impact the outcomes of health and medical services

Specific topics of discussion will be determined in collaboration with the MAC and based on the needs of NC Medicaid.

Members are expected to listen to the different perspectives of other members and work toward providing consensus advice on specific issues.

#### D. Terms of Membership

- Members cannot serve consecutive terms (but can serve non-consecutive terms).
- Members shall be appointed on a continuing and rotating basis (i.e., once a member's term has been completed, the Department must select a new member) Term limits are three-year periods with overlapping terms for continuity. Initial appointments shall be made for one, two, and three-year terms to provide for planned rotation and reappointment.
- If a member resigns, is removed or dies before the term is up, a replacement will be appointed by the Deputy Director of NC Medicaid for the remainder of the term.

- Members are expected to be present, including virtually or by phone, at all scheduled meetings.
- Members will serve out the duration of their terms and may only be removed only “for cause” removal, including written notice and explanation of the grounds for removal (See ARTICLE VII, F and G).

#### E. BAC Officers

The BAC shall have two officers. These shall be designated as the Chair and the Vice Chair.

- The Chair shall be nominated from the floor and elected by a majority vote of the BAC. The Vice Chair shall be nominated from the floor and elected by a majority vote of the BAC.
- The duty of the Chair is to call to order and to preside at all regular and special meetings of the BAC.
- The BAC Vice Chair shall exercise all powers of the Chair in the event of the absence of or inability of the Chair to serve and shall perform such other duties as assigned by the Chair.
- BAC membership is the single qualification required to hold any office.
- The BAC Chair and Vice Chair may serve no more than three one-year terms within an appointment term.
- The BAC Chair or Vice Chair shall serve as a liaison to the Medicaid Advisory Committee.
  - The liaison shall be a voting member representing the collective voice of the BAC.
  - The liaison member does not count toward the required percentage of BAC members on the MAC.

## ARTICLE V

### APPOINTMENT

The Deputy Secretary of Medicaid will select BAC members. The selection process must include interested parties submitting applications, which NC Medicaid will review before making its selection.

The procedure for appointments of BAC members is as follows:

- An application for membership will be made available by NC Medicaid staff to people interested in membership.
- Completed applications must be submitted to the Deputy Director of NC Medicaid for review and consideration.
- In the application, prospective members will describe their interest in the Medicaid program.
- The Deputy Director of NC Medicaid will review all applications.
- Appointment to the BAC shall be made by the Deputy Director of NC Medicaid. Members will have a vote in all BAC decisions only after the Deputy Director of NC Medicaid has formally appointed them.

## ARTICLE VI

### LIABILITIES

No one of the committee membership shall become liable for responsible actions of the committee which may result in legal actions developed by the public.

Members may not speak publicly on behalf of the BAC without prior permission and only in accordance with a majority vote of the full BAC.

## ARTICLE VII

### MEETINGS

#### A. Regular

The BAC shall hold meetings each quarter with an anticipated meeting time of up to two hours. Two meetings will be virtual, and two meetings will be held in person and virtual.

- All meeting formats must have a telephone dial-in option for BAC members.
- The public must be adequately notified of the date, location and time of each and any public BAC meeting at least 30 calendar days in advance of the date of the meeting.
- The BAC may decide for itself which meetings (if any) are to open to the public.

The BAC must meet separately from the MAC, before each MAC meeting. Additional meetings may be scheduled as needed.

Meeting agendas will be sent to members in advance of the meeting. BAC members may also make recommendations for agenda items.

Action on agenda items may be taken by no less than a majority of members present at the meeting.

Minutes will be taken by NC Medicaid staff and reviewed, revised as necessary and approved.

#### B. Special Meetings

Special meetings may be called by the Chair, the Deputy Director of Medicaid or by the request of three or more BAC members, with approval of the Chair. These special meetings can take up the work of the ad hoc subcommittees.

#### C. Meeting Publicity

The BAC bylaws, membership lists, meeting minutes and process for member recruitment and selection must be posted publicly (e.g., [MAC/BAC webpages](#) on NC Medicaid website).

BAC members can choose whether to be identified by name in public materials such as membership lists and meeting minutes.

#### D. New Member Orientation

Orientation shall be held when new members are appointed. It may be one-on-one if necessary. Current members will be invited to attend.

#### E. Quorum

A majority of the BAC members present shall constitute a quorum for the purpose of doing business.

#### F. Attendance

BAC members are required to attend quarterly meetings in person, virtually or by phone.

#### G. Removal

A member shall be removed from the BAC for any one of the following reasons:

- Absence without just cause from two consecutive meetings shall result in a formal notice from the Deputy Director of Medicaid requesting information on the member's intention for further participation.
- Absence without just cause from a third consecutive meeting will result in removal from the Committee and immediate appointment of a replacement from the same membership category.
- Abuse of other members.
- Failure to disclose conflicts of interest.
- Receipt of notification of resignation from the member.
- Members who move from the congressional district they represent shall be given the opportunity to transition into an at-large position if available, or to continue as a non-voting member for a reasonable period while they complete their transition.

### ARTICLE VIII

#### CONFLICT OF INTEREST

BAC members shall recognize and disclose to the BAC issues in which they have a substantial conflict of interest, as determined by the Chair.

### ARTICLE IX

#### REIMBURSEMENT

Travel expenses incurred for official committee business shall be reimbursed to BAC members in accordance with [§ 431.12 Medicaid Advisory Committee and Beneficiary Advisory Council guidelines](#) and standard State agency travel guidelines.

Members who request reimbursement of travel expenses should submit these expenses and mileage on standard State agency travel expense vouchers. Mileage reimbursement is defined by

the Office of Management and Budget.

Completion of travel expense vouchers is subject to all State requirements. Travel expense vouchers must be submitted within one month of the BAC meeting date.

Reimbursements (e.g., meals, childcare, mileage and lodging) do not count as income for Medicaid eligibility purposes.

Daily stipends and similar compensation would be countable income for both modified adjusted gross income (MAGI) and non-MAGI methodologies.

## **ARTICLE X**

### **AMENDMENTS TO BYLAWS**

The BAC bylaws, including revisions or amendments, must be approved by a majority vote of the BAC members, approved by the Chair of the BAC and submitted to the Deputy Secretary of Medicaid for review. Members may vote by absentee ballot if they are unable to attend the meeting when the vote is taken.

Proposed bylaw amendments will be submitted in writing to the Chair of the BAC and Deputy Secretary of Medicaid and discussed by the BAC at least one month prior to the vote. Bylaws may be amended at any regular meeting following written receipt of the proposed changes and notification of the proposed action.

The bylaws will be reviewed as needed, at least every three years. Meetings shall be conducted in accordance with the bylaws established.