



NC MEDICAID ADVISORY COMMITTEE BYLAWS

All prior bylaws are hereby repealed, and the bylaws contained in this document are approved and adopted by the Medicaid Advisory Committee on December 2, 2025.

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BYLAWS of
NC MEDICAID ADVISORY COMMITTEE (December 2, 2025)

ARTICLE I

NAME & LOCATION

Section 1

The name of the committee shall be the NC Medicaid Advisory Committee.

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

ARTICLE III

PURPOSE AND ROLE

The purpose of the NC Medicaid Advisory Committee is to serve in an advisory capacity to the State including through the submission of an annual report (See ARTICLE IX).

ARTICLE IV

COMPOSITION

A. Committee Structure

The MAC shall be composed of at least 20 members with members selected from the 14 congressional districts and six additional at-large members.

The MAC shall be a larger group to include a portion of NC Medicaid Beneficiary Council (BAC) members (20% July 10, 2026; 25% July 11, 2027).

MAC membership must include at least one member from each category:

- Clinical providers or administrators
- State, local or community-based organizations
- Participating plans and/or state associations
- Other state agencies as ex-officio members (non-voting)

BAC members may rotate on the MAC to alleviate burden of serving on the MAC for individual BAC members.

B. Subcommittees

- The MAC shall establish an Interested Parties Advisory Group (IPAG) by July 9, 2026. The IPAG is an advisory group for direct care workers, beneficiaries, authorized representatives and other interested parties to meet at least every two years and advise and consult on payment rates paid to direct care workers for personal care, home health aide, homemaker and habilitation services.
- The MAC may perform the functions of the home care advisory group.
- 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.
- The MAC can provide standing and ad hoc subcommittees focused on specific areas of concern.

C. Responsibilities

The MAC 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 BAC and based on the needs of NC Medicaid.

The MAC shall provide recommendations to the State on the following:

- Medicaid communications and engagement materials
- The State's managed care quality rating system
- The State's quality strategy
- §11115 demonstration projects via the public notice and hearing process

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 Secretary 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. MAC Officers

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

- The Chairs shall be nominated from the floor and elected by a majority vote of the MAC. The Vice Chair shall be nominated from the floor and elected by a majority vote of the MAC.
- The duty of the Chair is to call to order and to preside at all regular and special meetings of the MAC.
- The MAC 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.
- MAC membership is the single qualification required to hold any office.
- The MAC Chair and Vice Chair may serve no more than three one-year terms within an appointment term.

ARTICLE V

APPOINTMENT

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

The procedure for appointments of MAC members is as follows:

- An application for membership will be made available by NC Medicaid staff to persons interested in membership.
- Completed applications must be submitted to the Deputy Secretary of NC Medicaid for review and consideration.
- In the application, prospective members will describe their interest in the Medicaid program.
- The Deputy Secretary of NC Medicaid will review all applications.
- Appointment to the MAC shall be made by the Deputy Secretary of NC Medicaid. Members will have a vote in all MAC decisions only after the Deputy Secretary 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 MAC without prior permission and only in accordance with a majority vote of the full MAC.

ARTICLE VII

MEETINGS

A. Regular

The MAC 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 MAC members.
- Two MAC meetings a year must be open to the public with dedicated time for public comment.
- The public must be adequately notified of the date, location and time of each public MAC meeting at least 30 calendar days in advance of the date of the meeting.

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

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 Secretary of Medicaid or by the request of three or more MAC members, with approval of the Chair. These special meetings can take up the work of the *ad hoc* subcommittees.

C. Meeting Publicity

The MAC 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).

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 MAC members present shall constitute a quorum for the purpose of doing business.

F. Attendance

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

G. Removal

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

- Absence without just cause from two consecutive meetings shall result in a formal notice from the Deputy Secretary 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

ANNUAL REPORT

NC Medicaid must produce and post on its website an annual report.

- The MAC, with support from the Department, must submit an annual report describing its activities, topics discussed and recommendations. The Department must review the report and include responses to the recommended actions. The Department must:
- Provide MAC members with final review of the report.
- Ensure the annual report of the MAC includes a section describing the activities, topics discussed and recommendations of the BAC, as well as the State's responses to the recommendations.
- Post the report to the Department's website. The first MAC annual report must be finalized by July 9, 2026. After the report is finalized, it must be posted within 30 days.

ARTICLE IX

CONFLICT OF INTEREST

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

ARTICLE X

REIMBURSEMENT

Travel expenses incurred for official committee business shall be reimbursed to MAC 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 MAC 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 XI

AMENDMENTS TO BYLAWS

The MAC bylaws, including revisions or amendments, must be approved by a majority vote of the MAC members, approved by the Chair of the MAC 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 MAC and Deputy Secretary of Medicaid and discussed by the MAC 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.