

## Medicaid Community Member Engagement Landscape Assessment Guide

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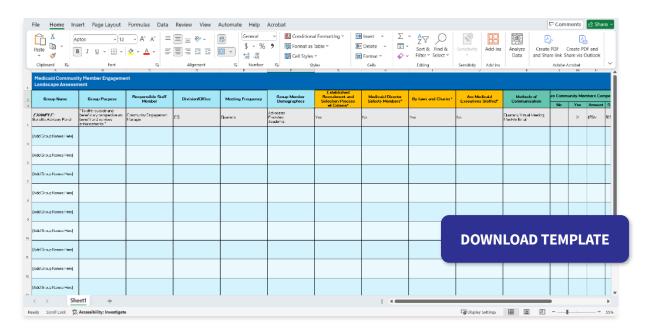
n increasing number of state Medicaid agencies are seeking to partner directly with Medicaid members through organized forums like advisory boards, councils, and committees to inform policy development and program implementation. Members' experiences and perspectives can offer important insight, build trust between health care organizations and communities, and ultimately, make care more effective.

State-level efforts in community member and family engagement have been steadily growing in recent years. In 2024, the Centers for Medicare & Medicaid Services (CMS) <u>issued a rule</u> requiring states to establish or strengthen Beneficiary Advisory Councils (BACs) and to reconfigure existing Medical Care Advisory Committees (MCACs) as Medicaid Advisory Committees (MACs) in order to ensure Medicaid member experience and input are integrated into the program and policy decision-making processes.

This guide is designed to help state Medicaid agencies systematically document existing efforts to engage community members through mechanisms such as advisory boards and committees, patients' groups, and other health-related organizations. The goal is to understand the existing landscape to design or strengthen BAC, or other member engagement advisory efforts, effectively. This guide, paired with the **Community Member Engagement Landscape Assessment**, can help state Medicaid agencies:

- 1. Identify existing, effective practices that promote inclusion and empowerment of Medicaid members;
- 2. Understand the needs, preferences, and challenges of different communities served by Medicaid; and
- 3. Inform the development of BAC implementation standard operating procedure.

The guide was developed to assist states participating in the Center for Health Care Strategies' <u>Building</u> State Capacity for Community-Informed Policymaking Learning and Action Series.



## **Landscape Assessment Process**

### **STEP 1: Create a List of Medicaid Member Advisory Mechanisms**

Enter groups identified from this section in the spreadsheet (Columns A - F)

#### 1. Identify Existing Advisory Mechanisms:

- Research and compile a list of existing Medicaid advisory mechanisms active in your state
  and at the federal level (i.e. MCACs, groups focused on specific health conditions or
  disabilities, and other member/beneficiary groups).
- Document details such as mechanism names, purposes (sourced from mission statements or charters), membership compositions, meeting frequencies, and internal organizers/owners.

#### 2. Categorize Mechanisms:

• Group advisory mechanisms based on their focus areas (e.g., policy, clinical, member advocacy).

#### **STEP 2: Formulate Criteria to Assess**

Enter information in the yellow cells in the spreadsheet (Columns G – J)

Enter additional information and notes in the spreadsheet (Columns K – Q)

#### 1. Develop Assessment Criteria:

- **Compliance with BAC Requirements**: Identify in what areas the mechanism meets the Beneficiary Advisory Committee (BAC) requirements, focusing on member support, engagement, and representation.
- **Relevance**: How relevant is the mechanism's focus to current Medicaid priorities?
- Effectiveness: How effective has the mechanism been in influencing Medicaid policy and practice?
- **Inclusivity**: Does the mechanism include diverse stakeholder representation, especially from beneficiaries?

# STEP 3: Gather Additional Information on Existing Community Engagement Efforts

#### 1. Engage:

- Schedule meetings with individuals with direct experience with or insights into the advisory mechanisms (e.g. colleagues, former or current members, facilitators).
- Gather surveys collected from mechanism participants that would document their perceptions of mechanism value.
- Discuss the nuances of each mechanism's operations, successes, challenges, and the above criteria.

#### 2. Capture Insights:

 Document key points from discussions to ensure a comprehensive understanding of each mechanism's impact and areas for improvement.

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#### STEP 4: Collect Collateral Documentation on Best Practices

#### 1. Gather Documentation:

- Collect reports, case studies, and other documentation on best practices in advisory mechanism operations and governance.
- Focus on materials that highlight successful engagement strategies, effective governance structures, and impactful policy recommendations.
- Best practice: keep an electronic file repository for future reference.

## **Additional/Optional Steps**

- 1. Perform a Strengths, Weaknesses, Opportunities, and Solutions (SWOS) Analysis using all information gathered from steps 1-4.
  - **Strengths**: Identify the strengths of each advisory mechanism, such as strong leadership, effective stakeholder engagement, compliance with BAC requirements, and successful policy influence.
  - Weaknesses: Identify weaknesses, such as lack of diversity, limited impact, or operational
    inefficiencies.
  - **Opportunities**: Identify opportunities for improvement, such as expanding membership diversity, enhancing engagement strategies, or leveraging technology for better communication.
  - **Solutions**: Propose solutions to address identified weaknesses and capitalize on opportunities.
  - Document Findings: Create a detailed report summarizing the findings of the SWOS analysis, including actionable recommendations to be incorporated into BAC Planning.

#### 2. Engage Stakeholders:

• Speak with a wide range of stakeholders, including internal staff, members, health care providers, and community organizations, from the beginning of the assessment process. This ensures diverse perspectives and buy-in.

#### 3. Observe:

 Observe advisory meetings and other related activities firsthand. This provides a deeper understanding of the mechanism's dynamics and effectiveness.

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#### **ABOUT THE CENTER FOR HEALTH CARE STRATEGIES**

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