

# MaineCare Advisory Committee (MAC)

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PRESENTED BY KATHY KILRAIN DEL RIO, MAC CHAIR

JANUARY 16, 2025

# Federal Statute

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- Every state has an Advisory Committee
- Federal Statute (Section 1902(a)(22) of the Social Security Act)
- Policy for the Committee is set forth in Section 431.12, Title 42, (Chapter IV) of the Code of Federal Regulations

# Maine Rules

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- Chapter 1 of the MaineCare Benefits Manual
- Section 1.25

# Purpose

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The MaineCare Advisory Committee shall advise MaineCare Services and the Office for Family Independence of the Department of Health and Human Services on MaineCare health and medical care services. The MaineCare Advisory Committee shall be given adequate opportunity for meaningful participation in policy development and program administration, including furthering the participation of beneficiary members in the MaineCare program. The advice of the Committee is not binding upon the Department.

# Membership

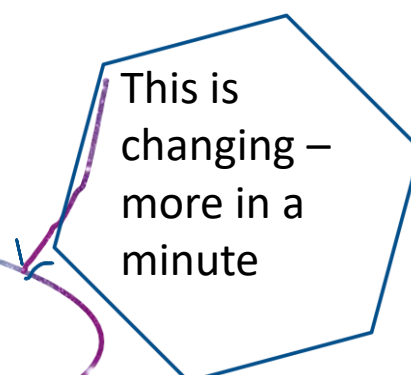
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The Director of MaineCare Services shall appoint members of the Committee. There shall be no fewer than fifteen (15) and no more than thirty (30) members on the Committee. The Committee shall include as members:

A. Board-certified physicians and other representatives of the health professions who are familiar with the medical needs of low-income population groups and with the resources available and required for their care.

B. Members of consumers' and consumer advocacy groups, including at least two (2) Medicaid beneficiaries, and consumer organizations, such as labor unions, cooperatives, consumer-sponsored prepaid group practice plans, and others.

C. The Director of the Office for Family Independence and/or the State's public health department.



This is changing – more in a minute

# Membership

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**Jessica Drenning**, Maine DHHS, OFI

**Jamie Bourque**, Maine CDC

**Mariam Beshir**, MaineCare Member Rep

**Nilsa Ayanle**, MaineCare Member Rep

**Norma Desjardins**, St Apollonia Dental Clinic

**Kathryn Brandt**, University of New England

**Adam Bloom-Paicopolos**, Alliance for Addiction and Mental Health Services

**Cathy Dionne**, Autism Society of Maine

**Becca Matusovich**, Children's Oral Health Network

**Vickie McCarty**, Consumer Council System

**Rachel Collamore**, Consumers for Affordable Healthcare

**Sara Squires**, Disability Rights Maine

**Gia Drew**, EqualityMaine

**Susan White**, Home Care & Hospice Alliance

**Cathy Hamilton**, Home Medical Equipment and Services Association

**Leo Delicata**, Legal Services for the Elderly

**Sarah Lewis**, Maine Access Immigrant Network

**Laura Cordes**, Maine Association for Community Service Providers  
Laura Cordes

**Rachel Dyer**, Maine Developmental Disability Council  
Rachel Dyer

**Kathy Kilrain del Rio**, Maine Equal Justice

**David Winslow**, Maine Hospital Association

**Anne Sedlack**, Maine Medical Association

**Bobby Martin**, Maine Primary Care Association

**Candy Henderly**, Penobscot Nation

**Theresa Cochran**, Wabanaki Public Health & Wellness

# Membership

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- Chair: Kathy Kilrain del Rio, Maine Equal Justice
- Vice Chair: Currently recruiting a new Vice Chair

MAC members currently serve 3-year terms; appointed by the Director of the Office of MaineCare Services; may serve additional terms following their initial appointment to the Committee

Current terms are January 2023 – December 2025

New members can be appointed on a rolling basis if a vacancy occurs

# Staff

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- A DHHS staff person is assigned to provide support to the MAC
- Other staff from DHHS attend MAC meetings to share information and hear concerns from members
- Notes and meeting materials are posted online at <https://www.maine.gov/dhhs/oms/about-us/advisory-groups>



# Meetings

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- First Tuesday of every other month from 10:00 AM – 12:00 PM
- Currently January, March, May, July, September, November
- Open to the public
- Since April 2020 meetings are held on Zoom

# Meetings

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- Regular Review of Policy Developments

At each regularly scheduled meeting, the Committee shall be provided with a list of all policy issues related to MaineCare that are currently under consideration by the Office for Family Independence or MaineCare Services. In addition, it shall list the subject matter of all currently proposed rules and issues scheduled for rulemaking within the next month, and the stage of those proposals. At each scheduled meeting, members of the Committee shall be given the opportunity to discuss any issue on the list or set any such issue aside for further discussion at a subsequent meeting.

# Meetings

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## Some Recent Agenda Items:

- Unwinding the Continuous Enrollment Provision
- Non-Emergency Transportation
- Rate System Updates
- Outreach Efforts
- Updates for the MAC related federal rule (the Access Rule) that made significant changes for MACs

# Subcommittees

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- May be formed anytime
- Must be chaired by a MAC member
- May include people who are not MAC members
- Share updates/concerns at MAC meetings as needed

# Current Subcommittees

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- Rates System (chaired by Laura Cordes)
- Dental (chaired by Kathy Kilrain del Rio)
- Provider Engagement (recruiting a new chair)

## Subcommittees Can Have Statutory Roles

### ➤ Dental – LD 221 in the 130<sup>th</sup>

**Sec. CCC-3. Benefit development process.** In developing the adult dental coverage required pursuant to the Maine Revised Statutes, Title 22, section 3174-F, subsection 1, the Department of Health and Human Services shall consider and consult with the dental subcommittee of the MaineCare Advisory Committee to ensure inclusion of the following:

1. Dental procedures and services that are aligned with evidence-based care, are medically necessary to maintain good oral and overall health and are appropriate to be included in an adult dental benefit under the MaineCare program;
2. Strategies to improve oral health education within the MaineCare program; and
3. Metrics to measure outcomes of the expansion of dental services to adults 21 years of age and over, including measures of provider participation, the use of those services by adults over 21 years of age and over and oral health outcomes for adults 21 years of age and over, in the aggregate and, in order to identify and address potential disparities in access to and outcomes of such services, by race, ethnicity and geography.

## Subcommittees Can Have Statutory Roles

### ➤ Rates System – LD 1867 in the 130<sup>th</sup>

6. MaineCare Advisory Committee. The MaineCare Advisory Committee, required 42 Code of Federal Regulations, Section 431.12 and further described in department rules, and referred to in this subsection as "the committee," shall participate in the department's rate-setting system in accordance with this subsection.

A. The committee must include a permanent rate system subcommittee that allows broad participation by the full spectrum of types of MaineCare providers. Participation in the rate system subcommittee may not be limited by number or type of stakeholder in order to allow for participation by any stakeholder affected by MaineCare reimbursement policy and interested in participating in the work of the subcommittee.

B. At each meeting of the committee or rate system subcommittee, if requested by the chair of the committee or rate system subcommittee, the department shall provide updates on the department's planned and completed activities under this section for discussion and advisement, including, but not limited to, the following:

- (1) Schedule and status of rate determination, planned and in progress, by MaineCare section of policy;
- (2) Status of and plans for comprehensive benchmarking studies; and
- (3) Contemplated rulemaking to establish rate methodology resulting from rate determination processes.

C. The rate system subcommittee may formulate and present recommendations to the committee pertaining to the department's activities under this section.

# Powers

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- Committee Action
- Public Statements by Committee Members
- Any testimony must clarify the Committee's role as advisory to the Department



# Exciting Changes

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## Ensuring Access to Medicaid Services Final Rule (CMS-2442-F)

Fact Sheet: <https://www.cms.gov/newsroom/fact-sheets/ensuring-access-medicaid-services-final-rule-cms-2442-f>

MaineCare and the MAC are actively working to comply with the new rule, which has staged implementation requirements between now and July 1, 2026.

# New Requirements

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- Expands the scope of states' Medicaid Advisory Committees to advise states on an expanded range of issues.
- Requires states to establish a **Beneficiary Advisory Council (BAC)** comprised of Medicaid beneficiaries, their families, and/or caregivers.
- Establishes minimum requirements for MAC membership, including a requirement that 25% of the MAC members will be drawn from the BAC.
- Requires states to make information about the MAC and BAC activities publicly available including bylaws, meeting schedules, agendas, minutes, and membership lists.
- Requires states to make at least two MAC meetings per year open to the public. These meetings must include a public comment period.
- Requires states to provide staff to support the planning and execution of the MAC and BAC activities.
- Requires states to create and publicly post an annual report summarizing MAC and BAC activities.

# Questions?

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MAC Page on the DHHS Website:

<https://www.maine.gov/dhhs/oms/about-us/advisory-groups>

Kathy Kilrain del Rio, MAC Chair

[kkilraindelrio@mejp.org](mailto:kkilraindelrio@mejp.org)