

**Amended and Restated
Bylaws
Of the
Medical Care Advisory Committee
Nevada State Division of Health Care Financing and Policy**

ARTICLE I

DEFINITIONS

- A. “Administrator” shall mean the State’s Administrator of the DHCFP.
- B. “Committee” is the Medical Care Advisory Committee.
- C. “DHCFP” shall mean the Division of Health Care Financing and Policy, a division of the DHHS.
- D. “DHHS” shall mean the Department of Health and Human Services of the State of Nevada.
- E. “Director” shall mean the State’s Director of DHHS.
- F. “Exhibit” shall mean a document to be presented to the MCAC whereby the MCAC is apprised of proposed changes in policy, regulation or the State Plan. An Exhibit may require and action/vote by the Committee.
- G. “MCAC” shall mean the Medical Care Advisory Committee.
- H. “MCAC Coordinator” shall mean the DHCFP staff person assigned to coordinate the MCAC, act as Secretary and provide staff assistance to the MCAC and its subcommittees.
- I. “Medicaid” shall mean the Medicaid program that is administered by the DHCFP.
- J. “Quorum” shall have the meaning stated in Nevada Revised Statutes (NRS) § 241.015 (4) as a simple majority of the constituent membership of the public body or another proportion established by law.
- K. “State Plan” shall mean the federally required plan adopted by the DHHS and the DHCFP to administer the Medicaid program. The State Plans under Title XIX and XXI of the Social Security Act (SSA) constitutes the contract under which the Medicaid program operated, and federal financial participation is secured.

ARTICLE II

FORMATION AND COMPOSITION

Section I. Creation

The MCAC is created within the DHCFP by federal regulations, specifically, 42 CFR § 431.12, § 1902(a)(22) of the SSA, and by NRS §§ 422.151 through 422.155, inclusive.

Section II. Number of members

The MCAC shall be comprised of nine members. In addition, the MCAC will have the power granted herein to form subcommittees, each with three appointed members that specialize in a particular interdisciplinary medical practice. Membership on the MCAC and subcommittees will be limited to persons who are contracted Medicaid service providers, except in cases in which the Director determines that a professional not enrolled in the program provides benefit to the program. Such an exception will be described in the appointment letter.

Section III. Appointment

The State Health Officer shall serve as an ex officio ninth member of the MCAC. The Director shall appoint the remaining eight members of the MCAC and any members of subcommittees. The eight members of the MCAC, including members of any other subcommittees formed pursuant hereto, shall service strictly at the pleasure of the Director.

Section IV. Conflict of Interest

Conflicts of interest must be declared by members prior to discussion of any matter that would provide direct financial benefit for that member, or otherwise have the appearance of a conflict of interest. When funding recommendations or other decisions are made regarding an organization with which the member has an affiliation, the member shall state their intention to abstain from making specific motions or casting a vote, before participating in related discussion.

ARTICLE III

Membership, Officers and Assistance

Section I. Qualifications for Membership in the MCAC and Subcommittees

- A. The eight appointed members of the MCAC, with the exception of the ex officio member, shall consist of the following individuals:
 - 1. 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.

2. Members of consumers' groups, including Medicaid beneficiaries, and consumer organizations such as labor unions, cooperatives, consumer-sponsored prepaid group practice plans, and others; and
 3. The director of the public welfare department or the public health department, whichever does not head the Medicaid agency.
- B. The MCAC may request a subcommittee on a topic area. Any subcommittee will include at least three members. One member with expertise in the topic area of health services to be discussed. One member from the MCAC.

Section II. Term

The Director shall appoint each member of both the MCAC and subcommittee(s) to a term of two years beginning on July 1st of a given year. Terms are renewable once, for up to four total years. The Division will seek interest from enrolled providers and other groups, as necessary to fill vacancies. Nominations of new potential members of the MCAC will be submitted to the Director by the MCAC Coordinator within the Division of Health Care Financing and Policy as vacancies occur on the MCAC. The terms of the existing MCAC member shall begin at the adoption of these Bylaws.

Each member is expected to participate in a majority of meetings and activities held in a single calendar year. The Director may request a member resign due to absences.

E. Section III. Officers

Before the first meeting of the calendar year, the Director shall appoint a Chair and a Vice-Chairperson. The Administrator or their designee shall serve as the MCAC Coordinator and the Secretary for the MCAC. The Chairperson and Vice-Chairperson will serve a term of two years and may be renewed once. The Director shall appoint a replacement in the event a replacement is needed for the Chair and Vice-Chairperson positions.

The Chair shall preside at all meetings and generally supervise the affairs of the MCAC or designate a representative to do so. The Vice-Chairperson shall assist and assume the duties of the Chair in case of his absence.

Section IV. Staff Assistance

The Division of Health Care Financing and Policy must provide the MCAC staff assistance and independent technical assistance as needed to enable it to accomplish its functions and duties.

ARTICLE IV

Meetings

Section I. Frequency and Location

The members of the MCAC shall meet at such times and places as the MCAC, the chairperson of the MCAC or the Administrator deems necessary. However, meeting(s) must be held at least once each calendar year.

Section II. Agenda

The MCAC Coordinator shall be responsible for drafting (or causing to be drafted) an agenda for each MCAC meeting and such agenda shall be distributed to each member no later than 5 business days prior to each meeting. The MCAC and the subcommittee(s) will conduct their meetings pursuant to the Open Meeting Law set forth in NRS Chapter 214.

Each appointed member of the MCAC is encouraged to provide at least three agenda items for consideration on an annual calendar basis (Jan-Dec) to the Secretary for the MCAC which is provided through the Division of Health Care Financing and Policy. The MCAC Chair will assist the Administrator in the creation of the agenda.

Section III. Minutes

Pursuant to NRS § 241.035, the MCAC and the subcommittee(s) shall keep, retain, and make available for public inspection, written minutes of each meeting. The MCAC shall record each meeting. Minutes or recordings must be made available for inspection by the public within 30 working days after each meeting. Minutes are deemed to have permanent value and must be retained by the DHCFP for at least five years. Thereafter, minutes may be transferred from archival preservation in accordance with NRS § 239.080 through 239.125, inclusive.

Section IV. Voting

Each of the members constituting a quorum of the MCAC shall vote to approve or disapprove each action item on the agenda.

ARTICLE V

Functions and duties

Section I. Functions

The purpose of the MCAC is:

- A. To participate in policy development and program administration, including furthering the participation of beneficiary members in the agency program(s).

- B. To advise the Administrator regarding the provision of services for the health and medical care of Medicaid recipients.
- C. To increase the participation of Medicaid recipients in the development of policy and administration of programs by the DHCFP.
- D. To review managed care health plan marketing materials and serve in a consultative capacity to Medicaid pursuant to Section 4707 (a) of the Balanced Budget Act of 1997.
- E. The Chairperson and Vice-Chairperson shall, at least on a yearly calendar basis, will prepare a letter to the Administrator of the Division of Health Care Financing and Policy relating to recommendations to improve Medicaid or to increase access to health insurance for vulnerable individuals. The recommendations included in the annual letter shall be approved through a vote during a quarterly meeting before the July 1 due date each year. The MCAC Coordinator within the Division of Health Care Financing and Policy shall provide assistance in the completion of the annual letter based on MCAC feedback.
- F. This report is due on or before July 1 of each year to the Administrator of the Division of Health Care Financing and Policy

Section II. Exhibits

Members of the MCAC shall review changes in policy, regulations and the administration of Medicaid's health care programs and shall advise the DHCFP thereon by providing recommendations regarding such changes. Proposals may be presented as Exhibit(s) having information, including but not limited to details regarding the present policy, future policy goals, and possible costs or savings related to any potential policy changes. Exhibits shall ideally be provided to each member via electronic mail 5 business days prior to each MCAC meeting.

Section III. Briefings

Medicaid staff will be available to conduct oral presentations on pending issues of significance to Medicaid. The MCAC may request written briefings. Exhibits shall be provided to MCAC members 5 business days in advance of each scheduled meeting.

ARTICLE VI

Compensation

Section I. Compensation

Members of the MCAC, and any subcommittee shall serve without compensation.

Section II. Per Diem and Other Expenses

While engaged in the business of the MCAC or any subcommittee, each member is entitled to receive the per diem allowance and travel expenses generally provided for state officers and employees.

ARTICLE VII

Adoption and Amendments to the Bylaws

The nine members of the MCAC recognize and acknowledge that these Amended and Restated Bylaws supersede, in their entirety, previously existing Bylaws dated November 3, 1994, as amended. Proposed amendments to these Bylaws must be submitted, in writing, to the MCAC members and the Director 15 days in advance of a scheduled meeting in order to be acted upon. A quorum of the members present shall be required to adopt a proposed amendment, and such amendments must be approved by the Director to become effective.