



Beneficiary Advisory Council (BAC)

August 13, 2026

4:00-6:00 pm

Hybrid – Sanders Building, Room 306, Helena, MT; and Zoom

RECORDING NOTICE

This meeting was not recorded. Use of AI note-taking, transcription, or summarization tools is discouraged until formal state policy is established. The official record is maintained by the BAC Secretary and state support staff in the form of formal minutes and supplemental documentation, posted on the Beneficiary Advisory Council webpage.

ATTENDANCE

Members Present	Amy J. Caliendo; Armanda Garcia; Chelsey Naseem Duenow; Colin Corbett; Devin Meineke; Diana Hawbaker-Tavary; Elizabeth Cummings; Isaac Baldry; Jarrett Allan Clark (Jerry); Kaitlin Wilkinson; Kay Lynn Eadie; Theron LaFountain
Not in Attendance	Laurie Thom; Sarah Riddle
Excused	Shannon Koenig
Public Members	Eric Arzubi (departed 4:45 p.m.)
DPHHS Staff	Savannah Olsen; Jessie Counts; Rebecca de Camara

CALL TO ORDER AND WELCOME

Chairperson Theron LaFountain called the meeting to order at 4:00 p.m. The Chair reviewed the agenda, meeting goals, and the Council's shared values: all voices are heard; respect is judgment-free; assume good intentions; and have compassion for ourselves and one another. Housekeeping items, accessibility reminders, and the "parking lot" procedure for off-topic items were reviewed. A round of introductions followed.

COUNCIL ORIENTATION – HOW WE WILL WORK TOGETHER

The Department provided a brief overview of the Beneficiary Advisory Council (BAC), including its purpose, origin, and role in advising the Medicaid Advisory Committee (MAC) and DPHHS. Chairperson LaFountain reviewed BAC leadership positions and current officeholders (Chair, Vice-Chair, Secretary, Historian/Continuity, Equity & Access).



Discussion followed on bylaws and meeting cadence. Members requested more frequent meetings, particularly in advance of major Department decisions. Members additionally requested opportunities for interaction between meetings, including email, chat, and smaller workgroup meetings.

PRIORITY 1 – CHANGES TO MEDICAID (HR1 AND COMMUNITY ENGAGEMENT)

DPHHS leadership provided a plain-language briefing on HR1 and the resulting Medicaid changes, followed by member questions and discussion. The Department clarified that all Medicaid members received a letter about upcoming changes, but the changes apply only to Medicaid expansion members. Additional information is available on the DPHHS Medicaid Changes webpage, and links to the Medicaid Changes webpage, Office of Public Assistance (OPA), help hotline, and application website were shared in the chat. DPHHS also described a partnership with the Department of Labor and Industry (DLI) focused on job readiness and information sharing.

Members raised concerns about confusing beneficiary letters and requested clearer guidance on who to call, what was mailed, and what community-level support exists. On disability determinations, DPHHS clarified that Social Security Administration (SSA) determinations are separate from Medicaid and that certain DPHHS programs maintain their own disability processes; because SNAP and TANF include work requirements, individuals on Medicaid expansion who are compliant with SNAP or TANF are considered compliant with the Community Engagement (CE) requirement.

Regarding the provider portal, DPHHS indicated that traditional versus expansion status will not be displayed due to potential HIPAA considerations, and that the State is working with CMS to determine what information can be shared with providers. A provider-facing demonstration of the beneficiary portal view is under development. Native American self-attestation was confirmed as a one-time step not required at each renewal. On marketplace applications, DPHHS explained that marketplace eligibility findings are forwarded to the State for additional verification beyond the financial criteria used by the marketplace.

Members identified Medicaid communication as a persistent problem, contrasting it with SSI's direct beneficiary contact number. DPHHS explained that call volume prevents assigning a specific point of contact per member, but noted that wait times are declining and that dedicated teams are being formed for specific populations. The Council also raised whether the medically frail CE exclusion could inadvertently limit supports for individuals who cannot work but who wish to work with supports. DPHHS acknowledged that this perspective had not previously been raised, confirmed no intent to change traditional Medicaid services or processes, and committed to bringing the concern back to the policy team.



PRIORITY 2 – CLEAR COMMUNICATION

Members discussed points at which communication breaks down for beneficiaries, drawing on lived experience. The Council emphasized the need for general group consensus before formal action is taken, and requested that pre-questions be shared with leadership and BAC members ahead of meetings so all parties can prepare. Members also described experiences of being routed among offices while attempting to obtain answers from DPHHS, underscoring the need for easily accessible, plain-language information.

The Council raised concern about ensuring the State takes group recommendations seriously. DPHHS staff explained the annual report process: the group tracks its recommendations, and the State must formally respond to each with the action taken or an explanation of how it was considered in decisions. The group agreed to submit meeting topics in advance so DPHHS staff can coordinate leadership attendance; when issues arise organically between meetings, DPHHS staff will serve as the point of contact to route information to leadership.

PRIORITY 3 – GROUP FUNCTIONING

BYLAWS, MAC COORDINATION, AND CONFLICT OF INTEREST

DPHHS staff will send revised bylaws reflecting group recommendations, and adoption will be voted on via email; the email-vote approach was supported by the group. A request was made to remove certain member-specific recommendations for bylaws sections 1.02 and 2.01 from the revision set.

On MAC coordination, members have been selected but are pending DPHHS Leadership and Governor's Office approval, and no MAC meeting is currently scheduled. The Council requested that BAC meetings be scheduled both before and after MAC meetings to support alignment.

Conflict-of-interest statements were provided by members with relevant affiliations. An open question was raised regarding whether workgroup and leadership meetings must be open to the public; DPHHS staff will confirm with legal counsel.

NEXT MEETING

Date: Thursday, September 10, 2026

Time: 4:00-6:00 pm

Location: Hybrid (111 N. Sanders, Helena MT 59601 & <https://mt.gov.zoom.us/meeting/register/6nCZudt9TgWswSdHd-bJyw>)