Montana Beneficiary Advisory Council

August 13, 2026
4:00-6:00 pm
Hybrid: Sanders Building room 306 (**please call to RSVP if attending in person: 406-444-8072**) and Zoom registration: https://mt-gov.zoom.us/meeting/register/F8_R2iHcRIyPoZgO7o_6iQ

STANDING REMINDER

FIRST-YEAR PRIORITIES

- Changes to Medicaid — HR1 and community-engagement requirements (rules asking some enrollees to show work, school, volunteering, etc., or an exemption)
- Clear communication — Medicaid vs. Medicare, and information on services
- Group functioning — how we work together well and stay effective
- *Alternative/watch area: Rural & home- and community-based services (HCBS) access*

WELCOME AND INTRODUCTIONS 4:00-4:15

- Welcome from the Chairperson; review agenda and goals for the meeting
- Round of introductions: name, community you reside in, and (optional) one thing you'd like the group to know about you
- Review our shared values as a group:
    - All voices need to be heard;
    - Respect (judgment-free, everyone has something valuable to add, listen and consider, take turns);
    - Always assume good intentions;
    - Have compassion for ourselves and one another
- Housekeeping: raise-hand signal for time checks; “parking lot” for items that come up mid-meeting; accessibility and call-in reminders

HOW WE'LL WORK TOGETHER 4:15-4:35

- Brief overview of the Council's purpose and its role advising the MAC and DPHHS, and who from the Council is serving on the MAC
- Leadership roles and who serves in them (Chair, Vice-Chair, Secretary, Historian/Continuity, Equity & Access)

- How we make decisions: work toward consensus as a whole group; use a poll or vote only if consensus isn't reached; this process is used for formal recommendations to the state/legislature
- Meeting cadence going forward: the Council is required to meet at least quarterly. Discuss what rhythm the group wants — for example, whether the full council meets quarterly with the leadership team meeting monthly, or another cadence. **(Decision for the group.)**

PRIORITY 1 — CHANGES TO MEDICAID 4:35-5:00

- Level-set: what HR1 and community-engagement requirements are, in plain terms — "community engagement" (sometimes called "work requirements") refers to rules that ask certain Medicaid enrollees to show they are working, volunteering, in school, etc., or exempt — and who these changes may affect
- Discussion: what beneficiaries need to understand these changes; what's confusing or worrying
- Desired outcome: identify 1–2 concrete things the Council wants to learn more about or act on first
    - DPHHS leadership will join this portion to give a short briefing on HR1 and then take the group's questions

PRIORITY 2 — CLEAR COMMUNICATION 5:00-5:20

- Discussion: where communication breaks down — Medicaid vs. Medicare confusion, hard-to-find service information, confusing or duplicate mailings
- Gather real examples from members' lived experience
- Desired outcome: name the top communication problem the group wants to tackle first

PRIORITY 3 — GROUP FUNCTIONING 5:20-5:35

- How the group wants to stay connected and effective between meetings
- Open logistics decisions:
    - Recording / AI notetaking of meetings — DPHHS legal guidance on this is firm. Review the approach and what it means for the group
- **Bylaws: the group will review the compiled feedback and vote on the bylaws at this meeting**

WRAP-UP & NEXT STEPS 5:35-6:00

- Review the "parking lot" and capture anything unresolved
- Confirm key decisions and action items, and who owns each
- Confirm next meeting date and what members should review beforehand
- Closing reflections and any support needs