# BYLAWS OF THE MEDI-CAL CHILDREN'S HEALTH ADVISORY PANEL



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#### **OVERVIEW: HISTORY AND PURPOSE**

The Medi-Cal Children's Health Advisory Panel (MCHAP) is a statutory advisory body established by DHCS in response to <u>Assembly Bill 357</u> (Chapter 442, Statutes of 2014) and restructured under <u>Senate Bill 220</u> (Chapter 280, Statutes of 2017). The panel began formal operation in January 2015.

The purpose of MCHAP is to advise DHCS on policy and operational issues affecting children enrolled in Medi-Cal. The panel brings together a diverse group of stakeholders, including health care professionals, advocates, and family representatives, to inform and improve the delivery of children's health services in California.

#### **MEMBERSHIP**

#### **Composition and Roles**

As required by SB 220, MCHAP is made up of 15 members appointed by DHCS. Each seat is designated for a specific type of representative to ensure the panel reflects a broad range of professional expertise, community perspectives, and lived experiences. The panel shall include:

- 1. A licensed, practicing dentist
- 2. A physician and surgeon who is board-certified in family practice medicine.
- 3. A physician and surgeon who is board-certified in pediatrics.
- 4. A representative from a licensed nonprofit primary care clinic.
- 5. A representative from the mental health provider community.
- 6. A representative from the substance abuse provider community.
- 7. A representative from the county public health provider community.
- 8. A representative from a licensed hospital on the disproportionate share hospital list maintained by DHCS.
- 9. An individual who is either:
  - a. A current or former foster youth,
  - b. An attorney, social worker, probation officer, or court-appointed special advocate who currently represents on or more foster youth,
  - c. A foster care service provider, or
  - d. A child welfare advocate
- 10. Three members who are either:
  - a. A Medi-Cal enrollee who has received benefits or services related to pregnancy (including the Medi-Cal Access Program) or

- b. A parent, foster parent, relative, caregiver, or legal guardian of a Medi-Cal enrollee who is 21 years of age or younger.
- 11. A representative from the health plan community.
- 12. A representative from the business community.
- 13. A representative from the education community.

#### **Terms of Service**

Under SB 220, members appointed on or after January 1, 2018, serve a 3-year term. A term begins on the date specified in the member's appointment letter from DHCS.

When a member's term ends, one of two things can happen:

- 1. Reappointment Reappointment is permitted, but it is not automatic. DHCS may reappoint the member to a new 3-year term, which begins with fresh start and end dates.
- 2. Holdover Service If no new appointment is made when the term ends, the member may continue serving until DHCS either reappoints them or appoints a successor. This allows the panel to maintain full membership and quorum.

#### **Vacancies and Resignations**

Under SB 220, a vacancy occurs when a member resigns, is removed, or their seat otherwise becomes unfilled. A vacancy does not occur solely because a member no longer meets the qualifications for which they were appointed.

Members may resign at any time by submitting a written notice to DHCS. Once the resignation is accepted, the member's service ends on the effective date stated in the resignation or as determined by DHCS. Members who resign are not required to serve until a replacement is appointed.

When a vacancy occurs, whether by resignation, removal, or another reason, the Chairperson must notify DHCS so the appointment process can begin.

If a member is appointed to fill a vacancy caused by any reason other than expiration of the predecessor member's term, SB 220 specifies that they serve only the remainder of the predecessor's term, rather than beginning a new 3-year term.

#### **Removal of Members**

SB 220 authorizes DHCS, in consultation with the Chair, to remove a member before the end of their term if determined to be necessary.

The Chair may also recommend removal of a member for reasons including, but not limited to:

- Failure to attend two consecutive panel meetings without prior notice.
- » Behavior that obstructs the function of the panel, such as repeated disruption, refusal to follow meeting procedures, or failure to participate in good faith.

If removal is recommended, the Chair will provide DHCS with the reason(s) in writing. DHCS will determine whether to proceed with removal and will notify the member in writing of its decision.

#### **Attendance and Participation**

Members are expected to attend all scheduled meetings and participate in discussions to fulfill the panel's advisory role. The panel's responsibilities include:

- Review meeting materials in advance to provide informed input.
- » Draw upon their professional expertise or personal experience, consistent with the seat they hold on the panel.
- Arrive on time, appear on camera, and remain for the full duration of the meeting.
- Engage in respectful and constructive dialogue with fellow members, DHCS staff, and members of the public.
- Meet at least quarterly, in accordance with SB 220, unless the Chair determines that a meeting is not necessary.

#### CHAIRPERSON ELECTION AND DUTIES

# **Chairperson Election**

As required by SB 220, MCHAP must have a Chairperson. The Chairperson shall be selected from among the MCHAP members by a majority vote, in accordance with the process outlined below:

- Prior to the meeting in which the election will be held, DHCS will notify all MCHAP members of the upcoming election and invite those interested in serving as Chairperson to submit a written statement of interest. Statements will be posted on the MCHAP page of the DHCS website in advance of the election.
- 2. At the MCHAP meeting, when the election takes place, each candidate will have 1-2 minutes to share their interest in serving as Chairperson.

- 3. Following candidate statements, members will vote, and the candidate receiving the majority of votes will be elected Chairperson.
- 4. If there is a tie vote, the final decision will be made by the DHCS Director.

### **Term Limits and Reappointments**

A member must be on the panel for one year before being eligible to run for Chairperson. The Chairperson is elected for a one-year term. A Chairperson may be reelected annually, but may not serve more than three consecutive one-year terms. After completing three consecutive years, the member shall step down from the Chair role for a minimum of one full calendar year before becoming eligible again to serve.

#### **Duties of a Chairperson**

The Chairperson is responsible for:

- 1. Leading all MCHAP meetings in an orderly manner, encourage participation from all members, and maintain a respectful, constructive environment.
- 2. Collaborating with DHCS staff to develop meeting agendas that reflect the panel's purpose and priorities.
- 3. Serving as the primary point of communication between the panel and DHCS staff.
- 4. Notifying DHCS promptly when a panel seat becomes vacant.

## **Chairperson Absence**

If the Chairperson is unable to attend a scheduled meeting, DHCS will work with the Chairperson to determine if the meeting should be rescheduled. If rescheduling is not feasible, the meeting will be cancelled. All members will be notified, and the cancellation will be posted on the MCHAP page of the DHCS website.

#### **MEETINGS**

#### **Meeting Frequency**

MCHAP shall meet at least quarterly, as set out in SB 220, unless the Chairperson determines that a meeting is not necessary. Additional meetings may be scheduled as needed.

#### **Agenda and Meeting Materials**

The agenda shall be posted on the MCHAP webpage at least 10 calendar days before the meeting, in compliance with the Bagley-Keene Open Meeting Act. Supporting

materials will be provided to members and made available to the public as soon as possible before the meeting.

### **Public Access and Participation**

Meetings shall be held at locations that are accessible to the public and panel members and will be conducted in a hybrid format. All meetings are open to the public, with time set aside for public comment. Written comments may be submitted before or after the meeting.

### **Teleconferencing and Remote Participation**

MCHAP members may participate remotely in accordance with the Bagley-Keene Open Meeting Act without disclosing their personal address. However, members must appear on camera during the meeting unless technologically impracticable. If a member does not appear on camera due to challenges with internet connectivity, the member must announce the reason for their nonappearance when they turn off their camera. Members must notify DHCS staff of their intent to participate remotely at least 24 hours in advance. This notice will be posted on the MCHAP webpage.

#### STAFF SUPPORT AND RESPONSIBILITIES

MCHAP shall have a staff liaison designated by the DHCS Office of Communications. The staff liaison shall coordinate with the appropriate parties to:

- 1. Plan and facilitate MCHAP meetings, including preparing agendas, posting public notices, and ensuring compliance with the Bagley-Keene Open Meeting Act.
- 2. Provide meeting minutes after each meeting.
- 3. Arrange for necessary travel reimbursement, in accordance with state travel policies.
- 4. In accordance with SB 220, provide a stipend of \$100 per meeting attended to members who are Medi-Cal enrollees or who are parent, foster parent, relative caregiver, or legal guardian of a Medi-Cal enrollee.
- 5. Maintain the MCHAP webpage with the panel's purpose and scope, current membership, meeting lists, agendas, materials, recommendations, and contact information.
- 6. Ensure meeting locations and participation options are accessible, and arrange for reasonable accommodations upon request.

# **QUORUM AND VOTING**

A quorum is required for MCHAP to conduct official business or take action.

- A quorum shall consist of a majority (8) of the appointed members currently serving on the panel.
- Vacant positions do not count toward the total number of appointed members.

Each member has one vote and must be present in person or remotely when voting. Proxy voting and absentee voting are not permitted.

#### **COMPLIANCE WITH BAGLEY-KEENE AND SB 220**

MCHAP shall comply fully with <u>SB 220</u> and the Bagley-Keene Open Meeting Act to ensure transparency, public access, and accountability.

- Meeting Notice and Agenda: DHCS will post the notice and agenda at least 10 calendar days before each meeting. The notice will include: the meeting date, time, location, and remote participation access; contact information to answer questions about the meeting; the MCHAP website address; and information on how persons with a disability may ask for accommodations. The agenda will describe each item of business that MCHAP will consider at the meeting. No action or discussion will occur on items not listed on the agenda. All other meeting materials will be posted on the MCHAP webpage as soon as they are available before the meeting.
- Meeting Format: MCHAP meetings may be conducted in a hybrid format, allowing both in-person and remote participation. At least one physical meeting location must be provided that is accessible to the public. At least one DHCS staff member must be physically present at the primary meeting location. Agendas must be posted at all teleconference locations and on the MCHAP webpage.
- Public Participation: Meetings will be open to the public, and a public comment period will be provided at the end of each meeting.
- » Accessibility: Meeting locations will be accessible to individuals with disabilities, and DHCS will provide reasonable accommodations upon request.
- Transparency and Public Information: MCHAP will maintain an accurate public record of each meeting by taking meeting minutes. In accordance with SB 220, DHCS will maintain a webpage that includes:

- o The purpose and scope of MCHAP
- o The current membership list
- o A list of past and upcoming meetings
- o Agendas and meeting materials
- $\circ$  Recommendations submitted to DHCS by MCHAP
- o DHCS responses to recommendations
- o Contact information for DHCS staff supporting MCHAP