

Medicaid Member Experience Council (MMEC)

Participant Guide

Welcome ambassadors! We are excited to have you join the Medicaid Member Experience Council (MMEC) for the next 3 years of work. This guide gives you some background about being in this council.

About the Participant Guide

This participant guide describes how the MMEC works together to advise the Medicaid Director to improve Medicaid for all members. This document explains how the MMEC works as a group and runs its meetings and business. The participant guide also serves as the Bylaws for the MMEC as required by federal law ([42 CFR 431.12\(f\)\(1\)](#)). With suggestions from any MMEC ambassador or the Medicaid Director, the MMEC may vote to change this guide at any time.

Why was the MMEC created?

The primary goal is to get Medicaid members connected with decision makers to tell us how we can do more of what's working, and fix what's not working.

All states have groups like the MMEC. The federal Centers for Medicare & Medicaid Services (CMS) required it in the 2024 Ensuring Access to Medicaid Services Final Rule ([CMS-2442-F](#)). Part of this rule required states to create a council of people who have personal experience with Medicaid.

So, the Wisconsin Department of Health Services (DHS) created the MMEC. MMEC ambassadors share their experiences and suggestions to help make Wisconsin Medicaid work better for all members.

How are the MMEC ambassadors chosen?

When there is an open spot on the MMEC, DHS will ask for applications and spread the word through email, our website, our partners, and social media. Members and caregivers with current or recent Medicaid experience can submit their application online, over email, on the phone, or through the mail. DHS staff review the applications and recommend candidates. The Medicaid director selects the ambassador(s).

More than 1 million Wisconsinites use Medicaid. Our goal is to reflect the variety of experiences of Wisconsin Medicaid members. As the group changes, we'll seek out diverse voices. The group of ambassadors might include representation from:

- Each Wisconsin region (northeastern, northern, southeastern, southern, and western regions)
- The county with the highest number of members (currently Milwaukee County)
- The county where the most residents are members (currently Menominee County)

- Tribal Nations
- Current members and caregivers
- Past members and caregivers (within the last two years)

What are the MMEC's goals?

The goals for the MMEC are to keep Wisconsin Medicaid focused on members and to make Wisconsin Medicaid the best it can be. The MMEC advises the Medicaid Director and the DHS team.

The council will talk about how Medicaid coverage and services are working, what isn't working, and how we can fix it. Ambassadors will work with the Medicaid director and staff. We will talk about things like Medicaid services, eligibility, and enrollment. We'll also talk about access to services, how members get information, and other issues affecting member health.

MMEC ambassadors are also part of the Medicaid Advisory Committee (MAC). The MAC and the MMEC have similar goals. The MAC also gives feedback and advice about how Medicaid is working to help improve the program. MAC members are mostly professionals who work with Medicaid members, but don't necessarily have recent personal experience using Medicaid.

Ambassador roles and responsibilities

Each ambassador is an expert because of their experience with Medicaid. Everyone will bring something different and unique. Here are some ways that every ambassador can contribute to the council:

- Share their experiences and suggestions and help create solutions to improve Medicaid.
- Attend quarterly MMEC meetings online or in person. These meetings are usually one or two hours long.
- Attend quarterly MAC meetings online or in person (find more information about MAC in the [Resources](#) section). These meetings are usually two or three hours.
- Take part in special projects during the year. The MMEC will choose these projects with help from DHS staff.
- Take part in the council for three years.
- Identify any conflicts of interest. If you or someone from your family could directly benefit from a decision we make, it's helpful to share this information. Find more information about conflicts of interest in the [Resources](#) section).
- Be committed to collaboration and respecting other viewpoints.

Length of service

When their term ends, MMEC ambassadors cannot immediately volunteer for another term.

Ambassadors can return to the MMEC after a break that is two years or longer. During their time away from the MMEC, ambassadors can join MMEC meetings as non-participating members of the public.

DHS may ask former MMEC ambassadors to support new ambassadors.

Ambassadors can leave the council at any time for any reason. For example, an ambassador may need to leave the council if they cannot attend at least six meetings every year. MMEC ambassadors should let DHS know if they need to end their term early. They must give DHS a written note that includes their last day on the MMEC. Also, DHS may end a MMEC ambassador's term with the council for any reason. DHS will share a written note with the ambassador's last day on the council.

If a MMEC ambassador loses their Medicaid coverage, they can continue to serve on the MMEC for the rest of their term. DHS values the experiences of all current and recent Medicaid members, including during transitions.

To ensure continuity, terms will be staggered so only one-third of the council will have terms that end during any given year.

Meetings

MMEC ambassadors will attend eight meetings each year. Meetings will be two or three hours long. Agendas will be shared ahead of time.

The MMEC will choose meeting days, times, and locations that allow the most attendance possible. The group will hold many meetings online, but some may be in person. All meetings will have a virtual and phone dial-in option. Ambassadors can bring a support person when needed.

MAC and MMEC meetings are open to the public. This means that members of the public can join the meeting to listen. MAC meetings also reserve time for members of the public to offer comments. If the MMEC decides to, they can also make time to invite public comments during MMEC meetings.

Meetings will not be recorded.

Meeting agenda

MMEC ambassadors will plan the agenda for each meeting in collaboration with the Medicaid director and DHS staff. These topics will generally relate to program operation and Medicaid member needs, such as:

- New or changing Medicaid services
- Quality of Medicaid services
- Access to Medicaid services
- Eligibility, enrollment, and renewal processes
- How Medicaid communicates with members
- How to make Medicaid more helpful for diverse cultures
- Using Medicaid when you speak languages other than English
- Problems in Medicaid operations or policies that negatively impact members, including small populations

Agendas will be posted ahead of time to:

- MMEC webpage: dhs.wi.gov/medicaid/mmec.htm
- MAC webpage: dhs.wi.gov/medicaid/advisory-committee.htm
- Public Meetings website: publicmeetings.wi.gov

Meeting schedule

MMEC

- February
- May
- August
- November

MAC

- March
- June
- September
- December

Meeting support

The MMEC is your group, and the DHS team is here to support you. DHS will provide support so each attendee feels welcomed and can fully participate, including:

- DHS will help with meeting logistics. We will help the ambassadors choose meeting dates, times, and locations.
- DHS will reschedule or cancel a meeting if fewer than half of the ambassadors can attend.
- DHS will help with meeting materials and will post the agenda before each meeting.
- DHS will take attendance and meeting notes and will share copies after each meeting.
- DHS will provide virtual meeting and phone dial-in logistics, as well as collaboration tools like surveys and whiteboards for brainstorming and decision making. Closed captioning is available for all virtual meetings.
- DHS will provide accommodations and translation as needed. Ambassadors should let DHS know what they need at least two weeks in advance so they can prepare the needed resources.
- DHS will pay back ambassadors for any costs they pay to attend meetings. For example, travel costs like gas and meals to get to and from an in-person meeting.
- DHS will help the group organize around making decisions. The goal is to make decisions everyone feels good about, in a way that everyone feels good about. That might mean voting on decisions, talking things through, or exploring options together.

Special projects

Each year, the MMEC will form special project groups to explore recommendations the MMEC makes and turn them into a reality. MMEC ambassadors will help lead these special project groups with support from the DHS team and community-based organizations.

The MMEC will choose these special projects. Some projects may be faster or easier to complete. We may have all the people and resources we need to make an improvement within a year. Other projects may be challenging, complicated, or take years to make progress. We may need Wisconsin's elected officials to make changes to laws, or we may need CMS review and approval. We may need more resources, effort, input, creativity or other answers to achieve our goal.

This flowchart shows how these groups form and work on Medicaid improvements throughout the year:



- **Fall:** The MMEC will brainstorm a few ideas for special projects for the next year. The MMEC will share these ideas with the MAC for feedback and additional ideas. Medicaid staff may also offer feedback on the ideas.
- **Winter:** The MMEC will identify their top projects for the coming year and discuss with the MAC.
- **Spring:** The MMEC will begin working with the special project groups. To include more member input, partner community-based organizations will help recruit additional Medicaid members and caregivers to each project. DHS' community-based organization partners will help recruit these participants. DHS will post these opportunities on their website and on other DHS channels. DHS staff will support these project groups to achieve their goal.
- **Summer:** The special project groups continue to work on their goal and meet to get feedback and discuss ideas and solutions. At the MMEC meetings, special project groups can talk with other MMEC ambassadors, share ideas, or ask DHS staff for assistance. The MMEC will start thinking about special projects for next year.
- **Fall:** Special project groups will share what they learned and any ideas to recommend to Medicaid. These findings will also go in the annual MAC/MMEC report. The MMEC will start to brainstorm special projects for next year.

Group agreements

We value every member's feedback and experience. To foster a welcoming and productive environment MMEC ambassadors will create group agreements for how we will work well together. The MMEC creates and agrees on these guidelines every time a new ambassador joins. As a group, we'll talk about these agreements by discussing things like:

- What would help you feel confident that we have common goals and trust each other?
- What would help you succeed/thrive on the MMEC?
- What should we avoid to ensure our success?
- When we are stuck, how should we move forward?

Resources

1. **[Medicaid Advisory Committee webpage](#)**: Learn about the MAC, see upcoming and past meetings, find meeting materials, and see a list of members. The MAC gives feedback and advice about Medicaid in Wisconsin.
2. **[Medicaid Member Experience Council webpage](#)**: Learn about and find updates about the council, including the council charter, meeting schedules and notes, special projects, and the annual report (available starting July 2026).
3. **Meeting expenses**: DHS will repay MMEC ambassadors for their expenses to attend meetings. This includes things like mileage and meals. Use this reimbursement form (dhs.wi.gov/library/collection/f-80190). Wisconsin law considers the MMEC an advisory board. This means DHS cannot pay ambassadors for their participation. (<https://docs.legis.wisconsin.gov/statutes/statutes/15/i/04/1/c>).
4. **Conflict of Interest**: MMEC members might be asked to make decisions where the outcome directly benefits them or their family. These can be clear and obvious benefits, or less direct. Anything that might influence your thinking about a decision the MMEC makes could be called a *Conflict of Interest*. Conflicts of Interest might make it hard to have an unbiased opinion on a topic.

It is important for ambassadors to share honestly about how topics influence them. If an ambassador thinks they have a conflict of interest, they should reach out to DHS staff before the meeting for help.

We may determine there is a conflict of interest. The ambassador and DHS staff can discuss how the ambassador should handle the conflict of interest. We may also ask other ambassadors for their thoughts. The solution might look different each time. Possible solutions might include:

- The ambassador sharing their ideas on a topic but not voting on a decision.
- The ambassador listening to a discussion but not contributing as much.
- The ambassador informing the group about their conflict of interest and then participating as they normally would.

Revisions

The MMEC will review and update this guide every three years or sooner, as needed.

Effective/Revision Date	Amendment	Author
July 9, 2025	Initial Release	Amanda Dreyer, Gladys Martens, Cheryl Jatczak-Glenn, Allie Merfeld, Laura Grulke-Rueter