#### HEALTH MANAGEMENT ASSOCIATES

# HMA Weekly Roundup

Trends in Health Policy

..... February 3, 2021







RFP CALENDAR
HMA News

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### THIS WEEK

- IN FOCUS: MACPAC REPORT EXAMINES MEDICAID SERVICES FOR ID/DD POPULATIONS
- ARIZONA AWARDS MEDICAID HOUSING CONTRACT
- Drug Importation News: Colorado, Florida
- MEDICAID EXPANSION NEWS: GEORGIA, KANSAS, MISSOURI
- KENTUCKY RELEASES RFP FOR MEDICAID FEE-FOR-SERVICE PBM
- DENTAQUEST MEDICAID, CHIP LIVES TOP 840,000 IN LOUSIANA
- NEW JERSEY MEDICAID COVERS DOULAS, RAISES MIDWIVES RATES
- New York Retroactively Cuts Medicaid Managed Care Rates
- OKLAHOMA ANNOUNCES MEDICAID MANAGED CARE AWARDS
- TEXAS SCHEDULES STAR+PLUS PRE-SOLICITATION MEETINGS
- WISCONSIN MEDICAID TO COVER SUD TREATMENT
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## IN FOCUS

# MACPAC REPORT EXAMINES MEDICAID SERVICES FOR ID/DD POPULATIONS

In a report to the Medicaid and CHIP Payment and Access Commission (MACPAC), HMA consultants <u>Sarah Barth</u>, <u>Sharon Lewis</u> and former research assistant Taylor Simmons, provided insight and review of Medicaid services for people with intellectual or developmental disabilities (ID/DD).

HMA provided the final report, <u>Medicaid Services for People with Intellectual</u> or <u>Developmental Disabilities</u> – <u>Evolution of Addressing Service Needs and</u> Preferences, which outlines Medicaid program policies and services to support

## HMA Weekly Roundup

the needs of people with ID/DD. Additionally, MACPAC supported the development of a <u>plain language version</u> designed to be accessible to a wide audience, including people with ID/DD.

Findings from the study revealed variability of state ID/DD systems and gaps in access to services. The Medicaid programs for people with ID/DD continue to evolve, and states are seeking to develop person-centered service delivery systems to better support this population to live healthy lives as fully participating members of the community.

Looking ahead, the project identified future focus areas including:

- Additional health research and data to help policymakers better understand and support effective programs for the population
- Aligning federal performance expectations to support home and community-based services quality could promote additional improvement at the state level
- Consideration of support needs in the context of families, including addressing multi-generational caregiver issues
- Supporting adults with ID/DD to exercise informed decision-making and have their preferences honored and respected
- Further research on the effectiveness of state initiatives designed to address workforce issues to help inform policies that support the stability and quality of the workforce going forward
- Improvements in access to disability-responsive medical care, as well
  as better coordination across physical health, behavioral health and
  Home and Community-Based Services (HCBS), to benefit people with
  ID/DD
- Addressing equity issues and health disparities, including development of culturally responsive services and supports

The findings were presented at the January 2021 MACPAC public <u>meeting</u> on January 29, 2021.



#### Arizona

Arizona Awards Medicaid Housing Contract to Behavioral Health Corporation. The Arizona Health Care Cost Containment System (AHCCCS) announced on February 2, 2021, that it awarded the three-year AHCCCS Housing Program contract to Arizona Behavioral Health Corporation (ABC). The program will provide permanent supportive housing to individuals with serious mental illness or other acute behavioral health needs or risk factors. The contract runs from October 1, 2021, through September 30, 2024. ABC will be responsible for subsidy payments to landlords and providers, establishing a referral process, waitlist management, eligibility verification, rent determinations, housing quality inspections, legal compliance, member recertifications, eviction prevention, and reporting, among other tasks. Read More

#### Arkansas

Arkansas Medicaid Work Requirements Case Garners Support from 18 States. The Arkansas Democrat-Gazette reported on January 28, 2021, that 18 states expressed support for Arkansas Medicaid work requirements in a brief to the U.S. Supreme Court. Arkansas Attorney General Leslie Rutledge is seeking to reverse a lower court ruling, which found that the Trump administration acted improperly when it approved work requirements. The 18 states that signed the brief are Alabama, Alaska, Arizona, Florida, Georgia, Indiana, Kansas, Louisiana, Mississippi, Missouri, Montana, Ohio, Oklahoma, South Carolina, Texas, Utah and West Virginia; Nebraska filed a separate brief arguing that the lower courts' rulings were flawed. Read More

### Colorado

**Colorado Releases Canadian Drug Importation Program ITN.** *CBS Denver* reported on January 25, 2021, that the Colorado Department of Health Care Policy & Financing released an Invitation to Negotiate (ITN) for the procurement of private entities to serve the state's Canadian Drug Importation program. The U.S. Department of Health and Human Services (HHS) finalized rules regarding drug importation in November 2020. Proposals are due April 26, and the state anticipates awarding vendor contracts later this year. <u>Read More</u>

# District of Columbia

District of Columbia Sought to Sidestep Ruling on Medicaid Managed Care Contracts. The Washington City Paper reported on January 27, 2021, that District of Columbia Deputy Mayor for Health and Human Services Wayne Turnage unsuccessfully lobbied for emergency legislation that would prevent MedStar Medicaid members from potentially having to change health plans twice in one year. The proposal would have allowed MedStar to sidestep a contract appeals board ruling that found that the DC Office of Contracting and Procurement acted unlawfully when it did not award a contract to incumbent plan Anthem/Amerigroup, which was replaced by MedStar. The court ordered DC to reevaluate Amerigroup's bid. Read More

#### Florida

Florida Hires LifeScience Logistics to Service Canadian Drug Importation Program. *Kaiser Health News* reported on January 29, 2021, that Florida awarded Texas-based LifeScience Logistics a contract to service the state's Canadian Drug Importation program following the state's failure to solicit any bidders from its procurement last year. Florida officials say the program could save the state between \$80 million to \$150 million in its first year. The contract, which is worth about \$39 million over two and a half years, began December 29, 2020, and runs through June 30, 2023. Read More

# Georgia

Georgia to Release Medicaid Quality Strategy Report in Spring 2021. *Georgia Health News* reported on February 2, 2021, that Georgia will release an updated plan on improving Medicaid quality in Spring 2021. The state's most recent quality strategy report is from 2016. Anthem/Amerigroup, CareSource, Centene/Peach State, and Centene/WellCare serve approximately 1.7 million Medicaid members. Read More

Governor's Fiscal 2022 Budget Proposal Includes Funding For Partial Medicaid Expansion. *The Augusta Chronicle* reported on January 30, 2021, that Georgia Governor Brian Kemp's fiscal 2022 budget proposal includes funding to implement a partial Medicaid expansion. Georgia received federal approval to offer Medicaid coverage to adults up to 100 percent of poverty. <u>Read More</u>

## Kansas

Governor's Fiscal 2022 Budget Proposal Includes Funds for Medicaid Expansion. ABC News reported on February 1, 2021, that Kansas Governor Laura Kelly proposed a fiscal 2022 state budget that includes \$19 million in general funds and \$541.5 million in federal matching funds to cover the first six months of Medicaid expansion. Kelly has also proposed using revenues generated from legalizing medical marijuana to help fund expansion. Medicaid expansion, which is projected to be available to 165,000 individuals, would require legislative approval. Kansas does not allow ballot initiatives. Read More

## Kentucky

Kentucky Releases RFP for Medicaid Fee-for-Service Pharmacy Benefits Manager. Kentucky released on January 26, 2021, a request for proposals (RFP) for a pharmacy benefit manager (PBM) to serve the state's fee-for-service Medicaid pharmacy program. The contract is for three years, with three optional, one-year renewals. Proposals are due April 20, 2021. The PBM will provide claims processing; prospective drug utilization review; rebate negotiation, administration, collection, reporting, and dispute resolution; and pharmacy call center services. Magellan currently holds the contract, which is set to expire December 31, 2021.

### Louisiana

**DentaQuest Has More Than 840,000 Lousiana Medicaid, CHIP Dental Members.** DentaQuest announced on February 1, 2021, that it has more than 840,000 Medicaid and Children's Health Insurance Program (CHIP) members in Louisiana. DentaQuest is one of two companies awarded a dental Medicaid managed care contract by the state, effective January 1, 2021. The other is MCNA. Contracts run for three years, with extensions of up to two years. <u>Read More</u>

## Mississippi

Lawmakers Consider Extending Medicaid Postpartum Coverage. *The Associated Press* reported on February 2, 2021, that Mississippi lawmakers are considering legislation to extend Medicaid postpartum coverage for new mothers from 60 days to a full year. The state already temporarily extended postpartum coverage as a condition for receiving federal COVID-19 relief funding. Mississippi has the highest rate of infant deaths in the country. <u>Read More</u>

## Missouri

Republican Lawmakers Introduce Bill Protecting Coverage for Individuals With Pre-existing Conditions. *The Associated Press* reported on February 3, 2021, that Republican lawmakers in Missouri filed legislation to amend the state constitution to require health insurers to cover individuals with pre-existing conditions without charging them more. If passed by the state legislature, the proposal would go before Missouri voters in 2022. <u>Read More</u>

Missouri Budget Proposal Includes \$1.9 Billion for Medicaid Expansion. *The Kansas City Star* reported on January 28, 2021, that Missouri Governor Mike Parsons' proposed budget for fiscal 2022 includes \$1.9 billion for Medicaid expansion. Parsons, who previously campaigned against expansion, vowed in his State of the State Address to "move forward" with the voter-approved initiative. Expansion, which is set for July 2021, would cover about 175,000 individuals, including 45,000 adults with severe mental illness and substance use disorders and another 5,000 adults with complex health conditions. <u>Read More</u>

## New Jersey

#### HMA Roundup - Karen Brodsky (Email Karen)

New Jersey Medicaid Covers Doula Services, Raises Midwives Reimbursement Rates. *Insider NJ* reported on February 2, 2021, that the New Jersey Medicaid program covers doula care and requires providers to complete a perinatal risk assessment during a beneficiary's first prenatal visit, according to the state's *Nurture New Jersey 2021 Strategic Plan*. The state also increased reimbursement rates for certified nurse midwives to 95 percent of the current physician rate for prenatal, labor and delivery, and postpartum services. <u>Read More</u>

Governor Signs Executive Order to Create Interagency Health Care Affordability Workgroup. *Insider NJ* reported on January 28, 2021, that New Jersey Governor Phil Murphy signed an executive order directing the Office of Health Care Affordability and Transparency to convene an Interagency Health Care Affordability Workgroup to develop healthcare cost growth benchmarks and health insurance affordability standards. The order also creates a Health Care Affordability Advisory Board comprised of healthcare industry stakeholders, consumer advocates, and policy experts to guide the development and implementation of the cost growth benchmarks. <u>Read More</u>

#### New York

#### HMA Roundup - Cara Henley (Email Cara)

New York COVID-19 Deaths in Nursing Homes Were Undercounted, Report Says. *Politico* reported on January 28, 2021, that the number of COVID-19 deaths in nursing facilities were undercounted by as much as 50 percent, according to a <u>report</u> released by New York Attorney General Tish James. The report says the state only counted deaths of residents who died in a nursing home, omitting residents transferred to a hospital. The report also said residents faced increased risk because of insufficient personal protective equipment for staff, lack of COVID-19 testing, and state guidance requiring admission of COVID-19 patients into nursing homes. <u>Read More</u>

New York Retroactively Cuts Medicaid Managed Care Rates. New York Governor Andrew Cuomo included in the state's fiscal 2022 Executive Budget Briefing Book retroactive fiscal 2021 rate cuts to Medicaid managed care and managed long-term care plans "based on lower health care utilization due to the pandemic, the use of available balances, and revisions to estimated costs." The Briefing Book added that in fiscal 2022, "savings are mainly achieved from across-the-board reductions and the use of available resources to support spending." Read More

Lawmakers Sign Letter to Reverse Medicaid Drug Carve-out Plan. Spectrum News reported on January 28, 2021, that more than 40 New York lawmakers signed a letter to try to reverse the state's plan to carve Medicaid drug benefits out of managed care. The carve-out, which would go into effect April 1, would make Medicaid drugs a fee-for-service benefit. In the letter, lawmakers argue that the policy will diminish available services, which could lead to consequences for low-income people during the pandemic. Read More

#### North Dakota

North Dakota Receives Federal Approval to Expand Behavioral Health Services. *The Minot Daily News* reported on January 28, 2021, that the North Dakota Department of Human Services (DHS) received federal approval for a Medicaid 1915(i) state plan amendment to expand home and community-based services for individuals with behavioral health conditions. Newly covered services include non-medical transportation, housing and employment supports, and educational supports. DHS plans to make the program available by February 16, 2021. Read More

#### Oklahoma

Ohio-Based CareSource Was Among Bidders on Oklahoma Medicaid Managed Care Contract. The Dayton Daily News reported on February 3, 2021, that Ohio-based CareSource was among the bidders in the recent Oklahoma Medicaid managed care procurement. CareSource was part of a joint-venture with Healthcare Highways, called CareSource Oklahoma, which did not win a contract. Awards went to four other plans – Blue Cross Blue Shield of Oklahoma, Humana, Centene/Oklahoma Complete Health, and UnitedHealthcare. Read More

Oklahoma Announces SoonerSelect Medicaid Managed Care Awards. On January 29, 2021, Oklahoma Governor Kevin Stitt and Secretary of Health and Mental Health and Oklahoma Health Care Authority CEO Kevin Corbett announced the SoonerSelect Medicaid Managed Care request for proposals (RFP) winners as Blue Cross Blue Shield of Oklahoma, Humana, Centene/Oklahoma Complete Health, and UnitedHealthcare. Centene/Oklahoma Complete Health also won the award for the SoonerSelect Specialty Children's Health Plan contract. Implementation is scheduled for October 1, 2021, covering physical health, behavioral health, and pharmacy benefits for more than 773,000 Medicaid beneficiaries. Contracts are estimated to be worth over \$2 billion.

## Oregon

Oregon Begins Setting Community Benefit Spending Floors for Not-for-profit Hospitals. The Oregon Health Authority (OHA) announced on February 2, 2021, that it has begun setting community benefit spending floors for not-for-profit hospitals operating in Oregon. The first spending floor was set at \$253 million for Legacy Health System for fiscal 2022. Floors are based on hospital revenues, prior expenditures, financial health, and the needs of the population served. OHA will assign minimum spending floors to not-for-profit hospitals and health systems throughout the year, with each floor subject to a 30-day public comment period. Read More

## Texas

Texas Schedules STAR+PLUS Pre-Solicitation Meetings for February. The Texas Health and Human Services Commission (HHSC) announced a series of 30-minute meetings for health plans interested in participating in the state's STAR+PLUS procurement, which serves aged, blind, and disabled members.

Meetings are scheduled from February 1-16, 2021, and will allow potential respondents to provide feedback on the procurement process. HHSC previously announced that they expect to issue the STAR+PLUS RFP in the second quarter of fiscal 2022. <u>Read More</u>

#### Wisconsin

**Wisconsin Medicaid to Cover Substance Use Disorder Treatment.** *WFRV* reported on January 29, 2021, that Wisconsin will cover residential substance use disorder treatment for Medicaid members effective February 1, 2021. Services covered include assessment and treatment planning, counseling, medication management, case management, peer support, recovery coaching, and medication-assisted treatment. Read More

#### **National**

Biden Administration Is Likely to End Public Charge Rule. *Modern Healthcare* reported on February 2, 2021, that the Biden administration will likely eliminate the federal public charge policy, which allowed immigration officials to consider a legal immigrant's use of Medicaid and other public benefits in determining eligibility for permanent residency. The administration could also rescind the requirements that family sponsors repay the government if relatives received public benefits. <u>Read More</u>

MACPAC Advances Medicaid, CHIP Postpartum Coverage Recommendations. *CQ* reported on January 29, 2021, that the Medicaid and CHIP Payment Access Commission (MACPAC) voted to recommend a number of policies to broaden postpartum coverage. Recommendations included the extension of postpartum coverage to a full year at a 100 percent federal match rate and providing the full range of Medicaid benefits to pregnant and postpartum women. Read More

Health Affairs Recommends New Models, Waivers to Drive Medicaid Innovation. Health Affairs recommended on February 1, 2021, that federal regulators make available a variety of new payment models and waivers to help states drive Medicaid innovations. Among the ideas proposed by Health Affairs in a blog post aimed at the Centers for Medicare & Medicaid Services (CMS) were payment model templates, a new state innovation model, incentives for improvements in equity, multipayer initiatives, integration of social services, improving access, and incentives for investment. Read More

MACPAC to Recommend Automatic Medicaid FMAP Increase During Economic Downturns. *Modern Healthcare* reported on January 29, 2021, that the Medicaid and CHIP Payment and Access Commission (MACPAC) has voted to recommend that Congress automatically increase the Medicaid Federal Medical Assistance Percentage (FMAP) during economic downturns. The FMAP increases would be based on rising unemployment and falling wages and salaries. Currently Congress must approve all FMAP increases, including the temporary 6.2 percent FMAP increase enacted as part of the federal COVID-19 relief package. Read More

**States Move to Implement Drug Importation Programs.** *Kaiser Health News* reported on January 29, 2021, that interest in drug importation programs remains popular, with Florida, Colorado, and several New England states moving forward with initiatives to import prescription medicine from Canada. Drug makers oppose the effort, which was approved by the Trump administration. Read More

Biden May Face Obstacles to Unwinding Medicaid Work Requirements. *NBC News* reported on January 28, 2021, that the Biden administration may face political and legal challenges in its attempt to dismantle Trump administration-imposed barriers to Medicaid coverage, including 19 pending or approved Medicaid work requirement waivers and Georgia's alternative Medicaid expansion. Arkansas, Kentucky, Michigan, and New Hampshire have Trump administration-approved work requirement waivers held up in litigation, with the U.S. Supreme Court agreeing to take up the Arkansas and New Hampshire cases for consideration. Read More

HHS Delays Rule That Would Prevent PBMs from Keeping Drug Rebates. *Modern Healthcare* reported on January 29, 2021, that the U.S. Department of Health and Human Services (HHS) delayed until March 22 a rule that would prevent pharmacy benefit managers (PBMs) from keeping drug rebates paid by drugmakers under Medicare Part D. The delay comes after the Pharmaceutical Care Management Association (PCMA), which represents PBMs, filed a federal lawsuit to block implementation of the rule. Read More

Hospitals Seek Withdrawal of 'Most Favored Nation' Drug Price Rule. *Modern Healthcare* reported on January 27, 2021, that hospital groups are pushing the Centers for Medicare & Medicaid Services (CMS) to withdraw a "most-favored-nation price" rule that would benchmark certain Medicare drug payments to lower prices abroad. The American Hospital Association argued that the burden of reducing drug prices would be placed on hospitals. <u>Read More</u>



## Industry News

Indiana-based Lighthouse Autism Centers Acquires Access Behavior Analysis. Indiana-based Lighthouse Autism Centers announced on February 3, 2021, the acquisition of Access Behavior Analysis, an applied behavioral analysis (ABA) provider serving central Indiana. The deal will make Lighthouse the largest ABA provider in the state. Read More

Anthem to Enter PR Medicaid, Medicare Market through Acquisition of MMM Holdings. Anthem announced on February 2, 2021, its entry into the Puerto Rico Medicaid and Medicare Advantage markets through an agreement to acquire MMM Holdings and affiliates from InnovaCare Health. MMM serves more than 267,000 Medicare Advantage members and 305,000 Medicaid members. Terms of the transaction, which is expected to close in the second quarter of 2021, were not disclosed. Read More

ACES Acquires In-Home Services Provider. Applied behavioral analysis services provider ACES announced on February 2, 2021, the acquisition of Center for Language and Autism Support Services (CLASS). Matthew Williams, who founded CLASS, will serve as regional director of the combined company. Terms of the deal were not disclosed. Read More

Hospitals Receive 90 Cents on Dollar for Medicaid Patients. *Becker's Hospital Review* reported on February 2, 2021, that hospitals received payment of 90 cents for every dollar spent on care for Medicaid patients and 87 cents for every dollar spent on Medicare patients in 2019, according to an American Hospital Association survey. The shortfall added up to \$75.8 billion, the survey said. Read More

Humana Partners With DispatchHealth to Offer Hospital-at-Home Care Services. Home Health Care News reported on February 1, 2021, that Humana is partnering with Colorado-based provider DispatchHealth to offer hospital-level, home care services to beneficiaries who frequently or inappropriately use emergency services for non-emergent care. Humana hopes the new hospital-at-home partnership will improve health outcomes and lower hospital readmissions by reducing health issues such as depression and malnutrition. The partnership will at first serve beneficiaries in Denver, Colorado and Tacoma, Washington and then expand to markets in Arizona, Nevada, and Texas. Read More

# RFP CALENDAR

Date	State/Program	Event	Beneficiaries
January 2021 - Delayed	Nevada	RFP Release	465,000
January 26, 2021 - Delayed	Ohio	Awards	2,450,000
February 8, 2021	Hawaii Community Care Services	Awards	4,500
February 15, 2021	Hawaii Quest Integration	Proposals Due	378,000
March 15, 2021	Hawaii Quest Integration	Awards	378,000
Spring 2021	Louisiana	RFP Release	1,550,000
April 1, 2021	Indiana Hoosier Care Connect ABD	Implementation	90,000
March 19, 2021	Minnesota MA Families, Children; MinnesotaCare (metro)	Proposals Due	548,000
May 10, 2021	Minnesota MA Families, Children; MinnesotaCare (metro)	Awards	548,000
May 21, 2021	North Dakota Expansion	Awards	19,800
June 11, 2021	North Carolina - BH IDD Tailored Plans	Awards	NA
July 1, 2021	North Carolina - Phase 1 & 2	Implementation	1,500,000
July 1, 2021	Hawaii Quest Integration	Implementation	378,000
July 1, 2021	Hawaii Community Care Services	Implementation	4,500
August 2021	Texas STAR Health	RFP Release	36,500
October 2021	Minnesota Seniors and Special Needs BasicCare	RFP Release	120,000
October 1, 2021	Oklahoma	Implementation	742,000
	California Two Plan Commercial - Alameda, Contra Costa, Fresno,		
Late 2021	Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, Santa	RFP Release	1,640,000
	Clara, San Francisco, San Joaquin, Stanislaus, and Tulare		
Late 2021	California GMC - Sacramento, San Diego	RFP Release	1,091,000
Late 2021	California Imperial	RFP Release	75,000
	California Regional - Alpine, Amador, Butte, Calaveras, Colusa, El		
Late 2021	Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas,	RFP Release	286,000
	Sierra, Sutter, Tehama, Tuolumne, Yuba		
Late 2021	California San Benito	RFP Release	7,600
January 2022	Minnesota MA Families and Children, MinnesotaCare	RFP Release	543,000
January 1, 2022	Minnesota MA Families, Children; MinnesotaCare (metro)	Implementation	548,000
January 1, 2022	Massachusetts One Care (Duals Demo)	Implementation	150,000
January 1, 2022	North Dakota Expansion	Implementation	19,800
January 5, 2022	Ohio	Implementation	2,450,000
February 2022	Texas STAR Health	Awards	36,500
July 1, 2022	North Carolina - BH IDD Tailored Plans	Implementation	NA
Q2 2022	Texas STAR+PLUS	RFP Release	538,000
	California Two Plan Commercial - Alameda, Contra Costa, Fresno,		
Early 2022 – Mid 2022	Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, Santa	Awards	1,640,000
	Clara, San Francisco, San Joaquin, Stanislaus, and Tulare		
Early 2022 – Mid 2022	California GMC - Sacramento, San Diego	Awards	1,091,000
Early 2022 – Mid 2022	California Imperial	Awards	75,000
	California Regional - Alpine, Amador, Butte, Calaveras, Colusa, El		
Early 2022 – Mid 2022	Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas,	Awards	286,000
	Sierra, Sutter, Tehama, Tuolumne, Yuba		
Early 2022 – Mid 2022	California San Benito	Awards	7,600
Q3 2022	Texas STAR+PLUS	Awards	538,000
Q1 2023	Texas STAR & CHIP	RFP Release	3,700,000
Q2 2023	Texas STAR & CHIP	Awards	3,700,000
Q3 2023	Texas STAR Kids	RFP Release	166,000
Q4 2023	Texas STAR Kids	Awards	166,000
Q4 2023	Texas STAR Health	Implementation	36,500
	California Two Plan Commercial - Alameda, Contra Costa, Fresno,		
January 2024	Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, Santa	Implementation	1,640,000
,	Clara, San Francisco, San Joaquin, Stanislaus, and Tulare		
January 2024	California GMC - Sacramento, San Diego	Implementation	1,091,000
January 2024	California Imperial	Implementation	75,000
	California Regional - Alpine, Amador, Butte, Calaveras, Colusa, El		
January 2024	Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas,	Implementation	286,000
	Sierra, Sutter, Tehama, Tuolumne, Yuba		
January 2024	California San Benito	Implementation	7,600
Q1 2024	Texas STAR+PLUS	Implementation	538,000
Q4 2024	Texas STAR & CHIP	Implementation	3,700,000
Q2 2025	Texas STAR Kids	Implementation	166,000

#### **HMA NEWS**

#### New this week on HMA Information Services (HMAIS):

#### **Medicaid Data**

- California Dual Demo Enrollment is Up 4.8%, Nov-20 Data
- California Medicaid Managed Care Enrollment is Up 8.6%, Nov-20 Data
- Louisiana Medicaid Managed Care Enrollment is Up 11.7%, 2020 Data
- Michigan Dual Demo Enrollment is Up 6.6%, 2020 Data
- Michigan Medicaid Managed Care Enrollment is Up 16.4%, 2020 Data
- Oklahoma Medicaid Enrollment is Up 21.6%, 2020 Data
- Oregon Medicaid Managed Care Enrollment is Up 14.2%, Nov-20 Data
- Pennsylvania Medicaid Behavioral HealthChoices Enrollment Up 12.9%, Nov-20 Data
- Pennsylvania Medicaid Managed Care Enrollment is Up 13%, Nov-20 Data
- Pennsylvania Medicaid Managed Care Enrollment is Up 14%, 2020 Data
- South Dakota Medicaid Enrollment is Down 2.2%, FY 2020 Data
- South Dakota Medicaid Spending Over \$905 Million, FY 2020 Data
- Wyoming Medicaid Enrollment Is Down 1.2%, FY 2020 Data

#### **Public Documents:**

Medicaid RFPs, RFIs, and Contracts:

- Arizona Housing Program Administration Services RFP, Proposals, Scoring, and Award, 2020-21
- Colorado Canadian Prescription Drug Importation Program ITN and Appendices, 2021
- Florida Canadian Prescription Drug Importation Program Contract, 2020-23
- Kentucky Medicaid FFS Pharmacy Benefits Manager RFP, Jan-21
- North Carolina Indian Managed Care Entity Contract, Oct-20

#### Medicaid Program Reports, Data and Updates:

- Arkansas Office of the Medicaid Inspector General Annual Reports, 2018-20
- California Medi-Cal Managed Care Rate Certifications, SFY 2018-19
- California Medi-Cal Managed Care Rate Certifications, SFY 2019-20
- California Medi-Cal Managed Care Rate Ranges, SFY 2017-18
- Florida Governor's Proposed Budget, FY 2022
- Florida KidCare Program Evaluation, CY 2019
- Florida Local Funding Revenue Maximization and Funding for Special Medicaid Reimbursement Programs, SFY 2020
- Florida Medicaid Eligibility by County, Age, Sex, 2020 Data
- Florida Medicaid MLTC Program Care Setting Transition Analysis Summary, Dec-20
- Florida Medical Care Advisory Meeting Materials, Jan-21
- Georgia Department of Community Health Board Meeting Materials, Jan-21
- Georgia DCH Validation of Performance Measures, 2019
- Georgia Proposed Budget, FY 2022

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- Georgia Section 1915 Comprehensive Supports Waiver Renewal Application, Jan-21
- Iowa Proposed Budget, FY 2022-23
- Kansas Governor Proposed Budget, FY 2022
- Kentucky Medicaid Managed Care Directed Payments and Supplemental Calculations, 2018-21
- Maryland Medicaid Advisory Committee Meeting Materials, Jan-21
- Michigan Department of Health and Human Services Annual Report of Key Program Statistics, FY 2013-20
- Michigan DHHS Comprehensive Quality Strategy, 2020-23
- Michigan DHHS Green Book Report of Key Program Statistics, 2017-20
- Minnesota Governor's Proposed Budget, FY 2022-23
- Missouri Executive Proposed Budget, FY 2022
- Pennsylvania HealthChoices CAHPS Quality Measures, 2020
- Pennsylvania HealthChoices HEDIS Performance Measures Rate Charts, 2015-20
- Pennsylvania Medical Assistance, CHIP Managed Care Quality Strategy, Dec-20
- Rhode Island Long Term Care Services and Finance Performance Report, 2019-20
- Vermont Green Mountain Care Board Advisory Committee Meeting Materials, Jan-21
- Wyoming Medicaid Annual Reports, SFY 2013-20

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