

HEALTH MANAGEMENT ASSOCIATES

HMA Weekly Roundup

Trends in Health Policy

..... March 3, 2021



[RFP CALENDAR](#)

[HMA News](#)

Edited by:

Alona Nenko

[Email](#)

Carl Mercurio

[Email](#)

Mary Goddeeris, MA

[Email](#)

Lisette Diaz

[Email](#)

Scott Silberberg

[Email](#)

THIS WEEK

- [IN FOCUS: HEALTH MANAGEMENT ASSOCIATES PROVIDES UPDATES ON 2021 FEDERAL HEALTHCARE POLICY LANDSCAPE](#)
- [ARKANSAS LAWMAKERS INTRODUCE MEDICAID WORK INCENTIVE BILL](#)
- [HAWAII RELEASES RFP FOR MEDICAID DENTAL TPA](#)
- [LOUISIANA GOVERNOR PROPOSES BUDGET WITHOUT MEDICAID CUTS](#)
- [MISSOURI MEDICAID DIRECTOR TO TAKE LEAVE OF ABSENCE](#)
- [NEW JERSEY MEDICAID BILL TO COVER UNDOCUMENTED IMMIGRANTS](#)
- [NEW YORK DELAYS MEDICAID PHARMACY BENEFIT CARVE-OUT](#)
- [RHODE ISLAND RELEASES MEDICAID MANAGED CARE RFI](#)
- [TEXAS PROJECTS MEDICAID CASELOADS TO FALL 8 PERCENT](#)
- [VERMONT HAS RFI FOR SUD TREATMENT, RECOVERY COORDINATION](#)
- [HOUSE LAWMAKERS REINTRODUCE TELEHEALTH BILL](#)
- [MEDICAID PLANS LOOK TO ADDRESS RISK CORRIDOR EXPOSURE](#)
- [CMS DELAYS MEDICARE GEOGRAPHIC DIRECT CONTRACTING MODEL](#)
- [BROOKDALE TO SELL STAKE IN HOME HEALTH, HOSPICE BUSINESS](#)
- [HEALTHCARE INNOVAGE SEEKS TO RAISE \\$100 MILLION IN IPO](#)
- [NEW THIS WEEK ON HMAIS](#)

IN FOCUS

HMA PROVIDES UPDATES ON 2021 FEDERAL HEALTHCARE POLICY LANDSCAPE

This week, our *In Focus* comes from an HMA cross-cutting subject matter team, who have updated a core set of federal policy slides that analyzes recent

federal policy actions following the Presidential and Congressional elections. It includes an analysis of President Biden's \$1.9 trillion COVID-19 relief legislation currently in development and recent CMS regulatory and administrative actions. Specifically, the analysis looks at:

- 2020 Election Outcome
- Key Nominations and Appointments
- Current Legislative Efforts to Respond to the COVID-19 pandemic
- Presidential Executive Orders
- CMS Regulations Under Review
- CMMI Models Under Review or Likely to be Reviewed
- Trump Administration Approved Medicaid Waivers in Question
- Noteworthy CMS/HHS Correspondence to States

A public version of the slides can be found [here](#). For a more detailed analysis, please email [here](#).



HMA MEDICAID ROUNDUP

Arkansas

Lawmakers Introduce Medicaid Work Incentive Bill. *FOX 16* reported on March 1, 2021, that Arkansas lawmakers introduced a Medicaid expansion work incentive bill designed to replace the state's inoperative work requirements program. The bill, which was referred to the Senate Public Health Committee, would allow expansion members who work to continue to enroll in Exchange plans instead of Medicaid fee-for-service. No one would lose coverage under the incentive program. [Read More](#)

Hawaii

Hawaii Releases RFP for Medicaid Dental TPA. The Hawaii Department of Human Services, Med-QUEST Division, on February 26, 2021, issued a request for proposals (RFP) for Medicaid dental third party administrator (TPA) and claims processing services. The contract would be effective from July 1, 2021, through June 30, 2024, with three optional one-year extensions. Proposals are due April 12, 2021, with an expected award date of April 26. Delta Dental/Hawaii Dental Service currently serves as the state's Medicaid dental TPA.

Hawaii Medicaid Enrollment Increases by 24 Percent Since Start of COVID-19 Pandemic. *Hawaii News Now* reported on February 25, 2021, that Medicaid enrollment in Hawaii has soared by 24 percent to 405,598 since January 2020 as unemployment increased due to the COVID-19 pandemic. Every county saw a jump in Medicaid recipients, but Maui saw the biggest increase at 50 percent. [Read More](#)

Idaho

Idaho House Approves Record High Medicaid Supplemental Funding. *The Idaho Press* reported on February 25, 2021, that the Idaho House approved a record high Medicaid supplemental funding appropriation, which will have the effect of pulling in an additional \$304.8 million in federal matching funds, while lowering state general funds going into Medicaid this year by \$35.8 million. The proposed budget now heads to the Senate. [Read More](#)

Iowa

Lawmaker to Delay Push for Medicaid Work Requirements Waiver. *The Des Moines Register* reported on February 25, 2021, that Iowa Senator Jason Schultz (R-Schleswig) will not push for a Medicaid work requirements waiver this year. “The waiver is probably a pretty long shot under a Biden administration,” Schultz said. However, Schultz hopes to bring the bill next year. The state Senate did pass a bill that would require an upgraded digital verification process for Medicaid recipients in the state. [Read More](#)

Louisiana

Louisiana Governor Proposes Fiscal 2022 Budget Without Medicaid Cuts. *The Advocate* reported on February 26, 2021, that Louisiana Governor John Bel Edwards proposed a \$36.6 billion fiscal 2022 budget, which would continue to use federal COVID-19 aid to shore up programs like Medicaid. The proposal allocates \$16 billion to Medicaid, representing more than 40 percent of the entire operating budget. [Read More](#)

Minnesota

Minnesota Uninsured Rate Remains Under 5 Percent. The Minnesota Department of Health reported on February 2, 2021, that the state’s uninsured rate remains under 5 percent despite COVID-related job losses. The state reported a 4.6 percent uninsured rate in July 2020, compared to a 4.7 percent rate in 2019. Declines in employer-sponsored insurance were offset by gains in individual and Medicaid coverage. [Read More](#)

Missouri

Missouri Medicaid Director to Take Leave of Absence. *The St. Louis Post-Dispatch* reported on February 27, 2021, that Missouri Medicaid director Todd Richardson is taking a leave of absence. Richardson, who has served in the position since 2018, is expected to be out several months when state lawmakers are expected to enact Medicaid expansion. A replacement has not yet been named. [Read More](#)

Nebraska

Nebraska Advocates File Lawsuit Opposing Medicaid Work Requirements. *The Tulsa World/The Associated Press* reported on February 26, 2021, that advocacy group Nebraska Appleseed filed a lawsuit alleging that the Nebraska Department of Health and Human Services exceeded its authority when it created a two-tiered Medicaid expansion program that offered enhanced benefits to people who work or volunteer. [Read More](#)

Nebraska Delays Roll Out of Enhanced Medicaid Expansion Benefit Tier. *The Lincoln Journal Star* reported on February 25, 2021, that Nebraska delayed the roll out of an enhanced Medicaid expansion benefit tier, which would have provided dental, vision, and over-the-counter drug coverage to beneficiaries who meet work requirements. The delay of the enhanced tier, a demonstration project previously scheduled to take effect April 1, 2021, comes after the Biden administration signaled its opposition to work requirements and its intention to withdraw approvals granted by the prior administration. Nebraska launched Medicaid expansion with a basic tier of benefits last year. [Read More](#)

Nevada

Nevada Posts Medicaid Fee Schedule Reflecting 6 Percent Provider Rate Reduction. Nevada announced on March 3, 2021, that it has posted Medicaid fee schedules reflecting a six percent across-the-board provider rate reduction previously approved by the state legislature. [Read More](#)

New Jersey

HMA Roundup – Karen Brodsky ([Email Karen](#))

Lawmaker Introduces Bill to Extend Medicaid Coverage for Undocumented Immigrants. *Insider NJ* reported on February 25, 2021, that a New Jersey lawmaker has introduced legislation that would extend comprehensive Medicaid coverage to undocumented individuals. The bill, introduced by Assemblywoman Valerie Vainieri Huttle (D-Bergen), could provide Medicaid coverage to an additional 800,000 individuals. [Read More](#)

Governor Releases Fiscal 2022 Budget Proposal. New Jersey Governor Phil Murphy released on February 24, 2021, a \$44.8 billion fiscal 2022 budget proposal that includes more than \$4.7 billion for the state's NJ FamilyCare Medicaid program. The budget proposal also maintains a funding increase for Medicaid nursing facilities; provides funding for a two-year Cover All Kids initiative, which would eliminate premiums in the Children's Health Insurance Program; and extends Medicaid post-partum coverage to a full year. [Read More](#)

New York

HMA Roundup – Cara Henley ([Email Cara](#))

New York Delays Medicaid Pharmacy Benefit Carve-Out to May 1. The New York State Department of Health announced on February 26, 2021, that the state has delayed the carve-out of Medicaid pharmacy benefits from managed care to fee-for-service by a month to May 1, 2021. [Read More](#)

Lawmakers Focus on COVID, Medicaid in Hearing on Fiscal 2022 Executive Budget Proposal. *Manatt* reported on February 25, 2021, that New York lawmakers focused on Medicaid and COVID-19 during a [joint legislative hearing](#) on the state's proposed fiscal 2022 Executive Budget. Topics included COVID-19-related fatalities in nursing homes, proposed cuts to Medicaid, gains in Medicaid enrollment, and the proposed carve-out of Medicaid pharmacy benefits from managed care. State lawmakers are expected to release budget proposals in mid-to-late March. The final budget is due April 1. [Read More](#)

New York Approves Highmark Acquisition of HealthNow BCBS License. *The Pittsburgh Business Times* reported on February 24, 2021, that the New York Department of Financial Services approved Highmark Health's planned acquisition of the HealthNow Blue Cross Blue Shield license, including BlueCross BlueShield of Western New York and BlueShield of Northeastern New York. Pennsylvania-based Highmark Health has committed to retaining almost all HealthNow employees and to invest in health equity initiatives. [Read More](#)

North Carolina

North Carolina Medicaid Enrollment Approaches 2.4 Million. *State of Reform* reported on February 25, 2021, that North Carolina Medicaid enrollment reached 2.38 million as of February 2021, and enrollment in the state's Children's Health Insurance Program (CHIP) topped 106,000, according to an [analysis](#) conducted by the state Department of Health and Human Services (DHHS) Fiscal Research Division. [Read More](#)

Pennsylvania

Jefferson-Einstein Merger to Move Forward. *Healthcare Dive* reported on March 1, 2021, that the merger of Jefferson Health and Albert Einstein Healthcare Network in Philadelphia is expected to be completed in the next six months after the Federal Trade Commission (FTC) dropped its opposition to the deal. The FTC decision comes after the state of Pennsylvania also dropped its opposition and Jefferson agreed to invest \$200 million over seven years in Einstein's north Philadelphia facilities. [Read More](#)

Puerto Rico

Puerto Rico Health Plan Triple-S Reports Medicaid Membership Growth. *The Weekly Journal* reported on March 3, 2021, that Puerto Rico-based Triple-S Management Corporation had Medicaid membership of 422,000, an increase of 37,000 in the fourth quarter of 2020 alone. During an earnings call with investors, Triple-S chief executive Roberto García Rodríguez attributed the increase to the departure of a competing plan. [Read More](#)

Rhode Island

Rhode Island Releases Medicaid Managed Care RFI. The Rhode Island Department of Administration, Executive Office of Health and Human Services, on March 2, 2021, issued a request for information (RFI) seeking input on the state's upcoming Medicaid managed care procurement for contracts serving 276,000 RIte Care, Rhody Health Partners, and adult expansion members. Responses are due March 30. The state is expected to release a request for proposals in summer 2021, with contracts, worth \$1.4 billion annually, effective July 1, 2022. Current incumbents are Neighborhood Health Plan of Rhode Island, Tufts Health Public Plan, and UnitedHealthcare Community Plan.

Tennessee

Tennessee Can Exclude Certain Drugs Under Medicaid Closed Formulary. *Forbes* reported on March 3, 2021, that Tennessee can exclude certain Medicaid drugs under the closed formulary approved by federal regulators in January. Exceptions include the six protected classes: antidepressants, anticonvulsants, antipsychotics, immunosuppressants, antineoplastics, and antiretroviral drugs. [Read More](#)

Texas

Texas Projects Medicaid Caseloads to Fall 8 Percent in Fiscal 2022. The Texas Health and Human Services Commission (HHSC) said on February 23, 2021, that Medicaid caseloads are projected to decrease by 8.2 percent in fiscal 2022, assuming the public health emergency ends in June 2021. However, HHSC also projected that Children's Health Insurance Program caseloads would increase by 20.8 percent in fiscal 2022. In a presentation to the state House Appropriations Committee, HHSC said that Medicaid costs per person increased 19 percent from 2010 to 2019, adding that nearly 70 percent of Medicaid beneficiaries are non-disabled children. [Read More](#)

Vermont

Vermont Releases RFI for Substance Use Disorder Treatment, Recovery Service Delivery Coordination. The Vermont Department of Health, Division of Alcohol & Drug Abuse Programs issued on February 26, 2021, a request for information (RFI) seeking input from vendors on the redesign of the state's coordination of delivery of treatment and recovery services for individuals with substance use disorder. Responses are due April 29, 2021. The state is expected to release a request for proposals later this year. Health Management Associates is acting as consultant to the state.

National

94 Percent of Medicaid Children Are in Managed Care Plans, Study Finds. *News Medical Life Sciences* reported on March 1, 2021, that the proportion of Medicaid-eligible children enrolled in managed care plans increased from 65 percent in 2000 to 94 percent in 2017, according to a study published in the journal *Academic Pediatrics*. The study also pointed to opportunities for Medicaid plans to improve quality by encouraging more preventive care visits for children. [Read More](#)

House Lawmakers Reintroduce Bill to Boost Medicaid, CHIP Telehealth Coverage. *mHealth Intelligence* reported on March 1, 2021, that House lawmakers have reintroduced legislation to boost telehealth coverage for children through Medicaid and state Children's Health Insurance Programs (CHIP). The Telehealth Improvement for Kids' Essential Services (TIKES) Act, which was first introduced in October 2020, is sponsored by Representatives Lisa Blunt Rochester (D-DE) and Michael Burgess, MD, (R-TX). Other recently reintroduced bills supporting telehealth include the COVID-19 Emergency Telehealth Impact Reporting Act, Telehealth Response for E-prescribing Addiction Therapy Services (TREATS) Act, and the Telehealth Modernization Act. [Read More](#)

CMS Announces Additional Navigator Funding for Special Exchange Enrollment Period. The Centers for Medicare & Medicaid Services (CMS) announced on March 1, 2021, that it will provide an additional \$2.3 million in funding to the 30 current Navigator grantee organizations to support outreach, education, and enrollment efforts for the 2021 special enrollment period. The special enrollment period runs through May 15, 2021. [Read More](#)

Biden Faces Hurdle in Dismantling Medicaid Work Requirements. *The Wall Street Journal* reported on March 1, 2021, that President Biden faces a potential hitch in attempting to undo state Medicaid work requirements. Seventeen states, including Arkansas, Georgia, and Tennessee, signed agreements with the previous administration preserving work requirements for nine months before they could be undone. [Read More](#)

Medicaid Plans Look to Address Risk Corridor Exposure. *Modern Healthcare* reported on February 26, 2021, that some Medicaid plans may try to address risk-corridor exposure associated with state medical loss ratio (MLR) requirements through different ways of categorizing medical and quality improvement costs. Value-added benefits; efforts to address housing instability, food insecurity, and transportation needs; and software development for telehealth services, discharge management, and self-management health programs, for example, could potentially be deemed quality improvement expenses and be counted toward MLRs. [Read More](#)

House Passes COVID-19 Relief Bill, Including Medicaid Expansion Incentives. *Fierce Healthcare* reported on February 27, 2021, that the House has approved a \$1.9 trillion COVID-19 relief bill, including an increase in matching funds for states that implement Medicaid expansion. The bill would also eliminate the cap on Medicaid drug rebates effective in 2023 and increase subsidies for plans sold on the Affordable Care Act's (ACA) exchanges for two years. The bill now heads to the Senate. [Read More](#)

MACPAC Meeting Is Scheduled for March 4. The Medicaid and CHIP Payment and Access Commission (MACPAC) announced on March 1, 2021, that its next meeting will be held March 4. Topics to be discussed are:

- Behavioral Health Services for Adults
- Behavioral Health Services for Children and Youth
- High-Cost Specialty Drugs
- COVID-19 Vaccine
- Building State Capacity
- Issues Facing the Territories [Read More](#)

Biden Strengthens Rules on COVID-19 Testing Without Cost Sharing. The Biden Administration issued guidance on February 26, 2021, aimed at strengthening rules requiring health plans to cover COVID-19 diagnostic tests without cost sharing or prior authorization. The guidance, issued by the Centers for Medicare & Medicaid Services (CMS) together with the U.S. Department of Labor and the Department of the Treasury, covers asymptomatic individuals without known or suspected exposure to COVID-19. Plans must also cover point-of-care COVID-19 diagnostic tests, and diagnostic tests administered at state or locally administered testing sites. [Read More](#)

COVID-19 Relief Bill Would Temporarily Increase Funding for Medicaid HCBS. *Forbes* reported on February 24, 2021, that the House COVID-19 relief bill includes a temporary \$9 billion funding increase for Medicaid home and community-based services (HCBS). The increase, which might be made permanent, excludes nursing home care. States could use the funding to increase payments to home care agencies and other Medicaid service providers; increase pay, training, or paid leave for direct care workers; and purchase emergency supplies such as personal protective equipment and testing. [Read More](#)

CMS Delays Medicare Geographic Direct Contracting Model. *Fierce Healthcare* reported on March 2, 2021, that the Centers for Medicare & Medicaid Services (CMS) placed its new Medicare Geographic Direct Contracting Model (Geo) under review until further notice. The Geo model will test whether a geographic-based approach to care delivery can improve health and reduce costs for Medicare beneficiaries enrolled in the traditional fee-for-service program across an entire region. CMS did not say why the model was put under review or for how long. CMS's [website](#) shows applications will be accepted from March 1, 2021, through April 2, 2021. [Read More](#)



INDUSTRY NEWS

Highmark Completes Acquisition of HealthNow BCBS License. *Fierce Healthcare* reported on March 1, 2021, that Highmark Health has finalized its acquisition of the HealthNow Blue Cross Blue Shield license. HealthNow will be rebranded Highmark Blue Cross Blue Shield of Western New York and Highmark Blue Cross Blue Shield of Northeastern New York. HealthNow chief executive Dave Anderson is expected to retire at the end of 2021, but will join the board of Highmark Western and Northeastern New York in 2022. The transaction brings Highmark membership to more than 6 million. [Read More](#)

AbsoluteCare Appoints Michael Radu as CEO. AbsoluteCare announced on March 1, 2021, the appointment of Michael Radu as chief executive. He replaces AbsoluteCare co-founder Alan Cohn, who will remain chairman. Radu previously served stints at the Center for Medicare & Medicaid Services Innovation Center (CMMI), UnitedHealthcare, and WellCare Health Plans (prior to WellCare's sale to Centene). AbsoluteCare provides ambulatory intensive care to patients with complex, chronic conditions. [Read More](#)

BrightSpring Health Services Reportedly Acquires Colorado-based Abode Healthcare. *Hospice News* reported on February 25, 2021, that BrightSpring Health Services has reportedly acquired Colorado-based Abode Healthcare from Summit Partners. Abode Healthcare offers home and hospice care services in 10 states, including Alabama, Arizona, Colorado, Iowa, Indiana, Minnesota, Nevada, Ohio, Pennsylvania, and Texas. [Read More](#)

Brookdale to Sell 80 Percent Stake in Home Health, Hospice, Outpatient Therapy Business to HCA Healthcare. *Home Health Care News* reported on February 24, 2021, that publicly traded Brookdale Senior Living entered into a definitive agreement to sell an 80 percent stake in its home health, hospice, and outpatient therapy business to HCA Healthcare for \$400 million. Brookdale operates 57 home health agencies and 22 hospice agencies across 26 states. Brookdale will retain a 20 percent equity interest in the venture with HCA Healthcare. [Read More](#)

Learn Behavioral Acquires IN-Based Behavior Analysis Center for Autism. Learn Behavioral Partners announced on February 18, 2021, the acquisition of Behavior Analysis Center for Autism (BACA), an Indiana-based provider of applied behavior analysis (ABA) therapy. BACA will continue to operate under its current brand. Learn Behavioral now provides services across 15 states and the District of Columbia. [Read More](#)

InnovAge Seeks to Raise \$100 Million in IPO. InnovAge announced on February 8, 2021, that it will seek to raise \$100 million in an initial public offering (IPO) of 16.7 million shares of common stock at a projected offering price of \$17 to \$19 per share. InnovAge, which will trade on Nasdaq using the ticker symbol INNV, is a Program of All-inclusive Care for the Elderly (PACE) provider, with 6,600 dual-eligible members in five states. [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
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
Summer 2021	Rhode Island	RFP Release	276,000
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	Missouri	RFP Release	756,000
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
November 2021	Missouri	Awards	756,000
Late 2021	California Two Plan Commercial - Alameda, Contra Costa, Fresno, Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, Santa Clara, San Francisco, San Joaquin, Stanislaus, and Tulare	RFP Release	1,640,000
Late 2021	California GMC - Sacramento, San Diego	RFP Release	1,091,000
Late 2021	California Imperial	RFP Release	75,000
Late 2021	California Regional - Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, Sierra, Sutter, Tehama, Tuolumne, Yuba	RFP Release	286,000
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	Rhode Island	Implementation	276,000
July 1, 2022	North Carolina - BH IDD Tailored Plans	Implementation	NA
July 1, 2022	Missouri	Implementation	756,000
Q2 2022	Texas STAR+PLUS	RFP Release	538,000
Early 2022 – Mid 2022	California Two Plan Commercial - Alameda, Contra Costa, Fresno, Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, Santa Clara, San Francisco, San Joaquin, Stanislaus, and Tulare	Awards	1,640,000
Early 2022 – Mid 2022	California GMC - Sacramento, San Diego	Awards	1,091,000
Early 2022 – Mid 2022	California Imperial	Awards	75,000
Early 2022 – Mid 2022	California Regional - Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, Sierra, Sutter, Tehama, Tuolumne, Yuba	Awards	286,000
Early 2022 – Mid 2022	California San Benito	Awards	7,600
Q3 2022	Texas STAR+PLUS	Awards	538,000
January 1, 2023	Minnesota MA Families and Children, MinnesotaCare	Implementation	543,000
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
January 2024	California Two Plan Commercial - Alameda, Contra Costa, Fresno, Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, Santa Clara, San Francisco, San Joaquin, Stanislaus, and Tulare	Implementation	1,640,000
January 2024	California GMC - Sacramento, San Diego	Implementation	1,091,000
January 2024	California Imperial	Implementation	75,000
January 2024	California Regional - Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, Sierra, Sutter, Tehama, Tuolumne, Yuba	Implementation	286,000
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

COMPANY ANNOUNCEMENTS

MCG Health Releases 25th Edition of Care Guidelines with Enhancements for Health Equity and Acute Viral Illness

The Impact of COVID-19 on Healthcare: A Round Table Discussion with MCG Experts and Stakeholders

HMA NEWS

New this week on HMA Information Services (HMAIS):

Medicaid Data

- Arizona Medicaid Managed Care Enrollment is Up 2.1%, Feb-21 Data
- Mississippi Medicaid Managed Care Enrollment is Up 1.8%, Feb-21 Data
- New Mexico Medicaid Managed Care Enrollment is Up 0.8%, Jan-21 Data
- Utah Medicaid Managed Care Enrollment is Up 1.8%, Jan-21 Data
- Wisconsin Medicaid Managed Care Enrollment is Up 24.4%, 2020 Data

Public Documents:

Medicaid RFPs, RFIs, and Contracts:

- Hawaii Medicaid Dental TPA Services RFP and Appendices, Feb-21
- Iowa External Quality Review Services RFP, Feb-21
- Michigan Behavioral PIHP Contract, FY 2020
- Michigan Comprehensive Health Care Program Medicaid Model Contract, FY 2021
- New York Medicaid MCO Model Contracts, 2015-24
- Rhode Island Medicaid Managed Care RFI, Mar-21
- Vermont Medicaid SUD Treatment, Recovery Service Delivery Coordination RFI, Feb-21

Medicaid Program Reports, Data and Updates:

- Arkansas Works 1115 Waiver Amendments and Related Documents, 2016-21
- Michigan Behavioral Health PIHPs MLR Calculation Report, SFY 2020
- New Jersey Governor's Proposed Budget, FY 2022
- New Jersey OLS Audit of Medicaid Managed Care Rate Setting, Administrative Costs, Jan-21
- New York Medicaid Pharmacy Managed Care to FFS Transition Presentations, Feb-21
- New York State Budget Conference Presentations, FY 2022
- North Carolina DHHS Budget Appropriations Presentation, FY 2021
- Texas Consolidated Behavioral Health Item Review Report, FY 2022-23
- Texas HHSC Presentation to the House Appropriations Committee, Feb-21

A subscription to HMA Information Services puts a world of Medicaid information at your fingertips, dramatically simplifying market research for strategic planning in healthcare services. An HMAIS subscription includes:

- State-by-state overviews and analysis of latest data for enrollment, market share, financial performance, utilization metrics and RFPs
- Downloadable ready-to-use charts and graphs
- Excel data packages
- RFP calendar

If you're interested in becoming an HMAIS subscriber, contact Carl Mercurio at cmercurio@healthmanagement.com.

HMA is an independent, national research and consulting firm specializing in publicly funded healthcare and human services policy, programs, financing, and evaluation. We serve government, public and private providers, health systems, health plans, community-based organizations, institutional investors, foundations, and associations. Every client matters. Every client gets our best. With 22 offices and over 200 multidisciplinary consultants coast to coast, our expertise, our services, and our team are always within client reach.

Among other services, HMA provides generalized information, analysis, and business consultation services to investment professionals; however, HMA is not a registered broker-dealer or investment adviser firm. HMA does not provide advice as to the value of securities or the advisability of investing in, purchasing, or selling particular securities. Research and analysis prepared by HMA on behalf of any particular client is independent of and not influenced by the interests of other clients.