HEALTH MANAGEMENT ASSOCIATES HMA Weekly Roundup Trends in Health Policy







RFP CALENDAR

HMA News

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THIS WEEK

July 28, 2021

- IN FOCUS: HMA PREPARES ISSUE BRIEFS EXPLORING MLTSS IMPACTS ON STATE MEDICAID PROGRAMS
- ALASKA MEDICAID COVERS GENDER REAFFIRMING HEALTH CARE
- CONNECTICUT TO USE MEDICAID FUNDS FOR VIOLENCE PREVENTION
- NEMT NEWS: CONNECTICUT, GEORGIA, IDAHO
- MISSOURI SUPREME COURT UPHOLDS MEDICAID EXPANSION
- NORTH CAROLINA AWARDS MEDICAID MANAGED CARE REGIONAL BEHAVIORAL HEALTH I/DD CONTRACTS TO SEVEN PLANS
- ANTHEM, HUMANA TO OWN 20 PERCENT OF PBM START-UP
- MODIVCARE ACQUIRES CAREFINDERS FOR \$340 MILLION
- NEW THIS WEEK ON HMAIS

IN FOCUS

HMA PREPARES ISSUE BRIEFS EXPLORING MLTSS IMPACTS ON STATE MEDICAID PROGRAMS

This week, our *In* Focus section highlights a recent pair of reports prepared for <u>Arizona for Better Medicaid</u>. HMA colleagues examined the impact of managed long-term services and supports (MLTSS) in state Medicaid programs. The first report, *Growth in MLTSS and Impacts on Community-Based Care*, examines the historical increase in the adoption of LTSS by state Medicaid programs and how that has contributed to a shift in long-term care from institutions to the community. The second report, *Managed LTSS Improves Quality of Care*, describes the evidence on the impact of managed LTSS in state Medicaid programs on the quality of care.

Link to <u>Growth in MLTSS and Impacts on Community-Based Care</u> Link to <u>Managed LTSS Improves Quality of Care</u> For more information, please contact HMA <u>Principal Stephen Palmer</u>, <u>Senior</u> Consultant Ashlen Strong, or Senior Consultant Aaron Tripp.



Alaska

Alaska Medicaid Has Begun Covering Gender Reaffirming Health Care. *The Advocate* reported on July 23, 2021, that Alaska Medicaid has begun covering gender-affirming health care, including treatment, therapy, surgery, or other procedures related to gender reassignment. The change comes after a lawsuit settlement in late June. <u>Read More</u>

Connecticut

Connecticut to Use Medicaid Funds for Violence Prevention. *My Journal Courier* reported on July 27, 2021, that Connecticut enacted legislation to use Medicaid funds for violence prevention, pending federal approval. Effective July 1, 2022, Medicaid would cover violence prevention services for beneficiaries who have received medical treatment for an injury "sustained from an act of community violence," such as a shooting. Connecticut hopes to receive a 56 percent federal Medicaid funding match for the services. <u>Read More</u>

Connecticut Extends Medicaid NEMT Contract Through March 2022. *CT News Junkie* reported on July 26, 2021, that Connecticut extended its Medicaid non-emergency medical transportation contract with Veyo until March 31, 2022, following a report showing that Veyo was improving service by addressing issues identified in a state audit. <u>Read More</u>

Georgia

Democrats Want to Address Medicaid Expansion in Special Legislative Session. *The Albany Herald* reported on July 27, 2021, that 67 Georgia Democratic lawmakers signed a letter asking Governor Brian Kemp to add Medicaid expansion to a special legislative session on redistricting later this year. Medicaid expansion would cover nearly 500,000 individuals. <u>Read More</u>

Georgia Releases Non-Emergency Medical Transportation RFP. The Georgia Department of Community Health (DCH) issued on July 22, 2021, a request for proposals (RFP) to procure providers of non-emergency medical transportation (NEMT) to Medicaid beneficiaries in five regions across the state. DCH will award a contract to one provider for each of the five regions, with no more than three regions per provider. Contracts will run from the expected award date of January 20, 2022, until the end of the state fiscal year, with five one-year optional renewals. Proposals are due August 9. The state cancelled a previous RFP for NEMT services released earlier this year.

Idaho

Idaho Releases NEMT ITN. The Idaho Department of Health and Welfare on July 20, 2021, released an Invitation to Negotiate (ITN) for a vendor to coordinate and manage the delivery of Medicaid non-emergency medical transportation (NEMT) services. Proposals are due September 23. The initial contract will run for four years with the possibility to renew for an additional six years.

Illinois

Illinois Extends Medicaid LTC Admission Timeframe to 120 Days. *The Jacksonville Journal-Courier* reported on July 26, 2021, that Illinois enacted legislation that will extend the time to submit Medicaid long-term care (LTC) admission documents to the state from 45 to 120 days. The bill was sponsored by state Representative Norine Hammond (R-Macomb). <u>Read More</u>

Michigan

Michigan Supplemental Budget Includes Funding for Hospitals, Nursing Homes. *The Associated Press* reported on July 27, 2021, that Michigan Governor Gretchen Whitmer signed a \$385 million supplemental budget, which includes \$160 million in grants to hospitals and \$100 million for nursing homes. <u>Read More</u>

Missouri

Governor Taps Donald Kauerauf to Lead State Health Department. Missouri Governor Mike Parson announced on July 21, 2021, the appointment of Donald Kauerauf as director of the Missouri Department of Health and Senior Services (DHSS), effective September 1, 2021. Kauerauf previously served in senior leadership positions in public health and emergency management in Illinois. <u>Read More</u>

Missouri Supreme Court Upholds Medicaid Expansion. *KMIZ* reported on July 22, 2021, that the Missouri Supreme Court has upheld the state's voter-approved Medicaid expansion, instructing a lower court judge to enter a ruling that the initiative did not violate the state constitution. Medicaid expansion is expected to cover an additional 275,000 individuals. <u>Read More</u>

Montana

Montana Releases Medicaid Waiver on Substance Use Disorder for Public Comment. *The Montana Free Press* reported on July 21, 2021, that the Montana Department of Public Health and Human Services released for public comment a \$25 million waiver proposal that would allow the state to use federal Medicaid dollars to help address substance use disorder. The Section 1115 waiver, known as HEART (Healing and Ending Addiction through Recovery and Treatment), would address social determinants of health and behavioral health, enhance services for justice-involved populations, and allow institutions of mental disease to receive federal reimbursement. The state intends to submit the waiver to federal regulators by September 30 and implement the plan by January 1, 2022. <u>Read More</u>

New Jersey

HMA Roundup - Karen Brodsky (Email Karen)

New Jersey Temporarily Increases Medicaid Reimbursement Rate to Assisted Living Facilities. *McKnight's Senior Living* reported on July 28, 2021, that New Jersey Governor Phil Murphy signed into law a fiscal 2021 supplemental appropriation of \$3 million to the state Department of Human Services to temporarily increase Medicaid reimbursement rates for assisted living and personal care home providers by 25 percent. Senior living associations said the reimbursement bump will allow providers to expand the number of Medicaid clients they serve. The new funds can go toward increasing wages and enhancing COVID-19 preparedness and response. <u>Read</u> <u>More</u>

North Carolina

North Carolina Awards Medicaid Managed Care Regional Behavioral Health I/DD Contracts to Seven Plans. The North Carolina Department of Health and Human Services announced on July 26, 2021, that it awarded contracts to seven existing Local Management Entity-Managed Care Organizations (LME-MCOs) to serve as Medicaid managed care Behavioral Health and Intellectual/Developmental Disability (IDD) Tailored Plans. The selected LME-MCOs are Alliance Health, Eastpointe, Partners Health Management, Sandhills Center, Trillium Health Resources, Vaya Health, and Cardinal Innovations Healthcare. Plans will provide integrated physical health, behavioral health, long-term care, and pharmacy services to approximately 200,000 individuals with significant behavioral health conditions, IDD, or traumatic brain injury (TBI). The contracts will run for four years starting July 1, 2022. <u>Read More</u>

Texas

Texas Medicaid Plans Received CHIP Overpayments, Audit Finds. Federal regulators released an audit on July 21, 2021, showing that Texas overpaid Medicaid managed care plans serving the State Children's Health Insurance Program (CHIP) by nearly \$923,000, including more than \$856,000 in federal matching funds. The audit, by the U.S. Department of Health and Human Services Office of the Inspector General, said overpayments were for beneficiaries assigned more than one identification number over the three years from January 1, 2016, to October 31, 2019. OIG recommended that the state repay the federal share, identify other beneficiaries who were assigned more than one identification number, and strengthen its procedures for determining member enrollment. <u>Read More</u>

Texas Extends Medicaid Postpartum Coverage to Six Months. *The Fort Bend Herald* reported on July 24, 2021, that Texas enacted legislation extending Medicaid postpartum coverage from two to six months. The law also requires the Texas Health and Human Services Commission to ensure Medicaid managed care plans provide continuity of care for individuals in the Healthy Texas Women program to improve maternal health outcomes. <u>Read More</u>

West Virginia

West Virginia Medicaid Covers One-Third of State Population, Report Finds. The West Virginia Center on Budget & Policy reported on July 21, 2021, that Medicaid covers 584,000 beneficiaries, or one-third of the state's population. The <u>report</u> stresses the importance of Medicaid from both a healthcare and economic standpoint. <u>Read More</u>

National

Bipartisan House Bill Would Expand Federal Oversight of Medicaid Providers. *Radio Results Network* reported on July 27, 2021, that bipartisan House lawmakers introduced legislation to expand the role of federal regulators in reviewing Medicaid provider eligibility compliance in all states. The bill, introduced by U.S. Representatives Jack Bergman (R-MI) and Cindy Axne (D-IA), is aimed at improving oversight of state Medicaid programs and preventing improper payments, waste, and fraud. Reviews would be handled by the Centers for Medicare & Medicaid Services. <u>Read More</u>

House Bill Would Expand Telehealth Services for Medicare Advantage, Medicaid. *mHealthIntelligence* reported on July 26, 2021, that a proposed House bill aims to expand the use of telehealth, remote patient monitoring, digital therapeutics, and other virtual health programs through demonstration projects for Medicare Advantage, Medicaid, and the Department of Veterans Affairs. The Advanced Safe Testing at Residence Telehealth (A-START) Act of 2021, introduced by Representative David Schweikert (R-AZ), is one of several bills aimed at fostering a long-term telehealth policy before the end of the COVID-19 public health emergency. <u>Read More</u> **Individuals in Medicaid Expansion States Experience Less Medical Debt Than Those In Non-Expansion States.** *WPLN* reported on July 27, 2021, that individuals living in Southern states that did not expand Medicaid in 2014 experienced three times as much medical debt on average compared to those living in Northeastern states that did expand, according to a <u>study</u> published in *JAMA Network*. The study examined unpaid medical debts in collections over the last decade and found that medical debt decreased since the passage of the Affordable Care Act in part due to a decrease in the rate of uninsured. In non-expansion states, the gap between medical debt in low-income versus high-income communities increased by more than \$200 per person, yet the gap shrank by nearly as much in expansion states. <u>Read More</u>

Uninsured Rates Drop in First Half of 2021, Report Shows. *HealthPayer Intelligence* reported on July 22, 2021, that uninsurance rates among adults ages 19 to 64 declined to 10 percent in the first half of 2021, compared to 12.5 percent a year earlier, according to a Commonwealth Fund <u>report</u>. The report, which surveyed more than 5,400 adults from March 9 through June 8, 2021, attributed the decline in uninsured to limited pandemic-related coverage losses, federal restrictions on Medicaid disenrollment during the pandemic, special Exchange enrollment periods, and increased Exchange subsidies and COBRA premium support. <u>Read More</u>

Dental Association Seeks to Increase Dentist Participation in Medicaid. *ADA News* reported on July 22, 2021, that the American Dental Association (ADA) hopes to work with the Centers for Medicare & Medicaid Services (CMS) to encourage dentist participation in the Medicaid program. In a letter to CMS, the ADA outlined seven possible areas for collaboration and improvement, including increasing reimbursements and reducing administrative burdens. <u>Read More</u>

CMS Issues Bulletin Reminding States About End of Public Charge Rule. *Bloomberg Law* reported on July 22, 2021, that the Centers for Medicare & Medicaid Services (CMS) issued a bulletin to encourage states to work with local partners and community organizations to inform people that the public charge rule no longer applies. The public charge rule allowed immigration officials to consider a legal immigrant's use of Medicaid and other public benefits in determining eligibility for permanent residency. <u>Read More</u>

House Committee Advances Series of Bills Aimed at Increasing Medicaid Funding to U.S. Territories, Maternal Health, Opioids. *CQ News* reported on July 21, 2021, that the U.S. House Energy and Commerce Committee advanced 16 bills, including legislation aimed at maintaining enhanced federal Medicaid funding for U.S. territories, improving maternal health outcomes, and addressing opioid overdoses, among other initiatives. The bill addressing Medicaid funding for U.S. territories would extend current enhanced federal funding for eight years in the U.S. Virgin Islands, American Samoa, Northern Mariana Islands, and Guam, and five years in Puerto Rico. <u>Read More</u>

State Attorneys General Unveil \$26 Billion Opioid Settlement with Drug Distributors, Manufacturer. *Reuters* reported on July 21, 2021, that fifteen state attorneys general unveiled a \$26 billion opioid settlement with drug distributors McKesson, Cardinal Health, and AmerisourceBergen and drug manufacturer Johnson & Johnson. Under the proposal, which still requires support from thousands of local governments, McKesson would pay \$7.9 billion while Cardinal and AmerisourceBergen would pay \$6.4 billion each over 18 years. The settlement funds would be used for addiction treatment, family support, education, and other social programs. <u>Read More</u>

Number of Medicaid Children Treated Under EPSDT Increases, Report Says. *The Current* reported on July 22, 2021, that the number of children referred for treatment under the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program nationwide rose from 9.8 million in 2015 to 13.8 million in 2019, according to a <u>report</u> from the National Health Law Program. Approximately 21 million of the 41 million children eligible for EPSDT received at least one screening in 2019. <u>Read More</u>

House Bill Aims to Boost Medicare ACO Participation. *Modern Healthcare* reported on July 21, 2021, that a bipartisan House bill aims to boost participation in Medicare Accountable Care Organizations (ACOs) by allowing providers to receive 50 percent to 60 percent of savings generated. The bill would also allow ACOs to operate for three years before having to take on risk. The bill would reverse changes made by the previous administration, which exposed ACOs to greater risk and lower gains. As of 2020, there were 477 Medicare ACOs serving 10.7 million beneficiaries, down from 561 ACOs serving 11.2 million beneficiaries three years ago. <u>Read More</u>



INDUSTRY

NEWS

Choice Health at Home Acquires Oklahoma-based Alpha Home Health. Home Health Care News reported on July 26, 2021, that Choice Health at Home acquired Alpha Home Health, which provides home health and hospice services in Oklahoma. Choice Health also recently purchased two other Oklahoma-based companies, Angelic Hospice and Restore Home Health. Terms of the deal were not disclosed. <u>Read More</u>

Mission Healthcare Acquires Three Home Health, Hospice Providers. California-based home health provider Mission Healthcare announced on July 27, 2021, the acquisition of three home health and hospice organizations, including Hands of Hope in Idaho as well as Sun Tree and Tender Care in Utah. Mission will now provide services to about 6,000 patients per day. All three companies will retain their current brands. <u>Read More</u>

Anthem, Humana To Own 20 Percent of PBM Start-up. *Modern Healthcare* reported July 26, 2021, Anthem and Humana have invested \$140 million for a 20 percent stake in a pharmacy benefits management (PBM) start-up dubbed DomaniRx. SS&C Technologies, which operates the RxNova claims processing platform, will hold 80 percent of the joint venture. Humana will be DomaniRx's first client. <u>Read More</u>

Lighthouse Autism Center Announces Investment by Cerberus. Indianabased applied behavioral analysis provider Lighthouse Autism Center announced on July 26, 2021, an investment from Cerberus Capital Management. Lighthouse founder and chief executive Gregg Maggioli and private equity firm Abry Partners will invest alongside Cerberus in the transaction. <u>Read More</u>

ModivCare Acquires CareFinders for \$340 Million. ModivCare announced on July 26, 2021, the acquisition of personal care provider CareFinders Total Care for \$340 million. CareFinders provides personal care services in New Jersey, Pennsylvania, and Connecticut, generating revenues of \$200 million annually. The deal, which is expected to close in the third quarter of 2021, expands ModivCare's personal care business. ModivCare is also a leading non-emergency medical transportation provider. <u>Read More</u>

July 28, 2021

HMA Weekly Roundup

RFP CALENDAR

ate	State/Program	Event	Beneficiaries
ummer 2021	Rhode Island	RFP Release	276,000
uly 1, 2021 - Delayed	Missouri	RFP Release	756,000
ugust 2021	Texas STAR Health	RFP Release	36,500
ugust 9, 2021	Indiana Hoosier Healthwise and HIP	Proposals Due	1,200,000
ugust 31, 2021	Tennessee	Proposals Due	1,500,000
eptember 3, 2021	Louisiana	Proposals Due	1,600,000
ctober 2021	Minnesota Seniors and Special Needs BasicCare	RFP Release	120,000
ctober 1, 2021	Oklahoma	Implementation	742,000
ctober 8, 2021	Tennessee	Awards	1,500,000
ovember 2021	Missouri	Awards	756,000
lovember 5, 2021	Louisiana	Awards	1,600,000
ecember 1, 2021	Delaware	RFP Release	240,000
ecember 22, 2021	lowa	RFP Release	745,000
ate 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
ate 2021	California GMC - Sacramento, San Diego	RFP Release	1,091,000
ite 2021	California Imperial	RFP Release	75,000
ite 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
ate 2021	California San Benito	RFP Release	7,600
ec. 2021 - Feb. 2022	Texas STAR+PLUS	RFP Release	538,000
rst Quarter 2022	Indiana MLTSS	RFP Release	NA
nuary 2022	Minnesota MA Families and Children, MinnesotaCare	RFP Release	543.000
nuary 1, 2022	Minnesota MA Families, Children; MinnesotaCare (metro)	Implementation	548,000
nuary 1, 2022	Nevada	Implementation	600,000
nuary 1, 2022		Implementation	150,000
nuary 1, 2022	Massachusetts One Care (Duals Demo) North Dakota Expansion	Implementation	19,800
nuary 5, 2022	Ohio	Implementation	2,450,000
nuary 7, 2022	Indiana Hoosier Healthwise and HIP	Awards	1,200,000
bruary 2022	Texas STAR Health	Awards	36,500
ly 1, 2022	Rhode Island	Implementation	276,000
ily 1, 2022	North Carolina - BH IDD Tailored Plans	Implementation	NA
ıly 1, 2022	Missouri	Implementation	756,000
ıly 1, 2022	Louisiana	Implementation	1,600,000
arly 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
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COMPANY ANNOUNCEMENTS

<u>The Leading Types of Auto Injuries: Costs, Treatment Durations, and</u> <u>Causes of Variation</u>

HMA NEWS

New this week on HMA Information Services (HMAIS): Medicaid Data

- Alabama Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Arkansas Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Colorado Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Connecticut Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Delaware Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Georgia Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Hawaii Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Iowa Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Kansas Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Kentucky Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Louisiana Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Massachusetts SNP Membership at 61,143, Mar-21 Data
- California SNP Membership at 187,840, Mar-21 Data
- Illinois SNP Membership at 7,766, Mar-21 Data
- Maine SNP Membership at 22,549, Mar-21 Data
- Mississippi SNP Membership at 39,411, Mar-21 Data
- Missouri SNP Membership at 43,936, Mar-21 Data
- Nevada SNP Membership at 14,529, Mar-21 Data
- New Mexico SNP Membership at 15,039, Mar-21 Data
- North Carolina SNP Membership at 114,801, Mar-21 Data
- Missouri Medicaid Managed Care Enrollment is Up 6.9%, Jun-21 Data
- Nebraska Medicaid Managed Care Financial Auditor RFP, Jul-21

Public Documents:

Medicaid RFPs, RFIs, and Contracts:

- DC Medicaid Managed Care RFP, Proposals, Evaluations, and Related Documents, 2020-21
- Georgia Medicaid Non-Emergency Medical Transportation (NEMT) Services RFP, Jul-21
- Idaho Medicaid Non-Emergency Medical Transportation ITN, Jul-21
- Louisiana PACE RFI, Jul-21
- New Jersey Medicaid EVV Management System RFP, Proposals, and Scoring, 2019-20
- Oregon Medicaid Enterprise System Interoperability Patient Access and Provider Directory RFP, Jul-21

Medicaid Program Reports, Data and Updates:

- Maryland Health Insurance Exchange Audit, May-21
- Massachusetts MassHealth Payments for Hospice-Related Services for Dual-Eligible Members Audit Report, Jul-21
- Montana HEART Program Section 1115 Demonstration Waiver Application DRAFT, Jul-21
- Nebraska DHHS Monthly Medicaid Expansion Reports, Jul-21

- New Jersey Medical Assistance Advisory Council Meeting Materials, Jul-21
- Ohio OhioRISE Advisory Council Meeting Materials, 2020-21
- Rhode Island Medicaid Annual Expenditure Reports, SFY 2013-19
- Tennessee Medicaid Advisory Committee Meeting Materials, 2019-20, Mar-21
- Texas Quarterly Reports from the HHS Ombudsman Managed Care Assistance Team, FY 2019-21
- Vermont Medicaid and Exchange Advisory Board Meeting Materials, Jun-21

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