HEALTH MANAGEMENT ASSOCIATES

HMA Weekly Roundup

Trends in Health Policy

October 6, 2021







RFP CALENDAR
HMA News

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THIS WEEK

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IN FOCUS

STRATEGIC APPROACHES TO UTILIZATION OF AMERICAN RESCUE PLAN ACT FUNDS TO SUPPORT OLDER ADULTS

This week, our *In Focus* highlights the issue brief, *Strategic Approaches to Utilization of American Rescue Plan Act Funds to Support Older Adults*, written by HMA Principal Madeleine Shea, PhD and Senior Consultant Aaron Tripp,

<u>MSW</u> and distributed by Milbank. The issue brief provides an overview of key provisions of the American Rescue Plan Act (ARPA) of 2021, which offer the potential to make communities better places to grow older. ARPA provides an opportunity for states to build sustainable, person-centered systems and infrastructure for older Americans. These provisions aim to allow older Americans to age in their home and communities. The provisions examined in the issue brief include addressing both long-standing and emerging needs of older adults for state government officials, including staff of Medicaid, aging, and housing and community development agencies; state legislators and their staff; and advisors to governors.

Please click here to read the issue brief.

For questions, please contact Madeleine Shea and Aaron Tripp.



California

California Law Allows Exchange Members to Add Parents as Dependents. *Health Payer Specialist* reported on October 6, 2021, that California Governor Gavin Newsom signed legislation allowing Exchange plan enrollees to claim parents as dependents, effective January 1, 2023. California is the only state with such a law in place. <u>Read More</u>

Florida

Florida County Votes to Implement Medicaid Provider Tax. *The Citrus County Chronicle* reported on September 29, 2021, that Citrus County commissioners voted to implement a provider tax aimed at increasing federal Medicaid payment to Citrus Memorial Hospital and Bayfront Health Seven Rivers. In 2020, Medicaid reimbursements covered 60% of the costs associated with health care services provided at the hospitals. <u>Read More</u>

Iowa

Iowa Medicaid Managed Care Contract Is Eyed by CareSource. *The Dayton Business Journal* reported on September 29, 2021, that Ohio-based CareSource confirmed its intent to bid for an Iowa Medicaid managed contract. Iowa is expected to release a request for proposals on or around December 22 for the business, which includes Medicaid and Children's Health Insurance Program members. Contracts are expected to be awarded in fall of 2022, with implementation beginning in summer 2023. Iowa will award up to four plans. Read More

Kentucky

Kentucky Receives Partial Federal Approval of HCBS Spending Plan. The Kentucky Department for Medicaid Services (DMS) announced on October 4, 2021, that the state has received partial federal approval of its spending plan for home and community-based services funding provided by the American Rescue Plan Act. DMS is working with the Centers for Medicare & Medicaid Services to gain full approval. Read More

Missouri

Missouri Begins Processing Medicaid Expansion Applications. *KMBC News* reported on October 1, 2021, that Missouri began processing Medicaid expansion applications today, with up to 275,000 individuals expected to enroll. Missouri voters approved Medicaid expansion in August 2020. <u>Read More</u>

Nebraska

Nebraska Implements Enhanced Medicaid Expansion Program. 101 Now reported on September 30, 2021, that Nebraska implemented an enhanced Medicaid expansion program on October 1, providing physical and behavioral health, pharmacy benefits, dental, vision, and over-the-counter drugs to all eligibles. The state dropped its prior "tiered" expansion program, in which beneficiaries needed to meet work requirements before receiving dental, vision, and over-the-counter drugs. Read More

New Mexico

New Mexico Issues Additional Pandemic Emergency Funds for Low-Income Families. New Mexico issued on October 2, 2021, \$5.6 million in additional Pandemic Emergency Assistance Funds to nearly 13,000 eligible families. The one-time cash payments of \$446 per family are intended for emergency needs like housing, utility payments, food, clothing, and back-to-school expenses. Read More

New York

New York Seeks Applicants for Health Care Facility Transformation Grants. The New York State Department of Health released on September 30, 2021, a request for applications (RFA) for health care providers interested in receiving grants from the Statewide Health Care Facility Transformation Program III. The grants, totaling more than \$500 million, will support capital projects, debt retirement, working capital, mergers, and acquisitions. The state will host a webinar for potential applicants on October 14. Proposals are due by January 12. Read More

Governor Signs Order Allowing Use Out-of-State TeleHealth Providers. *mHealth Intelligence* reported on October 4, 2021, that New York Governor Kathy Hochul signed a 30-day executive order allowing out-of-state providers to treat patients via telehealth. The order, which expires after October 27, also allows virtual nursing home visits and emergency medical technicians to treat patients at alternative locations. Hochul stated that the order is meant to alleviate staffing shortages caused by the pandemic. Read More

North Carolina

North Carolina Enacts Law to Strengthen Regulation of PBMs. *The Salisbury Post* reported on September 30, 2021, that North Carolina Governor Roy Cooper signed legislation strengthening the state's regulation of pharmacy benefit managers (PBMs). The law requires PBMs to obtain a license before operating in the state, blocks overpayment of fees, protects the ability of pharmacies to dispense medication, and allows the state insurance commissioner to ask for a court order forcing PBMs to pay restitution to pharmacies if they violate certain policies. <u>Read More</u>

Ohio

Ohio Official's Investments in Medicaid Plans Draw Scrutiny. *The Ohio Capital Journal* reported on October 6, 2021, that Ohio Medicaid director Maureen Corcoran has retained ownership of stock in corporations with large state contracts since taking the job in 2019, according to an article in *The Ohio Capital Journal*. According to the article, she "won't say if she filed legally required affidavits" disclosing the level of these. "Violations of the law could carry criminal penalties and invalidate contracts signed without proper disclosures," the article says. Read More

Hospital System Loses Bid to Take Medicaid Dispute to Supreme Court. Bloomberg Law reported on October 4, 2021, that the U.S. Supreme Court has declined to hear an appeal from Carrington Health Systems (CHS), which is disputing an attempt by the Ohio Department of Medicaid to claw-back \$12 million in Medicaid reimbursements. The state court of appeals ruled in Ohio's favor. Read More

Ohio to Increase Medicaid Provider Rates for Home and Community-based Services 6.1 Percent. *The Columbus Dispatch* reported on September 29, 2021, that Ohio will increase Medicaid provider rates for all home and community-based services (HCBS) by 6.1 percent beginning in November. Nearly 200,000 Ohio Medicaid members are enrolled in an HCBS program. Separately, the state expects to receive additional funding for HCBS through the American Rescue Plan Act. Read More

Oklahoma

Oklahoma Fails to Make Substantial Progress Reducing HCBS Waiting List, Report Finds. *News on 6* reported on October 5, 2021, that Oklahoma has failed to make substantial progress reducing waiting lists for individuals seeking care under three home and community-based services (HCBS) waivers, according to a report from the Oklahoma Legislative Office of Fiscal Transparency. The study also found that the state Department of Health and Human Services, which oversees the program, has enrolled fewer individuals than it has capacity for. Read More

Oregon

Oregon Considers Giving CCOs More Flexibility to Cover Social Determinants of Health. *The Lund Report* reported on October 4, 2021, that Oregon Health Authority officials are considering whether to give coordinated care organizations (CCOs) more flexibility to cover social determinants of health as part of the next five-year Medicaid waiver. Oregon expects to submit its Medicaid waiver for federal approval in February 2022, with new CCO contracts in place by January 2023. The current waiver expires in June 2022. Read More

Pennsylvania

Federal Judge Denies Motion to Dismiss Whistleblower Lawsuit Against Walgreens. *Bloomberg Law* reported on September 30, 2021, that a federal judge in Pennsylvania denied a motion to dismiss a whistleblower lawsuit alleging Walgreens submitted false prescription drug claims to the Pennsylvania Medicaid program. However, the judge said the whistleblowers did not adequately show that the false claims led to an increase in the rate of reimbursement. The whistleblower complaints, originally submitted in May 2019, can be amended by October 12. <u>Read More</u>

South Dakota

South Dakota Amendment Would Impact Medicaid Expansion Ballot Initiatives, Officials Says. *Keloland Media Group* reported on October 1, 2021, that a proposed South Dakota constitutional amendment would require a 60 percent supermajority for Medicaid expansion ballot measures, according to the South Dakota Secretary of State's office. The amendment, which will appear on the state's June primary ballot, would require the supermajority for any measure that increases taxes or requires the state to appropriate \$10 million per year or more. Separately, supporters of Medicaid expansion in South Dakota have been seeking the necessary number of signatures to put Medicaid expansion on the ballot. <u>Read More</u>

Texas

Texas Releases STAR Health Foster Care RFP. On October 4, 2021, the Texas Health and Human Services Commission (HHSC) released a request for proposals (RFP) for the procurement of Texas STAR Health, the state's Medicaid managed care program for children and young adults in foster care. Responses are due by December 6, with awards anticipated June 2022. HHSC will award one, six-year contract beginning August 2022, with up to three two-year renewals. Historically, the contract has been worth \$361 million annually. Implementation is expected September 2023. Read More

Texas Appellate Court Pauses Medicaid Drug Marketing Lawsuit. *Law360* reported on September 30, 2021, that a federal lawsuit alleging unlawful marketing of hepatitis C drugs by Gilead should take precedence over a Texas state whistleblower suit, according to a Texas appellate court ruling. The state lawsuit was filed in May 2020, while the federal lawsuit was filed in March 2017 in federal court in Pennsylvania. <u>Read More</u>

Wisconsin

Wisconsin Chooses Veyo for Medicaid NEMT Services, Effective November 1. The Wisconsin Department of Health Services announced on September 29, 2021, that Veyo will provide non-emergency medical transportation services (NEMT) for Medicaid members beginning on November 1. The state's previous NEMT provider was MTM. Veyo provides NEMT services for Medicaid and Medicare members in seven states. Read More

National

CMMI Eyes Mandatory Payment Models That Focus on Total Cost of Care, Instead of Episodes of Care. Fierce Healthcare reported on October 5, 2021, that the Center for Medicare and Medicaid Innovation (CMMI) is eyeing a shift to more mandatory value-based payment models, including those that focus on total cost of care, instead of voluntary models that focus on every specialty or episode of care, according to director Elizabeth Fowler. CMMI found in a recent review of payment models that voluntary models have risk selection issues. Read More

25 States Take Steps to Extend Postpartum Medicaid Coverage Under American Rescue Plan. The Kaiser Family Foundation reported on October 6, 2021, that at least 25 states have taken steps to extend Medicaid postpartum coverage under the American Rescue Plan Act. For example, Illinois received approval on a waiver to extend coverage, while three other states are awaiting approval. Thirteen states have enacted legislation to extend coverage, two others are debating proposed legislation, and two others have announced plans to use existing authority to enact the change. Read More

Democrats Debate Prioritizing Medicare or Medicaid in Budget Reconciliation Bill. *The Hill* reported on September 29, 2021, that Democratic Legislators are debating whether Medicare or Medicaid should be prioritized in President Biden's \$3.5 trillion budget reconciliation bill. House Majority Whip James Clyburn (D-SC) is the leading advocate for providing Medicaid coverage to eligible recipients in non-expansion states. Sen. Bernie Sanders (I-VT) and others argue that the majority of funding should be used to enhance Medicare to include dental, vision, and hearing benefits. <u>Read More</u>

SAMHSA Grants to Community Mental Health Centers Target Impact of Pandemic on Mental Illness. The Substance Abuse and Mental Health Services Administration (SAMHSA) announced on September 28, 2021, that it is providing \$825 million in grants to 231 community mental health centers to help address the impact of the COVID-19 pandemic on individuals battling mental illness. The funding comes from previously enacted COVID relief legislation. Read More

Medicare Advantage Premiums to Decline 10 Percent in 2022, Membership to Rise 10 Percent. The Centers for Medicare & Medicaid Services (CMS) announced on September 21, 2021, that average monthly premiums for Medicare Advantage plans will decline 10 percent to \$19 in 2022. The average monthly premium for Part D coverage will increase five percent to \$33 in 2022. Medicare Advantage enrollment is expected to increase 10 percent to 29.5 million in 2022. CMS also said that a growing number of Medicare plans will offer special supplemental benefits for chronically ill individuals in 2022. Read More

GAO Report Questions Effectiveness of Medicare Merit-based Incentive Payment System. *Modern Healthcare* reported on October 4, 2021, that the Medicare Merit-based Incentive Payment System (MIPS) does not yield enough of a payoff to be worth physician participation, according to a report from the Government Accountability Office (GAO). The report found that under MIPS from 2017-19, over 90 percent of providers earned an increase in Medicare payments of less than two percent. MIPS aims to improve Medicare quality and reduce costs by paying more to physicians who score best on quality and cost. Read More



Industry News

WindRose Health Investors Completes Sale of Vital Decisions to Evolent Health. WindRose Health Investors announced on October 6, 2021, that it has completed the sale of New Jersey-based Vital Decisions to Virginia-based Evolent Health. Vital Decisions will be part of Evolent's clinical solutions segment. Read More

Kepro Acquires eQHealth. Kepro announced on October 1, 2021, the acquisition of eQHealth Solutions, which offers population health management technology services. <u>Read More</u>

Addus HomeCare Acquires Summit Home Health in Chicago. Addus HomeCare announced on October 4, 2021, the acquisition of Summit Home Health, which serves about 240 patients daily in the greater Chicago area. <u>Read More</u>

Devoted Health Launches Medicare Advantage Plans in Chicago. Devoted Health announced on October 1, 2021, the launch of Medicare Advantage plans in the greater Chicago-area counties of Cook, DuPage, Kane, Kendall, McHenry, Lake, and Will. Devoted Health's Chicago team will be led by market president Sheffield Young. <u>Read More</u>

Pharos Capital Group Acquires THEMA Health Services. Pharos Capital Group announced on October 4, 2021, the acquisition of Arizona-based THEMA Health Services, a provider of hospice, skilled home health, and palliative care services. Founder Theresa Lungwitz will retain a minority stake and serve as executive chairwoman. Read More

Ensign Group Acquires Skilled Nursing Facilities in TX, ID. The Ensign Group announced on October 4, 2021, the acquisition of two skilled nursing facilities in Texas: 98-bed River Pointe of Trinity Healthcare and Rehabilitation Center and 150-bed Park Village Healthcare and Rehabilitation; and one in Idaho: 80-bed Skyline Transitional Care Center. Ensign now has 245 healthcare operations across 13 states. Read More

Sun Life Financial Announces Definitive Agreement to Acquire DentaQuest. Sun Life Financial announced on October 3, 2021, a definitive agreement to acquire Boston-based DentaQuest for \$2.475 billion. DentaQuest is the largest provider of Medicaid dental benefits in the U.S., with more than 33 million members in 36 states. DentaQuest's minority shareholder Centerbridge will sell its shares as part of the transaction. Read More

Health Plan to Pay \$71 Million to IL, AR in Medicaid Drug Pricing Settlement. *Modern Healthcare* reported on September 30, 2021, that Centene will pay a combined \$71 million to Illinois and Arkansas to settle allegations that it overcharged state Medicaid departments for prescription drugs. Centene already agreed to pay a combined \$143 million to Ohio and Mississippi to settle similar allegations and has reserved \$1.1 billion for future settlements. Read More

Cigna, Humana, UnitedHealth to Expand into New Medicare Advantage Markets in 2022. *Market Watch* reported on October 1, 2021, that Cigna, Humana, and UnitedHealthcare will expand into additional Medicare Advantage markets in 2022. Cigna plans to enter 108 new counties in 2022, Humana to enter 115 new counties, and UnitedHealth Group to enter 276 new counties. Read More

RFP CALENDAR

Tell 2021	Date	State/Program	Event	Beneficiaries
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COMPANY ANNOUNCEMENTS

MCG Clinical Editors to Speak at CCMC's 2021 Virtual Symposium

HMA NEWS

New this week on HMA Information Services (HMAIS):

Medicaid Data

- Georgia Medicaid Management Care Enrollment is Up 10.5%, Oct-21 Data
- Illinois Medicaid Managed Care Enrollment is Up 3.7%, Jun-21 Data
- Missouri Medicaid Managed Care Enrollment is Up 9.7%, Sep-21 Data
- New Jersey Medicaid Managed Care Enrollment is Up 7.1%, Aug-21 Data
- New York CHIP Managed Care Enrollment is Down 4.1%, May-21 Data
- New York Medicaid Managed Care Enrollment is Up 3%, May-21 Data
- North Carolina Medicaid Enrollment by Aid Category, Jun-21 Data
- North Carolina Medicaid Managed Care Enrollment is More Than 1.6 Million, Jul-21 Data
- Ohio Dual Demo Enrollment is Up 2.1%, Sep-21 Data
- Rhode Island Dual Demo Enrollment is Down 0.5%, Sep-21 Data
- Tennessee Medicaid Managed Care Enrollment is Up 4.6%, Jul-21 Data
- Utah Medicaid Managed Care Enrollment is Up 8.8%, Jun-21 Data

Public Documents:

Medicaid RFPs, RFIs, and Contracts:

- Indiana Fee-for Service Program Prior Authorization and Utilization Management Services RFI, Sep-21
- Massachusetts Dental Third-Party Administrator RFR and Proposals, 2015
- Texas STAR Health Foster Care RFP, Oct-21

Medicaid Program Reports, Data and Updates:

- Arkansas Plan for HCBS Implementation of the American Rescue Plan Act, 2021
- Arizona Plan for HCBS Implementation of the American Rescue Plan Act, 2021
- Georgia Plan for HCBS Implementation of the American Rescue Plan Act, 2021
- Kentucky Plan for HCBS Implementation of the American Rescue Plan Act, 2021
- Maryland Medicaid Advisory Committee Meeting Materials, Sep-21
- Massachusetts Health Safety Net Annual Reports, 2015-19
- Minnesota Plan for HCBS Implementation of the American Rescue Plan Act, 2021
- Montana Plan for HCBS Implementation of the American Rescue Plan Act, 2021
- Ohio Plan for HCBS Implementation of the American Rescue Plan Act, 2021
- Oklahoma DHS HCBS Waiting List Evaluation Report, 2021
- Texas STAR Kids Advisory Committee Annual Reports, 2019-21

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