

HEALTH MANAGEMENT ASSOCIATES

# HMA Weekly Roundup

Trends in Health Policy

..... March 17, 2021 .....



[RFP CALENDAR](#)  
[HMA News](#)

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## THIS WEEK

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## IN FOCUS

### HIGHLIGHTS FROM KAISER/HMA 50-STATE MEDICAID DIRECTOR SURVEY COVID-19 UPDATE FOR FY 2021 AND FY 2022

This week, our *In Focus* section shares key takeaways from the Kaiser Family Foundation (KFF) and Health Management Associates (HMA) mini-survey of

Medicaid directors in all 50 states and the District of Columbia titled, *Medicaid Spending and Enrollment Trends Amid the COVID-19 Pandemic – Updated for FY 2021 & Looking Ahead to FY 2022*. The survey, released on March 12, 2021, is an update to the 20<sup>th</sup> annual Medicaid Budget Survey conducted by KFF and HMA. The brief is authored by Elizabeth Hinton , Lina Stolyar , and Robin Rudowitz from KFF with survey assistance and dissemination from HMA Principal [Kathy Gifford](#) and Consultant [Anh Pham](#).

### Background

Of the 50 states KFF reached out to, 38 states responded to the survey. These states accounted for over three-quarters of total Medicaid enrollment. The 13 states that did not respond were Arkansas, the District of Columbia, Georgia, Hawaii, Idaho, Louisiana, New Hampshire, New Jersey, New Mexico, Ohio, Texas, Utah, and Vermont.

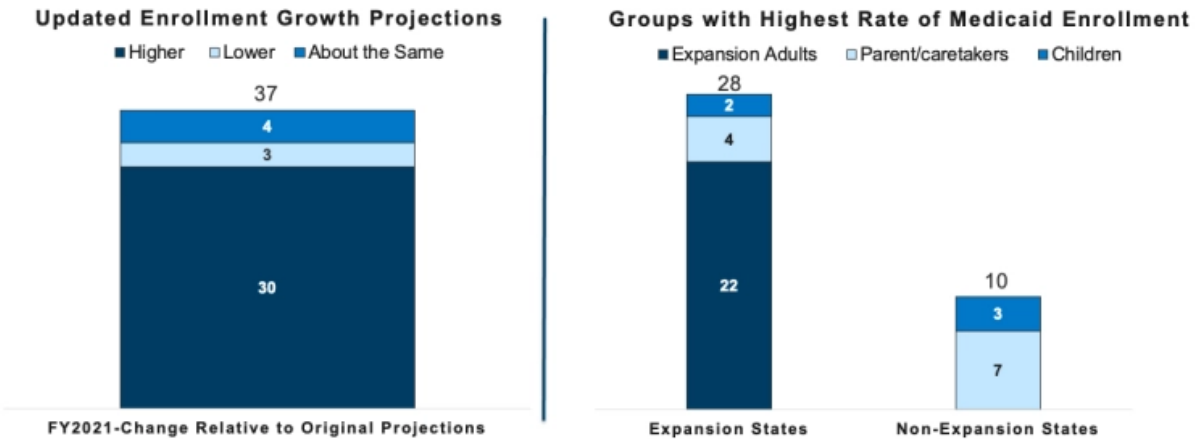
The COVID-19 pandemic impacted states significantly, causing state revenues to decline in FY 2020, with expected declines in FY 2021. In the annual survey conducted in June through August of 2020 and released in October 2020, states predicted Medicaid enrollment would increase 8.2 percent in FY 2021 and spending would increase by 8.4 percent in FY 2021.

### Medicaid Enrollment

The survey follow-up found that 30 out of 37 states expect overall Medicaid enrollment to exceed the original projections. Furthermore, of the 28 states that expanded Medicaid, 22 states indicated “expansion adults” have experienced the highest rate of enrollment growth in FY 2021. Among the 10 states that did not expand Medicaid, seven found “parent/caretakers” have experienced the highest enrollment growth in FY 2021.

More than half the states said the projections reflect the assumption that the public health emergency (PHE) would remain in effect through calendar year 2021, partway through FY 2022. States expect a gradual enrollment decline beginning in calendar year 2022 after the expiration of continuous coverage requirements.

## FY 2021 Medicaid enrollment growth projections and groups with highest growth rates amid COVID-19



NOTES: FY 2021—States were asked about current projections relative to projections made at the beginning of FY 2021. We do not show data for states with no projections available. For groups with highest enrollment growth, persons with disabilities and seniors were available responses but were not selected as experiencing the highest rate of growth by any state. 38 states submitted survey responses by early March 2021.  
 SOURCE: KFF survey of Medicaid officials in 50 states and DC conducted by Health Management Associates, February 2021.



Source: Kaiser Family Foundation

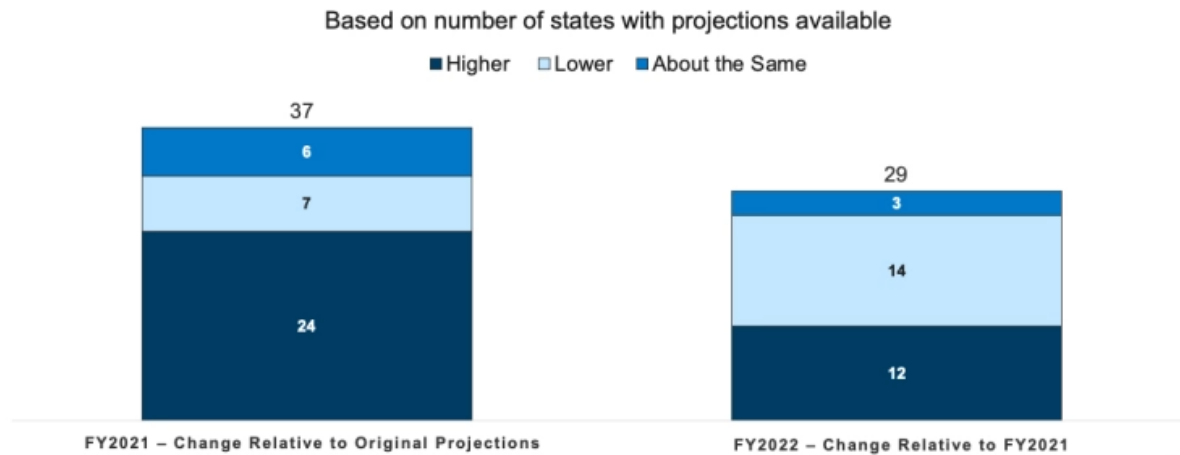
### Medicaid Spending

Similarly, the majority (24 of 37) of states expect to exceed their original total Medicaid expenditure projections for FY 2021. Of these, all except one state say higher Medicaid enrollment is the most significant driver of FY 2021 Medicaid expenditures. Only four states expected lower Medicaid expenditures due to lower utilization; three of these states have fee-for-service delivery models that would immediately reflect the lower utilization in expenditures.

Nine of 38 states reported implementing mid-year cost containment policy actions, including provider rate cuts, managed care plan rate adjustments, and benefit restrictions/expansions in FY 2021. In FY 2022, 12 states plan to make mid-year cost containment policy actions.

Of the 29 states that made projections for FY 2022, states were divided in whether total Medicaid expenditures would increase or decrease/stay the same relative to FY 2021. However, the state portions of spending are likely to accelerate in FY 2022 when the PHE and enhanced federal match rate (FMAP) expire.

## FY 2021 and FY 2022 Medicaid spending growth projections amid COVID-19



NOTES: FY 2021—States were asked about current projections relative to projections made at the beginning of FY 2021. FY 2022—States were asked about FY 2022 growth projections relative to FY 2021. We do not show data for states with no projections available. 38 states submitted survey responses by early March 2021. SOURCE: KFF survey of Medicaid officials in 50 states and DC conducted by Health Management Associates, February 2021.



Source: Kaiser Family Foundation

### Looking Ahead

States must account for the impacts of the COVID-19 pandemic as they adopt budgets for FY 2022. Medicaid enrollment can continue to grow in FY 2022, as individuals continue to struggle from the economic downturn and from the additional special enrollment period for the Affordable Care Act Exchanges. Although the rate of growth will slow as states resume eligibility renewals and redeterminations. States will also need to consider the end of the enhanced FMAP once the public health emergency is over.

As a companion piece to the Medicaid Director survey update, KFF also looked at how Medicaid agencies are assisting with the COVID-19 vaccine roll-out. The brief can be found [here](#).

[Medicaid Spending and Enrollment Trends Amid the COVID-19 Pandemic – Updated for FY 2021 & Looking Ahead to FY 2022 Brief](#)



## HMA MEDICAID ROUNDUP

### *Alabama*

**Democratic Lawmakers Push Governor to Expand Medicaid.** *AL.com* reported on March 16, 2021, that Alabama Democratic lawmakers are pushing Governor Kay Ivey to take advantage of federal incentives offered by the Biden administration to implement Medicaid expansion. Ivey is reportedly open to discussing Medicaid expansion, which could cover an additional 300,000 individuals in the state. [Read More](#)

**Alabama Medicaid Expansion Advocates Point to Federal Incentives for Expansion.** *Alabama Political Reporter* reported on March 12, 2021, that advocate groups Alabama Arise and the Cover Alabama Coalition in Alabama are urging the state to take advantage of new Medicaid expansion incentives. The newly enacted American Rescue Plan Act gives non-expansion states, like Alabama, a five percentage-point bump in federal Medicaid matching funds over two years if they implement Medicaid expansion. The incentive would bring in an additional \$940 million in federal Medicaid funds for Alabama, according to a [report](#) from the Center of Budget Priority and Policies. Medicaid expansion would cover an additional 300,000 individuals in the state. [Read More](#)

### *Arizona*

**Hospital Fee-Funded Enhanced Medicaid Rates Help Boost Banner Health Revenues.** *Modern Healthcare* reported on March 15, 2021, that Phoenix-based Banner Health reported revenue gains from Arizona's hospital fee-funded enhanced Medicaid reimbursement that took effect in October 2020, according to chief financial officer Dennis Laraway. The fee, which draws additional federal matching funds, brings Medicaid reimbursements roughly in line with Medicare reimbursements. [Read More](#)

### *Hawaii*

**Hawaii Tentatively Delays QUEST Integration Medicaid Managed Care Awards Until March 18.** The Hawaii Department of Human Services (DHS) announced on March 16, 2021, that it had tentatively delayed the award of QUEST Integration (QI) Medicaid managed care contracts until March 18, 2021. Awards were initially scheduled to be announced March 15.

## Illinois

**Illinois Lawmakers to Consider Bill on Medicaid Coverage for Doula Services.** *The Chicago Tribune* reported on March 12, 2021, that Illinois lawmakers plan to consider a bill allowing Medicaid to cover doula services for weekly at-home prenatal care, labor and delivery, and one year of postpartum care. The bill, co-sponsored by state Representative Mary Flowers (D-Chicago), is aimed at addressing data that show that women covered under Medicaid are five times more likely to die from pregnancy-related conditions. Only four other states cover doula services for Medicaid beneficiaries. [Read More](#)

## Louisiana

**Louisiana Medicaid Plan Healthy Blue Names Christy Valentine as President.** Louisiana Medicaid managed care plan Healthy Blue announced on March 11, 2021, that Christy Valentine, M.D. has been named president. Valentine previously served as Medicare regional medical director for Anthem. Valentine succeeds Aaron Lambert, who was recently named Anthem Medicaid chief growth officer. Healthy Blue is a joint venture between Blue Cross Blue Shield of Louisiana and Anthem. [Read More](#)

## Massachusetts

**Massachusetts Ranks Highest in Key Medicaid Metrics, Report Says.** *WalletHub* reported on March 15, 2021, that Massachusetts ranked highest in a tally of 12 key Medicaid metrics, including spending per low-income population, eligibility and enrollment, adult care quality, and transparency in reporting quality measures. Also ranking in top five were Rhode Island, Vermont, Pennsylvania, and Connecticut. [Read More](#)

## Nevada

**Nevada Releases Medicaid Managed Care RFP.** On March 17, 2021, the Nevada Department of Health and Human Services, Division of Health Care Financing and Policy (DHCFP), released a Medicaid managed care request for proposals (RFP). Contracts, which are for the urban two-county area of Clark and Washoe, are expected to run from January 1, 2022, to December 31, 2025, with a possible two year extension. The state can extend the geographic service area under the contract. DHCFP's actuary will hold a public meeting on April 2, 2021, to present an overview of 2022 rate development to potential bidders. Proposals are due May 13, 2021, with awards to be announced September 7, 2021. Current incumbents are Anthem/Amerigroup, UnitedHealthcare/Health Plan of Nevada, and Centene/SilverSummit Health Plan. There are approximately 580,000 individuals enrolled in Nevada Medicaid plans. [Read More](#)

## New York

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

**New York Budget Proposals Restore Health Care Funding, Strike Down Medicaid Drug Carve-out.** *Crain's New York* reported on March 16, 2021, that the New York Senate and Assembly announced their respective budget proposals, which look to restore about \$3.2 billion in state Department of Health funding, including \$60 million for managed care and \$52 million to \$74 million for managed long-term care. Both proposals also strike down or delay the state's plan to carve Medicaid drug benefits out of managed care. [Read More](#)

**New York Disability Providers Were Shortchanged on Enhanced FMAP Aid, Advocate Says.** *The Times Union* reported on March 10, 2021, that not-for-profit organizations and other providers serving individuals with developmental disabilities never received any of the \$400 million in enhanced Federal Medical Assistance Percentage (FMAP) funds earmarked for them, according to New York Disability Advocates president Tom McAlvanah. A state spokesman said no FMAP funds have been withheld. [Read More](#)

## Ohio

**Ohio Files Lawsuit Claiming Medicaid Plan Charged for Duplicative PBM Services.** *The Columbus Dispatch* reported on March 11, 2021, that Ohio filed a state lawsuit claiming that Centene's Buckeye Health Plan used \$20 million in Medicaid funds to pay its wholly owned subsidiaries for duplicative pharmacy benefit management (PBM) services. The lawsuit, filed by Ohio Attorney General Dave Yost in Franklin County Common Pleas Court, says that the payments went to Centene companies Envolve and Health Net for services already provided by the state's Medicaid PBM CVS Caremark, resulting in per-prescription costs that were double other Medicaid plans in the state. Centene called the lawsuit's claims "unfounded," adding that "Envolve will aggressively defend the integrity of the pharmacy services provided." [Read More](#)

## Oklahoma

**Oklahoma Medicaid Covers Methadone, Naltrexone, Other Treatments for Opioid Use Disorder.** *News 9* reported on March 16, 2021, that Oklahoma has received federal approval to provide Medicaid coverage for methadone, naltrexone, counseling, behavior therapy, and other treatments for opioid use disorder. Coverage, which is retroactive to October 1, 2020, is expected to help about 3,500 individuals on Medicaid in the state now and more when Oklahoma implements Medicaid expansion in July. [Read More](#)

**House Passes Bill to Limit Governor's Control Over Medicaid.** KPVI reported on March 11, 2021, that the Oklahoma House passed a bill that would require all appropriated Medicaid funds to be spent "in accordance with legislative intent." The move is an effort to regain some administrative control over Medicaid, following the decision by Governor Kevin Stitt to transition the program to managed care. The bill, sponsored by Representative Carol Bush (R-Tulsa), would also set certain service and provider standards as well as rules for certain contracts negotiated by the Oklahoma Health Care Authority. [Read More](#)

## Oregon

**Governor Urges Passage of Medicaid Coverage Bill for Undocumented Individuals.** *The Lund Report* reported on March 16, 2021, that Oregon Governor Kate Brown is urging state lawmakers to pass a bill that would offer Medicaid coverage to undocumented adults who make up to 138 percent of poverty. The bill would provide \$10 million to cover up to 2,000 adults for one year under a pilot program. [Read More](#)

## Puerto Rico

**Puerto Rico Seeks State-like Medicaid Funding Status, Transition Away from Block Grant.** *The Osceola News-Gazette* reported on March 14, 2021, that Puerto Rico Governor Pedro Pierluisi wants to transition federal Medicaid funding for the territory to a fully funded state-like program instead of the current statutorily capped block grant. In a letter to the U.S. Senate Finance and House Ways & Means Committees, Pierluisi also said the Federal Medical Assistance Percentage (FMAP) for Puerto Rico should be based on the territory's per capita income relative to that of the nation. Pierluisi expects a Medicaid fiscal cliff on September 30 if Puerto Rico does not receive continued federal funding. Puerto Rico's Medicaid program received \$2.7 billion for fiscal 2021 at an increased FMAP of 76 percent (plus \$200 million based on meeting certain requirements) and an additional \$2.8 billion from the Families First Coronavirus Response Act. [Read More](#)

## South Carolina

**South Carolina Official Urges CMS to Uphold Medicaid Work Requirements.** A South Carolina official, on March 11, 2021, urged federal regulators to uphold Medicaid work requirements. In a letter to the Centers for Medicare & Medicaid Services (CMS), state Department of Health and Human Services acting director Thomas Clark Phillip called work requirements an innovative approach to promoting better health outcomes and financial independence. [Read More](#)



## Tennessee

**Tennessee to Release Medicaid Managed Care RFP in 2Q21.** Tennessee announced that it expects to release a request for proposals (RFP) for its Medicaid managed care program, TennCare, in the second quarter of 2021. Current Medicaid managed care contracts expire December 31, 2022. Incumbent plans Blue Cross Blue Shield of Tennessee, Anthem/Amerigroup and UnitedHealthcare currently serve 1.5 million Medicaid members in the state. [Read More](#)

## Texas

**Texas Can Remove Planned Parenthood from Medicaid, Judge Rules.** CNN reported on March 10, 2021, that a Texas judge is allowing the state to exclude Planned Parenthood from participating in its Medicaid program. Planned Parenthood reported that it served 8,000 Medicaid recipients in Texas in 2019. [Read More](#)

## Washington

**Washington Governor Proposes Medicaid Rate Increase for Family Planning Services.** *Crosscut* reported on March 15, 2021, that Washington Governor Jay Inslee has proposed a Medicaid rate increase of 162 percent for family planning and reproductive services as part of the state's fiscal 2021-23 budget. The legislature is expected to finalize the two-year state budget in late April. Family planning providers attribute financial struggles and closures to the state's low Medicaid reimbursement rates. [Read More](#)

## Wisconsin

**Wisconsin Could Save \$1.6 Billion by Implementing Medicaid Expansion, Report Finds.** *The Wisconsin State Journal* reported on March 11, 2021, that Medicaid expansion would provide more than \$1.6 billion in general fund savings over the 2021-23 fiscal biennium as a result of new federal incentives, according to a report by the nonpartisan Legislative Fiscal Bureau. The newly enacted American Rescue Plan Act of 2021 (ARPA) would provide more than \$1 billion in savings in fiscal 2022, on top of \$635 million in enhanced Federal Medical Assistance Percentage funds. Governor Tony Evers included Medicaid expansion in his latest budget proposal but continues to face Republican opposition. Expansion would cover about 91,000 individuals. [Read More](#)

**Wisconsin Clears Medicaid Long-Term Care Services Waiting List.** *WSAW* reported on March 10, 2021, that the Wisconsin Department of Health Services has cleared the waiting list for Medicaid-eligible adults in need of long-term care services, including services offered through home and community based care programs aimed at individuals with physical or developmental disabilities. Currently, there are more than 77,000 people participating in these programs. [Read More](#)

## National

**Medicaid HCBS Providers Could Get \$11 Billion in Enhanced FMAP Funds, Kaiser Projects.** The Kaiser Family Foundation (KFF) reported on March 15, 2021, that home and community-based services (HCBS) providers nationwide could receive a projected \$11.4 billion in additional federal funds as a result of enhanced Federal Medical Assistance Percentage (FMAP) rates available through the Biden administration's COVID-19 relief package. The increase, which amounts to a 10 percentage point bump in FMAP, will be available from April 1, 2021 through March 31, 2022, provided states maintain current levels of HCBS spending as of April 1. Additional funds must be used to "implement, or supplement the implementation of, one or more activities to enhance, expand, or strengthen" Medicaid HCBS. [Read More](#)

**Expansion of Telehealth Flexibilities Results In Some Unintended Consequences.** *Modern Healthcare/Kaiser Health News* reported on March 15, 2021, that telehealth flexibilities put in place by states to address provider access problems caused by COVID-19 have resulted in some unintended consequences, including a rise in fraud and conflicts between in-state and out-of-state providers. Concerns include new competitive pressures on local providers and whether legislation is needed to ensure out-of-state providers have the same licensing requirements as in-state providers. [Read More](#)

**Medicaid Enrollment, Spending to Exceed Fiscal 2021 Projections, Survey Says.** The Kaiser Family Foundation (KFF) reported on March 12, 2021, that Medicaid enrollment and spending in fiscal 2021 is expected to exceed projections, according to a 50-state survey of Medicaid directors. Much of the enrollment growth has come from Medicaid expansion-eligible adults, the survey said. [Read More](#)

**MACPAC Releases March 2021 Report to Congress.** The Medicaid and CHIP Payment and Access Commission (MACPAC) released its March 2021 Report to Congress on Medicaid and CHIP. The report focused on improving Medicaid's responsiveness during economic downturns, addressing concerns about high rates of maternal morbidity and mortality, reexamining Medicaid's estate recovery policies, integrating care for people who are dually eligible for Medicaid and Medicare, and improving hospital payment policy for safety-net hospitals. [Read More](#)

**U.S. Supreme Court Cancels Hearings on Medicaid Work Requirements.** *Modern Healthcare* reported on March 11, 2021, that the U.S. Supreme Court has canceled oral arguments on whether to allow Medicaid work requirements to proceed in Arkansas and New Hampshire. The Biden administration, which had asked the court to cancel the hearings, has indicated that it may withdraw approvals in the nine states that received work requirement waivers from the Trump administration. [Read More](#)

**Biden Signs \$1.9 trillion COVID-19 Relief Bill.** *CNN* reported on March 11, 2021, that President Biden has signed a \$1.9 trillion COVID-19 relief package, which includes incentives for states that implement Medicaid expansion, enhanced Exchange subsidies, additional funds for rural hospitals, and a 2024 effective date for removing the cap on Medicaid drug rebates. [Read More](#)

**Congress to Decide Whether to Extend Moratorium on Medicare Provider Cuts.** *Modern Healthcare* reported on March 11, 2021, that the U.S. House is scheduled to vote on whether to extend the moratorium on a two percent sequester cut to Medicare providers, which Congress temporarily lifted in December 2020 in response to the COVID-19 pandemic. The cut, which began in 2013, would take effect again on April 1 without further Congressional action. Hospitals support the continued moratorium. [Read More](#)



## INDUSTRY NEWS

**Most Big Hospitals Have Not Followed Price Transparency Rule, Study Shows.** *Modern Healthcare* reported on March 16, 2021, that nearly two-thirds of the country's largest hospitals have failed to comply with a federal price transparency rule compelling them to publicly list prices negotiated with insurers, according to a [study](#) recently published in *Health Affairs*. The federal rule, which took effect January 1, 2021, is designed to help consumers be better healthcare shoppers and to incentivize providers to lower prices through the publication of payer-specific negotiated rates. [Read More](#)

**Lighthouse Autism Center Acquires Indiana-based ABA Provider.** Lighthouse Autism Center announced on March 17, 2021, the acquisition of Indiana-based A Step Ahead, an Applied Behavior Analysis (ABA) and Pediatric therapy provider. Lighthouse Autism also announced two new center locations in Valparaiso, IN; and Niles, MI. [Read More](#)

**BayMark Health Services Acquires PIDARC.** Medication-assisted treatment (MAT) provider BayMark Health Services announced on March 16, 2021, that it had completed the acquisition of PIDARC (Partners in Drug Abuse Rehabilitation Counseling), a MAT provider based in the District of Columbia. Baymark operates 97 opioid treatment programs across the country. [Read More](#)

**Wellspring Capital Management Completes Acquisition of Maryland-based HealthPRO Heritage.** Private equity firm Wellspring Capital Management announced on March 15, 2021, that it has completed the acquisition of Maryland-based therapy service provider HealthPRO Heritage. HealthPRO Heritage's current management will retain a significant equity position and remain in their roles. [Read More](#)

**Stepping Stones Group Acquires EBS Healthcare.** The Stepping Stones Group announced on March 15, 2021, that it acquired EBS Healthcare, a Pennsylvania-based provider of clinic, school, and home-based behavioral and therapeutic services to children with autism, special needs, and developmental/behavior issues. The two companies will remain legally separate but will be managed by a combined leadership team. EBS founder and chief executive Mark Stubits will become vice chairman of the Stepping Stones board. [Read More](#)

## RFP CALENDAR

Date	State/Program	Event	Beneficiaries
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 13, 2021	Nevada	Proposals Due	580,000
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
Q2 2021	Tennessee	RFP Release	1,500,000
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
September 7, 2021	Nevada	Awards	580,000
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	Nevada	Implementation	580,000
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

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## HMA WELCOMES

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### **Bruce Chernof, MD, FACP - Principal**

An expert in public policy and health systems practice related to adults with complex needs and other vulnerable populations, Bruce Allen Chernof, MD, FACP, has three decades of experience as a healthcare executive, educator, and physician..

Dr. Chernof joins HMA while also continuing to serve as a non-resident senior fellow at the Schaeffer Center for Health Policy and Economics at the University of California.

From 2008-2021, Dr. Chernof served as president and chief executive officer (CEO) of The SCAN Foundation, whose mission is to advance a coordinated and easily navigated system of high-quality services for older adults that preserves dignity and independence. In this role, he served as chairman of the federal Commission on Long-Term Care, which produced a bipartisan report to Congress recommending reforms for our nation's long-term care financing, delivery system, and workforce needs.

Under his leadership, The SCAN Foundation also played a pivotal role in the creation of new community-based benefits in the Medicare program, and in California, led the movement that created the state's first Master Plan for Aging.

Prior to leading The SCAN Foundation, Dr. Chernof served as director and chief medical officer for the Los Angeles County Department of Health Services; he also served as the department's senior medical director for clinical affairs and affiliations.

Earlier in his career, Dr. Chernof served as regional medical director for California Health Programs at Health Net, at the time, California's largest network-model managed care plan, where he managed the Healthy Families program statewide and the managed care Medicaid program in Los Angeles County.

He also worked as an academic general internist in the Veteran's Affairs system as well as at Olive View University of California, Los Angeles (UCLA) Medical Center, serving as a UCLA faculty member.

After 28 years of service culminating as an adjunct professor of medicine at David Geffen School of Medicine, Dr. Chernof retired from UCLA in 2018.

Dr. Chernof served as the founding director of UCLA's five-year combined Medical Doctor/Master of Business Administration program. In 2002, the Geffen School of Medicine at UCLA recognized Dr. Chernof with the Award for Excellence in Education for these innovative programs. He has had work published in a variety of journals as well as co-edited the Geriatric Care Handbook.

Dr. Chernof completed his residency and served as chief resident in internal medicine for the UCLA-San Fernando Valley Program. After residency, Dr. Chernof completed a fellowship in medical education at the UCLA School of Medicine. He earned his medical degree from UCLA and completed his undergraduate work at Harvard University.

## HMA NEWS

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

#### Medicaid Data

- Colorado RAE Enrollment is Up 1.3%, Jan-21 Data
- Indiana Medicaid Managed Care Enrollment Is Up 1.6%, Jan-21 Data
- Nevada Medicaid Managed Care Enrollment is Up 3.0%, Feb-21 Data
- North Carolina Medicaid Enrollment by Aid Category, Jan-21 Data
- Ohio Dual Demo Enrollment is Down 6.4%, Feb-21 Data
- Oklahoma Medicaid Enrollment is Up 1%, Jan-21 Data
- South Carolina Dual Demo Enrollment is Up 12.9%, 2020 Data
- South Carolina Medicaid Managed Care Enrollment is Up 0.9%, Jan-21 Data
- Utah Medicaid Managed Care Enrollment is Up 4%, Feb-21 Data

#### Public Documents:

##### *Medicaid RFPs, RFIs, and Contracts:*

- Nevada Medicaid Managed Care RFP, Mar-21
- Oklahoma Statewide Medicaid Managed Care RFP, Proposals, Scoring, Protest, and Related Documents, 2020

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

- MACPAC Reports to Congress on Medicaid and CHIP, 2017-21
- Arkansas Works Section 1115 Demonstration Waiver Reports, 2018-20
- Massachusetts Annual Medicaid Audit Report, 2019-21
- Pennsylvania Medical Assistance Advisory Committee (MAAC) Meeting Materials, Feb-21
- Pennsylvania OVR MLTSS Subcommittee Meeting Materials, Mar-21
- Texas Health and Human Services Presentations to House and Senate Committees, Mar-21
- Vermont Blueprint for Health Annual Reports, 2015-20
- Vermont Medicaid and Exchange Advisory Board Meeting Materials, Feb-21
- Vermont Medicaid Medical Spending Over \$1.4 Billion, Jun-20 Data
- Vermont Medicaid Program Enrollment and Expenditures Reports, SFY 2018-20
- Wisconsin Medicaid Expansion Incentive Funding Estimate Legislative Memo, Mar-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

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