

HEALTH MANAGEMENT ASSOCIATES

HMA Weekly Roundup

Trends in Health Policy

..... September 22, 2021



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IN FOCUS

HMA LAUNCHES NOVEL PROJECT ECHO FOR MOUD IN COUNTY JAILS

Aimed at shifting and improving the delivery of addiction treatment within county jails, Health Management Associates (HMA) will partner with the Washington/Baltimore High Intensity Drug Trafficking Area (W/B HIDTA) and Fairfax County Sheriff's Office to deliver a novel Project ECHO clinic. Funded by W/B HIDTA to support county jails in their region, the Medication

for Opioid Use Disorder (MOUD) in County Jails ECHO Clinic will provide participants with HMA training specifically focused on initiating or expanding the use of MOUD within their facilities. The project will broaden county knowledge and understanding of MOUD and its place in the criminal justice system, increase the use of MOUD with evidence-based and emerging promising practices, and promote a culture that supports MOUD in jails.

HMA has been integral in the training and education of providers and staff in jails and prisons across the country. The clinician-based team of consultants works with clients to develop systems of care which include MOUD initiation while in custody and integration of services upon release. The Project ECHO team will lean on this experience while expanding their reach to additional county jail teams.

“In the Fairfax County Adult Detention Center, both HMA and W/B HIDTA have been instrumental in helping us lay the groundwork for implementing MOUD,” said Laura Yager, Director of Correctional Health and Human Service for the Fairfax County Sheriff’s Office. “In less than two years, we have seen a marked change in outcomes for the incarcerated men and women with OUD.”

The ECHO clinics will use video capabilities to bring together the participating jail-based teams with addiction medicine specialists and other justice systems experts from the project team to improve care and patient outcomes. The addiction medicine and implementation specialists serve as mentors to help the jails’ clinical teams better understand addiction treatment and become more confident treating complex patients. In addition, the ECHO clinics expose providers to multiple cases and systems of care, while also earning continuing educational credits for participating.

“We are thrilled to be launching a Project ECHO specifically for MOUD providers in jails where the need is so great,” said Dr. Jean Glossa, HMA Managing Director and project lead. “This well-recognized ECHO model allows the panel experts to engage with jail providers to help promote evidence-based best practices for a high need and at-risk population.”

The Project ECHO training series will begin with an eight-session curriculum designed from HMA’s experience training jail teams across the country as well as W/B HIDTA’s systems approach to advancing treatment and prevention strategies across their region. Up to 20 jail teams can participate in the first series. Applicant counties are encouraged to build multi-disciplinary teams to participate in the training, which may include representatives from the county sheriff’s medical team, behavioral health team and custody leadership.

“It is important to the W/B HIDTA to partner with experts in the field such as HMA to bring innovative resources to our region in pursuit of implementing effective, evidence-based strategies. The MOUD ECHO Clinic is a critical and timely contribution to the ECHO portfolio,” states Dr. Lora Peppard, Deputy Director for Treatment and Prevention at W/B HIDTA.

HMA Managing Director, Dr. Jean Glossa, will serve as project leader and panel participant. The HMA colleagues providing subject matter expertise include:

- Shannon Robinson, MD, Principal, Board Certified Addiction Medicine Specialist
- R. Corey Waller, MD, FACEP, DFASAM, Managing Director of HMA’s Institute on Addiction

- Linda Follenweider, MS, APRN, BC, Managing Director, Justice Involved Services
- Scott Haga, PA-C, Senior Consultant
- Bren Manaugh, LCSW-S, CPHQ, CCTS, Principal
- Marc Richman, Ph.D., Principal
- Rich VandenHeuvel, MSW, Principal
- Shelly Virva, LCSW FNAP, Senior Consultant
- John Volpe, LCSW, Principal

For more information about Project ECHO, contact jglossa@healthmangement.com or to learn more about how to apply to participate, contact Rebecca Bates at rbates1@wb.hidta.org.



HMA MEDICAID ROUNDUP

Colorado

Colorado Faces Class Action Lawsuit Over Children’s Mental Health Care. *Legal Reader* reported on September 22, 2021, that three unnamed plaintiffs filed a federal class action lawsuit against the Colorado Department of Health Care Policy and Financing (HCPF) for failing to provide adequate mental health care to children enrolled in Medicaid. The suit, which names HCPF executive director Kim Bimestefer, claims the plaintiffs had to seek care for mental health crises in acute care facilities and have been refused admission to residential treatment centers. [Read More](#)

Connecticut

Connecticut Receives Federal Approval to Combine Medicaid, Housing Services. Connecticut Governor Ned Lamont announced on September 14, 2021, that the state received federal approval to combine Medicaid health coverage with a range of housing services for individuals with mental health, substance use, and other serious health conditions. The Connecticut Housing Engagement and Support Services initiative is one of five similar state programs to receive federal approval, including Arkansas, California, Minnesota, and North Dakota. [Read More](#)

Florida

Florida Regulators Approve Average Exchange Premiums Increases of 6.6 Percent. *Health News Florida* reported on September 22, 2021, that the Florida Office of Insurance Regulation approved average Exchange plan premium rate increases of 6.6 percent, beginning January 1, 2022. The rate increases require federal approval. [Read More](#)

Florida Official Proposes Shifting PACE Program to Another Regulatory Agency. *Florida Politics* reported on September 20, 2021, that the Florida Department of Elder Affairs (DOEA) proposed shifting its \$33.8 million Program of All-inclusive Care for the Elderly (PACE) to the state Agency for Health Care Administration. Richard Prudom, secretary of the Florida Department of Elder Affairs, made the proposal in remarks to the House Health Care Appropriations Committee. [Read More](#)

Florida Seeks Federal Approval to Extend Postpartum Coverage to 12 Months. The Florida Health Care Authority (HCA) announced on September 20, 2021, that it is seeking approval to increase Medicaid postpartum coverage to 12 months from 60 days, according to a waiver amendment submitted to federal regulators. Public comments will be accepted through October 19. [Read More](#)

Florida Agency Seeks Funds to Reduce HCBS Waiting List. *Florida Politics* reported on September 16, 2021, that the Florida Agency for Persons with Disabilities (APD) submitted a legislative budget request for more than \$71 million, including \$25 million to reduce the waiting list for the state's Medicaid iBudget program, which covers home and community-based services (HCBS) for individuals with intellectual and developmental disabilities. APD also requested \$2 million to hire nurses for institutionalized patients, \$28.4 million for behavioral services, and \$16 million for health care infrastructure improvements. The request did not include funding for pay raises for HCBS direct service providers. [Read More](#)

Michigan

Michigan Wins Approval to Continue Expanded Medicaid Program for Children, Pregnant Women in Flint. *The Detroit News* reported on September 16, 2021, that Michigan won federal approval to continue for another five years a waiver that expands Medicaid eligibility up to 400 percent of poverty for pregnant women and children suffering from the long-term health effects of lead exposure in Flint. The waiver, which also applies to the Children's Health Insurance Program, waives cost-sharing and premiums. An estimated 46,000 children and pregnant women have received coverage because of the expanded eligibility. [Read More](#)

Mississippi

Mississippi Economist Says Uncompensated Care Savings Would Cover State Cost of Medicaid Expansion. *Mississippi Public Broadcasting* reported on September 16, 2021, that Mississippi would be able to cover the state's share of Medicaid expansion costs through savings from other areas, according to a report from a state economist. About 75 percent of the savings would come from a reduction in uncompensated care costs from 2022 to 2027. The report also found that up to 233,000 individuals would be covered by Medicaid expansion. [Read More](#)

New Hampshire

New Hampshire Seeks IMD Exclusion Amendment. New Hampshire announced on September 21, 2021, that it is seeking approval of an amendment to use federal funds for Medicaid beneficiaries ages 21 to 64 who are receiving short-term mental health treatment in an Institution for Mental Disease. The amendment, which would apply to both Medicaid fee-for-service and managed care members, is to the state's Section 1115(a) Substance Use Disorder Treatment Recover and Access demonstration waiver. [Read More](#)

New York

New York Hospitals, Advocacy Group Seek to Improve Contracting Between CBOs, Providers, Health Plans. The Human Services Council in conjunction with the Greater New York Hospital Association and other groups released a set of recommendations on September 2, 2021, designed to improve partnerships, contracting, and value-based arrangements between community-based organizations (CBO), healthcare organizations, and managed care organizations. Among the recommendations are engaging community networks, members, and stakeholders when developing interventions to ensure that community needs are met; aligning definitions, parameters, and populations served; and for healthcare organizations specifically, evaluating the impact of CBO services on health care outcomes. [Read More](#)

North Carolina

North Carolina Court Dismisses Health Plan Appeal of State Medicaid Awards. *Bloomberg Law* reported on September 21, 2021, that the North Carolina Court of Appeals dismissed an appeal by Aetna Better Health over its failure to win a Medicaid managed care contract in the state's recent procurement. The court ruled that Aetna failed to comply with mandatory provisions for appealing state administrative agency decisions. [Read More](#)

Oklahoma

Oklahoma Fails to Win Federal Approval of HCBS Residency Requirement. *The Oklahoman* reported on September 16, 2021, that Oklahoma failed to win federal approval for a five-year residency requirement before individuals can receive home and community-based services (HCBS). The Centers for Medicare & Medicaid Services informed the Oklahoma Department of Human Services that the state law imposing the requirement was unconstitutional. The law was passed in May as part of an effort to reduce the state's HCBS waiting list. [Read More](#)

Oregon

Oregon to Seek Federal Funding for Health Equity, Social Determinants of Health. *The Lund Report* reported on September 21, 2021, that Oregon will seek millions of dollars in federal funding to address health equity and social determinants of health, according to the Oregon Health Authority. The request is expected to be part of the state's five-year Medicaid waiver renewal application. The current waiver expires on June 30, 2022. [Read More](#)

Puerto Rico

Puerto Rico Secures \$2.9 Billion in Federal Medicaid Funding for Next Fiscal Year. *The Weekly Journal* reported on September 17, 2021, that Puerto Rico has been assured that it will receive \$2.9 billion in federal Medicaid funds for the next fiscal year, according to resident commissioner Jenniffer González despite the measure having not yet been approved. Among other U.S. territories, Guam is expected to receive \$133 million, U.S. Virgin Islands \$131 million, American Samoa \$87 million, and Northern Mariana Islands \$64 million. [Read More](#)

Utah

Utah Requests Five-Year Extension of Medicaid Waiver. Utah announced on September 7, 2021, that it is seeking a five-year extension of its Medicaid Primary Care Network Demonstration waiver through June 30, 2027. The current waiver, which covers 225,000 Medicaid beneficiaries, expires June 30, 2022. The public comment period is open through October 21, 2021. [Read More](#)

Washington

Washington Increases Medicaid Fees for Behavioral Health, Primary Care Providers. The Washington Health Care Authority (HCA) submitted supplemental budget requests on September 14, 2021, to support information technology, administrative support, and extension of the state's 1115 waiver. Previously, HCA announced that effective October 1, fees for behavioral health and adult primary care providers would increase 15 percent, while fees for pediatric primary care and pediatric critical care providers would rise 21 percent. [Read More](#)

National

CMS to Include Features of Dual-Eligible Plans in Medicare Advantage Program. *Modern Healthcare* reported on September 21, 2021, that the Centers for Medicare & Medicaid Services (CMS) plans to modify the Medicare Advantage program by incorporating successful features of the dual-eligible Financial Alignment Initiative, according to Tim Engelhardt, director of the CMS Medicare-Medicaid Coordination Office. The changes, which are expected as early as this fall, are aimed at helping Medicare Advantage plans better serve the needs of dual eligibles. CMS is expected to continue to support dual Medicare-Medicaid plans despite the changes, Engelhardt said. [Read More](#)

States Fail to Adequately Monitor Medicaid Behavioral Telehealth, Report Finds. *Fierce Healthcare* reported on September 21, 2021, states are failing to adequately monitor Medicaid behavioral telehealth services for fraud and impact on access and care, according to a report from the Office of Inspector General. The report found that only two states have evaluated the effectiveness of telehealth on access to care and only one state evaluated the impact on cost. [Read More](#)

20 States To Receive Grants for Mobile Crisis Intervention Services. The Centers for Medicare & Medicaid Services announced on September 20, 2021, that it has awarded \$15 million in planning grants to 20 state Medicaid agencies for community-based mobile crisis intervention services. The funding, authorized by the American Rescue Plan, aims to help connect individuals undergoing a mental health or substance use disorder crisis to behavioral health services. [Read More](#)

House Panel Advances Proposal to Close Medicaid Expansion Coverage Gap. *Modern Healthcare* reported on September 17, 2021, that the House Energy and Commerce Committee advanced a proposal aimed at closing the Medicaid expansion coverage gap. The proposal would create a federal Medicaid look-alike program in non-expansion states, with coverage through managed care plans contracted by the U.S. Department of Health and Human Services. [Read More](#)

Five States to Receive 80 Percent Federal Match for Certain Substance Use Disorder Expenditures. The Centers for Medicare & Medicaid Services announced on September 17, 2021, that Connecticut, Delaware, Illinois, Nevada, and West Virginia will receive 80 percent in federal matching funds for three years for substance use disorder (SUD) expenditures in excess of 2018 spending levels. The award is a part of the SUD Prevention that Promotes Opioid Recovery and Treatment demonstration project. [Read More](#)

States to Receive \$350 Million to Support Safe Pregnancies, Healthy Babies. The U.S. Department of Health and Human Services announced on September 17, 2021, that it will award states with nearly \$350 million to support safe pregnancies and healthy babies. Funds will go toward expanding home visits, increasing access to doulas, addressing health disparities in infant deaths, and improved reporting on maternal mortality. [Read More](#)

Exchange Open Enrollment Period Is Extended by 30 Days. The Centers for Medicare & Medicaid Services announced on September 17, 2021, that the annual Exchange plan open enrollment period will take place from November 1, 2021 through January 15, 2022, an increase of 30 days from previous years. CMS also said that the number of Exchange Navigators available to assist consumers will increase fourfold to 1,500. [Read More](#)

MACPAC Meeting Is Scheduled for September 23-24. The Medicaid and CHIP Payment and Access Commission (MACPAC) announced on September 17, 2021, that its next meeting will be held September 23-24. Topics to be discussed are:

- Plans for the 2021-2022 report cycle;
- Beneficiary preferences for communication regarding eligibility, enrollment, and renewal;
- Associates between state eligibility processes and rates of churn and continuous coverage;
- Medicaid in the U.S. territories and considerations for long-term financing solutions;
- Medicaid levers to address concerns about the primary and specialty care workforce;
- Monitoring access to care for Medicaid beneficiaries;
- A congressionally mandated study on the Money Follows the Person demonstration program;

- A panel discussion on health information technology adoption and use by behavioral health providers to support care integration; and
- Access, coverage, and payment for vaccines for adults enrolled in Medicaid. [Read More](#)

Four States Are Awarded \$5 Million Each for Rural Health Transformation. The Centers for Medicare & Medicaid Services announced on September 10, 2021, that it had awarded \$5 million each to [Alabama](#), [Texas](#), [South Dakota](#), and [Washington](#) “to transform the way health care is delivered in rural communities.” Funding, which is through the Community Health Access and Rural Transformation (CHART) Model, includes \$2 million for the pre-implementation phase and up to \$3 million over the course of six performance periods. CHART will also provide technical assistance and other support. [Read More](#)

HHS Announces \$25.5 Billion in COVID-19 Provider Relief Funding. The U.S. Department of Health and Human Services announced on September 10, 2021, the availability of \$25.5 billion in new funding for health care providers affected by the COVID-19 pandemic. The funds include \$8.5 billion for providers who serve rural Medicaid, Children’s Health Insurance Program, or Medicare patients, and \$17 billion in Provider Relief Funds for providers impacted by the pandemic. HHS will be accepting applications on September 29, 2021. [Read More](#)

Exchange Plan Enrollment Hits All Time High at 12.2 Million. *The Hill* reported on September 15, 2021, that Exchange plan enrollment hit an all-time high at 12.2 million, according to the Biden administration. More than 2.8 million signed up during this year’s special enrollment period. Medicaid and Children’s Health Insurance Program enrollment hit 82.3 million people as of April, also an all-time high. [Read More](#)

15 Million Medicaid Enrollees Could Lose Coverage When Public Health Emergency Ends, Report Finds. *Modern Healthcare* reported on September 15, 2021, that 15 million Medicaid enrollees could lose coverage when the COVID-19 public health emergency ends, according to the Urban Institute. The figure, which includes 8.7 million adults and 5.9 million children, represents nearly 90 percent of those who enrolled in Medicaid during the pandemic. States are prohibited from disenrolling Medicaid beneficiaries during a public health emergency. [Read More](#)

Four States Are Awarded \$5 Million Each for Rural Health Transformation. The Centers for Medicare & Medicaid Services announced on September 10, 2021, that it had awarded \$5 million each to [Alabama](#), [Texas](#), [South Dakota](#), and [Washington](#) “to transform the way health care is delivered in rural communities.” Funding, which is through the Community Health Access and Rural Transformation (CHART) Model, includes \$2 million for the pre-implementation phase and up to \$3 million over the course of six performance periods. CHART will also provide technical assistance and other support. [Read More](#)



INDUSTRY NEWS

Molina to Bid on 40 Percent of Medicaid Procurements, Charts Aggressive M&A Strategy. *Health Payer Specialist* reported on September 22, 2021, that California-based Molina Healthcare is planning to bid on roughly 40 percent of upcoming Medicaid managed care procurements, according to chief executive Joe Zubretsky. In a call with investors, Zubretsky also said the company has “ample cash flow” for acquisitions. Molina forecasts 2022 premium revenues of \$29 billion, up 11.5 percent from 2021. [Read More](#)

HCA Healthcare to Acquire Five Utah Hospitals from Steward Health. HCA Healthcare announced on September 20, 2021, a definitive agreement to acquire the operations of Steward Health’s five Utah hospitals and to lease the related real estate from the owner. The hospitals will be a part of HCA’s Mountain Division, which includes hospitals in Utah, Idaho, and Alaska. [Read More](#)

Intermountain Healthcare, SCL Health to Merge. *Modern Healthcare* reported on September 16, 2021, that Utah-based Intermountain Healthcare and Colorado-based SCL Health signed a letter of intent to merge. The deal is expected to close in early 2022. The combined not-for-profit organization would operate 33 hospitals and 385 clinics across six states. [Read More](#)

Anthem is Suspended from Enrolling New Medicare Advantage Members in Puerto Rico. *Modern Healthcare* reported on September 16, 2021, that the Centers for Medicare & Medicaid Services suspended Anthem from enrolling new Medicare Advantage members in Puerto Rico in 2022 for failing to meet the 85 percent minimum medical loss ratio requirement for three straight years. Current enrollees will retain their benefits. [Read More](#)

UnitedHealthcare Is Suspended From Enrolling Additional Members in Certain Medicare Markets. *Health Payer Specialist* reported on September 15, 2021, federal regulators have blocked UnitedHealthcare from enrolling additional Medicare Advantage members in Arkansas, New Mexico, and four midwestern states – Iowa, Kansas, Missouri, and Nebraska – in 2022 for failing to meet the 85 percent minimum medical loss ratio requirement for three straight years. Current enrollees are not affected. [Read More](#)

RFP CALENDAR

Date	State/Program	Event	Beneficiaries
Summer 2021- Delayed	Rhode Island	RFP Release	276,000
Fall 2021	Missouri	RFP Release	756,000
October 2021	Minnesota Seniors and Special Needs BasicCare	RFP Release	120,000
October 1, 2021	Oklahoma	Implementation	742,000
October 8, 2021	Tennessee	Awards	1,500,000
October 25, 2021	Texas STAR Health	RFP Release	43,700
November 2021	District of Columbia	RFP Release	230,000
November 5, 2021	Louisiana	Awards	1,600,000
December 1, 2021	Delaware	RFP Release	240,000
December 22, 2021	Iowa	RFP Release	745,000
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
Dec. 2021 - Feb. 2022	Texas STAR+PLUS	RFP Release	538,000
2022	Georgia	RFP Release	1,800,000
First Quarter 2022	Indiana MLTSS	RFP Release	NA
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	600,000
January 1, 2022	Massachusetts One Care (Duals Demo)	Implementation	150,000
January 1, 2022	North Dakota Expansion	Implementation	19,800
January 7, 2022	Indiana Hoosier Healthwise and HIP	Awards	1,200,000
June 2022	Texas STAR Health	Awards	43,700
July 1, 2022	Ohio	Implementation	2,450,000
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
July 1, 2022	Louisiana	Implementation	1,600,000
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
Fourth Quarter 2022	Indiana MLTSS	Awards	NA
Sep. 2022 - Nov. 2022	Texas STAR+PLUS	Awards	538,000
Sep. 2022 - Nov. 2022	Texas STAR & CHIP	RFP Release	3,700,000
January 1, 2023	Tennessee	Implementation	1,500,000
January 1, 2023	Minnesota MA Families and Children, MinnesotaCare	Implementation	543,000
January 7, 2022	Indiana Hoosier Healthwise and HIP	Awards	1,200,000
Mar. 2023 - May 2023	Texas STAR & CHIP	Awards	3,700,000
Mar. 2023 - May 2023	Texas STAR Kids	RFP Release	166,000
Sep. 2023 - Nov. 2023	Texas STAR Kids	Awards	166,000
Sep. 2023 - Nov. 2023	Texas STAR Health	Implementation	43,700
Sep. 2023 - Nov. 2023	Texas STAR+PLUS	Implementation	538,000
2024	Indiana MLTSS	Implementation	NA
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
Jun. 2024 - Aug. 2024	Texas STAR & CHIP	Implementation	3,700,000
Dec. 2024 - Feb. 2025	Texas STAR Kids	Implementation	166,000

HMA NEWS

[Health Management Associates Acquires Wilson Strategic](#)

Jay Rosen, founder, president, and co-chairman of Health Management Associates (HMA), announced the firm's acquisition of Wilson Strategic, a Washington state-based company that operates State of Reform health policy conferences. [Read More](#)

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

Medicaid Data

- Colorado RAE Enrollment is Up 6.9%, Jul-21 Data
- Colorado RAE Enrollment is Up 7.5%, Aug-21 Data
- California Medicaid Managed Care Enrollment is Up 2.9%, Apr-21 Data
- California Dual Demo Enrollment is Down 1.5%, Apr-21 Data
- Iowa Medicaid Managed Care Enrollment is Up 6.1%, Sep-21 Data
- Indiana Medicaid Managed Care Enrollment Is Up 9.2%, Jul-21 Data
- Indiana Medicaid Managed Care Enrollment Is Up 10.6%, Aug-21 Data
- New Mexico Medicaid Fee for Service vs. Managed Care Penetration, 2020
- New York Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- North Carolina Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Oregon Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- South Carolina Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Utah Medicaid Fee for Service vs. Managed Care Penetration, 2014-20
- Wisconsin Medicaid Fee for Service vs. Managed Care Penetration, 2014-20

Public Documents:

Medicaid Program Reports, Data and Updates:

- Arkansas PASSE Program Capitation Rate Development and Data Book, CY 2021
- Florida Managed Medical Assistance (MMA) 1115 Demonstration Waiver Approval and Amendments, 2016-21
- Kansas Medical Assistance Reports, FY 2014-22
- Michigan Medicaid Health Plan CAHPS Reports, 2015-21
- New Hampshire Medicaid SUD Treatment and Recovery Access 1115 Waiver, 2018-21
- Ohio Medicaid Budget Variance Reports, 2021
- Ohio Medicaid Annual Reports, 2014-21
- Texas Audit of Superior HealthPlan's Reimbursements to PBMs, May-21
- Utah 1115 Primary Care Network Demonstration Waiver Documents, 2016-21
- Vermont Medicaid Program Enrollment and Expenditures Reports, SFY 2018-21

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