

HEALTH MANAGEMENT ASSOCIATES

HMA Weekly Roundup

Trends in Health Policy

..... February 10, 2021



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IN FOCUS

MEDICAID MANAGED CARE ENROLLMENT UPDATE - Q4 2020

This week, our *In Focus* section reviews recent Medicaid enrollment trends in capitated, risk-based managed care in 33 states.ⁱ Many state Medicaid agencies

ⁱ Arizona, California, District of Columbia, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Mississippi, Missouri, Nebraska, Nevada, New Jersey, New Mexico, New York, Ohio, Oregon, Pennsylvania, South Carolina, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wisconsin.

post monthly enrollment figures by health plan for their Medicaid managed care population to their websites. This data allows for the timeliest analysis of enrollment trends across states and managed care organizations. All 33 states highlighted in this review have released monthly Medicaid managed care enrollment data into the fourth quarter (Q4) of 2020. This report reflects the most recent data posted. HMA has made the following observations related to the enrollment data shown on Table 1 (below):

- The 33 states in this report account for an estimated 60 million Medicaid managed care enrollees as of December 2020. Based on HMA estimates of MCO enrollment in states not covered in this report, we believe that, nationwide, Medicaid MCO enrollment is likely over 63 million in 2020. As such, the enrollment data across these 33 states represents approximately 95 percent of all Medicaid MCO enrollment.
- Oklahoma could add approximately 742,000 Medicaid managed care lives when it transitions from fee-for-service in October 2021. North Carolina is also on track to shift to managed care in July 2021. Currently there are 2.3 million Medicaid members in the state.
- States with managed care that do not publish monthly enrollment reports are Delaware, Colorado, Massachusetts, New Hampshire, and Rhode Island.
- Across the 33 states tracked in this report, Medicaid managed care enrollment is up 15.8 percent year-over-year as of December 2020.
- All states saw increases in enrollment in December 2020, compared to previous year, due to the high gains from the COVID-19 pandemic.
- Twenty-three of the 33 states – Arizona, California, District of Columbia, Hawaii, Illinois, Indiana, Iowa, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Nevada, New Jersey, New Mexico, New York, Ohio, Oregon, Pennsylvania, Utah, Virginia, Washington, and West Virginia – expanded Medicaid under the Affordable Care Act and have seen increased Medicaid managed care enrollment since expansion.
- The 23 expansion states listed above have seen net Medicaid managed care enrollment increase by 6 million members, or 15.6 percent, in the past year, to 44.9 million members at the end of Q4 2020.
- The 10 states that have not yet expanded Medicaid – Florida, Georgia, Kansas, Mississippi, Missouri, Nebraska, South Carolina, Tennessee, Texas, and Wisconsin – have seen Medicaid managed care enrollment increase 16.5 percent to 15.1 million members at the end of Q4 2020. Missouri is expected to begin implementing its voter-approved Medicaid expansion by July 2021.

Table 1 - Monthly MCO Enrollment by State – July 2020 through December 2020

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Arizona	1,713,828	1,735,099	1,758,860	1,774,121	1,794,442	1,811,778
+/- m/m	21,823	21,271	23,761	15,261	20,321	17,336
% y/y	8.2%	8.9%	10.0%	10.8%	12.5%	13.7%
California	10,673,867	10,796,391	10,944,482	11,054,638	11,149,906	11,246,744
+/- m/m	107,716	122,524	148,091	110,156	95,268	96,838
% y/y	2.5%	3.9%	5.6%	6.6%	7.9%	9.5%
D.C.	193,735	197,854	200,065	219,119	220,325	221,879
+/- m/m	3,004	4,119	2,211	19,054	1,206	1,554
% y/y	N/A	N/A	N/A	N/A	N/A	15.0%
Florida	3,474,483	3,523,695	3,572,363	3,627,647	3,659,834	3,710,315
+/- m/m	51,184	49,212	48,668	55,284	32,187	50,481
% y/y	9.3%	10.9%	12.8%	14.6%	16.2%	18.0%
Georgia	1,556,904	1,581,426	1,607,744	1,633,920	1,655,759	1,674,474
+/- m/m	57,813	24,522	26,318	26,176	21,839	18,715
% y/y	12.1%	14.0%	15.3%	17.2%	19.0%	22.7%
Hawaii	367,877	373,185	378,100			
+/- m/m	5,965	5,308	4,915	N/A	N/A	N/A
% y/y	8.1%	11.4%	10.8%			
Illinois	2,453,608	2,498,788	2,547,855	2,576,344	2,597,213	
+/- m/m	144,842	45,180	49,067	28,489	20,869	N/A
% y/y	12.3%	14.0%	16.7%	17.6%	19.0%	
Indiana	1,299,847	1,321,575	1,344,850	1,372,852	1,399,810	1,430,281
+/- m/m	27,408	21,728	23,275	28,002	26,958	30,471
% y/y	17.7%	19.5%	21.4%	23.6%	26.3%	28.9%
Iowa	678,556	686,939	694,076	701,342	708,174	714,499
+/- m/m	6,111	8,383	7,137	7,266	6,832	6,325
% y/y	5.1%	7.6%	8.9%	10.0%	11.3%	12.0%
Kansas		413,181				425,437
+/- m/m	N/A	N/A	N/A	N/A	N/A	N/A
% y/y						10.5%
Kentucky	1,280,191	1,290,322	1,305,929	1,313,796	1,311,310	1,342,423
+/- m/m	13,741	10,131	15,607	7,867	(2,486)	31,113
% y/y	4.7%	5.1%	7.2%	8.1%	9.1%	13.0%
Louisiana	1,587,385	1,610,360	1,627,747	1,640,704	1,663,714	1,651,321
+/- m/m	N/A	22,975	17,387	12,957	23,010	(12,393)
% y/y	11.4%	N/A	N/A	9.6%	N/A	11.7%
Maryland	1,269,896	1,275,322	1,289,028	1,304,143	1,314,379	1,328,268
+/- m/m	16,173	5,426	13,706	15,115	10,236	13,889
% y/y	5.8%	6.0%	7.1%	8.2%	9.2%	11.4%
Michigan	1,967,357	1,994,191	2,014,396	2,044,001	2,069,929	2,082,511
+/- m/m	45,971	26,834	20,205	29,605	25,928	12,582

% y/y	11.7%	13.6%	13.9%	15.4%	16.7%	16.4%
Minnesota	1,029,588	1,045,127	1,057,634	1,070,666	1,082,204	1,090,954
+/- m/m	17,919	15,539	12,507	13,032	11,538	8,750
% y/y	10.8%	12.5%	13.7%	14.9%	16.6%	18.7%
Mississippi	450,665	459,511	462,070	466,000	472,821	475,636
+/- m/m	5,762	8,846	2,559	3,930	6,821	2,815
% y/y	3.4%	6.1%	6.5%	7.6%	8.5%	8.6%
Missouri	688,684	704,631	719,209	734,621	745,640	756,461
+/- m/m	31,192	15,947	14,578	15,412	11,019	10,821
% y/y	14.9%	22.6%	24.1%	28.4%	27.9%	30.1%
Nebraska	249,260	253,514	257,589	269,440	277,790	285,354
+/- m/m	3,751	4,254	4,075	11,851	8,350	7,564
% y/y	9.0%	10.5%	11.6%	17.2%	20.0%	23.9%
Nevada	530,997	543,736	553,760	566,407	577,318	581,945
+/- m/m	11,492	12,739	10,024	12,647	10,911	4,627
% y/y	14.4%	15.9%	19.1%	21.8%	23.6%	25.8%
New Jersey	1,730,775	1,753,441	1,782,267	1,804,720	1,826,373	1,837,833
+/- m/m	N/A	22,666	28,826	22,453	21,653	11,460
% y/y	6.7%	9.1%	10.5%	12.3%	14.0%	15.8%
New Mexico	713,388	720,947	727,421	733,381	739,327	748,383
+/- m/m	8,209	7,559	6,474	5,960	5,946	9,056
% y/y	7.8%	8.6%	9.2%	9.9%	10.7%	11.6%
New York	5,013,007	5,076,657	5,169,895	5,248,850	5,308,931	5,378,218
+/- m/m	83,527	63,650	93,238	78,955	60,081	69,287
% y/y	6.5%	8.2%	10.3%	12.5%	14.5%	16.5%
Ohio	2,710,581	2,734,018	2,761,497	2,775,535	2,792,865	2,822,896
+/- m/m	29,036	23,437	27,479	14,038	17,330	30,031
% y/y	20.2%	22.5%	25.0%	26.4%	28.9%	36.4%
Oregon	973,749	981,809	995,807	1,006,104	1,014,119	N/A
+/- m/m	10,236	8,060	13,998	10,297	8,015	
% y/y	9.5%	11.3%	12.7%	12.8%	14.5%	
Pennsylvania	2,404,996	2,434,275	2,461,326	2,489,219	2,517,302	2,541,504
+/- m/m	32,232	29,279	27,051	27,893	28,083	24,202
% y/y	6.3%	8.0%	9.5%	10.9%	12.6%	14.0%
South Carolina	865,457	878,183	889,047	899,577	912,678	922,891
+/- m/m	9,792	12,726	10,864	10,530	13,101	10,213
% y/y	6.6%	8.8%	9.2%	10.6%	12.6%	13.8%
Tennessee	1,464,487	1,480,466	1,493,081	1,503,839	1,513,581	1,526,031
+/- m/m	15,345	15,979	12,615	10,758	9,742	12,450
% y/y	3.2%	4.3%	4.9%	6.0%	6.9%	8.0%
Texas			4,468,464		4,618,921	
+/- m/m	N/A	N/A	N/A	N/A	N/A	N/A

	% y/y					
Utah	288,545	296,195	304,944	312,773	320,747	327,744
+/- m/m	10,005	7,650	8,749	7,829	7,974	6,997
% y/y	25.7%	29.3%	34.1%	38.6%	42.5%	46.4%
Virginia	1,219,432	1,234,634	1,251,554	1,271,032	1,286,464	1,308,777
+/- m/m	19,791	15,202	16,920	19,478	15,432	22,313
% y/y						22.9%
Washington	1,608,050	1,627,391	1,646,862	1,662,652	1,677,523	1,701,943
+/- m/m	19,323	19,341	19,471	15,790	14,871	24,420
% y/y	0.0%	0.0%	12.2%	0.0%	0.0%	11.8%
West Virginia	429,336	434,426	437,061	442,849	447,625	463,057
+/- m/m	2,967	5,090	2,635	5,788	4,776	15,432
% y/y	10.8%	12.1%	13.5%	14.9%	16.0%	20.3%
Wisconsin	931,273	947,493	963,205	978,670	992,346	1,006,662
+/- m/m	16,989	16,220	15,712	15,465	13,676	14,316
% y/y	15.5%	17.1%	19.0%	20.9%	22.2%	24.4%

Note: In Table 1 above and the state tables below, “+/- m/m” refers to the enrollment change from the previous month. “% y/y” refers to the percentage change in enrollment from the same month in the previous year.

Below, we provide a state-specific analysis of recent enrollment trends in the states where HMA tracks data.

It is important to note the limitations of the data presented. First, not all states report the data at the same time during the month. Some of these figures reflect beginning-of-the-month totals, while others reflect an end-of-the-month snapshot. Second, in some cases the data is comprehensive in that it covers all state-sponsored health programs for which the state offers managed care; in other cases, the data reflects only a subset of the broader managed Medicaid population. This is the key limiting factor in comparing the data described below and figures reported by publicly traded Medicaid MCOs. Consequently, the data we review in Table 1 and throughout the *In Focus* section should be viewed as a sampling of enrollment trends across these states rather than a comprehensive comparison, which cannot be developed based on publicly available monthly enrollment data.

State-Specific Analysis

Arizona

Medicaid Expansion Status: Expanded January 1, 2014

Enrollment in Arizona’s two Medicaid managed care programs has grown to 1.8 million in December 2020, up 13.7 percent from December 2019.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Acute Care	1,647,114	1,668,873	1,692,948	1,708,204	1,728,397	1,745,801
ALTCS	66,714	66,226	65,912	65,917	66,045	65,977
Total Arizona	1,713,828	1,735,099	1,758,860	1,774,121	1,794,442	1,811,778
+/- m/m	21,823	21,271	23,761	15,261	20,321	17,336
% y/y	8.2%	8.9%	10.0%	10.8%	12.5%	13.7%

California

Medicaid Expansion Status: Expanded January 1, 2014

Medi-Cal managed care enrollment data shows an increase in December 2020, with managed care enrollment up approximately 97,000 members since December 2019. As of December 2020, enrollment in managed care is over 11.2 million.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Two-Plan Counties	6,887,227	6,962,282	7,057,193	7,125,376	7,182,282	7,240,857
Imperial/San Benito	85,404	86,425	87,389	88,143	88,892	89,434
Regional Model	299,886	303,976	308,466	311,747	315,048	317,434
GMC Counties	1,142,358	1,161,124	1,178,639	1,193,693	1,209,802	1,224,057
COHS Counties	2,148,654	2,171,453	2,201,007	2,222,829	2,240,070	2,259,861
Duals Demonstration	110,338	111,131	111,788	112,850	113,812	115,101
Total California	10,673,867	10,796,391	10,944,482	11,054,638	11,149,906	11,246,744
+/- m/m	107,716	122,524	148,091	110,156	95,268	96,838
% y/y	2.5%	3.9%	5.6%	6.6%	7.9%	9.5%

District of Columbia

Medicaid Expansion Status: Expanded January 1, 2014

Medicaid managed care enrollment was up 15 percent to approximately 222,000 in December 2020.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Washington DC	193,735	197,854	200,065	219,119	220,325	221,879
+/- m/m	3,004	4,119	2,211	19,054	1,206	1,554
% y/y						15.0%

Florida

Medicaid Expansion Status: Not Expanded

Florida's statewide Medicaid managed care program has seen an 18 percent rise in total covered lives over the last year to 3.7 million beneficiaries as of December 2020. (Note that the managed LTC enrollment figures listed below are a subset of the Managed Medical Assistance (MMA) enrollments and are included in the MMA number; they are not separately added to the total to avoid double counting).

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
MMA	3,037,339	3,093,449	3,137,126	3,187,008	3,228,530	3,275,185
LTC (Subset of MMA)	119,623	118,600	117,372	116,973	117,661	117,618
SMMC Specialty Plan	241,641	247,185	252,176	257,578	261,426	265,252
FL Healthy Kids	195,503	183,061	183,061	183,061	169,878	169,878
Total Florida	3,474,483	3,523,695	3,572,363	3,627,647	3,659,834	3,710,315
+/- m/m	51,184	49,212	48,668	55,284	32,187	50,481
% y/y	9.3%	10.9%	12.8%	14.6%	16.2%	18.0%

Georgia

Medicaid Expansion Status: Not Expanded

As of December 2020, Georgia's Medicaid managed care program covered nearly 1.7 million members, up 22.7 percent from the previous year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Georgia	1,556,904	1,581,426	1,607,744	1,633,920	1,655,759	1,674,474
+/- m/m	57,813	24,522	26,318	26,176	21,839	18,715
% y/y	12.1%	14.0%	15.3%	17.2%	19.0%	22.7%

Hawaii

Medicaid Expansion Status: Expanded January 1, 2014

Through September 2020, enrollment in the Hawaii Medicaid managed care program stands at 378,100, up 10.8 percent from September 2019.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Hawaii	367,877	373,185	378,100			
+/- m/m	5,965	5,308	4,915	(378,100)	0	0
% y/y	8.1%	11.4%	10.8%	-100.0%	-100.0%	-100.0%

Illinois

Medicaid Expansion Status: Expanded January 1, 2014

Illinois enrollment across the state's managed care programs was up 19 percent to 26 million as of November 2020.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
HealthChoice	2,400,107	2,442,022	2,489,506	2,516,586	2,536,996	
Duals Demonstration	53,501	56,766	58,349	59,758	60,217	
Total Illinois	2,453,608	2,498,788	2,547,855	2,576,344	2,597,213	0
+/- m/m	144,842	45,180	49,067	28,489	20,869	(2,597,213)
% y/y	12.3%	14.0%	16.7%	17.6%	19.0%	-100.0%

Indiana

Medicaid Expansion Status: Expanded in 2015 through HIP 2.0

As of December 2020, enrollment in Indiana's managed care programs—Hoosier Healthwise, Hoosier Care Connect, and Healthy Indiana Program (HIP)—is over 1.4 million, up 28.9 percent from December 2019.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Hoosier Healthwise	659,776	668,109	677,232	689,375	700,137	711,588
Hoosier Care Connect	94,432	94,752	94,693	95,304	95,925	96,563
HIP	545,639	558,714	572,925	588,173	603,748	622,130
Indiana Total	1,299,847	1,321,575	1,344,850	1,372,852	1,399,810	1,430,281
+/- m/m	27,408	21,728	23,275	28,002	26,958	30,471
% y/y	17.7%	19.5%	21.4%	23.6%	26.3%	28.9%

Iowa

Medicaid Expansion Status: Expanded January 1, 2014

Iowa launched its statewide Medicaid managed care program in April of 2016. Enrollment across all populations sits at 714,500 as of December 2020. Enrollment is up 12 percent from the previous year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Traditional Medicaid	438,643	444,254	448,832	453,160	456,830	459,765
Iowa Wellness Plan	181,556	184,365	186,958	189,843	192,849	196,059
hawk-i	58,357	58,320	58,286	58,339	58,495	58,675
Total Iowa	678,556	686,939	694,076	701,342	708,174	714,499
+/- m/m	6,111	8,383	7,137	7,266	6,832	6,325
% y/y	5.1%	7.6%	8.9%	10.0%	11.3%	12.0%

Kansas

Medicaid Expansion Status: Not Expanded

Kansas Medicaid managed care enrollment was over 425,000 as of December 2020, up 10.5 percent from the previous year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Kansas		413,181				425,437
+/- m/m						
% y/y						10.5%

Kentucky

Medicaid Expansion Status: Expanded January 1, 2014

As of December 2020, Kentucky covered over 1.3 million beneficiaries in risk-based managed care. Total enrollment is up 13 percent from the prior year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Kentucky	1,280,191	1,290,322	1,305,929	1,313,796	1,311,310	1,342,423
+/- m/m	13,741	10,131	15,607	7,867	(2,486)	31,113
% y/y	4.7%	5.1%	7.2%	8.1%	9.1%	13.0%

Louisiana

Medicaid Expansion Status: Expanded July 1, 2016

Medicaid managed care enrollment is nearly 1.7 million as of December 2020, up 11.7 percent from the previous year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Louisiana	1,587,385	1,610,360	1,627,747	1,640,704	1,663,714	1,651,321
+/- m/m		22,975	17,387	12,957	23,010	(12,393)
% y/y	11.4%			9.6%		11.7%

Maryland

Medicaid Expansion Status: Expanded January 1, 2014

Maryland's Medicaid managed care program covered over 1.3 million lives as of December 2020.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Maryland	1,269,896	1,275,322	1,289,028	1,304,143	1,314,379	1,328,268
+/- m/m	16,173	5,426	13,706	15,115	10,236	13,889
% y/y	5.8%	6.0%	7.1%	8.2%	9.2%	11.4%

Michigan

Medicaid Expansion Status: Expanded April 1, 2014

As of December 2020, Michigan's Medicaid managed care is up 16.4 percent to over 2 million.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Medicaid	1,928,884	1,954,985	1,975,341	2,004,732	2,030,040	2,042,712
MI Health Link (Duals)	38,473	39,206	39,055	39,269	39,889	39,799
Total Michigan	1,967,357	1,994,191	2,014,396	2,044,001	2,069,929	2,082,511
+/- m/m	45,971	26,834	20,205	29,605	25,928	12,582
% y/y	11.7%	13.6%	13.9%	15.4%	16.7%	16.4%

Minnesota

Medicaid Expansion Status: Expanded January 1, 2014

As of December 2020, enrollment across Minnesota's multiple managed Medicaid programs sits at 1.1 million, up 18.7 percent from the prior year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Parents/Kids	631,780	640,708	647,675	655,234	662,092	667,345
Expansion Adults	192,354	196,872	200,697	204,552	207,781	210,353
Senior Care Plus	17,979	18,120	18,280	18,518	18,859	19,139
Senior Health Options	41,265	41,445	41,594	41,680	41,530	41,089
Special Needs BasicCare	58,440	58,856	59,130	59,550	59,784	59,995
Minnesota Care	87,770	89,126	90,258	91,132	92,158	93,033
Total Minnesota	1,029,588	1,045,127	1,057,634	1,070,666	1,082,204	1,090,954
+/- m/m	17,919	15,539	12,507	13,032	11,538	8,750
% y/y	10.8%	12.5%	13.7%	14.9%	16.6%	18.7%

Mississippi

Medicaid Expansion Status: Not Expanded

MississippiCAN, the state's Medicaid managed care program, had net enrollment declines between 2016 and 2018 and a flat showing in 2019.

However, enrollment began to rise in 2020 due to COVID-19. Medicaid managed care membership is up 8.6 percent to 476,000 as of December 2020.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Mississippi	450,665	459,511	462,070	466,000	472,821	475,636
+/- m/m	5,762	8,846	2,559	3,930	6,821	2,815
% y/y	3.4%	6.1%	6.5%	7.6%	8.5%	8.6%

Missouri

Medicaid Expansion Status: Expected July 2021

Missouri managed care enrollment in the Medicaid and CHIP programs sits at 756,000 as of December 2020. Missouri is expected to begin implementing its voter-approved Medicaid expansion by July 2021.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Medicaid	650,973	666,196	680,421	695,346	705,998	716,368
Total CHIP	37,711	38,435	38,788	39,275	39,642	40,093
Total Missouri	688,684	704,631	719,209	734,621	745,640	756,461
+/- m/m	31,192	15,947	14,578	15,412	11,019	10,821
% y/y	14.9%	22.6%	24.1%	28.4%	27.9%	30.1%

Nebraska

Medicaid Expansion Status: Expanded October 1, 2020

As of December 2020, the program enrolled 285,000 members, up 23.9 percent from the previous year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Nebraska	249,260	253,514	257,589	269,440	277,790	285,354
+/- m/m	3,751	4,254	4,075	11,851	8,350	7,564
% y/y	9.0%	10.5%	11.6%	17.2%	20.0%	23.9%

Nevada

Medicaid Expansion Status: Expanded January 1, 2014

Nevada's Medicaid managed care enrollment was up 25.8 percent to nearly 582,000 as of December 2020.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Nevada	530,997	543,736	553,760	566,407	577,318	581,945
+/- m/m	11,492	12,739	10,024	12,647	10,911	4,627
% y/y	14.4%	15.9%	19.1%	21.8%	23.6%	25.8%

New Jersey

Medicaid Expansion Status: Expanded January 1, 2014

As of December 2020, enrollment was up 15.8 percent to over 1.8 million.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total New Jersey	1,730,775	1,753,441	1,782,267	1,804,720	1,826,373	1,837,833
+/- m/m		22,666	28,826	22,453	21,653	11,460
% y/y	6.7%	9.1%	10.5%	12.3%	14.0%	15.8%

New Mexico**Medicaid Expansion Status: Expanded January 1, 2014**

As of December 2020, New Mexico's Centennial Care program covers over 748,000 members, up 11.6 percent from the previous year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total New Mexico	713,388	720,947	727,421	733,381	739,327	748,383
+/- m/m	8,209	7,559	6,474	5,960	5,946	9,056
% y/y	7.8%	8.6%	9.2%	9.9%	10.7%	11.6%

New York**Medicaid Expansion Status: Expanded January 1, 2014**

New York's Medicaid managed care programs collectively covered 5.4 million beneficiaries as of December 2020, a 16.5 percent increase from the previous year. New York phased out its Fully Integrated Duals Advantage (FIDA) Demonstration in December 2019 and moved all FIDA enrollees into that plan's Medicaid Advantage Plus (MAP) plan. The FIDA-IDD program ended December 31, 2020.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Mainstream MCOs	4,583,725	4,659,669	4,750,662	4,823,368	4,882,712	4,947,832
Managed LTC	258,017	242,875	244,514	246,044	246,991	249,754
Medicaid Advantage	3,620	3,599	3,561	3,536	3,520	3,481
Medicaid Advantage Plus	21,754	21,941	22,369	23,133	23,019	22,978
HARP	144,193	146,854	147,057	151,019	150,935	152,416
FIDA/FIDA-IDD (Duals)	1,698	1,719	1,732	1,750	1,754	1,757
Total New York	5,013,007	5,076,657	5,169,895	5,248,850	5,308,931	5,378,218
+/- m/m	83,527	63,650	93,238	78,955	60,081	69,287
% y/y	6.5%	8.2%	10.3%	12.5%	14.5%	16.5%

Ohio**Medicaid Expansion Status: Expanded January 1, 2014**

As of December 2020, enrollment across all four Ohio Medicaid managed care programs was over 2.8 million, up 36.4 percent from the prior year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
CFC Program	1,637,949	1,650,513	1,666,768	1,676,408	1,686,306	1,703,719
ABD Program	337,490	338,823	339,143	338,975	338,817	337,326
Group 8 (Expansion)	653,426	662,023	672,532	677,094	684,990	699,949
MyCare Ohio (Duals)	81,716	82,659	83,054	83,058	82,752	81,902
Total Ohio	2,710,581	2,734,018	2,761,497	2,775,535	2,792,865	2,822,896
+/- m/m	29,036	23,437	27,479	14,038	17,330	30,031
% y/y	20.2%	22.5%	25.0%	26.4%	28.9%	36.4%

Oregon**Medicaid Expansion Status: Expanded January 1, 2014**

As of November 2020, enrollment in the Oregon Coordinated Care Organization (CCO) Medicaid managed care program is over 1 million. (This figure includes roughly 1,600 enrolled in managed care other than CCO).

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Oregon	973,749	981,809	995,807	1,006,104	1,014,119	
+/- m/m	10,236	8,060	13,998	10,297	8,015	
% y/y	9.5%	11.3%	12.7%	12.8%	14.5%	

Pennsylvania

Medicaid Expansion Status: Expanded January 1, 2015

As of December 2020, Pennsylvania's Medicaid managed care enrollment is over 2.5 million, up 14 percent in the past year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Pennsylvania	2,404,996	2,434,275	2,461,326	2,489,219	2,517,302	2,541,504
+/- m/m	32,232	29,279	27,051	27,893	28,083	24,202
% y/y	6.3%	8.0%	9.5%	10.9%	12.6%	14.0%

South Carolina

Medicaid Expansion Status: Not Expanded

South Carolina's Medicaid managed care programs collectively enrolled nearly 923,000 members as of December 2020, which represents an increase of 13.8 percent in the past year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Medicaid	849,428	862,314	873,283	883,792	896,780	906,887
Total Duals Demo	16,029	15,869	15,764	15,785	15,898	16,004
Total South Carolina	865,457	878,183	889,047	899,577	912,678	922,891
+/- m/m	9,792	12,726	10,864	10,530	13,101	10,213
% y/y	6.6%	8.8%	9.2%	10.6%	12.6%	13.8%

Tennessee

Medicaid Expansion Status: Not Expanded

As of December 2020, TennCare managed care enrollment totaled 1.5 million, up 8 percent from the prior year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Tennessee	1,464,487	1,480,466	1,493,081	1,503,839	1,513,581	1,526,031
+/- m/m	15,345	15,979	12,615	10,758	9,742	12,450
% y/y	3.2%	4.3%	4.9%	6.0%	6.9%	8.0%

Texas

Medicaid Expansion Status: Not Expanded

Enrollment reporting out of Texas has been limited in the past year. As of November 2020, Texas managed care enrollment was over 4.6 million across the state's six managed care programs, up 14.7 percent from November 2019.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
STAR			3,348,889		3,517,954	
STAR+PLUS			537,599		534,417	
STAR HEALTH			36,449		39,682	
Duals Demo			38,244		38,009	
CHIP			341,523		319,938	
STAR KIDS			165,760		168,921	
Total Texas			4,468,464		4,618,921	
+/- m/m						
% y/y					14.7%	

Utah

Medicaid Expansion Status: Expanded January 1, 2020

As of December 2020, Utah's Medicaid managed care enrollment was nearly 328,000, up 46.4 percent from the previous year. The state implemented the Utah Medicaid Integrated Care (UMIC) program effective January 1, 2020. The program manages physical and behavioral benefits through integrated managed care plans in five counties. Adult Expansion Medicaid members in Davis, Salt Lake, Utah, Washington, and Weber counties are required to enroll in a UMIC plan.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Utah	288,545	296,195	304,944	312,773	320,747	327,744
+/- m/m	10,005	7,650	8,749	7,829	7,974	6,997
% y/y	25.7%	29.3%	34.1%	38.6%	42.5%	46.4%

Virginia

Medicaid Expansion Status: January 1, 2019

Enrollment was up 22.9 percent in December 2020 to 1.3 million members.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Virginia	1,219,432	1,234,634	1,251,554	1,271,032	1,286,464	1,308,777
+/- m/m	19,791	15,202	16,920	19,478	15,432	22,313
% y/y						22.9%

Washington

Medicaid Expansion Status: Expanded January 1, 2014

Washington's Medicaid managed care enrollment increased 11.8 percent to 1.7 million as of December 2020, compared to December 2019.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total Washington	1,608,050	1,627,391	1,646,862	1,662,652	1,677,523	1,701,943
+/- m/m	19,323	19,341	19,471	15,790	14,871	24,420
% y/y			12.2%			11.8%

West Virginia

Medicaid Expansion Status: Expanded January 1, 2014

As of December 2020, West Virginia's managed care program covered 463,000 members, up 20.3 percent year-over-year.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Total West Virginia	429,336	434,426	437,061	442,849	447,625	463,057
+/- m/m	2,967	5,090	2,635	5,788	4,776	15,432
% y/y	10.8%	12.1%	13.5%	14.9%	16.0%	20.3%

Wisconsin

Medicaid Expansion Status: Not Expanded

Across Wisconsin's three managed care programs, December 2020 enrollment totaled 1 million, up 24.4 percent from the year before.

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
BadgerCare+	819,621	835,608	850,944	866,135	879,539	893,811
SSI	56,435	56,617	56,944	57,062	57,393	57,696
LTC	55,217	55,268	55,317	55,473	55,414	55,155
Total Wisconsin	931,273	947,493	963,205	978,670	992,346	1,006,662
+/- m/m	16,989	16,220	15,712	15,465	13,676	14,316
% y/y	15.5%	17.1%	19.0%	20.9%	22.2%	24.4%

More Information Available from HMA Information Services

More detailed information on the Medicaid managed care landscape is available from HMA Information Services (HMAIS), which collects Medicaid enrollment data, health plan financials, and the latest on expansions, waivers, duals, ABD populations, long-term care, accountable care organizations, and patient-centered medical homes. HMAIS also includes a public documents library with copies of Medicaid RFPs, responses, model contracts, and scoring sheets.

HMA enhances this publicly available information with an overview of the structure of Medicaid in each state, as well as a proprietary HMA Medicaid Managed Care Opportunity Assessment.

For additional information on how to subscribe to HMA Information Services, contact Carl Mercurio at 212-575-5929 or cmercurio@healthmanagaement.com.



HMA MEDICAID ROUNDUP

California

California Considers Making Certain Telehealth Flexibilities Permanent. *mHealthIntelligence* reported on February 4, 2021, that the California Department of Health Care Services (DHCS) has proposed making certain telehealth flexibilities permanent and expanding others, according to a 14-page plan issued by the state. The flexibilities, which were put in place during the COVID-19 pandemic, include payment parity, expanded coverage for services delivered by federally qualified health centers and rural health centers, and some coverage for audio-only telehealth. DHCS hopes to enact some of the proposals by July 1. [Read More](#)

Florida

House, Senate Democrats Renew Push for Medicaid Expansion. *Florida Politics* reported on February 9, 2021, that Florida House and Senate Democrats have introduced a series of Medicaid expansion bills, noting that expansion would bring additional federal funding to the state. Medicaid expansion in Florida could cover anywhere from 850,000 to 1.5 million individuals. [Read More](#)

Florida Lawmakers Renew Push for PBM Reform Legislation. *The Center Square* reported on February 3, 2021, that Florida lawmakers have introduced two separate bills to impose transparency requirements, address prior authorization concerns, and examine the role of pharmacy benefit managers (PBMs) in drug costs, including Medicaid prescription drugs. Senate Bill 528, introduced by Senate Health Policy Chair Gayle Harrell (R-Stuart), would address transparency and prior authorization. Senate Bill 390, introduced by Senator Tom Wright (R-Port Orange), would require insurers to submit PBM contracts for a study on how PBMs impact drug costs. In the past, similar bills have failed. [Read More](#)

Idaho

Governor Withdraws Call for \$30 Million in Medicaid Cuts. *The Idaho Press-Tribune* reported on February 4, 2021, that Idaho Governor Brad Little has dropped a proposal to cut \$30 million in fiscal 2022 Medicaid costs, a move that would have cost the program \$118 million including federal matching funds. The state said it no longer needed to cut the Medicaid budget, given the Biden administration's decision to continue to pay additional federal matching funds during the COVID-19 pandemic. [Read More](#)

Illinois

Illinois Bill Would Allow Medicaid Members to Use Preferred Pharmacy. *Crain's Chicago Business* reported on February 5, 2021, that Illinois state Representative La Shawn Ford (D-Chicago) introduced legislation that would allow Medicaid beneficiaries to fill their prescriptions from their preferred pharmacies. The bill comes after Aetna Better Health of Illinois/CVS Health dropped Walgreens from its Medicaid pharmacy network, a move that affects about 400,000 Medicaid recipients in the state. [Read More](#)

Indiana

Indiana Bill Would Direct Cigarette Taxes to Medicaid Providers. *WHAS11/The Associated Press* reported on February 6, 2021, that Indiana lawmakers proposed using 40 percent of state cigarette tax revenues to pay Medicaid provider reimbursements. The proposal is expected to generate nearly \$290 million in additional taxes by adding \$1 to the state's current 99.5 cents per pack cigarette tax. An earlier proposal would have directed the additional tax into the state's general fund and pensions. [Read More](#)

Kentucky

Kentucky Senate Panel Clears Bills to Reduce Number of Medicaid Plans, Eliminate Copays. *WHAS11* reported on February 9, 2021, that a Kentucky Senate committee has advanced a bill to reduce the number of state contracted Medicaid managed care plans from five to three. Current incumbents are Anthem, Centene, CVS/Aetna, Passport, and Humana. A second bill to eliminates copays for Medicaid members also advanced. [Read More](#)

Mississippi

Mississippi Senate Votes to Reject Medicaid Expansion Proposals. *The News & Observer/Associated Press* reported on February 9, 2021, that the Republican-controlled Mississippi Senate rejected two Medicaid expansion bills with votes falling along party lines. Expansion advocates say that the state has lost billions of dollars by not expanding Medicaid, which would cover about 300,000 people. [Read More](#)

Missouri

Missouri to Contract With 3 Health Plans in Upcoming Medicaid Managed Care RFP. Missouri announced at its February 4, 2021, MO HealthNet Oversight Committee meeting that the state plans to award contracts to three health plans in its upcoming Medicaid managed care request for proposals (RFP), which is expected to be released in July 2021. The state also plans to separately contract with a single, statewide specialty plan for foster children and children receiving adoption subsidy assistance. Awards will be made no later than November 2021, with an effective date of July 1, 2022. Incumbent plans are Home State Health Plan/Centene, Healthy Blue/Anthem, and UnitedHealthcare. [Read More](#)

Montana

Montana Could Face Further Mental Health Cuts, Worrying Providers. *Kaiser Health News* reported on February 5, 2021, that Montana could face further mental health cuts, which concerns providers as demand for behavioral health services rises. In January, a Montana legislative panel suggested nearly \$1 billion in cuts as a starting point. [Read More](#)

New Hampshire

New Hampshire Bill Would Exclude Audio-Only Medicaid Telehealth Coverage, Eliminate Parity. *Healthcare IT News* reported on February 4, 2021, that New Hampshire lawmakers have introduced a bill that would exclude Medicaid audio-only services from telehealth coverage and eliminate payment parity requirements for virtual services. The bill is sponsored by three Republican state legislators. [Read More](#)

Oklahoma

Oklahoma Medical Association Seeks to Block Transition to Managed Care. *Oklahoma News 4* reported on February 6, 2021, that the Oklahoma State Medical Association (OSMA) will ask the state Supreme Court to issue an injunction blocking the state's planned transition to Medicaid managed care. OSMA will argue in a motion that the initiative should be put on hold until the state legislature discusses and approves. The state selected Blue Cross Blue Shield of Oklahoma, Humana, Centene/Oklahoma Complete Health, and UnitedHealthcare to serve as Medicaid managed care plans. Implementation is scheduled for October 1, 2021. [Read More](#)

Pennsylvania

HMA Roundup – Julie George ([Email Julie](#))

Pennsylvania Medicaid Work Supports Program Generates 38,000 Inquiries. The Pennsylvania Department of Human Services (DHS) reported on February 4, 2021, that 38,000 Medicaid recipients have indicated an interest in learning more about local employment resources since the launch of the state's Medicaid Work Supports program a year ago. The program, which is attracting inquiries from about 800 individuals per week, is designed to connect Medicaid members to local employment and training resources. [Read More](#)

Puerto Rico

Puerto Rico Needs Risk-Based Oversight of Medicaid Procurement Process, GAO Says. The U.S. Government Accountability Office (GAO) issued a report in February 2021 recommending that the Centers for Medicare & Medicaid Services (CMS) implement risk-based oversight of Puerto Rico's Medicaid procurement process. The report found that seven of the eight selected Puerto Rico procurements did not include important steps to promote competition and mitigate the risk for fraud, waste, and abuse.

South Dakota

South Dakota Group Begins Collecting Signatures for Medicaid Expansion Ballot Initiative. *Bloomberg Law* reported on January 26, 2021, that former South Dakota U.S. Senate candidate Rick Weiland and his group, Dakotans For Health, have begun collecting the roughly 36,000 valid signatures necessary to put Medicaid expansion on the November 2022 ballot. A separate group, The Fairness Project, is also backing an effort to expand Medicaid with the support of the South Dakota Association of Healthcare Organizations, the South Dakota Medical Association, the South Dakota Farm Bureau, and others. Medicaid expansion would cover an additional 42,500 eligibles at a total annual estimated cost of about \$302 million, with the state's share approaching \$21 million. South Dakota is one of 13 states that has not expanded Medicaid. [Read More](#)

Tennessee

Lawmakers Introduce Medicaid Buy-in Bill. *ABC News 9* reported on February 8, 2021, that two Tennessee lawmakers introduced a bill directing the state Department of Finance Administration to create a Medicaid buy-in plan. The Medicaid Buy-In Act, sponsored by Representative Jason Hodges (D-Clarksville) and Senator Jeff Yarbro (D-Nashville), would cover emergency, inpatient hospital, outpatient, maternity, newborn, mental health, rehab, pediatric (including oral and vision), and preventative care services. It would also cover prescription drugs and lab services. The initiative would require a federal waiver and approval by the governor. [Read More](#)

Texas

Texas Judge Temporarily Blocks State Medicaid Program from Excluding Planned Parenthood. *The Texas Tribune* reported on February 3, 2021, that a Texas district judge issued a temporary restraining order preventing the state from excluding Planned Parenthood from participating in its Medicaid program. Planned Parenthood filed an emergency lawsuit to keep providing non-abortion services to thousands of low-income patients. A court hearing is set for February 17. [Read More](#)

Wisconsin

Wisconsin Medicaid LTC Plan to Reduce Assisted Living Provider Rates. *WBAY* reported on February 13, 2021, that Wisconsin Medicaid long-term care plan Lakeland Care is reducing rates for certain assisted living facilities by 9 percent. Lakeland said not all facilities will receive a 9 percent reduction. The new rates are scheduled to go into effect April 1. [Read More](#)

National

GAO Says T-MSIS Data Completeness, Accuracy Have Improved. The U.S. Government Accountability Office (GAO) said in January 2021 that “the completeness and accuracy of Transformed Medicaid Statistical Information System (T-MSIS) data have improved.” Details of the GAO findings can be found in the report *Data Completeness and Accuracy Have Improved, Though Not All Standards Have Been Met*. T-MSIS data is a Centers for Medicare & Medicaid Services (CMS) initiative to improve state-reported Medicaid data.

House Proposal Would Raise ACA Subsidies for Two Years. *The Hill* reported on February 8, 2021, that House Democrats have proposed legislation that would increase Affordable Care Act (ACA) subsidies in 2021 and 2022 so that enrollees would not have to pay more than 8.5 percent of income on health insurance premiums. Currently, ACA members pay up to 10 percent. The proposal, which is part of a broader COVID-19 relief bill, would also provide ACA subsidies for people earning more than 400 percent of poverty (or about \$100,000 annually for a family of four) and subsidize 85 percent of COBRA costs for individuals who lost their employment-based insurance. [Read more](#)

U.S. Senators Call for \$450 Billion Investment in Medicaid HCBS. *McKnight's Senior Living* reported on February 8, 2021, that 31 Senators, led by Bob Casey (D-PA) and Cory Booker (D-NJ), urged the Biden administration to invest \$450 billion in Medicaid home and community-based services (HCBS). In a letter to President Biden and Vice President Harris, the Senators said the investment would advance racial and gender equity; help lift the economy out of recession; and support individuals with disabilities, the elderly, and family caregivers. [Read More](#)

Senators Push for Legislation to Grant Full Federal Matching Funds to States that Expand Medicaid. *Georgia Health News* reported in February 5, 2021, that a group of Democratic Senators are pushing for legislation, known as the States Achieve Medicaid Expansion (SAME) Act of 2021, which would allow states that expanded Medicaid after 2014 or plan to expand in the future to receive the same full federal matching funds as states that expanded Medicaid earlier. Sponsors of the bill include Raphael Warnock and Jon Ossoff (D-GA). A similar bill was introduced in the U.S. Senate in 2019 but it failed to pass. [Read More](#)

Chiquita Brooks-LaSure Is Leading Candidate for CMS Administrator Position. *Politico* reported on February 4, 2021, that health policy expert Chiquita Brooks-LaSure has emerged as the leading candidate to be the next administrator of the Centers for Medicare & Medicaid Services (CMS). Brooks-LaSure is currently a managing director of consulting firm Manatt Health, and previously worked as deputy director of the CMS health insurance office during the Obama administration. North Carolina health secretary Mandy Cohen is also being considered for the job. [Read More](#)



INDUSTRY NEWS

ConcertoHealth, Perfect Health to Merge. Risk-based senior healthcare providers Perfect Health and ConcertoHealth announced on February 10, 2021, that they will merge to form a new company called ConcertoCare. The chairman and chief executive of ConcertoCare will be Julian Harris, M.D., who was most recently president of Cigna-affiliated CareAllies. Chief financial officer of ConcertoCare will be Dinesh Ganesan, who was previously CFO for Kaiser Permanente outside of California. ConcertoCare is backed by healthcare investment firm Deerfield Management Company. [Read More](#)

Centene to Cut 3,000 Jobs After Reporting 4Q20 Loss. *The St. Louis Post-Dispatch* reported on February 9, 2021, that Centene announced plans to cut 3,000 jobs and eliminate 1,500 open positions after reporting a fourth quarter 2020 loss. Centene revenues rose 50 percent in the fourth quarter largely due to the acquisition of WellCare as well as other expansions and new programs. [Read More](#)

McKinsey Reportedly Reaches \$573 Million Multi-State Settlement Over Opioid Crisis. *Reuters* reported on February 3, 2021, that consulting firm McKinsey & Co. reportedly reached a \$573 million settlement with 43 states, the District of Columbia, and three territories over its role in the opioid epidemic. Washington state reached a separate \$13 million settlement with McKinsey. More than 3,200 lawsuits are pending seeking to hold drug makers, distributors and pharmacies responsible for the epidemic. The litigation involved advice McKinsey gave to Purdue Pharma on how to increase OxyContin sales. [Read More](#)

Netsmart Acquires Mobile EHR Technology Company GPM. Netsmart announced on February 3, 2021, the acquisition of North Carolina-based GPM, which provides mobile electronic health record (EHR), care coordination, and messaging platforms to physicians and long-term care providers serving the elderly. Netsmart provides EHRs, health information exchanges, analytics, and telehealth solutions and services. [Read More](#)

Gateway Health Plan, Bridges Health Partners Form Medicare ACO. Gateway Health Plan and Bridges Health Partners announced on February 3, 2021, the formation of a Medicare Accountable Care Organization (ACO). The partnership will offer value-based care to Gateway Health Medicare members in southwestern Pennsylvania. Gateway Health currently offers Medicare dual eligible Special Needs Plans across 46 counties in Pennsylvania. Bridges is a provider network formed in 2017 by affiliates of Butler Health System, Excela Health, St. Clair Hospital, and Washington Health System. [Read More](#)

RFP CALENDAR

Date	State/Program	Event	Beneficiaries
January 2021 - Delayed	Nevada	RFP Release	465,000
January 26, 2021 - Delayed	Ohio	Awards	2,450,000
February 8, 2021 - Delayed	Hawaii Community Care Services	Awards	4,500
February 15, 2021	Hawaii Quest Integration	Proposals Due	378,000
March 15, 2021	Hawaii Quest Integration	Awards	378,000
Spring 2021	Louisiana	RFP Release	1,550,000
April 1, 2021	Indiana Hoosier Care Connect ABD	Implementation	90,000
March 19, 2021	Minnesota MA Families, Children; MinnesotaCare (metro)	Proposals Due	548,000
May 10, 2021	Minnesota MA Families, Children; MinnesotaCare (metro)	Awards	548,000
May 21, 2021	North Dakota Expansion	Awards	19,800
June 11, 2021	North Carolina - BH IDD Tailored Plans	Awards	NA
July 1, 2021	North Carolina - Phase 1 & 2	Implementation	1,500,000
July 1, 2021	Missouri	RFP Release	756,000
July 1, 2021	Hawaii Quest Integration	Implementation	378,000
July 1, 2021	Hawaii Community Care Services	Implementation	4,500
August 2021	Texas STAR Health	RFP Release	36,500
October 2021	Minnesota Seniors and Special Needs BasicCare	RFP Release	120,000
October 1, 2021	Oklahoma	Implementation	742,000
November 2021	Missouri	Awards	756,000
Late 2021	California Two Plan Commercial - Alameda, Contra Costa, Fresno, Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, Santa Clara, San Francisco, San Joaquin, Stanislaus, and Tulare	RFP Release	1,640,000
Late 2021	California GMC - Sacramento, San Diego	RFP Release	1,091,000
Late 2021	California Imperial	RFP Release	75,000
Late 2021	California Regional - Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, Sierra, Sutter, Tehama, Tuolumne, Yuba	RFP Release	286,000
Late 2021	California San Benito	RFP Release	7,600
January 2022	Minnesota MA Families and Children, MinnesotaCare	RFP Release	543,000
January 1, 2022	Minnesota MA Families, Children; MinnesotaCare (metro)	Implementation	548,000
January 1, 2022	Massachusetts One Care (Duals Demo)	Implementation	150,000
January 1, 2022	North Dakota Expansion	Implementation	19,800
January 5, 2022	Ohio	Implementation	2,450,000
February 2022	Texas STAR Health	Awards	36,500
July 1, 2022	North Carolina - BH IDD Tailored Plans	Implementation	NA
July 1, 2022	Missouri	Implementation	756,000
Q2 2022	Texas STAR+PLUS	RFP Release	538,000
Early 2022 – Mid 2022	California Two Plan Commercial - Alameda, Contra Costa, Fresno, Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, Santa Clara, San Francisco, San Joaquin, Stanislaus, and Tulare	Awards	1,640,000
Early 2022 – Mid 2022	California GMC - Sacramento, San Diego	Awards	1,091,000
Early 2022 – Mid 2022	California Imperial	Awards	75,000
Early 2022 – Mid 2022	California Regional - Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, Sierra, Sutter, Tehama, Tuolumne, Yuba	Awards	286,000
Early 2022 – Mid 2022	California San Benito	Awards	7,600
Q3 2022	Texas STAR+PLUS	Awards	538,000
January 1, 2023	Minnesota MA Families and Children, MinnesotaCare	Implementation	543,000
Q1 2023	Texas STAR & CHIP	RFP Release	3,700,000
Q2 2023	Texas STAR & CHIP	Awards	3,700,000
Q3 2023	Texas STAR Kids	RFP Release	166,000
Q4 2023	Texas STAR Kids	Awards	166,000
Q4 2023	Texas STAR Health	Implementation	36,500
January 2024	California Two Plan Commercial - Alameda, Contra Costa, Fresno, Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, Santa Clara, San Francisco, San Joaquin, Stanislaus, and Tulare	Implementation	1,640,000
January 2024	California GMC - Sacramento, San Diego	Implementation	1,091,000
January 2024	California Imperial	Implementation	75,000
January 2024	California Regional - Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, Sierra, Sutter, Tehama, Tuolumne, Yuba	Implementation	286,000
January 2024	California San Benito	Implementation	7,600
Q1 2024	Texas STAR+PLUS	Implementation	538,000
Q4 2024	Texas STAR & CHIP	Implementation	3,700,000
Q2 2025	Texas STAR Kids	Implementation	166,000

COMPANY ANNOUNCEMENTS

Anthem, Cleveland Clinic, CDPHP, and Effingham Health System Named 2020 Doyle Award Winners

HMA WELCOMES

Isis Montalvo – Senior Consultant

Isis Montalvo is an outcomes driven healthcare executive with expertise in nursing quality, business management, program development, healthcare policy, and education.

Before joining HMA, she served as vice president of medical management for Aetna Better Health® of California where she focused on managed care in Medicaid. With 33 years of experience as a nurse, as well as executive leadership and consulting experiences, she is a well-rounded, passionate, and patient-centered professional.

While serving as director of the National Center for Nursing Quality at the American Nurses Association, she was responsible for strategic planning and business development, which included advocacy, education and conference planning, publications, and product growth.

Focused on policy and quality at the forefront of nursing and healthcare, Isis has provided testimony to the Senate Finance Committee on value-based purchasing and has planned for and co-edited four books on nursing quality improvement and outcomes.

She earned a Bachelor of Science in Nursing from Columbia Union College, a Master of Science in Administration of Nursing Services from The University of Maryland, and a Master of Business Administration in General Business Administration from The University of Baltimore. She is a registered nurse licensed in both California and Maryland.

Cara Peterson – Senior Consultant

A seasoned National Committee for Quality Assurance (NCQA) navigator with deep experience guiding clients through the entire accreditation survey process, Cara Peterson is committed to helping health plans succeed with expertise and empathy.

Before joining HMA, Cara spent more than a decade with Dean Health Services Company in progressively advancing roles including quality and accreditation specialist lead. While there, she managed multi-state NCQA programs for commercial and Marketplace clients with a focus on process improvement.

Passionate about quality, efficiency, engagement and a collaborative approach, Cara has developed and maintained survey readiness metrics, coordinated pre-survey submissions, and provided training and education to business areas on NCQA standards.

She also has experience preparing for and conducting Healthcare Effectiveness Data and Information Set (HEDIS) medical record reviews including scheduling clinic visits, ordering medical records, and designing trainer and review materials.

Cara earned a Bachelor of Arts in speech communication from Iowa State University.

HMA NEWS

New Report Supports State Medicaid Programs to Advance Health Justice. Rates of illness and death due to the COVID-19 pandemic have disproportionately impacted Americans who are Black, African American, Latinx, Native American, Asian, and other people of color as well as people with disabilities and those subsisting on poverty-level income. In response to this, [AcademyHealth](#), in partnership with the [Disability Policy Consortium \(DPC\)](#), a Massachusetts-based cross-disability advocacy and action research organization, released a new report: [Advancing Health Justice Using Medicaid Data: Key Lessons from Minnesota for the Nation](#). This report provides information on the importance of investing in data analysis to advance health justice in Medicaid populations. It further highlights the importance of partnering with communities most impacted by injustices that cause inequities in health outcomes. HMA's [Ellen Breslin, MPP](#), [Anissa Lambertino, PhD](#), and [Kelsi Jackson, MPH](#) contributed to this report. [Read more](#)

New this week on HMA Information Services (HMAIS):

Medicaid Data

- Alabama Medicaid Spending is Up 1% to \$6.6 Billion, 2018 Data
- DC Medicaid Managed Care Enrollment is Up 15%, 2020 Data
- Georgia Medicaid Management Care Enrollment is Up 2.6%, Feb-21 Data
- KY Medicaid Managed Care Enrollment is Up 13%, 2020 Data
- Nebraska Medicaid Managed Care Enrollment Is Up 20.6%, Nov-20 Data
- Nebraska Medicaid Managed Care Enrollment Is Up 23.9%, 2020 Data
- New York CHIP Managed Care Enrollment is Down 3.8%, Nov-20 Data
- New York Medicaid Managed Care Enrollment is Up 14.8%, Nov-20 Data
- Puerto Rico Medicaid Managed Care Enrollment is Up 5.8%, 2020 Data
- South Carolina Medicaid Managed Care Enrollment is Up 12.6%, Nov-20 Data

Public Documents:

Medicaid RFPs, RFIs, and Contracts:

- Colorado Medicaid Electronic Consultation Program RFI, Feb-21
- Minnesota Medicaid Families, Children Medical Assistance and MinnesotaCare RFP, Addendum, Model Contract, Q&A, and Related Documents, 2021
- Ohio DSH Payment Auditing Services RFP, Feb-21
- Oklahoma Statewide Medicaid Managed Care RFP, Proposals, Scoring, and Related Documents, 2020

Medicaid Program Reports, Data and Updates:

- GAO Medicaid Data Completeness and Accuracy Report, Jan-21
- GAO Oversight of Puerto Rico's Procurement Process Report, Feb-21
- California Medicaid Managed Care Plan Medical Audit Reports and Corrective Action Plans, 2018-20
- Georgia Medicaid Managed Care Teaching Hospitals Rate Increase Approval Letter, 2020-21

- Kentucky Medicaid Managed Care Rate Certifications, FY 2015-21
- Maryland Medicaid Report Optum Behavioral Health ASO Transition, Nov-20
- Maryland Medicaid, CHIP Annual Report Provider Reimbursement Rates, Mar-20
- Mississippi Medicaid Managed Care Directed Payments, 2018-21
- New Mexico HSD Social, Economic, and Health Statistics Data Books, 2020-21
- Puerto Rico Medicaid Quality Management Strategy Report, 2019
- Puerto Rico Transition Plan Agreement Between ASES and Molina, Sep-20
- South Dakota HCBS Waiver Enrollment and Expenditures, 2012-20
- Texas HHS Promoting Independence Plan, Dec-20
- Texas HHSC Procurement and Contracting Evaluation Report, Jan-21
- Washington Medicaid Managed Care Capitation Rate Development, CY 2015-21

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

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

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

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

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