

February 11, 2021

The Honorable Frank Pallone, Jr.
Chairman
House Energy and Commerce Committee
Washington, DC 20510

The Honorable Cathy McMorris Rodgers
Ranking Member
House Energy and Commerce Committee
Washington, DC 20510

Dear Chairman Pallone, Ranking Member McMorris Rodgers, and members of the House Energy and Commerce Committee:

I write today in support of several Medicaid provisions included in the Medicaid committee print of the House Energy and Commerce Committee's legislative recommendations for budget reconciliation. The Medicaid Health Plans of America (MHPA) knows that support and investment in the Medicaid program is critical to addressing the severe public health and economic crisis we continue to face due to the COVID-19 pandemic. MHPA and our member health plans remain committed to working with you and your staff to further strengthen the Medicaid program and its federal-state partnership during this important time in our nation's history.

By way of background, MHPA is the only national trade association with a sole focus on Medicaid, representing more than 120 managed care organizations (MCOs) serving nearly 36 million Medicaid beneficiaries in 38 states. MHPA's members include both for-profit and non-profit, national and regional, as well as single-state health plans that compete in the Medicaid market. Nearly three-quarters of all Medicaid beneficiaries receive health care through MCOs, and our association provides research and advocacy services that support policy solutions to enhance the delivery and coordination of holistic, comprehensive, cost-effective, and quality health care service delivery for Medicaid enrollees.

MHPA strongly supports the Medicaid components outlined in the budget reconciliation committee print, and I would like to highlight what we believe to be priority provisions that are consistent with MHPA's past COVID-19 stimulus legislative requests:

- ***Modifications to Certain Coverage Under Medicaid and CHIP for Pregnant and Postpartum Woman (Sections 3102 and 3202)***
 - MHPA supports the creation of a new state plan option to extend continuous Medicaid and CHIP eligibility for 12 months postpartum, which would be a significant step forward in helping to address gaps in maternal and infant health in the Medicaid program. Legislation to create a state option to extend postpartum continuous coverage has a rich history of bipartisanship at the federal and state level. To prevent avoidable and premature deaths, and help women and their families live healthier lives, we believe this provision is key to reducing serious maternal and infant health disparities.

- ***Temporary Increase in FMAP for Medical Assistance Under State Medicaid Plans which Begin to Expend Amounts for Certain Mandatory Individuals (Sec. 3105)***
 - MHPA is supportive of providing incentives to the fourteen states that have not yet implemented the ACA's Medicaid expansion option, and we hope these states can soon

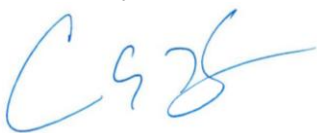
expand. For these remaining states, nearly 4 million uninsured low-income adults would gain coverage, and this population includes traditionally underserved populations, people of color, and working adults, many of whom are essential or front-line workers and have been disproportionately impacted by the COVID-19 pandemic.

- ***Allowing for Medical Assistance Under Medicaid for Inmates During 30-Day Period Preceding Release (Sec. 3103)***
 - MHPA supports the provision to provide Medicaid eligibility to incarcerated individuals 30 days prior to their release. Congregate settings, including prisons, have proven to be more susceptible to widespread COVID-19 infections. Continuous, comprehensive health insurance coverage is critical to ensuring that vulnerable populations get access to testing and treatment prior to, and immediately following, their release. This provision will also allow for more seamless coverage for individuals undergoing substance use disorder treatment.

Finally, while not included in this committee print, we want to underscore the importance of enacting an additional, temporary Medicaid FMAP increase for all states, which we believe is critical to addressing the severe health and economic challenges facing beneficiaries, providers, plans and states. Specifically, MHPA urges Congress to increase the FMAP by at least 5.8 additional percentage points for all states. This would create a minimum 12 percentage point FMAP increase when combined with the FMAP increase provided in the *Families First Coronavirus Response Act*. Over the course of the last 12 months, enrollment in Medicaid and CHIP has increased by almost 6 million enrollees, and continued growth in enrollment is expected as COVID cases continue to surge over the winter months, further stressing our health care system and the economy. State economies and budgets are facing unprecedented stress, and without additional fiscal support, states will have no choice but to consider grave cuts to their Medicaid programs, hurting safety net providers and the beneficiaries they serve during a public health emergency and exacerbating public health issues and disparities impacting vulnerable populations. Also, history has demonstrated that enhanced FMAP assistance is the most efficient form of state fiscal relief during an economic downturn. We greatly appreciate the various provisions within the committee print that would target FMAP increases for certain state actions, but we urge you to consider a temporary FMAP increase for all states to address the fiscal crisis and the urgent needs of Medicaid beneficiaries as this legislation progresses.

If you have any questions or would like to speak with me and my team, please contact Shannon Attanasio, Vice President, Government Relations and Advocacy at sattanasio@mhcpa.org.

Sincerely,



Craig A. Kennedy, MPH
President and CEO