MHPA Joins with Health Care Providers, Patient Advocates, Calls for Additional Medicaid Funding

WASHINGTON, DC (June 2, 2020) – Medicaid Health Plans of America (MHPA), the only national trade association with a sole focus on Medicaid, joined with 19 other national health care organizations — representing consumers, providers, and other stakeholders — in signing a letter urging Congress to further enhance federal financing for the Medicaid program. MHPA’s official statement reads:

“MHPA believes Congress must act to further increase the Medicaid Federal Medical Assistance Percentage (FMAP). Due to the economic upheaval inflicted by the COVID-19 pandemic, many states will soon be forced to resort to budget cuts that will directly impact the Medicaid program. Over 70 million Americans are already covered by the Medicaid program, and that number is only set to increase dramatically in the coming months.

MHPA supports the recommendations put forth by the National Governors Association (NGA) and the National Association of Medicaid Directors (NAMD) requesting that Congress increase the FMAP by at least a total of twelve (12) percentage points. This FMAP increase should extend beyond the public health emergency designation until certain economic measures (i.e. unemployment rate) are met, which is consistent with the request outlined by NGA.

With an influx of new Medicaid beneficiaries in every state across the country, this FMAP increase will help ease the financial burdens placed upon state governments. Since all states benefit from robust Medicaid funding, this is an issue that should transcend party lines. By supporting state Medicaid programs, health care providers, and Medicaid beneficiaries, an additional FMAP increase would secure health insurance for millions of people and help set states on the path to economic recovery.”

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ABOUT MHPA

Founded in 1995, the Medicaid Health Plans of America (MHPA) represents the interests of the Medicaid managed care industry through advocacy and research to support innovative policy solutions that enhance the delivery of comprehensive, cost-effective, and quality health care for Medicaid enrollees. MHPA works on behalf of its 90+ member health plans, known as managed care organizations (MCOs), which serve approximately 23 million Medicaid enrollees in 37 states, or about one-third of all Medicaid beneficiaries in states with managed care delivery systems. 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. www.medicaidplans.org | @MHPA