

**NEWS RELEASE  
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## **MHPA Statement on Final Passage of Bipartisan Consolidated Appropriations Act of 2022**

**Washington, DC, December 23, 2022** - Medicaid Health Plans of America (MHPA), the only association solely representing Medicaid managed care organizations (MCOs), released the following statement on final passage of the bipartisan Consolidated Appropriations Act of 2022 in Congress. Passed in the Senate on Thursday afternoon and approved by the House today, the package includes several MHPA legislative priorities that strengthen and expand Medicaid coverage in America. The legislation also decouples the Families First Coronavirus Response Act's (FFCRA) Maintenance of Eligibility (MOE) requirements from the Administration's Public Health Emergency declarations, thereby ending FFCRA's Medicaid continuous eligibility provision and setting in motion the state Medicaid eligibility determination process.

Last month, [MHPA sent a letter](#) to Senate and House leaders urging Congress prioritize policy proposals that protect and improve Medicaid for vulnerable populations. In that letter, MHPA also underscored the importance of Congress providing robust guardrails and significant prior notice to a wind down of the enhanced Federal Medical Assistance Percentage and the continuous eligibility/MOE provisions included in FFCRA.

"MHPA is heartened to see Congress come together in a bipartisan, bicameral fashion to pass legislation that includes several very important Medicaid provisions," says MHPA President and CEO Craig Kennedy. "We believe this comprehensive package sets a very positive precedent for Congress to work across the aisle to strengthen the Medicaid program for the millions of people who rely on it for health coverage today. Importantly, Congress used this opportunity to take sweeping action on several key MHPA priorities outlined in our November letter to Congressional leadership. Included in the Consolidated Appropriations Act of 2022 are important investments in postpartum Medicaid coverage for new moms, the Children's Health Insurance Program (CHIP), the Money Follows the Person program and protections against spousal impoverishment, and the Medicaid programs in Puerto Rico and other United States Territories. The legislation establishes a permanent, nationwide year of continuous coverage for children in Medicaid and CHIP, as well as expands Medicaid access to certain services for incarcerated juveniles 30-days prior to release. A strong and sustainable Medicaid

program that best meets the needs of its enrollees will always be a focus of MHPA's advocacy efforts; this legislation represents a significant step forward toward attaining that goal.

“But while we are pleased by the bipartisan commitment Congress made to Medicaid, we must also acknowledge that this step forward does come with challenges. Included in the Consolidated Appropriations Act of 2022 is language that will formally initiate state Medicaid eligibility determinations, a process that has been paused since April 2020 with passage of the Families First Coronavirus Response Act. Over 90 million Americans are currently enrolled in Medicaid and determining whether these individuals are still eligible for the program, or must transition to another form of coverage, will be a historic undertaking in both size and scope. We acknowledge and appreciate that Congress heard MHPA's request to ensure that any decoupling language must also incorporate significant prior notice, as well as safeguards to protect Medicaid beneficiaries. We must also recognize that millions of Americans are now at significant risk of losing coverage, coverage for which they remain eligible, but who could still fall through the cracks.

“As they have been doing for over a year in preparation for the inevitable restart of eligibility determinations, MHPA members – Medicaid managed care organizations in 40 states, DC, and Puerto Rico – will continue to work closely with state Medicaid agencies and CMS to reduce coverage loss and minimize harm to Medicaid enrollees. And MHPA, in support of that same goal, will redouble our advocacy efforts both in the states and at the federal level in the coming New Year and beyond.”

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### **About Medicaid Health Plans of America**

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 130+ member health plans, known as managed care organizations (MCOs), which serve nearly 49 million Medicaid enrollees in 40 states, the District of Columbia and Puerto Rico. 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](http://www.medicaidplans.org)