



MEDICAID HEALTH PLANS OF AMERICA

HEALTH PLAN NEW MEMBER APPLICATION

PEOPLE WHO COUNT ON
MEDICAID, COUNT ON US

October 2023



Letter from MHPA Leadership



Catherine K. Anderson
Chair, Board of Directors
MHPA



Craig A. Kennedy, MPH
President & CEO
MHPA

Thank you for your consideration in joining Medicaid Health Plans of America (MHPA). As an association, we are solely focused on representing Medicaid programs because our members believe in the value and importance of providing integrated, capitated care to our nation's most vulnerable populations. MHPA is dedicated to being the premier resource for both elected policymakers and regulators to help them make informed, quality decisions that support the continuous improvement of America's most important insurance program.

MHPA's platform is uniquely powered by the member plans of our Association. We are comprised of all types of Medicaid managed care organizations: multi-state Medicaid managed care plans that have traditionally been Medicaid insurers; commercial insurers with Medicaid lines of business; Blue Cross and Blue Shield plans; and single state for-profit and not-for-profit plans.

MHPA's mission is to forcefully advocate for the value of managed care in the Medicaid program. Our Board is made up of leaders who are accountable for their plans' Medicaid markets. The collaborative efforts of our Board provide a strategic overlay to the development of policy and advocacy tactics that help inform and educate stakeholders about important questions relating to the program and its future. This charge extends beyond Congressional and White House staff, and includes regulatory experts at the Centers for Medicaid and Medicare Services (CMS) and the Department of Health and Human Services (DHHS). We also extensively coordinate with state health plan trade associations to help drive plan efforts nationwide.

We would welcome the opportunity to talk with you and your team about the benefits of joining MHPA and how we can work together to help strengthen Medicaid today and into the future!

A handwritten signature in blue ink that reads "Catherine K. Anderson".

Catherine K. Anderson
MHPA Chair, Board of Directors

A handwritten signature in black ink that reads "Craig A. Kennedy".

Craig A. Kennedy
MHPA President & CEO

Our Mission

Medicaid Health Plans of America (MHPA) is an organization dedicated to protecting the financial and structural viability of the Medicaid program to ensure access to needed health services for America's underserved populations. MHPA supports efforts to address the needs of the Medicaid beneficiaries through innovative strategies that drive better health outcomes, greater beneficiary choice, and whole-person care.

MHPA is committed to:

- Prioritizing the needs of each Medicaid beneficiary
- Highlighting the value of managed care organizations (MCOs)
- Increasing our influence on federal regulators
- Driving legislative initiatives that highlight MCOs as 'Engines of Innovation'



MEDICAID & MHPA BY THE NUMBERS

More than 90 MILLION

Americans rely on Medicaid to gain access to quality health care

81% of Medicaid enrollees are in MCOs

MHPA represents more than **140 PLANS** that serve Medicaid enrollees

MHPA members represent for profit and non-profit, national, regional, and single-state health plans that compete in the Medicaid market.

MHPA members serve **50 MILLION** Medicaid enrollees

MHPA members cover **41 STATES, Washington, D.C. and Puerto Rico**



Board Tenets

1. **Medicaid is a vital program** that provides care to underserved populations who deserve access to quality care.
2. **Medicaid managed care health plans ensure value-based health care** through unparalleled care coordination.
3. **This state-federal partnership** that provides the financial resources for this care should be prudently managed.
4. **MHPA member plans are risk-bearing entities** that provide Medicaid beneficiaries with access to comprehensive, high-quality, and cost-effective care, while delivering program cost-savings and state budget predictability.
5. **MHPA represents the Medicaid interests** of the nation's Medicaid managed care plans and strives to advance public policy that controls costs and improves access in delivery of quality health care to Medicaid enrollees.
6. **MHPA strongly supports payment rates** to health plans that are actuarially sound and ensure the financial stability of health plans, allowing them to provide necessary services to beneficiaries.
7. **MHPA believes in a person-centered approach** to patient care through a comprehensive, integrated package.
8. **MHPA supports the ability of states to tailor their Medicaid programs** to meet the needs of their unique population, but also strongly encourages them to adopt comprehensive, person-centered programs.
9. **MHPA strongly opposes state- or federal-level barriers** to adoption of comprehensive, risk-based care for Medicaid beneficiaries.
10. **MHPA supports efforts to bring high-needs populations**, such as individuals who are aged, blind, or living with disabilities, into managed, coordinated care.
11. **MHPA focuses on issues unique to managed care** organizations participating in the Medicaid program.
12. **MHPA supports the use of standardized, national measurements** of quality which allow consumers to compare the performance of health plans.

Membership Benefits

With your MHPA membership, you will receive the following benefits:

- Ensures a seat on the MHPA Board of Directors for your Chief Executive Officer (or equivalent with profit and loss responsibility). Participation on the Board of Directors provides opportunity to set strategic framework for health plan members to inform policy and government relations activity.
- MHPA policy staff provides detailed information on federal regulations that protects your plan's interests and state relationships, and facilitates direct conversation with the Centers for Medicare and Medicaid Services (CMS).
- MHPA government relations and advocacy staff provide access to key legislators and staff on Capitol Hill.
- Attendance for your Board representatives during quarterly Board meetings—at least two will be in-person. All in-person meetings include a networking reception and dinner program with industry peers.
- Provides member representation on all core MHPA committees.
- Recognition as an MHPA member on the MHPA website (medicaidplans.org) which also includes a board listing.
- Attendance at weekly educational Webinar Wednesdays hosted by MHPA Business Partners.
- Invitation to attend and participate in MHPA conferences, events, and meetings.

MHPA Committee Structure

Board of Directors

MHPA Staff Lead: Craig A. Kennedy, President & CEO

The Board sets the strategic vision and policy initiatives on behalf of MHPA. The Board evaluates annually the performance of the organization in achieving its mission. The annual commitment includes quarterly Board meetings, at least three of which are in-person. Board meetings can be held virtually when needed.

Communications

MHPA Staff Lead: Jill Talley, Director of Communications

The Communications Committee is devoted to the public relations efforts important to Medicaid Plans and their beneficiaries. This includes both industry news, political issues, project communications and stories concerning millions of Medicaid lives. The goal of the committee is to coordinate and share news from Medicaid Plans with pertinent stakeholders. During committee meetings, Medicaid Plans have the opportunity to share their success stories and learn about potential venues from communications growth.

Conference Planning

MHPA Staff Lead: Patrick Corr, Vice President, Membership and Engagement

Oversees and provides guidance to MHPA staff on efforts relating to the annual conference. This includes structure, invitations, location, and logistics. The Committee also helps establish the annual budget relating to the conference activities. The Committee ensures a successful conference for all parties involved, including participants, exhibitors, sponsors, presenters, and other invited guests.

Congressional Affairs

MHPA Staff Lead: Sean Garrity, Director of Federal Affairs

Provides guidance, tactical support, and oversight for determining positions on federal legislation and setting the federal legislative priorities and agenda for MHPA. The Committee is responsible for ensuring federal legislative and other advocacy activities support the mission, tenants, values, and strategic goals of the organization.

Finance

MHPA Staff Lead: Jacqueline “Jax” Fontenot, Senior Accountant

Ensures financial compliance with all applicable state and federal laws. Creates and manages fiscal programs within the organization that safeguards budget stability. Oversees annual audit and auditor selection.

MHPA Committees (cont'd)

PAC Board

MHPA Staff Lead: Sean Garrity, Director of Federal Affairs

Responsible for oversight of MHPA PAC activities, including federal political giving strategy and ensuring the PAC's sustainability and strength. The MHPA PAC Board consists of representatives of PAC-contributing MHPA-members and guides the PAC's efforts to advance MHPA's broader Congressional advocacy mission.

Public Policy & Regulatory

MHPA Staff Lead: Nicolas Wilhelm, JD, Director of Regulatory Affairs

Monitors, analyzes, and develops positions on regulatory and sub regulatory actions by federal executive branch agencies, including the Centers for Medicare & Medicaid Services, the Office of Management and Budget, and the Office of the Inspector General. In collaboration with MHPA members, drafts and submits comment letters in response to requests for information and notices of proposed rulemaking. Seeks alignment with external governmental and nongovernmental organizations, such as the Medicaid and CHIP Payment and Access Commission, trade associations, and the National Association of State Medicaid Directors to advance the interests of MHPA members. Coordinates meetings with key policymakers to provide additional advocacy opportunities for membership.

NOTE: Members have the opportunity to provide representation on ad hoc sub-committees that represent key issues and initiatives set forth by the Board of Directors for the given calendar year. Previously, sub-committees have been instituted to address Behavioral Health, MDRP, MLTSS/Duals, Regulatory Issues, and Specialty Care.

Research

MHPA Staff Lead: Michelle Proser, PhD, MPP, Vice President of Research, Quality, and Performance

Provides guidance, support, and oversight for an MHPA research strategy for demonstrating the state and value of Medicaid managed care. MHPA's research strategy centers on designing and implementing a structure for data analytics that can inform policy, deepen understanding of performance, and drive quality. The Committee is responsible for ensuring the research strategy supports the mission, tenants, values, and strategic goals of the organization.

State Affairs

MHPA Staff Lead: Stephanie Myers, Director of State Affairs

Oversees and provides guidance to MHPA staff in the identification, development, and management of key Medicaid/managed care issues at the state level, as well as strategic relationships with state associations and initiatives that directly impact state Medicaid programs and MCOs with the purpose of advancing the Medicaid and managed care priorities of MHPA.

MHPA Member Application

Health Plan Organizations

Organization Name *(as it should appear)*: _____

Primary Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

Mailing Address *(if different)*: _____

City: _____ State: _____ Zip: _____

KEY BUSINESS INFORMATION

Tax Status: For Profit Non-profit

Medicaid Covered Lives: _____

NOTE: Only a plan's Medicaid enrollment is counted toward assessment of MHPA dues. Medicaid enrollment includes members covered in Medicaid (Title XIX), CHIP (Title XXI), and duals enrolled in MCOs for at least Medicaid benefits. Do not include commercial, ASO, exchange, or Medicare enrollment.

List States in which the Company does Business: _____

Provide State & Location with the Most Employees: _____

ORGANIZATIONAL CONTACTS LISTING

CEO / P&L Medicaid Leader

Name: _____ Title: _____

Email *(for internal use only)*: _____

Phone: _____ Mobile: _____

Assistant to above Executive (Designee appointed to represent or receive materials on behalf of MHPA Board Member.)

Name: _____ Title: _____

Email *(for internal use only)*: _____

Phone: _____ Fax: _____

ORGANIZATIONAL CONTACTS LISTING - CONTINUED

Chief Medical Officer

Name: _____ Title: _____

Email (for internal use only): _____

Phone: _____ Mobile: _____

Chief Information Officer

Name: _____ Title: _____

Email (for internal use only): _____

Phone: _____ Mobile: _____

Chief Marketing Officer/Public Affairs/Communications

Name: _____ Title: _____

Email (for internal use only): _____

Phone: _____ Mobile: _____

Policy

Name: _____ Title: _____

Email (for internal use only): _____

Phone: _____ Mobile: _____

Government Affairs

Name: _____ Title: _____

Email (for internal use only): _____

Phone: _____ Mobile: _____

Chief Operating Officer/COO

Name: _____ Title: _____

Email (for internal use only): _____

Phone: _____ Mobile: _____

Vendor Contracting

Name: _____ Title: _____

Email (for internal use only): _____

Phone: _____ Mobile: _____

MHPA-ASSIGNED SERVICE REPRESENTATIVES

MHPA Committee Representatives

Board of Directors Representative: _____

Second Board Representative: _____

Communications Committee Representative: _____

Conference Planning Committee Representative: _____

Congressional Affairs Committee Representative: _____

Finance Committee Representative: _____

PAC Board Representative: _____

Public Policy & Regulatory Committee Representative: _____

Research Committee Representative: _____

State Affairs Committee Representative: _____

AGREEMENT

In submitting this Member Organization Application, the Applicant agrees to the following:

1. If admitted to membership, to pay annual dues as determined by the MHPA Board of Directors and to comply with the provisions of the MHPA Bylaws.
2. All invoices are to be paid 30 days of invoice date.
3. On behalf of the applicant, the undersigned agrees to the foregoing conditions and certifies that the information in this application is true and correct.

Signature _____

Print Name: _____

Title: _____

Signature: _____

Date: _____

Please send completed/signed application form to Craig Kennedy, MHPA President & CEO to ckennedy@mhpa.org.
Questions? Call Craig at (202) 857-5771 or the MHPA Membership Department at 1575 Eye Street, NW, Suite 300, Washington, DC 20005.





*Medicaid Health
Plans of America*

Patrick Corr
Vice President,
Membership and
Partnership Engagement
E: pcorr@mhpa.org
(202) 857-5720

1575 Eye Street, NW, Suite 300
Washington, DC 20005

WWW.MEDICAIDPLANS.ORG

