

PRESS RELEASE

For Immediate Release

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MHPA Applauds Congressional Action on Emergency Legislation Addressing COVID-19

WASHINGTON, DC (March 18, 2020) - Medicaid Health Plans of America (MHPA), the leading association representing Medicaid managed care organizations, released the following statement in response to passage of the Families First Coronavirus Response Act.

“MHPA and its member health plans thank Congress and the Administration for their leadership on the Families First Coronavirus Response Act, legislation that addresses the COVID-19 pandemic, an urgent public health emergency that poses a threat to millions of Americans. As MHPA wrote in a [letter](#) to the CMS Administrator last week, Medicaid beneficiaries should not be subject to any cost-sharing for testing related to COVID-19, so we applaud the inclusion of this provision in the bipartisan legislation.

MHPA also commends Congress for including an increase to the Medicaid FMAP (Federal Medical Assistance Percentages), which will help states address serious public health needs for the duration of the COVID-19 pandemic. Medicaid is an extremely important program that includes a wide range of optional benefits and services for enrollees at critical times like these, such as telehealth. An enhanced FMAP allows state Medicaid agencies to expand such services and take other steps to meet the treatment care needs of Medicaid beneficiaries during this unprecedented national health crisis.

MHPA and our member health plans will continue to work tirelessly with federal, state, and local governments, as well as with providers, partners, and other stakeholders to ensure our response to COVID-19 recognizes the unique needs of the more than 70 million Americans that rely on the Medicaid program.”

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ABOUT MHPA

Founded in 1995, 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 36 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.
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