



AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

April 23, 2013

Quick Links

[MA-ACA Website](#)



These Updates, published by the Executive Office of Health and Human Services (EOHHS) in consultation with the other state agencies involved in ACA implementation, will bring you news related to the implementation of provisions of the ACA here in Massachusetts.

Grants and Demonstrations

The ACA provides funding opportunities to transform how health care is delivered, expand access to care and support healthcare workforce training.

Grant Activity

For information about ACA grants awarded to and grant proposals submitted by the Commonwealth, visit the Grants page of the **Massachusetts National Health Care Reform website** at: [Mass.Gov](#)

News

4/16/13 CMS published a notice regarding the Early Retiree Reinsurance Program (ERRP), a program authorized under ACA §1102 which provides reimbursement to participating employment-based plans for a portion of the costs of health benefits for early retirees and early retirees' spouses, surviving spouses, and dependents. The April 2013 notice sets termination dates for several processes for the sunset of the ERRP program. Plan sponsors participating in ERRP must use ERRP reimbursement funds as soon as possible but no later than December 31, 2013.

In April 2011 CMS announced that, due to the availability of funds, the agency was exercising its authority under ACA §1102(f) to stop accepting applications for the ERRP as of May 5, 2011. The ERRP fund was initially established to be available until 2014, when health insurance exchanges are operational and new rules are in effect to make it easier for older Americans to buy insurance without the help of an employer. Congress appropriated \$5 billion for the

program, but as of February 2012, ERRP had provided \$4.73 billion in reinsurance payments to more than 2,800 employers and other sponsors of retiree plans. In December 2011, when reimbursements surpassed the \$4.5 billion mark, CMS said it would not pay claims incurred after December 31, 2011, although early retiree health care plan sponsors could continue to file for reimbursement of claims incurred through that date.

Read the April 2013 notice at: <http://www.gpo.gov/fdsys/pkg/FR-2013-04-23/pdf/2013-09541.pdf>

Learn more about ERRP at: <http://errp.gov/newspages/2013/20130419-federal-register-announcement-posted.shtml>

4/16/13 The U.S. Preventive Services Task Force (USPSTF) issued a draft recommendation statement on medications for risk reduction of primary breast cancer in women. The proposal recommends that clinicians engage in shared decision-making with women at increased risk of breast cancer regarding medications to reduce their risk. For women who are at increased risk for breast cancer and at low risk for adverse medication effects, clinicians should offer to prescribe risk-reducing medications such as tamoxifen or raloxifene. Tamoxifen and raloxifene are selective estrogen receptor modulators, medications that block the effects of estrogen in the breast tissue and have been shown to reduce the risk of hormone receptor (HR) positive breast cancer, a type of cancer that receives signals from estrogen in a way that could promote the cancer cell's growth.

The USPSTF is an independent panel of non-federal government experts that conduct reviews of scientific evidence of preventive health care services. The USPSTF then develops and publishes recommendations for primary care clinicians and health systems in the form of recommendation statements. As part of their recommendations process, the USPSTF will assign definitions to the services they review based on the certainty that a patient will receive a substantial benefit from receiving the benefit. Services that are graded "A" and "B" are highly recommended and the USPSTF believes there is a high certainty that patient will receive a substantial or moderate benefit. Under ACA §1001, all of the recommended services receiving grades of "A" or "B" must be provided without cost-sharing when delivered by an in-network health insurance provider in the plan years (or, in the individual market, policy years) that begin on or after September 23, 2010.

The USPSTF has recommended a "B" rating for the prescription of medications such as tamoxifen or raloxifene for women who are at increased risk for breast cancer and at low risk for adverse effects from the medications. According to the National Cancer Institute, more than 232,000 women will be newly diagnosed with breast cancer in 2013, making it the most common non-skin cancer in women. However, the USPSTF recommends against the routine use of such medications for risk reduction of primary breast cancer in women who are not at increased risk for breast cancer. (This is a "D" recommendation which means that the USPSTF recommends against the service because there is moderate or high certainty that the service has no net benefit). The draft recommendation statement applies to asymptomatic women between the ages of 40 and 70 who have not previously been diagnosed with breast cancer.

USPSTF is accepting comments on the draft recommendation until May 13, 2013. The USPSTF will review all comments as it develops its final recommendation.

Read the draft recommendation at:
<http://www.uspreventiveservicestaskforce.org/draftrec4.htm>

To comment on the draft recommendation, visit:
[http://www.uspreventiveservicestaskforcecomments.org/?dno=QXM1MzIzXNjhSWmclM2Q\\$](http://www.uspreventiveservicestaskforcecomments.org/?dno=QXM1MzIzXNjhSWmclM2Q$)

Learn more about the USPSTF and the ACA at:

<http://www.healthcare.gov/law/resources/regulations/prevention/taskforce.html>

Upcoming Events

Integrating Medicare and Medicaid for Dual Eligible Individuals Implementation Council Meeting

May 10, 2013

1:00 PM - 3:00 PM

State Transportation Building, Conference Rooms 1, 2 and 3

10 Park Plaza

Boston, MA

The Implementation Council welcomes attendance at its meetings from all stakeholders and members of the public with interest in the Demonstration. Reasonable accommodations will be made for participants who need assistance. Please send your request for accommodations to Donna Kymalainen at Donna.Kymalainen@state.ma.us.

Quarterly Affordable Care Act Implementation Stakeholder Meeting

May 17, 2013

3:00 PM - 4:00 PM

Public Health Council Conference Room

250 Washington Street, 2nd Floor

Boston, MA

Bookmark the **Massachusetts National Health Care Reform website** at:

[National Health Care Reform](#) to read updates on ACA implementation in Massachusetts.

Remember to check the Mass.Gov website at: [Dual Eligibles](#) for information on the **"Integrating Medicare and Medicaid for Dual Eligible Individuals"** initiative.