



## AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

May 5, 2014

### 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 Announcements

**The Patient Centered Outcomes Research Institute (PCORI)**, created under ACA §6301, **PCORI** is an independent nonprofit organization, tasked with conducting patient-centered outcomes research and studies.

For more information about PCORI, visit [PCORI](#)

For more information about PCORI funding opportunities, visit:

[www.pcori.org/funding-opportunities](http://www.pcori.org/funding-opportunities).

Two PCORI grants were recently announced:

**Pragmatic Clinical Studies and Large Simple Trials to Evaluate Patient Centered Outcomes, §6301.** This opportunity was previously posted on February 18, 2014 and is being re-announced with an updated application deadline. Funding is available to conduct clinical trials, large simple trials, or large-scale observational studies that compare two or more alternatives for addressing prevention, diagnosis, treatment, or management of a disease or symptom; improving health care system-level approaches to managing care; or for eliminating healthcare disparities. Eligible applicants include: private or public research organizations; nonprofit or for-profit organizations; university or college hospitals or healthcare systems; or local, state, or federal government agencies. \$90,000,000 in total for 6 to 9 awards available.

Letters of Intent were due March 7, 2014.

Applications are now due August 8, 2014.

The announcement for this opportunity can be found at:

<http://www.pcori.org/funding-opportunities/funding-announcements/pragmatic-clinical-studies-and-large-simple-trials-to-evaluate-patient-centered-outcomes/>

**Disseminating and Implementing Evidence from Patient-Centered Outcomes Research in Clinical Practice Using Mobile Health Technology**, §6301. Announced April 29, 2014. Funding is available in order to develop research projects on using mobile health technology (mHealth) to facilitate the dissemination and implementation of findings from patient-centered outcomes research (PCOR) into clinical practice. This research will help evaluate the effectiveness of novel approaches that use mHealth tools to enable the timely incorporation and appropriate use of PCOR evidence in clinical practice. Eligible applicants include state, county, city, and town governments, public and private institutions of higher education, certain federal agencies, Native American tribal governments and tribally designated organizations. \$1,500,000 in total is available for 10 to 15 awards. Applications are due August 4, 2014.

This funding announcement may be viewed at:

<http://grants.nih.gov/grants/guide/rfa-files/RFA-HS-14-010.html>

## 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](http://Mass.Gov)

## Guidance

**4/30/14 IRS/Treasury published technical corrections to the [final regulations](#) "Information Reporting of Minimum Essential Coverage."** The document makes technical additional corrections to the [final regulations](#) which were published in the Federal Register on March 10, 2014.

The final regulations update the [proposed regulations](#) (which were published in the Federal Register on September 9, 2013) and implement ACA §1502, reporting of health insurance coverage. The final regulations provide guidance to providers of [minimum essential coverage](#) (MEC, ACA §1501) that are subject to the annual information reporting requirements of section 6055 of the Internal Revenue Code (Code), as enacted by ACA §1514(a). Health insurance issuers, certain employers, governments and others that provide MEC to individuals must report to the IRS information about the type and period of coverage and furnish the information in statements to insured individuals.

Read the corrections published at:

<http://www.gpo.gov/fdsys/pkg/FR-2014-04-30/pdf/2014-09795.pdf> and <http://www.gpo.gov/fdsys/pkg/FR-2014-04-30/pdf/2014-09796.pdf>

Prior guidance can be found at: <http://www.hhs.gov/healthcare/index.html>

## News

**4/8/14 The U.S. Preventive Services Task Force (USPSTF) issued two draft recommendation statements on the prevention of sexually transmitted infections (STIs).** The USPSTF recommends intensive behavioral counseling for all sexually active adolescents and adults at increased risk for STIs. In a related recommendation, the USPSTF recommends screening for chlamydia and gonorrhea in sexually active women age 24 years and younger and in older women who are at increased risk for infection. The Task Force assigned a "B" rating to both recommendations, indicating that the Task Force recommends the services.

Both draft recommendations apply to all sexually active adolescents and adults. The draft recommendation on screening for chlamydia and gonorrhea infections also applies to pregnant women. Age is a strong predictor of risk for both chlamydial and gonococcal infections, with the highest infection rates in women age 20 to 24 years.

The USPSTF's evidence review found that STIs are a significant health concern for many Americans. According to CDC estimates, approximately 20 million cases occur each year, with half of those cases in people ages 15 to 24 years. If untreated, STIs such as gonorrhea and chlamydia, can lead to serious complications including pelvic inflammatory disease, complications in pregnancy, chronic pelvic pain, infertility, cancer, and death.

According to the USPSTF, men with chlamydia or gonorrhea infections are more likely than women to experience symptoms for which they would seek medical attention. As a result of earlier detection and treatment, men with these STIs are less likely than women to develop long-term complications. Subsequently, the Task Force concluded that, for men, there is not enough evidence to determine the effectiveness of screening to prevent chlamydia and gonorrhea.

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. If the recommendations are finalized with "B" ratings, then screening for gonorrhea and chlamydia for women and behavioral counseling interventions to prevent sexually transmitted infections will be required to be covered without cost-sharing under the ACA.

Comments on the draft recommendation statement on screening for gonorrhea and chlamydia can be submitted at: [USPSTF](#)

Comments on the draft recommendation statement on behavioral counseling interventions to prevent sexually transmitted infections at: [USPSTF](#)

Comments on both drafts are due May 26, 2014.

Read the draft recommendation statement on screening for gonorrhea and chlamydia at:

<http://www.uspreventiveservicestaskforce.org/draftrec2.htm>

Read the draft recommendation statement on behavioral counseling interventions to prevent sexually transmitted infections at: <http://www.uspreventiveservicestaskforce.org/draftrec3.htm>

Learn more about preventive services covered under the ACA at: [HHS.Gov](#)

Learn more about the USPSTF at: <http://www.uspreventiveservicestaskforce.org/>

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.