

AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

October 27, 2014

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

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:

<http://www.mass.gov/eohhs/gov/commissions-and-initiatives/healthcare-reform/national-health-care-reform-plan/grants-and-demonstrations.html>

Guidance

10/21/14 CMS/HHS issued a proposed rule called "Basic Health Programs: Federal Funding Methodology for Program Year 2016."

The proposed rule contains the funding methodology and data sources necessary to determine federal payment amounts made in program year 2016 to states that elect to establish a Basic Health Program (BHP) under the ACA to offer health benefits coverage to low-income individuals otherwise eligible to purchase coverage through Affordable Insurance Exchanges.

The BHP program, as authorized by §1331 and subsequent guidance, provides states the option to establish a health benefits coverage program for low-income individuals who would otherwise be eligible to purchase coverage through the Health Insurance Exchange. Under the BHP rules, citizens or lawfully present non-citizens who do not qualify for Medicaid, the Children's Health Insurance Program (CHIP) or other minimum essential coverage and have incomes between 133% FPL and 200% FPL are eligible for the BHP.

The BHP is federally funded by determining the amount of payments that the federal government would have made through the premium tax credit and cost sharing reductions (CSR) for individuals enrolled in BHP had they instead been enrolled in an Exchange. To calculate the amounts for each state, HHS/CMS is asking states for "reference premiums" for the second lowest cost silver plans in each geographic area in a state, as those amounts are a basic unit in the calculation of tax credits and CSRs under the Exchanges. Furthermore, reference premiums are critical components of the BHP payment methodology. According to HHS/CMS, the agency has the required data to establish reference premiums for states with Exchanges that are operated by the Federally Facilitated Exchange (FFE) or are operated in partnership with the FFE, although the agency is seeking such information from the 17 states that are operating State Based Exchanges.

The ACA established Affordable Insurance Exchanges (§1311(b)) to provide individuals and small business employees with access to health insurance coverage beginning January 1, 2014, where low and moderate income individuals would be eligible for premium tax credits (§1401, §1411) to make purchasing a qualified health plan (QHP) more affordable by reducing out-of-pocket premium costs. QHPs are health plans that have been certified by an Exchange, provide essential health benefits (§1301) and follow established limits on cost-sharing (like deductibles, copayments, and out-of-pocket maximum amounts).

Beginning January 1, 2015, states will have an option to establish a BHP for certain individuals who meet the income criteria and would otherwise be eligible to obtain coverage through the Exchange. BHP benefits are required to include at least the ten essential health benefits specified in §1301. BHP monthly premiums and cost sharing cannot exceed what an eligible individual would have paid if the eligible individual were to receive coverage from a QHP through the Exchange. A state that operates a BHP will receive federal funding equal to 95% of the amount of the premium tax credits and the cost sharing reductions that would have otherwise been provided to (or on behalf of) eligible individuals if these individuals enrolled in QHPs through the Exchange.

Comments are due November 24, 2014.

Read the rule (which was published in the Federal Register on October 23, 2014) at:

<http://www.gpo.gov/fdsys/pkg/FR-2014-10-23/pdf/2014-25257.pdf>

News

10/20/14 The Government Accountability Office (GAO) announced a call for nominations for the Methodology Committee of 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.

Under the ACA, the Comptroller General of the United States has the responsibility for appointing no more than 15 members to a Methodology Committee of PCORI. The GAO is currently accepting nominations for one vacancy on this committee. Members of the Methodology Committee must meet the qualifications listed in §6301 of the ACA. Expertise in health informatics, especially expertise in developing data networks or decision support for clinicians and patients, would be beneficial. Letters of nomination and resumes should be submitted by November 17, 2014.

Email: PCORIMethodology@gao.gov

Mail: U.S. GAO, Attn: PCORI Methodology Committee Appointments 441 G Street NW, Washington, DC 20548.

Read this announcement at: GPO.GOV

Upcoming Events

Integrating Medicare and Medicaid for Dual Eligible Individuals (also known as One Care) Implementation Council Meeting

Friday, November 21, 2014
1 Ashburton Place, 21st Floor
Boston, MA

A meeting agenda and any meeting material will be distributed prior to the meetings.

Meetings of the Implementation Council are open to stakeholders and members of the public with an interest in One Care. Reasonable accommodations are available upon request. Please contact Donna Kymalainen at Donna.Kymalainen@umassmed.edu to request accommodations.

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.

To **subscribe** to receive the ACA Update, send an email to: join-ehs-ma-aca-update@listserv.state.ma.us. To **unsubscribe** from the ACA Update, send an email to: leave-ehs-ma-aca-update@listserv.state.ma.us. Note: When you click on the sign up link, a blank e-mail should appear. If your settings prevent this, you may also copy and paste join-ehs-ma-aca-update@listserv.state.ma.us into the address line of a blank e-mail. Just send the blank e-mail as it's addressed. No text in the body or subject line is needed.