



AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

January 25, 2016

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

State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity, and Associated Risk Factors and Promote School Health, \$4002. Announced January 19, 2016.

Continued funds are available to help prevent and control diabetes, heart disease, obesity and associated risk factors, while also promoting school health at the state level.

Eligible applicants are limited to states previously awarded funding under this opportunity, including the Massachusetts Department of Public Health. \$101,225,000 is available for fifty awards.

To see a list of awardees, visit: CDC.GOV

Applications are due March 3, 2016.

The announcement may be viewed at: GRANTS.GOV

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

Guidance

1/20/16 HHS/CMS issued a notice under the Paperwork Reduction Act of 1995 (PRA) seeking comments on two information collection activities.

Comments are due February 19, 2016.

Read the notice at: <https://www.gpo.gov/fdsys/pkg/FR-2016-01-20/pdf/2016-00994.pdf>

In item #1, HHS/CMS is seeking comments on the extension of a currently approved information collection activity related to Consumer Assistance Program Grants.

ACA §1002 provides for the establishment of consumer assistance programs (CAPs). CAPs are independent offices that provide consumer support by helping with filing complaints and appeals regarding health insurance coverage requirements, assisting with enrollment into group health plans and health insurance coverage, providing education on group health plans and health insurance coverage, and helping resolve related problems with the enrollment process.

Grant recipients are required to collect and report data to the HHS Secretary on the types of problems and inquiries encountered by consumers. In turn, HHS is required to share program data reports with the Departments of Labor and Treasury, and various state regulators. Program data can offer CCIIO some information on the effectiveness of state enforcement of insurance-related issues and possible opportunities to provide technical assistance and support to state insurance regulators.

More information about Consumer Assistance Programs can found at: www.cms.gov/CCIIO/Resources/Consumer-Assistance-Grants/

In item #2, HHS/CMS is seeking comments on the revision of a previously approved information collection activity related to Cost Sharing Reduction Reconciliation.

According to CMS, the data collection will be used by HHS to make payments or collect charges from health insurance issuers under the following ACA programs: advance payments of the premium tax credit, advanced cost-sharing reductions, and Marketplace (Exchange) user fees. According to CMS, the data collection establishes the data elements that a QHP issuer would be required to report to HHS in order to establish the cost-sharing reductions provided on behalf of enrollees for the benefit year and eliminates some data elements and requires summary plan level reporting and reporting in the 2016 reconciliation cycle on the dollar amount of 2014 cost-sharing reductions used in calculations for medical loss ratio and risk corridors programs reporting.

Beginning October 1, 2013, qualified individuals and qualified employees could purchase private health insurance coverage through Exchanges (Marketplaces) for January 1, 2014 effective dates. 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. Furthermore, an Exchange makes an advance determination of tax credit eligibility for individuals who enroll in a qualified health plan (QHP) through the Exchange and pursue financial assistance (§1401, 1411, and 1412). QHPs are health plans that have been certified by an Exchange, provide essential health benefits (EHB, §1301) and follow established limits on cost-sharing (such as reduced deductibles, copayments, and out-of-pocket maximum amounts).

Using information available at the time of an individual applicant's enrollment, the Exchange determines whether the individual meets income and other requirements for advance payments and the amount of the advance payments that can be used to pay premiums. Advance payments are made periodically to the issuer of the QHP in which the individual enrolls (§1412). §1402 provides for the reduction of cost sharing for certain individuals enrolled in a QHP through an Exchange and §1412 provides for the advance payment of these reductions to health insurance issuers. Moreover, the ACA directs the issuers to reduce EHB cost sharing for individuals with household incomes between 100% and 400% FPL who are enrolled in a silver level QHP through an individual market Exchange and who are eligible for advance payments of the premium tax credit.

1/19/16 HHS/CMS issued a notice under the Paperwork Reduction Act of 1995 (PRA) seeking comments on a revision of a currently approved information collection activity related to the Evaluation of the Graduate Nurse Education Demonstration Program.

The GNE Demonstration, which is mandated under ACA §5509, states that the five selected demonstration sites receive "payment for the hospital's reasonable costs for the provision of qualified clinical training to advance practice

registered nurses." Furthermore, §5509 also requires that an evaluation of the GNE Demonstration must be completed no later than October 17, 2017. The evaluation includes analysis of the following: (1) growth in the number of advanced practice registered nurses with respect to a specific base year as a result of the demonstration; (2) growth for each of the following specialties: clinical nurse specialist, nurse practitioner, certified nurse anesthetist, certified nurse-midwife; and (3) costs to the Medicare program as result of the demonstration.

According to HHS/CMS, the information collected through the evaluation of the GNE project will be used to meet the requirements specified under §5509, to determine the overall effectiveness of the GNE project, to understand how the demonstration is implemented overall, how that implementation has changed over time, which aspects of the demonstration have been successful or unsuccessful, and what plans the sites have for the remainder of the implementation and after the demonstration formally ends.

Comments are due February 18, 2016.

Read the notice at: <https://www.gpo.gov/fdsys/pkg/FR-2016-01-19/pdf/2016-00844.pdf>

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

Upcoming Events

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

Implementation Council LTSS Subcommittee Meeting

January 29, 2016

1:00 PM - 2:30 PM

Transportation Building, 10 Park Plaza, Boston, Conference Room 4
Boston, MA 02116

At all meetings we welcome attendance from all stakeholders and members of the public with an interest in One Care. 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

This information was provided by the One Care Implementation Council. Any information or opinions contained therein are the express views of the Implementation Council and are not endorsed by or binding on EOHHS or MassHealth.

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.



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