



AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

July 11, 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 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

6/27/16 HHS/CMS issued a proposed rule called "Medicare and Medicaid Programs; CY2017 Home Health Prospective Payment System Rate Update; Home Health Value-Based Purchasing Model; and Home Health Quality Reporting Requirements"

According to CMS, the proposed rule, which implements portions of §3131 and §3401 of the Affordable Care Act, would update the Home Health Prospective Payment System (HH PPS) payment rates, including the national, standardized 60-day episode payment rates, the national per-visit rates, and the non-routine medical supply (NRS) conversion factor, effective for home health episodes of care ending on or after January 1, 2017, would make a number of other changes to Home Health rates, proposes changes to the Home Health Value- Based Purchasing (HHVBP) Model, which was implemented on January 1, 2016, and proposes updates to the Home Health Quality Reporting Program (HH QRP), among other changes.

Comments are due August 26, 2016.

Read the rule (which was published in the Federal Register on July 5, 2016) at: <https://www.gpo.gov/fdsys/pkg/FR->

[2016-07-05/pdf/2016-15448.pdf](https://www.cms.gov/medicare/medicaid-support/aca-requirements/2016-07-05/pdf/2016-15448.pdf)

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

News

6/30/16 The Commonwealth Health Insurance Connector Authority released its final risk adjustment transfer calculations for the 2015 plan year. Ten insurers will make payments into the program, while six insurers will receive payments. The total transfer of payments is approximately \$85.7M, an increase from last year's \$61M transfer and reflects risk scores for approximately 735,000 Massachusetts residents in small group and individual plans. The total transfer increase is due to an increase in risk adjusted member months. While the state has been running the ACA-required risk adjustment program, CMS will take over the program in 2018 for plan year 2017.

The ACA established three risk-mitigation programs to stabilize premiums in the individual insurance market and minimize the effects of adverse selection that may occur as insurance reforms and the Exchanges launch in 2014. These programs include transitional reinsurance (§1341), temporary risk corridors programs (§1342), and a permanent risk adjustment program (§1343) to provide payments to health insurance issuers that cover higher-risk populations and to more evenly spread the financial risk borne by issuers.

6/29/16 PCORnet, PCORI's Health Data Initiative, Commits to Advance White House Cancer Moonshot

PCORI announced its support of Vice President Joe Biden's [Cancer Moonshot program](#) to accelerate progress in cancer research and care. PCORI's support includes a series of commitments by PCORnet, the institute's ambitious effort to harness health data and patient partnerships to increase the pace and power of clinical research.

[PCORnet](#), the National Patient-Centered Clinical Research Network, is a collaboration involving 33 individual partner networks working to help the nation conduct clinical research faster, more efficiently, and at lower cost than is currently possible by incorporating patient health information and other data. PCORnet launched with PCORI funding in 2013 and expanded in 2015.

PCORnet, through its partner networks, already has made substantial progress in supporting high-quality, patient-centered cancer research. Researchers involved with PCORnet's partner networks have built observational data sets based on large cohorts of patients with colorectal, hereditary ovarian and breast, and pediatric cancers. The vast scale of PCORnet also supports research in rare cancers.

The PCORnet collaborative research group (CRG) planning committee, composed of patients, clinicians, and investigators, will survey the landscape of potential additional partners, both inside and outside of PCORnet, and create work plans for the research group. The CRG will build on PCORnet's resources of standardized EHR, clinical data, and patient-reported data. The planning group will seek funding from PCORI to establish the research group by October of 2016.

In addition to its support of patient-centered cancer research via PCORnet, PCORI has awarded nearly \$157 million to support comparative clinical effectiveness (CER) [studies related to cancer](#). These patient-centered studies compare two or more available options for cancer care with the goal of determining which works best for which patients given their needs and preferences. Among them are [studies focusing on cancer survivors' needs](#) as well as on prevention, screening, and treatment.

Created under ACA §6301, PCORI is an independent nonprofit organization, tasked with conducting patient-centered outcomes research and studies.

Those interested in collaborating with PCORnet may contact pmo@pcornet.org. Click www.pcori.org/news-release/pcornet-pcoris-health-data-initiative-commits-advance-white-house-cancer-moonshot for more information and [here](#) to view PCORnet's full commitment to the White House Cancer Moonshot.

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

Commonwealth of MA News

MassHealth Section 1115 Demonstration Extension

The Massachusetts Executive Office of Health and Human Services (EOHHS) announces its intent to submit a request to amend and extend the MassHealth Section 1115 Demonstration ("Request") to the Centers for Medicare and Medicaid Services.

The MassHealth 1115 Demonstration provides federal authority for Massachusetts to expand eligibility to individuals who are not otherwise Medicaid or CHIP eligible, offer services that are not typically covered by Medicaid, and use innovative service delivery systems that improve care, increase efficiency, and reduce costs as a part of MassHealth restructuring. Federal authorization and funding for key aspects of the current 1115 Demonstration are only approved through June 30, 2017.

MassHealth plans to advance alternative payment methodologies and delivery system reform through accountable care organizations and community partners for behavioral health and long term services and supports. A significant focus will be placed on improving integration and delivery of care for members with behavioral health needs and those with dual diagnoses of substance abuse disorder; as well as integration of long term services and supports and health-related social services. In addition, MassHealth plans to expand treatment for individuals affected by substance use disorder and opioid addiction.

The Request does not affect eligibility for MassHealth. A more detailed public notice can be found at MassHealth's home page: www.mass.gov/eohhs/gov/departments/masshealth/, and the Request documents can be found at the MassHealth Innovations web site: www.mass.gov/hhs/masshealth-innovations. Paper copies of the documents may be obtained in person from 9 am-5 pm at EOHHS, One Ashburton Place, 11th Floor, Boston, MA 02108.

Public Comment Period:

EOHHS will accept comments on the proposed Request through July 17, 2016. Written comments may be delivered by email or mail. By email, please send comments to MassHealth.Innovations@state.ma.us and include "Comments on Demonstration Extension Request" in the subject line. By mail, please send comments to: EOHHS Office of Medicaid, Attn: 1115 Demonstration Comments, One Ashburton Place, 11th Floor, Boston, MA 02108. Comments must be received by July 17, 2016 in order to be considered. Paper copies of submitted comments may be obtained in person by request from 9 am-5 pm at EOHHS, One Ashburton Place, 11th Floor, Boston, MA 02108. Comments will be posted on the MassHealth 1115 Demonstration website: www.mass.gov/eohhs/gov/departments/masshealth/masshealth-and-health-care-reform.html

Upcoming Events

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

July 22, 2016
1:00 PM -3:00 PM
1 Ashburton Place, 21st Floor
Boston, MA

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.

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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