



AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

April 7, 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

National Diabetes Prevention Program: Preventing Type 2 Diabetes Among People at High Risk, §4002. Announced March 27, 2014. Currently funded grantees are eligible for continued program funding to expand the National Diabetes Prevention Program within participating states. This opportunity provides funding to state and local organizations in order to address the primary prevention of diabetes by helping implement improved and enhanced diabetes prevention and control strategies.

The National Diabetes Prevention Program encourages collaboration among federal agencies, community-based organizations, employers, insurers, health care professionals, academia, and other stakeholders who work together to prevent or delay the onset of type 2 diabetes among people with pre-diabetes in the United States.

Applications are due April 28, 2014.

The announcement may be viewed at:

<http://www.grants.gov/web/grants/view-opportunity.html?oppId=253070>

Although none of the current DPRP grantees are in Massachusetts, there are many DPRP partnering organizations that offer lifestyle change classes in communities in Massachusetts.

View a full list at: [CDC](#)

Grant Activity

On March 19, 2014 CMS awarded the Commonwealth a Balancing Incentive Program (BIP) grant. BIP is an ACA program designed to increase access to non-institutional long-term services and supports (LTSS). To participate, states must commit to achieving 50% spending on non-institutional LTSS by September 2015 and implementing structural changes to improve their long-term care system.

This award will provide the Commonwealth with a 2% enhanced federal matching rate on non-institutionally-based LTSS between April 2014 and September 2015. The estimated \$110.6m in enhanced revenue will benefit Medicaid-funded LTSS recipients of all ages including individuals with physical, mental, intellectual/development and cognitive disabilities. The enhanced funds will be purposed to directly or indirectly increase offerings of or access to Medicaid-funded LTSS. This additional funding will allow the Commonwealth to improve and enhance its LTSS offerings and community-based long-term care system. The specific uses of the funding will be determined over the next several months through a stakeholder engagement process and negotiations with CMS.

Read the project abstract at: <http://www.mass.gov/eohhs/docs/eohhs/healthcare-reform/grants/140319-sec-10202-bip.pdf>

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

Guidance

4/2/14 HHS/CMS issued a notice under the Paperwork Reduction Act of 1995 (PRA) seeking comments on the reinstatement of and changes to previously approved information collection activities related to rate increase disclosure and review reporting requirements. According to CMS, the notice explains that the transitional health plans (non-grandfathered coverage in the small group and individual health insurance markets which may have otherwise been canceled or terminated but authorized to continue for an additional policy year by HHS on November 14, 2013) are subject to the ACA's rate review process and are required to use the agency's rate review justification system and templates which were required and utilized prior to April 1, 2013.

The [rate review program](#) under §1003 requires that insurers seeking rate increases of 10% or more for non-grandfathered plans in the individual and small group markets publicly and clearly disclose the proposed increases and the justification for them. Such increases are reviewed by either state or federal experts (in states that do not have a rate review program deemed effective by HHS) to determine whether they are unreasonable. Although the ACA does not grant HHS the authority to block a proposed rate increase, companies whose rates have been determined unreasonable must either reduce their rate hikes or post a justification on their website within 10 days of the rate review determination.

Comments are due May 2, 2014.

Read the notice at: <http://www.gpo.gov/fdsys/pkg/FR-2014-04-02/pdf/2014-07402.pdf> (see item #2).

4/1/14 IRS/Treasury issued a correction and a correcting amendment to the final regulations regarding "Net Investment Income Tax." The documents make technical corrections to the [final rule](#) which was published in the Federal Register on December 2, 2013.

The final regulations provide guidance on the general application of the Net Investment Income Tax and the computation of Net Investment Income rules which went into effect on January 1, 2013 and are effective for taxable years beginning after December 31, 2012. As required under ACA §1402(a)(1) and Section 1411 of the amended Internal Revenue Code, the regulation affects individuals, estates, and trusts. The 3.8%

Net Investment Income Tax applies to individuals, estates and trusts that have certain investment income above certain threshold amounts.

Read the correcting amendment at: <http://www.gpo.gov/fdsys/pkg/FR-2014-04-01/pdf/2014-07160.pdf>

Read the correction at: <http://www.gpo.gov/fdsys/pkg/FR-2014-04-01/pdf/2014-07162.pdf>

Read the IRS Questions and Answers about the tax at: <http://www.irs.gov/uac/Newsroom/Net-Investment-Income-Tax-FAQs>

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

News

4/1/2014 The National Council on Disability (NCD) announced a funding opportunity for a cooperative agreement - The ACA and What it Means for People with Disabilities. Authorized by the Rehabilitation Act of 1973, funded projects will assess and report on the status of the implementation of certain ACA provisions, such as ACA §1201 which prevents insurance companies from discriminating against people with pre-existing conditions and benefits people who are living with disabilities. NCD describes the ACA as one of the most important pieces of legislation for people living with disabilities since the Americans with Disabilities Act.

NCD's main concern is to ensure that the ACA is successfully implemented in order to achieve the health outcomes for people with disabilities as prioritized by NCD. This project will evaluate the policy options facing states as they consider implementing the provisions of the ACA such as expansion of the Medicaid program (§2001) and the creation of the Health Insurance Exchanges (Marketplaces, §1311) that expand the availability of affordable health coverage and benefit people living with disabilities. The project will also develop recommendations on tracking the ACA's implementation in order to improve health outcomes of people with disabilities. Proposals are due April 29, 2014.

The NCD is an independent federal agency charged with advising the President, Congress, and federal agencies regarding policies, programs, practices, and procedures that affect people with disabilities.

For more information on the National Council on Disability and this opportunity please visit:

<http://www.ncd.gov/newsroom/research/04012014>

Upcoming Events

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

Friday, April 25, 2014

10:00 AM - 12:00 PM

Transportation Building

10 Park Plaza, Conference Rooms 1-3

Boston, MA

MBTA and driving directions to 1 Ashburton Place are located here: www.mass.gov/anf

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

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.