

Quality Improvement and Patient Protection

Health Policy Commission

Committee Meeting
November 13, 2013



Agenda

- Approval of the minutes from the September 9, 2013 meeting
- Discussion of proposed updates to Office of Patient Protection (OPP) regulations
- Schedule of next committee meeting (December 16, 2013)

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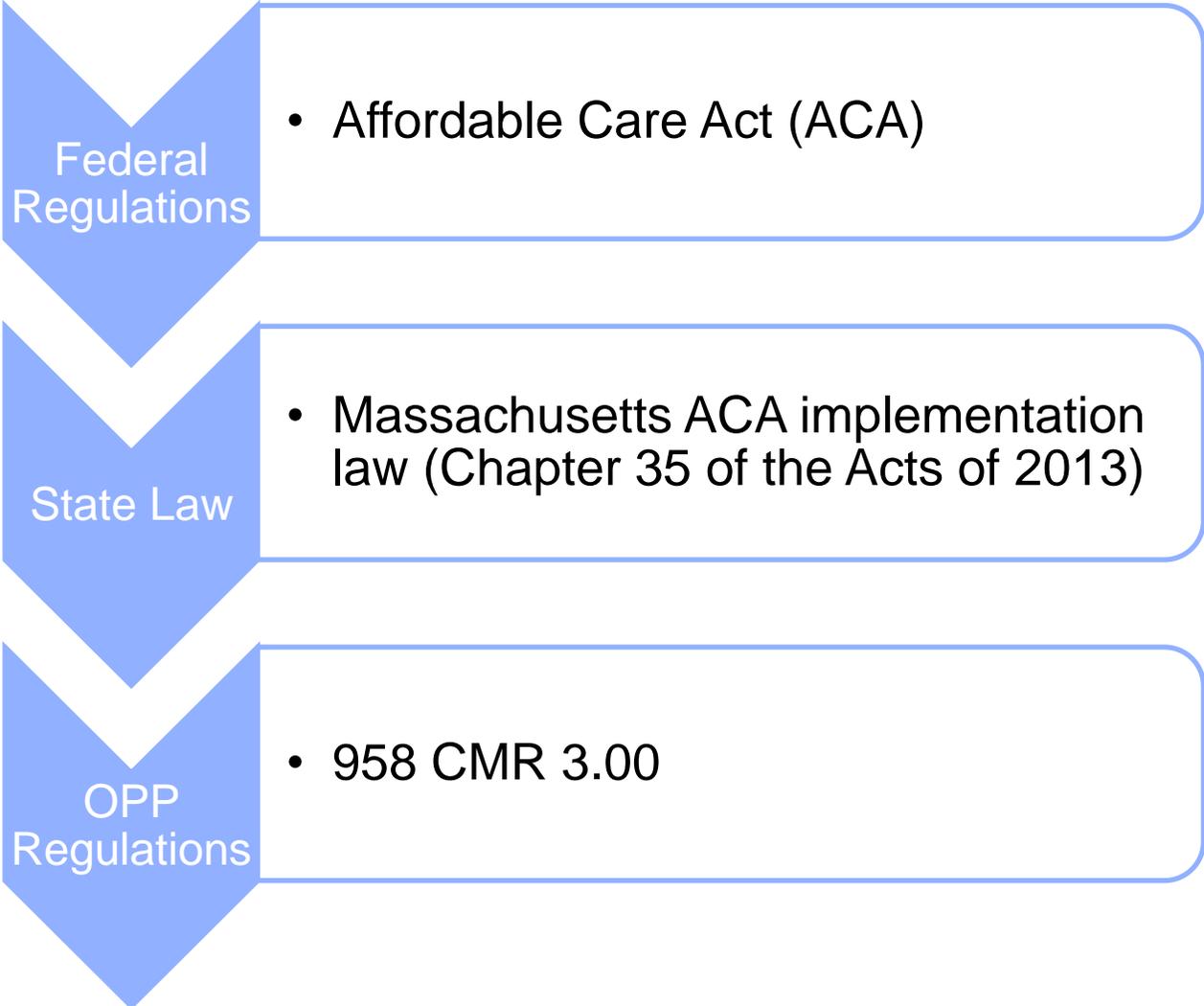
Vote: Approving minutes

Motion: That the Quality Improvement and Patient Protection Committee hereby approves the minutes of the Committee meeting held on September 9, 2013, as presented.

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Foundations of proposed changes



Federal
Regulations

- Affordable Care Act (ACA)

State Law

- Massachusetts ACA implementation law (Chapter 35 of the Acts of 2013)

OPP
Regulations

- 958 CMR 3.00

Proposed updates to OPP regulations

What

- Proposing updates to the OPP regulations, 958 CMR 3.00

Why

- Amending the regulations to comply with the federal Affordable Care Act (ACA) and the Massachusetts law that implements the ACA

When

- If adopted, these provisions are planned to be effective January 2014

A summary of changes

- Providing clear information to consumers about the internal and external review process
 - Clarifying requirements to provide language access to consumers
 - Updating reporting requirements for carriers
 - Further promoting consistency and clarity of OPP rules
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Changes to the internal review process

What is the internal review process?

- When a member files a grievance with the insurance carrier to contest a coverage decision.

What changes will be made?

- Establishes one level of appeal for internal grievances, with reconsideration available to members of group health plans.
- Mandates that insurance carriers share new information or rationale with the consumer before the decision on the consumer's grievance is issued.
- Mandates that the insurance carrier share with consumers information that the carrier reviewed while considering the member grievance.

What will these changes mean for consumers?

- Allow for greater clarity to consumers about the information that is available to them through the review process.
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Changes to the external review process

What is the external review process?

- When a member receives a “final adverse determination” after filing a grievance to contest a coverage decision, and seeks to have that decision reviewed by an external review agency

What changes will be made?

- Shorter timetables. Consumers will receive their external review decisions faster
 - Fewer fees. Consumers will be refunded their \$25 external review fee if they win their appeals, and will individually pay no more than \$75 in external review fees per plan year.
 - Consumers may seek external review for insurance coverage denials for treatment deemed to be experimental or investigational, and rescissions of coverage.
 - Further guidance for consumers to submit additional medical information during an external review.
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Changes to the expedited review process

What is the expedited review process?

- Consumers with urgent medical needs may be able to receive a quicker decision from the carrier or external review agency.

What changes will be made?

- Shorter timetable for expedited external reviews decisions. Decision from the external review agency within 72 hours.
 - Consumers with urgent medical needs may choose file a request for expedited external review at the same time as a request for expedited internal review.
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Changes to information provided to consumers

Notices:

- Adverse determination notices will contain detailed information for consumers
 - Diagnosis, treatment and denial codes
 - Medical necessity criteria and guidelines

Language:

- Changes to expand upon language access rules, aligned with DOI and ACA

Content of decisions:

- Further detail about information and analysis to be provided in external review decisions
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Changes to insurance carrier reporting requirements

- Reducing paperwork by enabling electronic submission of documents
 - Additional information regarding internal grievances and reconsiderations
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Public hearing on regulations

A public hearing on these proposed regulations is scheduled for the following:

Monday, December 16, 2013
9:00 a.m.

Daley Conference Room
Two Boylston Street, 5th Floor
Boston, MA 02116

Contact Information

For more information about the Health Policy Commission and the Office of Patient Protection:

- Visit us: <http://www.mass.gov/hpc>
- Follow us: [@Mass_HPC](#)
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