**Clarifications, Technical Corrections, and Policy Changes
to the Technical Specifications for the
MassHealth ACO Quality and Equity Incentives Program
Performance Year 2**

This document outlines clarifications, technical corrections, and policy changes to the Technical Specifications for Performance Year 2 (PY2) of the MassHealth ACO Quality and Equity Incentives Program (AQEIP). Updates are incorporated into the change log table below.

MassHealth's working definitions for clarification, technical correction and policy changes are as follows:

Clarification is additional information that explains an existing requirement.

Technical Correction is a change made to rectify an error in the technical specification.

Policy Update is a modification of an existing requirement.

Measure Name	Page #	Type of Update	Section Header	Update	Update release date
RELD SOGI Data Completeness	47	Technical Correction	PY2 Performance Requirements & Assessment	Updated reference to "Member Data and Member Enrollment Monthly Submission Specifications for all Entities" from Version 2.0 to Version 3.0.	11/4/24
HRSN Screening	53	Technical Correction	Administrative Data Reporting Requirements	Change "CPT" Code System to "HCPCS" Code System.	11/4/24
HRSN Screening	52	Technical Correction	Administrative Specification	Add "Member died during the measurement period" as an exclusion for Rate 1.	11/4/24
HRSN Screening	57	Technical Correction	Supplemental Data Reporting Requirements	Change "CPT" Code System to "HCPCS" Code System.	11/4/24
HRSN Screening	57	Technical Correction	PY2 Performance Requirements & Assessment	Change the due date from March 31, 2025 to June 30, 2025.	11/4/24

Language Access	71	Technical Correction	Eligible Population	Change Anchor Date from "December 31, 2024" to "Date of Qualifying Outpatient Visit."	11/4/24
Language Access	71	Clarification	Eligible Population	Add details around identifying eligible outpatient visits occurring at ACO Primary Care Entities (PCEs).	11/4/24
Language Access	72	Clarification	Definitions	Change definition of "Interpreter Services" to definition of "Language Assistance Services."	11/4/24
Language Access	73	Clarification	Administrative Specifications	Clarify that Component 2 applies to outpatient visits occurring at ACO PCEs.	11/4/24
Language Access	73	Technical Correction	Administrative Specifications	Remove "Member dies during the outpatient visit" as an exclusion.	11/4/24
Language Access	74	Technical Correction	Reporting Method	Update sampling methodology language to be visit-based rather than member based.	11/4/24
Language Access	75	Technical Correction	PY2 Performance Requirements & Assessment	Change the due date of Component 1 from December 31, 2024 to March 31, 2025, and the due date of Component 2 from March 31, 2025 to June 30, 2025.	11/4/24
Disability Competent Care	77	Clarification	Eligible Population	Clarify that the eligible population is all patient-facing staff across ACO PCEs.	11/4/24
Disability Competent Care	80	Clarification	PY2 Performance Requirements & Assessment	Change the denominator for the Component 2 Rate to "Total # of Patient-Facing Staff."	11/4/24
Disability Accommodation Needs	86	Clarification	Administrative Specifications	Add final supplemental questions added to the Member Experience Survey (MES) related to accommodation needs.	11/4/24
External Standards for Health Equity	90	Technical Correction	PY2 Performance Requirements & Assessment	Change the due date from December 31, 2024 to January 31, 2025.	11/4/24
Member Experience	92-95	Clarification	Entire measure	Simplified language throughout the specification.	11/4/24
Member Experience	93	Technical Correction	Administrative Specifications	Updated MES questions in the Adult & Child Communication	11/4/24

				Composites to reflect updated PY2 survey.	
RELD SOGI: All sub-measures	3, 9, 14, 22, 34, 39	Clarification	Overview	Clarified numerator source to "ACO 'Member Data and Member Enrollment' Monthly Data File Submission" and clarified denominator source to "MassHealth Enrollment Data."	3/14/25
HRSN Screening	47	Clarification	Measure Summary	Clarified Rate 2: HRSN Screen Positive Rate to "Rate of HRSN identified (i.e., screen positive) among cases in Rate 1 numerator."	3/14/25
HRSN Screening	47	Clarification	Eligible Population	Clarified that Continuous Enrollment is "90 days" and Allowable Gap is "None."	3/14/25
HRSN Screening	50	Clarification	Administrative Specification	Clarified description of Rate 2: HRSN Screen Positive Rate to "Rate of HRSN identified (i.e., screen positive) among cases in Rate 1 numerator."	3/14/25
HRSN Screening	50	Clarification	Administrative Specification	Clarified Rate 2 denominator description.	3/14/25
HRSN Screening	54	Technical Correction	Administrative Data Reporting Requirements	Added ICD-10 Code "Z59.12" to ICD-10 Codes Contribution to Rate 2 Numerators for Utility Difficulties.	3/14/25
HRSN Screening	55	Clarification	Supplemental Data Reporting Requirements	Added language about audit expectations.	3/14/25
HRSN Screening	55	Clarification	PY2 Performance Requirements & Assessment	Clarified that the data submission due date is applicable to all data submitted by the ACO (administrative and supplemental, as applicable).	3/14/25
Quality Performance Disparities Reduction	60	Clarification	Reporting Method	Added language about requesting additional member-level data.	3/14/25
Equity Improvement Interventions	64	Technical Correction	PY2-5 Performance Requirements & Assessment	Updated PIP2 Planning Report due date to 3/31/2025 (originally 3/30/2025) and the PIP1 Remeasurement 1	3/14/25

				Report due date to 8/29/2025 (originally 8/1/2025).	
Language Access	68	Clarification	Measure Summary	Clarified setting of eligible outpatient visits: "ACO Primary Care Entities."	3/14/25
Language Access	69	Clarification	Eligible Population	Clarified that the ACO may use their internal data to identify members with a preferred spoken language other than English if not available from the site where the visit occurred.	3/14/25
Language Access	72	Clarification	Reporting Method	Clarified sampling methodology language and added reference to the QEIP Portal User Guide, which contains further sampling methodology details.	3/14/25
Language Access	73	Clarification	Reporting Method	Added language about audit expectations.	3/14/25
Disability Competent Care	78	Clarification	Administrative Specifications	Clarified that the DCC Training Rate denominator is all patient-facing staff "at the ACO's Primary Care Entities."	3/14/25
Disability Competent Care	78	Clarification	PY2 Performance Requirements & Assessment	Clarified that entities must report total number of patient-facing staff in their DCC Training Report.	3/14/25
Member Experience	93	Clarification	Additional Measure Information	Clarified that MassHealth reports data to ACOs, including stratifications.	3/14/25
Health-Related Social Needs	50	Clarification	Administrative Specification	Removed "pending" and replaced with "*with* permission from NCQA."	6/13/25
Quality Performance Disparities Reduction	58	Policy Update	Administrative Specification	Removing requirement to submit member-level Race and Ethnicity data alongside annual clinical quality measure reporting.	6/13/25
Quality Performance Disparities Reduction	59	Technical Correction	Administrative Specification	Removed "30 day follow up" from FUM, FUA, and FUH (to align with Quality measure reporting).	6/13/25
Quality Performance	59	Clarification	Additional Measure Information	Clarified acceptable use of imputed data in the stratified reports.	6/13/25

Disparities Reduction					
Quality Performance Disparities Reduction	60	Policy Update	PY2 Performance Requirements & Assessment	Updating the Performance Assessment, so that 100% of the measure points are attributed to submission of stratified reports.	6/13/25
Language Access	67	Clarification	Measure Summary	Clarified Component 2, changing "either interpreter services or in language services" to "language assistance services."	6/13/25
Language Access	68	Clarification	Eligible Population	Removed "pending" and replaced with "*with* permission from NCQA."	6/13/25
Language Access	68	Clarification	Eligible Population	Clarified Step 2 of "Event/Diagnosis," adding "language services documentation system (e.g., vendor logs)" as an acceptable source for preferred spoken language other than English data.	6/13/25
Language Access	70, 71	Clarification	Administrative Specification	Clarified Component 2 description and numerator, changing "either interpreter services or in language services" to "language assistance services."	6/13/25
Language Access	71	Clarification	Administrative Specification	For Component 2 Numerator, addition of "language services documentation system (e.g., vendor logs)" as an acceptable source of documentation for language assistance services provided.	6/13/25
Disability Accommodation Needs	82	Technical Correction	Definitions	Clarified ages for each of the six questions to align with the ages listed in the RELD SOGI Data Completeness – Disability Data Completeness measure (under Eligible Population)	6/13/25
Equity Improvement Interventions	63-64	Technical Correction	Performance Requirements and Assessment	Revised information to reflect only PY2 submission requirements	7/15/25

Disability Competent Care	76	Technical Correction	PY2 Performance Requirements & Assessment	Corrected the formula for calculating the DCC Training Rate.	8/25/25