MassHealth Quality and Equity Incentive Program (QEIP)

Program(s):	**ACO, MCO, MBHV QEIP**
Performance Year:	3
Metric:	Disability Accommodations Needs
Deliverable:	Disability Accommodations Needs Report
Submission Portal:	OnBase
Submission Due Date:	March 31, 2026
File Naming Convention:	EntityAbbreviation_PY3DANReport_YYYYMMDD
Suggested Page Limit:	2-3

Summary

Individuals with disabilities continue to face health care disparities due to a lack of necessary accommodations. To help reduce these inequities, it is essential to identify accommodation needs at the point of care. Accountable Care Organizations (ACOs), Managed Care Organizations (MCOs), and the Massachusetts Behavioral Health Vendor (MBHV) participating in MassHealth's Quality and Equity Incentive Programs (AQEIP, MQEIP, and MBHV-QEIP) are incentivized to meet performance requirements for the Disability Accommodation Needs measure, as outlined in the Performance Year 3 Technical Specifications.

Reporting Template

Contact Information

Point of Contact Name:	Add text
Organization Name:	Add text
Point of Contact Email Address:	Add text

Introduction

The following questions will ask ACOs, MCOs, and the MBHV to report details on the screening tools used to assess disability accommodation needs at the point of care and how information is documented in the electronic health record.

A complete, responsive, and timely report submission to MassHealth by **March 31, 2026,** via OnBase, will satisfy Reporting Element 1 for this measure. Please refer to the PY3-5 Technical Specifications for further information on performance requirements.

Section 1: Screening Tool Information

Please share all accommodation needs screening tools used for the purpose of meeting the performance requirements of the Disability Accommodation Needs measure. *Add additional tables (1B, 1C, etc.) if multiple tools are used. If multiple screening tools are used across in-network Primary Care Entities: please add at least two additional tables after Table 1A below, so that the three most commonly used screening tools (e.g., screening tools used at the practices with the largest outpatient visit volume) are reported.*

Table 1A: Screening Tool 1

Please describe:

Field	Response
a. Accommodation Needs Screening Questions & Response Options	Please list the exact question(s) and response option(s) used to screen for accommodation needs. If the member response options are unstructured (e.g., open-ended, recorded as a free-text field), please note that here. Add additional questions as needed: Question 1: Response Options:
b. Tool Selection	☐ Internally developed ☐ Adopted from external source (specify below) Source/Steward Name: _____ Citation (if applicable): _____
c. Modalities Used *(Select all that apply)*	☐ In-person ☐ Telephone ☐ MyChart/Portal (pre-visit) ☐ Other: _____

Section 2: Documentation in the Medical Record

For each screening tool described in section 1, describe how a member's responses will be documented in the medical record. *Please add additional tables for additional tools (2B, 2C, etc). The screening tools and number of tables in this section should correspond with the tools and tables in Section 1.*

Table 2A. Screening Tool 1 Documentation

Please match this table to the screening tool reported in Table 1A.

Please describe:

Field	Response
a. Who documents the accommodation needs screening response? *(Check all that apply)*	☐ Primary care providers ☐ Nurses ☐ Care coordinators ☐ Administrative staff ☐ Other: _____
b. Format of documentation in medical record	☐ Structured field ☐ Unstructured note ☐ Both ☐ N/A
c. Where is the data stored in the record? *(Check all that apply)*	☐ Header/sidebar of EHR ☐ Progress notes ☐ Problem list ☐ Care plan ☐ Other: _____

Field	Response
d. Is a timestamp captured?	☐ Yes ☐ No
e. Who can view the accommodation needs data? *(Check all that apply)*	☐ Clinical teams ☐ Billing staff ☐ Patient safety teams ☐ Quality teams ☐ Health Plan or ACO/MCO staff ☐ Other: _____

Section 3: Additional Context and Insights (Optional)

Please provide any additional context, clarifications, or narrative you believe would clarify your organization's approach to identifying and documenting disability accommodation needs. This may include challenges encountered, innovative practices, or planned improvements.

<u>Response</u>: