



**Clarifications, Technical Corrections, and Policy Changes
to the Technical Specifications for the
MassHealth CBHC Clinical Quality Incentive (CCQI) Program
Performance Year 2**

This document outlines clarifications, technical corrections, and policy changes to the Technical Specifications for Performance Year (PY2) of the MassHealth CBHC Clinical Quality Incentive (CCQI) Program. 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
CCQI-1 Access Standards	3	Policy Change	Eligible Population: Event/Diagnosis	Removed note on the "Initial 90-Day Lookback Period for identifying the eligible population.	8/4/25
CCQI-1 Access Standards	4	Policy Change	Eligible Population: PY2 Measurement Period	Added new section on the updated lookback period to determine the eligible population in the Access Standards measure.	8/4/25
CCQI-1 Access Standards	5	Clarification	Definitions: Qualifying Triage	Clarified a Qualifying Triage to an Open Access walk-in visit.	8/4/25
CCQI-1 Access Standards	6	Clarification	Definitions: Qualifying CBHC Visit	Clarified a Qualifying CBHC Visit for Open Access.	8/4/25

CCQI-1 Access Standards	6	Clarification	Definitions: Qualifying Triage	Clarified that intakes are considered an "urgent appointment" for a Qualifying Triage to MOUD or Urgent Psychopharmacology appointments.	
CCQI-1 Access Standards	10	Technical Correction	Administrative Specification: Exclusions	Added exclusions in the case of multiple qualifying CBHC visits scheduled from a Qualifying Triage.	8/4/25
CCQI-2 Follow-up After Acute BH Episode of Care	15	Technical Correction	Definitions: MCI, CCS, and CBHC Bundle Services	Revised not to include MCI in ED setting or ED Crisis Evaluation	8/4/25
CCQI-2 Follow-up After Acute BH Episode of Care	15	Technical Correction	Definitions: MCI, CCS, and CBHC Bundle Services	Revised to exclude: 1.) ED as POS (place of service) for MCI Follow-up Interventions (15 min) H code. 2.) Mobile Unit or ED as POS for MCI Evaluations (S9485 code with HE modifier). 3.) Include Mobile Unit as POS for MCI Evaluations (S9485 code with U1 modifier).	8/4/25
CCQI-2 Follow-up After Acute BH Episode of Care	19	Clarification	Additional Measure Information: HEDIS Value Sets	Added section on referencing NCQA HEDIS Value Set Directory.	8/4/25
CCQI-3 Readmission to Acute BH Care	23	Technical Correction	Definitions: MCI, CCS, and CBHC Bundle Services	Revised not to include MCI in ED setting or ED Crisis Evaluation	8/4/25
CCQI-3 Readmission to Acute BH Care	24	Technical Correction	Definitions: MCI, CCS, and CBHC Bundle Services	Revised to exclude: 1.) ED as POS for MCI Follow-up Interventions (15 min) H code. 2.) Mobile Unit or ED as POS for MCI Evaluations (S9485 code with HE modifier). 3.) Include Mobile Unit as POS for MCI Evaluations (S9485 code with U1 modifier).	8/4/25
CCQI-3 Readmission to Acute BH Care	27	Clarification	Additional Measure Information: HEDIS Value Sets	Added section on referencing NCQA HEDIS Value Set Directory.	8/4/25
All CCQI Measures	7, 17, 25	Policy Change	Definitions: Members	Updated eligible member population to exclude PACE members for each measure.	8/4/25