MassHealth Cambridge Health Alliance Hospital Quality and Equity Incentive Program (CHA-HQEIP)

Program:	**Cambridge Health Alliance Hospital QEIP (CHA-HQEIP)**
Performance Year:	3
Deliverable:	Health Quality and Equity Strategic Plan
Submission Portal:	OnBase
Submission Due Date:	December 31, 2025
File Naming Convention:	EntityAbbreviation_HQEStrategicPlan_YYYYMMDD
Suggested Page Limit:	10 pages

Introduction

The QEIP requires, among other things, that individual Hospitals complete and submit to MassHealth this Health Quality and Equity Strategic Plan (hereinafter, the "Strategic Plan"), which connects to important components of the QEIP. This Strategic Plan serves as an opportunity for individual Hospitals to create and update a plan that guides their implementation and continuous quality improvement of health quality and equity activities throughout the waiver demonstration period. To ensure an equitable and community-driven plan, Entities should collaborate with their Health Quality and Equity Committee to develop their Strategic Plan.

MassHealth encourages Hospitals to consider doing the following activities as part of the planning process: key planning sessions and meetings with the Health Quality and Equity Committee, the Patient and Family Advisory Committee (PFAC), other methods of soliciting patient input, and providers representing the population served by the organization such as other community hospitals, other community-based providers, Community Partners, members, and members' families.

The Performance Year (PY) 3 Reconciliation Payment is contingent upon completion and submission of the Strategic Plan.

Instructions

Each Hospital will submit a Health Quality & Equity Strategic Plan deliverable annually. While some overlap amongst entities in a hospital system is expected and acceptable, each individual organization must respond to the Strategic Plan prompts included in this Strategic Plan Update template (the "Template") at the individual Hospital level, unless otherwise indicated. Hospitals may cite relevant information from existing strategic plans or other relevant sources that directly pertains to prompts in this Template. Additionally, information submitted can be broader than activities within the QEIP; however, the information should explicitly consider the MassHealth population.

There are five sections and one sub-section that will need to be completed, as well as two appendices. Your response to each individual question **must not exceed 500 words**. See below for breakdown of sections.

- Section 1: Strategic Plan Process
- Section 2: Needs Assessment
- Section 3: Health Equity Strategic Goals
    - Section 3A: Health Equity Strategic Goals: Served Uninsured Population
- Section 4: Commitment to Equity
- Section 5: MassHealth Member and Community Engagement
- Appendix A: HRSN Referral Annual Plans (and HRSN Services Plans)
- Appendix B: HRSN Screening

This Strategic Plan Update is to be completed, in accordance with this Template, by each individual Hospital and submitted to MassHealth by December 31, 2025. Please do not change the template format or numbering of questions. **All completed Strategic Plans must be submitted via OnBase.**

Contact Information

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

Section 1: Strategic Plan Process

Please remember that your response to each individual question must not exceed 500 words.

1. Please describe the process used for implementing, reviewing, and improving the PY2 Health Quality & Equity Strategic Plan and related strategic planning efforts that have contributed to this plan over the past year. Please make sure to specify the involvement of the Health Quality and Equity Committee.

Section 2: Needs Assessment

Please remember that your response to each individual question must not exceed 500 words.

2. Please describe how you continue to assess the health equity needs of your MassHealth patients served by the individual hospital named in this Strategic Plan and include the date and year you carried out a Population and Community Needs Assessment (PCNA) or any other needs assessments. The answer must include the date and year of an upcoming PCNA or any other needs assessment. *Note: this answer must be tailored to the individual hospital named on this Strategic Plan. If a systematic approach was taken, please include that in the answer.*

3. Over the past year, what have you learned about the MassHealth population you serve at the hospital named in this Strategic Plan and the communities in which they live?

    To illustrate this:

    - Please provide clear, concise, and readable MassHealth data that summarize and stratify your organization's population served by Race, Ethnicity, Language, Disability, Sexual Orientation, and Gender Identity (RELD SOGI). We **DO NOT** want member level data or data that could inadvertently identify someone.
    - Please stratify, where possible, your organization's population served by town or zip code level population data.
    - Please ensure that you explain how the data supports your response.
    - Please also include a brief description of the significant health needs of your MassHealth patients, inclusive of physical, social and behavioral health needs.

4. In the past year, in what ways have you designed and implemented new services or adapted existing services to address the inequities you've identified through the data summarized above? Your response may reference PIP related activities and services, but you do not need to replicate content that is captured in PIP deliverables.

Section 3: Health Equity Strategic Goals

Please remember that your response to each individual question must not exceed 500 words. Overlap in goals across hospital systems is appropriate; however, at least one goal must be tailored to the entity for which this Strategic Plan applies.

5. Have any of your system goals been modified from PY2?

   ☐Yes
   ☐No

6. Have any of your individual entity goals been modified from PY2?

   ☐Yes
   ☐No

7. If your individual entity goals have been modified from PY2, please specify how the goal(s) changed and provide the rationale. If they have not changed, please write N/A.

8. Based on milestones identified in PY2, please share successes made at your individual entity for each high-level strategic goal included in your individual entity's PY2 Strategic Plan. Should these goals relate to your PIPs, you do not need to replicate content that is captured in the PIP deliverables.

High-Level Goals	Success(es) at the individual entity based on milestones identified in PY2
1. Goal #1	
2. Goal #2	
3. Goal #3	

9. Please complete the table below with updates on your entity's barriers and solutions from your entity's PY2 Strategic Plan. What progress did the entity make in implementing the solutions?

High-Level Goals	Barriers at the individual entity	Solutions at the individual entity	Progress with implementing solutions
1. Goal #1			
2. Goal #2			
3. Goal #3			

Section 3A: Health Equity Strategic Goals for the Served Uninsured Population

Please remember that your response to each individual question must not exceed 500 words.

10. Have any of your goals for the served uninsured population been modified from PY2?

    ☐Yes
    ☐No

11. If any of your goals for the served uninsured population have been modified from PY2, please specify how the goal(s) changed and provide the rationale. If they have not changed, please write N/A.

12. Based on milestones identified in PY2, please share successes made for each high-level strategic goal for the served uninsured population included in your individual entity's PY2 Strategic Plan. Should these goals relate to your PIPs, you do not need to replicate content that is captured in the PIP deliverables.

High-Level Goals	**Success(es) at the individual entity based on milestones identified in PY2**
4. Goal #1	
5. Goal #2	
6. Goal #3	

13. Please complete the table below with updates on your entity's barriers and solutions for the goals addressing the served uninsured population from your entity's PY2 Strategic Plan. What progress did the entity make in implementing the solutions?

High-Level Goals	**Barriers at the individual entity**	**Solutions at the individual entity**	**Progress with implementing solutions**
4. Goal #1			
5. Goal #2			
6. Goal #3			

Section 4: Commitment to Equity

Please remember that your response to each individual question must not exceed 500 words.

14. Please select below which teams are contributing to health equity at your individual Hospital.
    - ☐ Executive Senior Leadership
    - ☐ Clinical Teams
    - ☐ Performance Improvement
    - ☐ Quality
    - ☐ Population Health
    - ☐ Care/Case Management
    - ☐ Patients
    - ☐ PFAC
    - ☐ HQEC
    - ☐ Community Based Organizations
    - ☐ BH and LTSS Community Partners
    - ☐ Other
        a. If you selected "other", please describe.

15. At your individual Hospital, how has your organizational structure related to implementing QEIP changed since PY2? Please describe any staffing challenges that have impacted your organizational structure in PY3.

16. Please describe how health equity has been integrated in new internal organizational policies and procedures at the individual Hospital in PY3. If no new internal organizational policies and procedures were integrated at the individual Hospital, state none.

17. Please describe how health equity has been integrated in new external policies and procedures at the individual Hospital in PY3. If no new external organizational policies and procedures were integrated at the individual Hospital, state none.

Section 5: MassHealth Member and Community Engagement

Please remember that your response to each individual question must not exceed 500 words.

MassHealth Member/Patient Engagement

18. How do you currently solicit feedback from MassHealth members, patients, and family members of MassHealth members/patients? In your response, please include feedback methods related to your PFAC as well as feedback methods outside of your PFAC.

19. How have you adapted the implementation of your health equity strategy based on MassHealth member/patient feedback? Please provide at least two specific examples from PY3.

20. What has been the most challenging aspect of soliciting MassHealth member/patient feedback?

21. Please identify and describe any best practices for engaging MassHealth members/patients?

Health Quality & Equity Committee (HQEC)

22. Do you have a combined HQEC across health system/hospital system or is it separate? *If combined, please complete this section once for your system and make sure to reference which entity submitted the completed section.*

23. HQEC membership
    a. How many participants currently serve on the HQEC?
    b. How many of the participants are MassHealth members?
    c. How many of the participants are front-line staff members?
    d. Please list any other types of HQEC participants such as advocates, providers, and other stakeholders.

24. HQEC Recruitment
    a. What new recruitment strategies have you tried this year to recruit MassHealth members, family members, and caregivers to the HQEC? If none, state none.
    b. If the entity implemented new recruitment strategies in PY3, which new recruitment strategies have been most successful to recruit MassHealth members, family members, and caregivers?
    c. If the entity implemented new recruitment strategies in PY3, what new recruitment strategies have been less successful to recruit MassHealth members, family members, and caregivers?

25. How have you adapted the implementation of your health equity strategy based on HQEC feedback? Please provide at least two specific examples from PY3.

External Community Engagement

Please remember that your response to each individual question must not exceed 500 words.

26. How are you engaging with community-based organizations and neighboring areas separate from the PCNA, PFAC, and HQEC? Please list any relevant organizations you are working with.

Appendix A: HRSN Referral Annual Plans

One of MassHealth's Key goals in this demonstration period is to improve health for underserved communities by focusing on initiatives that address the Health-Related Social Needs (HRSN) of members. Hospitals will annually submit to MassHealth a detailed "HRSN Referral" plan for how they intend to refer beneficiaries to services to address unmet HRSNs, inclusive of connecting eligible members with HRSN Services (including the Specialized Community Supports Program (CSP) programs and HRSN Supplemental Services), other benefits/entitlements that address unmet HRSNs and other relevant supports. The HRSN Referral plans must also describe how hospitals will be able to report, upon MassHealth request, on HRSN referrals by their staff, contractors, or partners. In these HRSN Referral plans, hospitals must ensure that the HRSN services are provided to members in ways that are culturally appropriate, and trauma-informed.

- Please describe your acute hospital's HRSN Referral Plan. The Plan should include:
    - how beneficiaries will be referred to services to address unmet HRSNs;
    - how you will utilize existing MassHealth HRSN Services (including Specialized CSP and HRSN Supplemental Services) as well as other entitlement programs to address unmet HRSNs; and
    - how you will ensure that HRSN services are provided to members in a way that is culturally appropriate and trauma-informed.

- Please describe how your hospital is currently able to track and report upon HRSN referrals conducted by your staff, contractors, and other partners.
    - What methods (e.g., electronic referral platforms, case management tools, spreadsheets) does your hospital currently use to manage and track HRSN referrals? If using an electronic referral platform, which specific system is your hospital utilizing?

Appendix B: HRSN Screening

MassHealth and hospitals participating in the QEIP are incentivized to meaningfully improve rates of health-related social needs (HRSN) screening of its beneficiaries and establish the capacity to track and report on screenings and referrals.

The questions in this section assess your organization's capacity and plans to systematically capture HRSN screening in **performance year 4 (PY4 2026)** of the QEIP.

1. Will your organization have the capacity to **track** HRSN screenings using any of the following **HCPCS administrative codes**[1]? *Please answer "yes" or "no" for each item*.

	Yes	No
a. HCPCS M1207		
b. HCPCS M1208		
c. HCPCS M1237		
d. HCPCS G0136		

2. Will your organization have the capacity to **report** HRSN screenings using any of the following **HCPCS administrative codes**? *Please answer "yes" or "no" for each item*.

	Yes	No
a. HCPCS M1207		
b. HCPCS M1208		
c. HCPCS M1237		
d. HCPCS G0136		

3. Will your organization have the capacity to **track** HRSN screenings **using ICD-10 codes**[2]?
    a. Yes
    b. No

4. Will your organization have the capacity to **report** HRSN screenings **using ICD-10 codes**[2]?
    c. Yes
    d. No

5. Please describe any **challenges** your organization is encountering related to your capacity to track and report **administrative codes** for HRSN screenings in PY4.

6. How do you **plan to address** challenges related to your capacity to track and report **administrative codes** for HRSN screenings in PY4?

7. Please describe any **challenges** your organization is encountering related to your capacity to track and report HRSN screenings using **supplemental data** in PY4.

8. How do you **plan to address** challenges related to your capacity to track and report HRSN screenings using **supplemental data** in PY4?

1. HCPCS codes are the administrative data utilized to calculate rate 1 of the QEIP HRSN screening measure.
2. ICD-10 codes are the administrative data utilized to calculate rate 2 of the QEIP HRSN screening measure. A complete list of ICD-10 codes is provided in the QEIP HRSN screening measure specifications.