



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

This document outlines clarifications, technical corrections, and policy changes to the Technical Specifications for Performance Year (PY2) of the MassHealth Hospital Quality and Equity Incentives Program (HQEIP). 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
Preferred Language Data Completeness	16	Technical Correction	Overview	Revised the numerator source from CHIA "Electronic Health Record Dataset (EHRD)" to CHIA "Enhanced Demographics Data File" to align with the other RELD SOGI data elements	11/8/24
Preferred Language Data Completeness	17	Technical Correction	Definition	Revised the definition for "Hospital File ["Electronic Health Record Dataset (EHRD)"] now labeled as "Hospital File ["Enhanced Demographics Data File"]"	11/8/24
RELD SOGI Data Completeness	49	Clarification	Performance Requirements & Assessment	Clarified Performance Requirement around timely submission of EHRD file to CHIA and Performance Assessment of EHRD Data Collection File	11/8/24
Health-Related Social Needs	51	Technical Correction	Eligible Population	Deleted "Members" definition which was duplicative; definition of "Members" is now listed only under Definitions	11/8/24
Health-Related Social Needs	54	Technical Correction	Administrative Specification—Rate 2: HRSN	Edited language to reference discharges and not number of members (e.g., "Number of members" → "Discharges where a member")	11/8/24

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			Screen Positive Rate		
Health-Related Social Needs	55	Technical Correction	Supplemental Data Reporting Requirements — Table	For Rate 1, changed “CPT” to “HCPCS” under Code System	11/8/24
Health-Related Social Needs	58	Technical Correction	Performance Requirements & Assessment	Revised supplemental data submission date from March 31, 2025 to June 30, 2025	11/8/24
Quality Performance Disparities Reduction	61	Clarification	Administrative Specification	Included a reference for calculating top box results	11/8/24
Quality Performance Disparities Reduction	63 & 64	Clarification	Performance Requirements & Assessment	Specified submission dates for the Reporting Elements and the submission process for HCAHPS survey data and provided clarifications on Performance Assessment for reach measure requirement	11/8/24
Equity Improvement Interventions	69	Clarification	Performance Requirements & Assessment	Added a sentence to clarify that the adjusted score on the PIP Reports will be used to calculate the measure score	11/8/24
Meaningful Access...for Individuals with a Preferred Language other than English	71	Technical Correction	Eligible Population	Modified the Anchor Date from “December 31 of the measurement year” to “Date of discharge of the qualifying hospital stay”	11/8/24
Meaningful Access...for Individuals with a Preferred Language other than English	73 & 74	Technical Correction	Reporting Method; Component 2: Addressing Language Access Needs in Acute Hospital Settings	Modified the required sampling size based on Eligible Population size to a minimum required sample size of 411 records or all discharges (whichever is less) and added language on oversampling	11/8/24
Meaningful Access...for Individuals with a Preferred Language other than English	74 & 75	Technical Correction	Performance Requirements & Assessment	Revised submission dates for Language Access Self-Assessment Survey (Component 1) from December 31, 2024 to January 31, 2025 and supplemental data submission date (Component 2) from March 31, 2025 to June 30, 2025	11/8/24
Disability Accommodation Needs	81	Technical Correction	Eligible Population—Event	Removed reference of the HEDIS® Value Set and included specific Radiology CPT Code Sets to identify ambulatory radiology encounters	11/8/24

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Disability Accommodation Needs	82	Technical Correction	Eligible Population—Exclusions	Removed exclusion criteria: “Patient reason for not screening for disability accommodation needs (e.g., patient declined or other patient reasons).”	11/8/24
Disability Accommodation Needs	84	Clarification	Reporting Method	Modified as follows: “Report to MassHealth on all inpatient discharges, observation discharges, and ambulatory radiology encounters identified in <i>Step 1 of the process to identify eligible events where members were screened for accommodation needs</i> ,” added information on data form and format submission	11/8/24
Disability Accommodation Needs	84 & 85	Technical Correction	Performance Requirements & Assessment	Revised supplemental data submission date from March 31, 2025 to June 30, 2025	11/8/24
Achievement of External Standards for Health Equity	87	Clarification	Performance Requirements & Assessment	Clarified the self-evaluation of compliance refers to TJC’s Health Care Equity Certification Standards Checklist	11/8/24
Achievement of External Standards for Health Equity	87	Technical Correction	Performance Requirements & Assessment	Revised attestation submission date from December 31, 2024 to January 31, 2025	11/8/24
Patient Experience: Communication, Courtesy, and Respect	90 & 91	Clarification & Technical Correction	Performance Requirements & Assessment	Updated to align with data collection fields from PY1 and clarified language to include MassHealth HCAHPS eligible members; removed requirement for aggregate top-box scores for Nurse and Physician Communication Composites	11/8/24
RELD SOGI Data Completeness	5, 11, 17, 25, 37, 43	Technical Correction	Eligible Population—Event/ Diagnosis	Removed “acute” from “acute inpatient discharge” and “acute inpatient stays”	12/27/24
RELD SOGI Data Completeness	5, 11, 18, 26, 38, & 44	Clarification	Eligible Population—Members	Added a reference to an addendum that provides information on CHIA Medicaid Payer Source Types and Payer Source codes that apply to the HQEIP	12/27/24
Health-Related Social Needs	51	Technical Correction	Eligible Population—Anchor Date	Modified from “December 31 of the measurement year” to “None”	12/27/24
Health-Related Social Needs	51	Technical Correction	Eligible Population—Event/ Diagnosis	Removed “acute” from “acute inpatient discharge” and “acute inpatient stays”	12/27/24

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Health-Related Social Needs	51	Clarification	Definition—Members	Added a reference to an addendum that provides information on CHIA Medicaid Payer Source Types and Payer Source codes to use for the HQEIP	12/27/24
Meaningful Access...for Individuals with a Preferred Language other than English	69	Technical Correction	Eligible Population—Anchor Date	Modified from “December 31 of the measurement year” to “None”	12/27/24
Meaningful Access...for Individuals with a Preferred Language other than English	69	Technical Correction	Eligible Population—Event/ Diagnosis	Removed “acute” from “acute inpatient discharge” and “acute inpatient stays”	12/27/24
Meaningful Access...for Individuals with a Preferred Language other than English	69	Technical Correction	Eligible Population	Deleted “Members” definition which was duplicative; definition of “Members” is now listed only under Definitions	12/27/24
Meaningful Access...for Individuals with a Preferred Language other than English	72	Clarification	Definition—Members	Added a reference to an addendum that provides information on CHIA Medicaid Payer Source Types and Payer Source codes to use for the HQEIP	12/27/24
Disability Competent Care	77	Technical Correction	Eligible Population—Anchor Date	Modified from “December 31 of the measurement year” to “None”	12/27/24
Disability Accommodation Needs	80	Technical Correction	Eligible Population—Anchor Date	Modified from “December 31 of the measurement year” to “None”	12/27/24
Disability Accommodation Needs	82	Clarification	Definition—Members	Added a reference to an addendum that provides information on CHIA Medicaid Payer Source Types and Payer Source codes to use for the HQEIP	12/27/24
N/A	3	Policy Update	Introduction (new section)	Outlines the HQEIP accountability policy for those hospitals participating in a performance period other than the calendar year in which majority of other hospitals are being held accountable	3/14/25
N/A	3	Clarification	Introduction	Added language on audit process for the HQEIP	3/14/25

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Health-Related Social Needs	50 & 51	Clarification	Measure Summary	Revised language of the Description of Rate 2: HRSN Screen Positive Rate	3/14/25
Health-Related Social Needs	53	Clarification	Administrative Specification	Modified language from “and” to “and/or”— “screening instrument prior to discharge for food, housing, transportation, and/or utility needs”	3/14/25
Health-Related Social Needs	54	Clarification	Administrative Specification	Revised language of the Description of Rate 2: HRSN Screen Positive Rate	3/14/25
Health-Related Social Needs	55	Clarification	Supplemental Data Reporting Requirements	Modified language to the bullet regarding G0136 code under Notes for Rate 1	3/14/25
Health-Related Social Needs	58	Clarification	Performance Requirements & Assessments	Audit of data submitted for Rate 1 and Rate 2	3/14/25
Meaningful Access to Healthcare Services for Individuals with a Preferred Language other than English	74& 75	Clarification	Performance Requirements & Assessments	Revised audit language from MassHealth “reserves” the right to “expects” to audit data submitted for Component 2; moved this language from Reporting Methods section to the Performance Requirements & Assessments section	3/14/25
Disability Accommodation Needs	85	Clarification	Performance Requirements & Assessments	Audit of data submitted for Rate 1 and Rate 2	3/14/25