



**Clarifications, Technical Corrections, and Policy Changes
to the Technical Specifications for the
MassHealth MCO 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 MCO Quality and Equity Incentives Program (MQEIP). 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 |
|---|---------------|-----------------------|---|--|----------------------------|
| Health-Related Social Needs | 48 | Clarification | Administrative Specification | Removed "pending" and replaced with "with permission from NCQA." | 6/13/25 |
| Quality Performance Disparities Reduction | 56 | 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 | 56, 57 | 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 Disparities Reduction | 57 | Clarification | Additional Measure Information | Clarified acceptable use of imputed data in the stratified reports. | 6/13/25 |
| Quality Performance Disparities Reduction | 58 | 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 |

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| Language Access | 59 | Clarification | Measure Summary | Clarified Component 2, changing “either interpreter services or in language services” to “language assistance services.” | 6/13/25 |
| Language Access | 60 | Clarification | Eligible Population | Removed “pending” and replaced with “ <i>with</i> permission from NCQA.” | 6/13/25 |
| Language Access | 62 | 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 | 62 | 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 |
| Language Access | 64 | Technical Correction | PY2 Performance Requirements & Assessment | Changed due date for Component 2 from September 30, 2025 to December 31, 2025. | 6/13/25 |
| Disability Accommodation Needs | 73 | 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 |
| RELD SOGI Data Completeness: All sub-measures | 3, 8, 13, 21, 33, 38 | Clarification | Overview | Clarified numerator source to “MCO ‘Member Data and Member Enrollment’ Monthly Data File Submission” and clarified denominator source to “MassHealth Enrollment Data.” | 3/14/25 |
| HRSN Screening | 45 | 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 | 45 | Clarification | Eligible Population | Clarified that Continuous Enrollment is “90 days” and Allowable Gap is “None.” | 3/14/25 |
| HRSN Screening | 48 | 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 |

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| HRSN Screening | 48 | Clarification | Administrative Specification | Clarified Rate 2 denominator description. | 3/14/25 |
| HRSN Screening | 52 | 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 | 53 | Clarification | Supplemental Data Reporting Requirements | Added language about audit expectations. | 3/14/25 |
| HRSN Screening | 53 | Clarification | PY2 Performance Requirements & Assessment | Clarified that the data submission due date is applicable to all data submitted by the MCO (administrative and supplemental, as applicable). | 3/14/25 |
| Quality Performance Disparities Reduction | 58 | Clarification | Reporting Method | Added language about requesting additional member-level data. | 3/14/25 |
| Language Access | 59 | Clarification | Measure Summary | Clarified setting of eligible outpatient visits: “MCO Primary Care Providers.” | 3/14/25 |
| Language Access | 63 | 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 | 63 | Clarification | Reporting Method | Added language about audit expectations. | 3/14/25 |
| Language Access | 64 | Technical Correction | PY2 Performance Requirements & Assessment | Updated Component 2 reporting due date to 09/30/2025 (originally 09/01/2025) and removed reference to full population reporting methodology. | 3/14/25 |
| Disability Competent Care | 68 | Clarification | Administrative Specifications | Clarified that the DCC Training Rate denominator is all patient-facing staff “at the MCO.” | 3/14/25 |
| Disability Competent Care | 68 | 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 | 82 | Clarification | Additional Measure Information | Clarified that MassHealth reports data to MCOs, including stratifications. | 3/14/25 |

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| RELD SOGI Data Completeness | 44 | 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 |
| Health-Related Social Needs | 50 | Technical Correction | Administrative Data Reporting Requirements | Change “CPT” Code System to “HCPCS” Code System. | 11/4/24 |
| Health-Related Social Needs | 52 | Technical Correction | Administrative Specification | Add “Member died during the measurement period” as an exclusion for Rate 1. | 11/4/24 |
| Health-Related Social Needs | 53 | Technical Correction | Supplemental Data Reporting Requirements | Remove language related to CP Screenings. | 11/4/24 |
| Health-Related Social Needs | 54 | Technical Correction | Supplemental Data Reporting Requirements | Change “CPT” Code System to “HCPCS” Code System. | 11/4/24 |
| Health-Related Social Needs | 54 | Technical Correction | PY2 Performance Requirements & Assessment | Change the due date from March 31, 2025 to June 30, 2025. | 11/4/24 |
| Language Access | 61 | Technical Correction | Eligible Population | Change Anchor Date from “December 31, 2024” to “Date of Qualifying Outpatient Visit.” | 11/4/24 |
| Language Access | 61 | Technical Correction | Eligible Population | Add language to “Event/ Diagnosis” to clarify that MassHealth will identify the eligible outpatient visits. | 11/4/24 |
| Language Access | 61 | Clarification | Eligible Population | Add details around identifying eligible outpatient visits occurring at MCO Primary Care Providers (PCPs). | 11/4/24 |
| Language Access | 62 | Clarification | Definitions | Change definition of “Interpreter Services” to definition of “Language Assistance Services.” | 11/4/24 |
| Language Access | 63 | Clarification | Administrative Specifications | Clarify that Component 2 applies to outpatient visits occurring with MCO PCPs. | 11/4/24 |
| Language Access | 63 | Technical Correction | Administrative Specifications | Remove “Member dies during the outpatient visit” as an exclusion. | 11/4/24 |
| Language Access | 64 | Technical Correction | Reporting Method | Update sampling methodology language to be visit-based rather than member based. | 11/4/24 |

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| Language Access | 65 | 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 September 1, 2025. | 11/4/24 |
| Disability Competent Care | 67 | Clarification | Eligible Population | Clarify that the eligible population is all patient-facing staff at the MCO. | 11/4/24 |
| Disability Competent Care | 70 | 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 | 76 | 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 | 79 | 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 Composites to reflect updated PY2 survey. | 11/4/24 |