

Statewide Quality Advisory Committee

Meeting #2

April 30, 2026





Agenda

1. Welcome and Roll Call
2. Approval of January 22nd Meeting Minutes
3. Proposed 2026 SQAC Meeting Plan
4. Review of QMAT Recommendations for the 2027-2028 Aligned Measure Set
5. Next Steps and Wrap-Up



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Proposed 2026 SQAC Meeting Plan

Meeting	Proposed Agenda
Q1: January 22 nd	<ol style="list-style-type: none"> 1. Overview of SQAC charge and responsibilities 2. 2026 Aligned Measure Set and QMAT annual review process 3. 2026 goals recommended by QMAT
Q2: April 30 th	<ol style="list-style-type: none"> 1. QMAT recommendations for the 2027-2028 Aligned Measure Set
Q3 and Q4: Dates TBD	<p>To be finalized, but may include, e.g.:</p> <ol style="list-style-type: none"> 1. Discuss whether to create additional Aligned Measure Sets applicable to specialists, hospitals, and/or other provider types (and if so, define measure selection criteria and review process) 2. Consider changes to the (ACO) Aligned Measure Set purpose, measure selection criteria, and/or review process 3. Discuss Aligned Measure Set requirements for reporting provider performance to CHIA





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Reminder: The Origins of the Aligned Measure Set

- In 2017, EOHHS convened the Quality Measure Alignment Taskforce (QMAT) to define an aligned measure set for use in global budget-based risk contracts.
- In doing so, EOHHS' objectives were to:
 1. **reduce the administrative burden** on provider organizations associated with operating under multiple, non-aligned contractual measure sets, including burden associated with resources dedicated to varied quality improvement initiatives and to measure reporting, and
 2. **focus provider quality improvement efforts** on state health improvement opportunities and priorities.



Reminder: Chapter 343

- On January 7, 2025, Governor Healey signed [Chapter 343](#) into law. Chapter 343 mandates use of a Standard Quality Measure Set* in contracts between payers and providers which incorporate quality measures into payment terms. In practice, for 2026, it will build off the foundation of the Aligned Measure Set that the QMAT first began to create in 2017 for use in global budget-based risk contracts and make compliance a legal requirement.
- The law also:
 - broadens application of aligned measures to all provider value-based contracts;
 - requires aligned measure use in provider tiering assignments in insurance product design, and
 - requires public reporting of performance.

* We will continue to use “Aligned Measure Set.”



Reminder: The SQAC

- The law calls on CHIA to convene a Statewide Quality Advisory Committee (SQAC) to make recommendations on the measure set.
- For the 2026 transition year, the QMAT continued its annual review process that it began this fall in developing recommendations for SQAC review today. The QMAT will then sunset and CHIA will procure a new technical advisory group that will continue the review function that the QMAT previously performed. The new body will do so in service to the SQAC.
- The law also directs the SQAC to only update the Aligned Measure Set in even-numbered years. This varies from the existing annual review process.
 - SQAC staff have discussed having a more limited review in the off-years, focused on changes in measure specifications, changes in CMS requirements of MassHealth, and changes in measure endorsement by national bodies.

Reminder: The Aligned Measure Set & QMAT Review Process

- The Aligned Measure Set consists of a **Core Set** and a **Menu Set**.
 - The Core Set consists of measures that payers and providers are always expected to use in their global budget-based risk contracts.
 - The Menu Set includes all other measures from which payers and providers may choose to supplement the Core Measures in their global budget-based risk contracts.
- During the annual review of the Aligned Measure Set, staff prepare information on the following topics for review by QMAT:
 1. substantive specification changes to the measures in the Aligned Measure Set;
 2. any changes to each measure's status in relevant state and federal measure sets;
 3. adoption of the Core and Menu Measures in Massachusetts global budget-based risk contracts, and
 4. opportunities for performance and/or equity improvement on the Core and Menu Measures.



QMAT Recommendations for the 2027-2028 Core Set (N = 5) (↑ 1 from 2026)

1. CG-CAHPS (MHQP version)
2. *Childhood Immunization Status (Combo 10)*
3. *Controlling High Blood Pressure*
4. ***Depression Screening and Follow-Up for Adolescents and Adults***
(recommended for elevation from the Menu Set)
5. *Glycemic Status Assessment for Patients with Diabetes: Glycemic Status Poor Control (>9.0%)*

QMAT Recommendations for the 2027-2028 Menu Set (N=19) (↓ 3 from 2026)

1. Adult Immunization Status (**Influenza**)
- ~~2. Behavioral Health Risk Assessment (for Pregnant Women)~~
3. Blood Pressure Control for Patients with Diabetes
4. Breast Cancer Screening
5. Cervical Cancer Screening
6. Child and Adolescent Well-Care Visits
7. Chlamydia Screening
8. Colorectal Cancer Screening (eCQM)
- ~~9. Depression Screening and Follow-up for Adolescents and Adults~~
10. Developmental Screening in the First Three Years of Life
11. Eye Exam for Patients with Diabetes
12. **Follow-Up After Acute and Urgent Care Visits for Asthma**
13. Health-Related Social Needs Screening
14. Immunizations for Adolescents (Combo 2)
15. Initiation and Engagement of Substance Use Treatment
16. Kidney Health Evaluation for Patients with Diabetes
17. Lead Screening in Children
- ~~18. Pharmacotherapy for Opioid Use Disorder~~
19. Prenatal & Postpartum Care
20. Race, Ethnicity, Language, and Disability Data Collection
21. Race, Ethnicity, and Language Stratification
- ~~22. Screening for Depression and Follow-up Plan~~
23. Well-Child Visits in the First 30 Months of Life

Review of QMAT Recommendations for 2027-2028

- We will now briefly review key information for each measure, including the measure definition and steward, the number of payers using the measure in 2026 contracts (out of a total of seven payers), and the most recent Massachusetts commercial and MassHealth (Medicaid) performance for the measure (where available).
- Performance data for HEDIS measures were compared to national percentile benchmarks from NCQA's Quality Compass and are presented using to the following key:

<25th	Between 25th and 50th	Between 50th and 75th	Between 75th and 90th	≥90th
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- As we review the QMAT's recommendations for each measure, please indicate if you have concerns about a recommendation.

CG-CAHPS (MHQP Version)

2026 CORE MEASURE

Measure Definition

Child and adult survey instruments used to assess patient experience with both office-based and virtual health care; based on CG-CAHPS, the instruments also include additional items and composites developed by MHQP and validated measurement scales developed by other researchers or organizations.

Measure steward	MHQP
# of payers using in 2026 contracts	4
2024 commercial performance	(see following slides)
2024 MassHealth performance	(see following slides)
QMAT recommendation	Retain in the Core Set

CG-CAHPS (MHQP Version)

2026 CORE MEASURE

Adult Survey Composite	Commercial Performance	MassHealth Performance
Communication	96.6	93.4
Integration of Care	90.6	86.3
Knowledge of Patient	92.2	87.8
Organizational Access	83.4	79.8
Office Staff	95.4	93.8
Self-Management Support	70.5	64.5
Overall Visit Rating	92.3	88.7
Willingness to Recommend	92.9	88.7
Adult Behavioral Health	77.8	67.1
Trust	88.0	81.4

CG-CAHPS (MHQP Version)

2026 CORE MEASURE

<u>Child Survey Composite</u>	Commercial Performance	MassHealth Performance
Communication	98.5	96.1
Integration of Care	90.2	86.2
Knowledge of Patient	94.8	90.1
Organizational Access	92.3	83.4
Office Staff	96.8	94.5
Self-Management Support	59.0	52.4
Overall Visit Rating	95.0	91.4
Willingness to Recommend	96.7	92.5
Child Provider Communication	n/a	96.0
Pediatric Prevention	70.1	62.6
Child Development	77.7	66.4
Trust	92.6	82.4

Childhood Immunization Status (Combo 10)

2026 CORE MEASURE

Measure Definition

The percentage of persons 2 years of age who had four DTaP; three polio; one MMR; three HiB; three HepB; one chicken pox; four pneumococcal conjugate; one HepA; two or three rotavirus; and two flu vaccines by their second birthday.

Measure steward	NCQA
# of payers using in 2026 contracts	5
2024 commercial performance	70.6
2024 MassHealth performance	46.5
QMAT recommendation	Retain in the Core Set

Controlling High Blood Pressure

2026 CORE MEASURE

Measure Definition

The percentage of persons 18–85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90 mm Hg) during the measurement period.

Measure steward	NCQA
# of payers using in 2026 contracts	7
2024 commercial performance	77.8
2024 MassHealth performance	76.4
QMAT recommendation	Retain in the Core Set

Glycemic Status Assessment for Patients with Diabetes: Glycemic Status Poor Control (>9.0%)

2026 CORE MEASURE

Measure Definition

The percentage of persons 18–75 years of age with diabetes (type 1 or type 2) whose most recent glycemic status (hemoglobin A1c or glucose management indicator) was >9.0% during the measurement period.

Measure steward	NCQA
# of payers using in 2026 contracts	7
2024 commercial performance*	18.3
2024 MassHealth performance*	24.7
QMAT recommendation	Retain in the Core Set

*A lower rate reflects better performance for this measure.

Depression Screening and Follow-Up for Adolescents and Adults

2026 MENU MEASURE

Measure Definition

The percentage of persons 12 years of age and older who were screened for clinical depression using a standardized instrument and, if screened positive, received follow-up care within 30 days.

Measure steward	NCQA
# of payers using in 2026 contracts	2
2024 commercial performance	Screening: 0.3
	Follow-Up: N/A
2024 MassHealth performance	Screening: 9.1
	Follow-Up: 77.9
QMAT recommendation	Elevate to the Core Set

Screening for Depression and Follow-Up Plan

2026 MENU MEASURE

Measure Definition

The percentage of patients 12 years of age and older screened for depression on the date of the encounter or up to 14 days prior to the date of the encounter using an age-appropriate standardized depression screening tool and, if positive, a follow-up plan is documented on the date of, or up to two days after the date of, the qualifying encounter.

Measure steward	CMS
# of payers using in 2026 contracts	3
2024 commercial performance	N/A
2024 MassHealth performance	55.0
QMAT recommendation	Remove from the Menu Set

Adult Immunization Status (Influenza)

2026 MENU MEASURE

Measure Definition

The percentage of persons 19 years of age and older who are up to date on recommended routine vaccines for influenza, Td or Tdap, zoster, pneumococcal, HepB, and COVID-19.

Measure steward	NCQA
# of payers using in 2026 contracts	1
2024 commercial performance	39.8 (Influenza only)
2024 MassHealth performance	20.7 (Influenza only)
QMAT recommendation	Retain in the Menu Set but allow use of any rates

Behavioral Health Risk Assessment (for Pregnant Women)

2026 MENU MEASURE

Measure Definition

The percentage of women who gave birth during a 12-month period and seen at least once for prenatal care who received a behavioral health screening risk assessment that includes the following screenings at the first prenatal visit: depression, alcohol use, tobacco use, drug use (illicit and prescription, over the counter), and intimate partner violence.

Measure steward	AMA-PCPI
# of payers using in 2026 contracts	0
2024 commercial performance	N/A
2024 MassHealth performance	N/A
QMAT recommendation	Remove from the Menu Set

Blood Pressure Control for Patients with Diabetes

2026 MENU MEASURE

Measure Definition

The percentage of persons 18–75 years of age with diabetes (type 1 or type 2) whose blood pressure was adequately controlled (<140/90 mm Hg) during the measurement period.

Measure steward	NCQA
# of payers using in 2026 contracts	4
2024 commercial performance	81.8
2024 MassHealth performance	78.3
QMAT recommendation	Retain in the Menu

Breast Cancer Screening

2026 MENU MEASURE

Measure Definition

The percentage of persons 40-74 years of age who were recommended for routine breast cancer screening and had a mammogram to screen for breast cancer.

Measure steward	NCQA
# of payers using in 2026 contracts	5
2024 commercial performance	83.5
2024 MassHealth performance	64.4
QMAT recommendation	Retain in the Menu

Cervical Cancer Screening

2026 MENU MEASURE

Measure Definition

The percentage of persons 21-64 years of age who were recommended for routine cervical cancer screening and had cervical cytology performed within the last 3 years or, for persons 30-64, had cervical hrHPV testing or cervical cytology/hrHPV cotesting performed in the last 5 years.

Measure steward	NCQA
# of payers using in 2026 contracts	5
2024 commercial performance	80.9
2024 MassHealth performance	70.1
QMAT recommendation	Retain in the Menu

Child and Adolescent Well-Care Visits

2026 MENU MEASURE

Measure Definition

The percentage of persons 3-21 years of age who had at least one comprehensive well-care visit with a PCP or OB/GYN practitioner during the measurement period.

Measure steward	NCQA
# of payers using in 2026 contracts	4
2024 commercial performance	84.0
2024 MassHealth performance	70.5
QMAT recommendation	Retain in the Menu

Chlamydia Screening

2026 MENU MEASURE

Measure Definition

The percentage of persons 16-24 years of age who were recommended for routine chlamydia screening, were identified as sexually active, and had at least one test for chlamydia during the measurement period.

Measure steward	NCQA
# of payers using in 2026 contracts	5
2024 commercial performance	74.0
2024 MassHealth performance	72.3
QMAT recommendation	Retain in the Menu

Colorectal Cancer Screening

2026 MENU MEASURE

Measure Definition

The percentage of persons 45-75 years of age who had appropriate screening for colorectal cancer.

Measure steward	NCQA
# of payers using in 2026 contracts	6
2024 commercial performance	71.6
2024 MassHealth performance	44.5
QMAT recommendation	Retain in the Menu but put "On Deck" for 2029-2030 Core Set

Developmental Screening in the First Three Years of Life

2026 MENU MEASURE

Measure Definition

The percentage of children screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months preceding or on their first, second, or third birthday.

Measure steward	OHSU
# of payers using in 2026 contracts	2
2024 commercial performance	N/A
2024 MassHealth performance	80.1
QMAT recommendation	Retain in the Menu

Eye Exam for Patients with Diabetes

2026 MENU MEASURE

Measure Definition

The percentage of persons 18-75 years of age with diabetes (type 1 or type 2) who had a retinal eye exam.

Measure steward	NCQA
# of payers using in 2026 contracts	5
2024 commercial performance	68.8
2024 MassHealth performance	62.1
QMAT recommendation	Retain in the Menu

Health-Related Social Needs Screening

2026 MENU MEASURE

Measure Definition

The percentage of members who were screened at least once during the measurement year using a standardized screening instrument for food, housing, transportation, and utility needs. The measure also includes screen positive rates for each HRSN.

Measure steward	MassHealth-modified CMS
# of payers using in 2026 contracts	3
2024 commercial performance	N/A
2024 MassHealth performance	Screening: 10%
QMAT recommendation	Retain in the Menu

Immunizations for Adolescents (Combo 2)

2026 MENU MEASURE

Measure Definition

The percentage of persons 13 years of age who had one dose of meningococcal vaccine, one Tdap vaccine, and completed the HPV vaccine series by their 13th birthday.

Measure steward	NCQA
# of payers using in 2026 contracts	5
2024 commercial performance	52.7
2024 MassHealth performance	52.7
QMAT recommendation	Retain in the Menu

Initiation and Engagement of Substance Use Treatment

2026 MENU MEASURE

Measure Definition

The percentage of new SUD episodes that result in treatment initiation within 14 days and have evidence of treatment engagement within 34 days of initiation.

Measure steward	NCQA
# of payers using in 2026 contracts	3
2024 commercial performance	Initiation: 40.9
	Engagement: 13.9
2024 MassHealth performance	Initiation: 49.7
	Engagement: 18.0
QMAT recommendation	Retain in the Menu

Kidney Health Evaluation for Patients with Diabetes

2026 MENU MEASURE

Measure Definition

The percentage of persons 18–85 years of age with diabetes (type 1 or type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate and a urine albumin-creatinine ratio, during the measurement period.

Measure steward	NCQA
# of payers using in 2026 contracts	4
2024 commercial performance	67.0
2024 MassHealth performance	46.9
QMAT recommendation	Retain in the Menu

Lead Screening in Children

2026 MENU MEASURE

Measure Definition

The percentage of persons 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday.

Measure steward	NCQA
# of payers using in 2026 contracts	0
2024 commercial performance	N/A
2024 MassHealth performance	87.3
QMAT recommendation	Retain in the Menu

Pharmacotherapy for Opioid Use Disorder

2026 MENU MEASURE

Measure Definition

The percentage of opioid use disorder (OUD) pharmacotherapy events that lasted at least 180 days among persons 16 years of age and older with a diagnosis of OUD and a new OUD pharmacotherapy event.

Measure steward	NCQA
# of payers using in 2026 contracts	0
2024 commercial performance	36.2
2024 MassHealth performance	32.7
QMAT recommendation	Remove from the Menu Set

Prenatal and Postpartum Care

2026 MENU MEASURE

Measure Definition	The percentage of live births on or between October 8 of the year prior to the measurement period and October 7 of the measurement period that received a prenatal care visit in the first trimester (or within 42 days of enrollment) and had a postpartum visit on or between 7 and 84 days after delivery.	
Measure steward	NCQA	
# of payers using in 2026 contracts	2	
2024 commercial performance	Prenatal: 86.2	
	Postpartum: 91.1	
2024 MassHealth performance	Prenatal: 90.9	
	Postpartum: 86.8	
QMAT recommendation	Retain in the Menu	

Race, Ethnicity, and Language Stratification

2026 MENU MEASURE

Measure Definition

Performance for the 4 Core measures and any 6 Menu measures (at the discretion of a payer/provider dyad) from the 2026 Massachusetts Aligned Measure Set, stratified by race, ethnicity, and language.

Measure steward	Massachusetts EOHHS
# of payers using in 2026 contracts	2
2024 commercial performance	N/A
2024 MassHealth performance	N/A
QMAT recommendation	Retain in the Menu

Race, Ethnicity, Language, and Disability Data Collection

2026 MENU MEASURE

Measure Definition

The percentage of ACO attributed members with self-reported data collected by an ACO in the measurement year for each of (five separate rates): race, ethnicity, preferred written language, preferred spoken language, and disability status.

Measure steward	Massachusetts EOHHS
# of payers using in 2026 contracts	3
2024 commercial performance	N/A
2024 MassHealth performance	N/A
QMAT recommendation	Retain in the Menu

Well-Child Visits in the First 30 Months of Life

2026 MENU MEASURE

Measure Definition

The percentage of persons who had six or more well-child visits in the first 15 months of life or two or more well-child visits between the first 15 and 30 months of life.

Measure steward	NCQA
# of payers using in 2026 contracts	3
2024 commercial performance	95.2
2024 MassHealth performance	74.6
QMAT recommendation	Retain in the Menu

Follow-Up After Acute Care Visits for Asthma

NOT IN THE 2026 ALIGNED MEASURE SET

Measure Definition

The percentage of persons 5-64 years of age with an urgent care visit, acute inpatient discharge, observation stay discharge or ED visit with a diagnosis of asthma that had a corresponding outpatient follow-up visit with a diagnosis of asthma within 30 days.

Measure steward	NCQA
# of payers using in 2026 contracts	0
2024 commercial performance	n/a
2024 MassHealth performance	n/a
QMAT recommendation	Add to the Menu

Measures to Track (1 of 2)

- QMAT recommended tracking (or continuing to track) the following measures to monitor for declines in performance:

Measure	Steward	Definition
<i>Follow-Up After ED Visit for Mental Illness (30-day)</i>	NCQA	The percentage of ED visits for persons 6 and older with a principal dx of mental illness or intentional self-harm who had a mental health follow-up service within 30 days.
<i>Childhood Immunization Status (Combo 7)</i>	NCQA	The percentage of persons 2 years of age who had four DTaP; three polio; one MMR; three HiB; three HepB; one chicken pox; four pneumococcal conjugate; one HepA; and two or three rotavirus vaccines by their second birthday.

Measures to Track (2 of 2)

- QMAT recommended tracking (or continuing to track) the following developmental measures:

Measure	Steward	Definition
<i>Young Children Receiving Social-Emotional Issue-Focused Treatment / Intervention Services</i>	Oregon Pediatric Improvement Partnership	The percentage of members 1-5.99 years who received issue-focused intervention/ treatment services within the measurement year, as defined by specific CPT codes.
<i>Hypertension: Improvement in Blood Pressure</i>	CMS	The percentage of patients 18-85 with a diagnosis of hypertension whose blood pressure improved during the measurement period.



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Next Steps: CHIA to Establish the Aligned Measure Set

- The SQAC will submit its final recommendations on the Aligned Measure Set to CHIA for consideration.
- Consistent with its statutory charge, CHIA will formally establish the Aligned Measure Set for 2027-2028 and issue associated guidance (e.g., contracts to which the Aligned Measure Set applies, reporting requirements).



Next Steps: Implementation

- Historically, QMAT has maintained a published set of implementation parameters that it updates annually at the same time as the Aligned Measure Set.
- As the transition from QMAT to SQAC further proceeds in 2026, the Division of Insurance anticipates communicating expectations for implementation to the market closely in time with CHIA's formal establishment of the Aligned Measure Set, leveraging the QMAT implementation parameters where appropriate.



Next Steps: Potential for SQAC Input

- Pursuant to the law, the SQAC's purpose is to develop and submit recommendations for the Aligned Measure Set to CHIA on a biennial basis.
- Notwithstanding that, the co-chairs may solicit and consider consultative input from committee members on associated questions (particularly as the Aligned Measure Set transitions from voluntary to mandatory) to enhance understanding of key market perspectives and support the Division of Insurance's continued development of its compliance and enforcement position, consistent with its legal authority.
- For example, key questions for consideration include:
 - Application (e.g., to global budget-based risk contracts that currently lack quality measures)
 - Timing of Aligned Measure Set incorporation (e.g., upon a fixed date, execution, renewal cycle)



THANK YOU



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