Administrative Bulletin 26-02

957 CMR 4.00: Standard Quality Measure Set
Effective July 17, 2026

2027-2028 Standard Quality Measure Set Establishment

The Center for Health Information and Analysis ("CHIA") is issuing this Administrative Bulletin in accordance with 957 CMR 4.04(2) and 4.03(1) to notify Payers and Providers, including Provider Organizations and Accountable Care Organizations, of the establishment of the Standard Quality Measure Set (SQMS) for calendar years 2027-2028.

Pursuant to M.G.L. c. 12C, § 14, CHIA, in consultation with the Statewide Quality Advisory Committee (SQAC), is required to establish a SQMS in each even-numbered year for use in contracts between Payers, including the Commonwealth and Carriers, and health care Providers, Provider Organizations and Accountable Care Organizations, which incorporate quality measures into payment terms, including the designation of a set of Core Measures and a set of Non-Core Measures.

As the 2027-2028 cycle is the first under the revised M.G.L. c. 12C, § 14, CHIA worked with the reconstituted SQAC to establish the SQMS as expeditiously as practicable. The SQAC recommended the 2027-2028 SQMS to CHIA at a meeting on April 30, 2026. The SQAC's recommendations were approved by CHIA's Executive Director on June 5, 2026. The 2027-2028 SQMS is defined in Appendix A. The SQMS is also known as the Massachusetts Aligned Measure Set.

The SQMS consists of two categories of measures: the Core Measures (also known as the "Core Set") and the Non-Core Measures (also known as the "Menu Set"). The SQAC has also recommended additional Non-Core Measures that MassHealth may use to meet Medicaid-specific program needs, identified in Appendix A as "Non-Core (MassHealth Specific)."

This Administrative Bulletin only establishes the measure set; CHIA will issue a separate Data Submission Manual defining the SQMS reporting requirements for 2027-2028.

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APPENDIX A

2027-2028 Massachusetts Aligned Measure Set

Set	Measure Name	Steward[i]
Core	CG-CAHPS (MHQP Version)	MHQP[ii,iii]
Core	Childhood Immunization Status (Combo 10)	NCQA[iv]
Core	Controlling High Blood Pressure	NCQA
Core	Depression Screening and Follow-Up for Adolescents and Adults	NCQA
Core	Glycemic Status Assessment for Patients with Diabetes: Glycemic Status Poor Control (>9.0%)	NCQA
Non-Core	Adult Immunization Status[v]	NCQA
Non-Core	Blood Pressure Control for Patients with Diabetes	NCQA
Non-Core	Breast Cancer Screening[vi]	NCQA
Non-Core	Cervical Cancer Screening	NCQA
Non-Core	Child and Adolescent Well-Care Visits	NCQA
Non-Core	Chlamydia Screening	NCQA
Non-Core	Colorectal Cancer Screening[vii]	NCQA
Non-Core	Developmental Screening in the First Three Years of Life	Oregon Health & Science University[viii]
Non-Core	Eye Exam for Patients with Diabetes	NCQA
Non-Core	Follow-Up After Acute and Urgent Care Visits for Asthma	NCQA
Non-Core	Health-Related Social Needs Screening[ix]	MassHealth
Non-Core	Immunizations for Adolescents (Combo 2)	NCQA
Non-Core	Initiation and Engagement of Substance Use Treatment[x]	NCQA
Non-Core	Kidney Health Evaluation for Patients with Diabetes	NCQA

Set	Measure Name	Steward[i]
Non-Core	Lead Screening in Children	NCQA
Non-Core	Prenatal & Postpartum Care	NCQA
Non-Core	Race, Ethnicity, Language and Disability Data Collection[xi]	MassHealth
Non-Core	Race, Ethnicity, and Language Stratification	Massachusetts QMAT[xii]
Non-Core	Well-Child Visits in the First 30 Months of Life	NCQA
Non-Core (MassHealth Specific)	Metabolic Monitoring for Children and Adolescents on Antipsychotics	NCQA
Non-Core (MassHealth Specific)	Follow-Up After Emergency Department Visit for Mental Illness (7-day)	NCQA
Non-Core (MassHealth Specific)	Follow-Up After Hospitalization for Mental Illness (7-day)	NCQA
Non-Core (MassHealth Specific)	Follow-Up After Emergency Department Visit for Substance Use	NCQA
Non-Core (MassHealth Specific)	Topical Fluoride for Children	American Dental Association
Non-Core (MassHealth Specific)	Quality Performance Disparities Reduction	MassHealth

[i] A measure steward is responsible for the oversight, quality and maintenance of a measure throughout its lifecycle. The measure steward grants permission for measure use and application by others, approves any updates, and communicates such information to interested parties. For more information, see CMS *Roles in Measure Development*: https://mmshub.cms.gov/about-quality/new-to-measures/roles.

[ii] Massachusetts Health Quality Partners. See https://www.mhqp.org/

[iii] There is no requirement to use all measure domains or to weight domains equally in contracts. CHIA encourages a focus on domains where there is the greatest opportunity for performance improvement.

[iv] National Committee for Quality Assurance. See https://www.ncqa.org/.
[v] Payer and Provider dyads may use any of the immunization rates included in the measure.
[vi] Payer and Provider dyads may use any of the age stratifications included in the measure.
[vii] Electronic clinical quality measure (eCQM) reporting only.
[viii] See https://oregon-pip.org/
[ix] Providers should not be held accountable for the rate at which health-related social needs are identified by the Health-Related Social Needs Screening.
[x]Payer and Provider dyads may use the initiation and/or the engagement phase.
[xi]Payer and Provider dyads may optionally also include collection of sexual orientation, gender identity, and/or sex data.
[xii] See EOHHS Quality Measure Alignment Taskforce | Mass.gov