Designation Handbook

General



Executive Office of Aging & Independence





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Commonwealth of Massachusetts

Contents

Notes for viewing in web browser: Viewing this document in a web browser may cause display changes that make the exact page numbers listed in this table of contents inaccurate. It may also shift the location of page breaks, leading blank pages to display.

1. Introduction

This General Designation Handbook is for the Aging Service Access Points (ASAPs) and contains the following:

- *ASAP Oversight Framework,* which describes the AGE's four pillars for ASAP oversight and the current state and future goals for Designation in the context of AGE ASAP oversight.
- *Compliance Reporting,* which gives an overview of how Designation reports on compliance following an evaluation period.
- *Quality Improvement,* which describes Designation expectations related to quality improvement for ASAPs when not meeting the minimum compliance threshold or at risk of falling below it.
- *Timelines,* which details when AGE will report compliance results across all live Designation domains and where to find information on when data must be submitted.
- *Communication Expectations*, which outlines how information regarding Designation will be communicated between AGE and ASAPs.

Designation aims to support continuous quality improvement and help AGE examine whether AGE funded ASAPs are meeting contractual and regulatory obligations.[1] The Designation process involves: (a) AGE collecting data from ASAPs and other stakeholders, (b) ASAP program and AGE reviews of experience through surveys, record reviews, and other methods (c) AGE analysis and reporting of data, and (d) ASAP quality improvement processes monitored by AGE. The Designation process is a standard part of AGE and ASAP program operations.

Designation is guided by the following principles

- Focusing on residents, including their experiences and outcomes.
- Creating consistency and uniformity state-wide, so the same level of service is provided to applicants regardless of where the individual lives
- Engaging with the ASAPs and including their voice in this process.
- Using reliable data that accurately represents agency performance.
- Adhering to a "test and learn" approach and adapting along the way.
- Documenting quality measures and related processes to foster transparency, strengthen program integrity, and help with staff transitions.
- Developing quality metrics that accurately assess program compliance.
- Providing accessible summaries.
- Developing comprehensive metrics that capture all important program aspects.

[1] In addition to AGE requirements, ASAPs are also MassHealth providers and MassHealth relies on the Designation process to ensure that ASAPs are adhering to relevant regulations and CMS requirements.

The Designation process examines each ASAP program separately. For purposes of Designation, each ASAP program is referred to as a *domain*, except for the Home Care program that has been split into multiple domains based on core program functions.

AGE has updated the previous Designation process, in place since 2010. The previous process involved a comprehensive periodic audit every three years. To support regular quality improvement, the new Designation process provides feedback every six months. The purpose of the revised Designation process is:

- Continuous Improvement: Provides closer to real-time feedback every six months for faster, predictable results.
- Regular Maintenance: Acts as routine upkeep, focusing on ongoing improvement instead of one-time fixes.
- Cycle of Improvement: Prioritizes steady progress over perfection.
- Consumer Support: Ensures consumers consistently receive at least satisfactory support through continuous quality checks.
- Minimum Contract Standards: Measures minimum standards, while acknowledging that overall performance and criteria may evolve.

AGE revised the Designation process in 2022, piloted the new process with 6 ASAPs in 2023, and conducted a "soft launch" of the revised process with all 24 ASAPs from January – April 2024. As of February of 2026, the Designation process is fully implemented for four domains.

Live Designation Domains

1. Home Care (HC) Referral and Intake
2. Protective Services (PS)
3. Information and Referral (I&R)
4. Supportive Housing (SH)

Each of the fully implemented "live" domains above has its own Designation Handbook, with more information specific to that domain. This General Designation Handbook contains information applicable to all the domains.

1. ASAP Oversight Framework

AGE's ASAP Oversight framework is comprised of the following four pillars.

Compliance

Pillar 1: ASAP Contract Management and Compliance

Focus: Ensuring that ASAPs meet the minimum regulatory, contractual, and operational requirements.

Comparative Performance

Feedback

Pillar 2: Ongoing Performance Management

Focus: Supporting ASAPs in measuring and understanding their performance in efficiently and consistently delivering quality services.

Analysis

Improvement

Pillar 3: Quality Improvement (QI)

Focus: Empowering ASAPs to enhance service quality, consumer satisfaction, and the overall experience of older adults and caregivers.

Results

Pillar 4: Outcome Evaluation

Focus: Tracking and evaluating the long-term impact of ASAPs' work on consumer health, well-being, and independence.

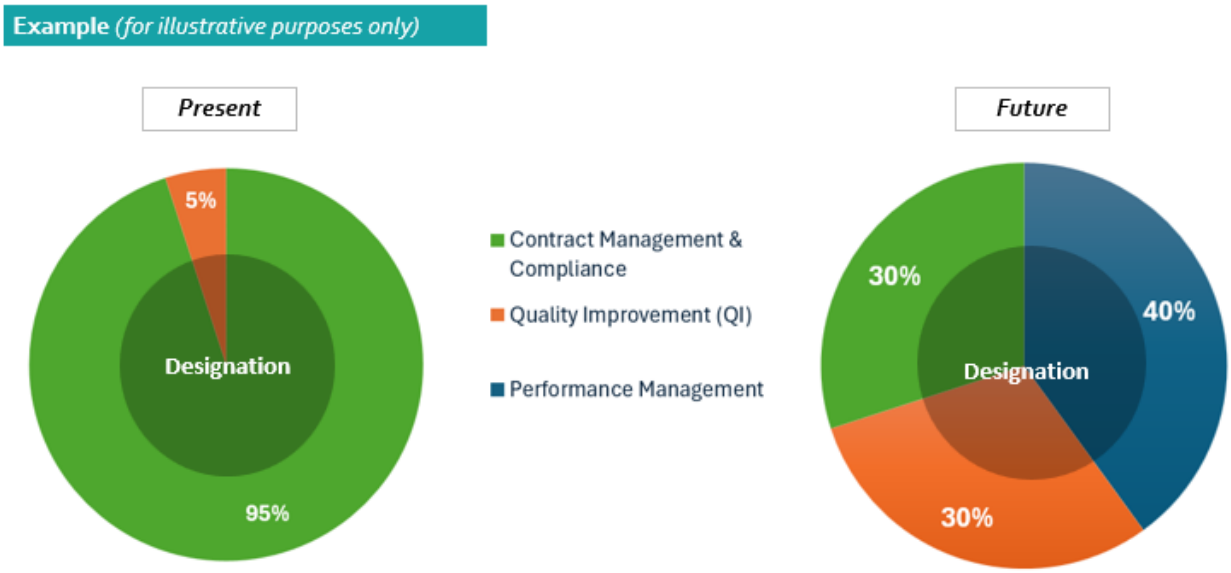
Designation in the Context of ASAP Oversight Framework

Designation is only one part of the larger ASAP Oversight Framework. As of early 2026, the current state of AGE's ASAP oversight through Designation is a heavy focus on compliance (the first pillar above). However, AGE aims to ensure there's integration across the four pillars by routinely:

- **Defining & Standardizing Measures:** Clarify and document measures for compliance, performance and quality

- **Gathering Feedback:** Use insights from performance management and quality improvement to refine compliance monitoring and designation criteria.
- **Engaging Stakeholders:** Maintain ongoing dialogue with ASAP leadership, consumers, and AGE staff to ensure goals and activities remain aligned with community needs.

In the future, AGE seeks to spend more time on performance management and quality improvement through Designation (see illustrative example below).



It's important to remember that not all program components can be measured through Designation, so maintaining good performance across the board is crucial. Additionally, what is measured may shift over time.

2. Compliance Reporting

To support regular quality improvement, the updated Designation process provides Compliance Reports to "live" ASAP domains every six months, reporting on six-month time periods (called evaluation periods).

AGE's Designation Team provides each ASAP domain with an individual Compliance Report detailing their agency's data and findings for that domain for the most recent completed evaluation period. See the Timelines section for more details on the timing of these reports.

AGE also provides each ASAP domain with a Compliance Report Companion Guide, to help programs contextualize and understand their data and findings**. Please see the individual domain Designation Handbooks for the most updated Compliance Report Companion Guide for that domain (included as a section of the handbooks[2]).** These domain-specific handbooks have more information on the Designation evaluation and Compliance Reporting processes for each domain.

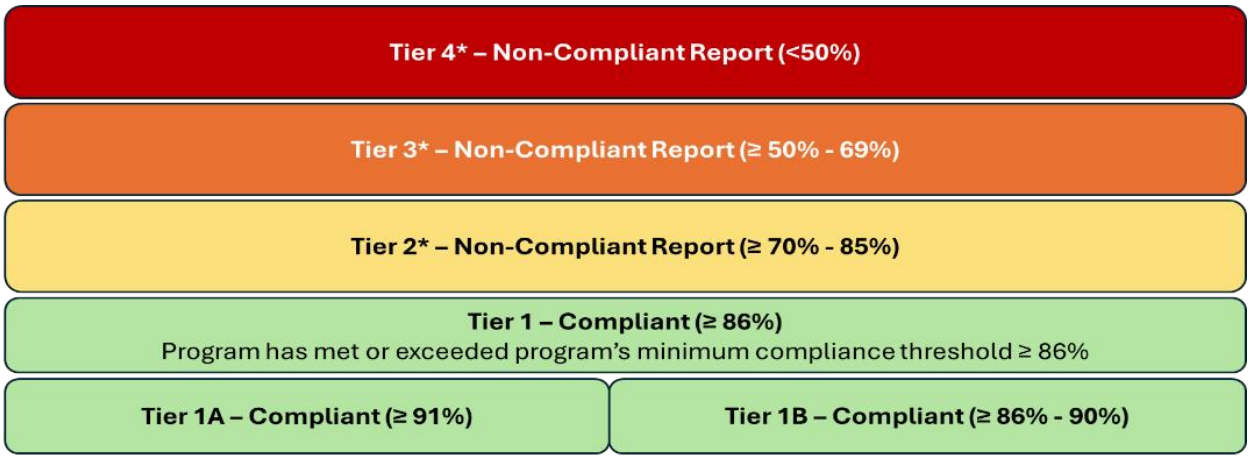
More general information about the AGE Designation compliance reporting process, not specific to any domain, may be added to future iterations of this General Designation Handbook.

[2] For 2025 Evaluation Period 1 and 2024 Soft Launch, Compliance Report Companion Guides were issued to ASAPs as separate standalone documents, rather than sections of domain handbooks.

3. Quality Improvement

A. Compliance Tiers

The AGE Designation compliance framework is structured into tiers based on ASAP program performance during the evaluation period.



Any program in Tiers 2-4 for longer than two evaluation periods (1 year) without positive compliance progression will be escalated a tier

B. ASAP Deliverables

ASAPs are required to complete specific deliverables based on their compliance tier.

ASAP Corrective Action Deliverables	Tier 1A *Compliant (≥ 91%)*	Tier 1B *Compliant (86% – 90%)*	Tier 2 *Non-Compliant (70% – 85%)*	Tier 3 *Non-Compliant (50% – 69%)*	Tier 4 *Non-Compliant (< 50%)*
Review notification of compliance standing (Executive Director & program team)	X	X	X	X	X
Monitor risk and maintain continuity of compliance	X	X	X	X	X
Complete and submit Failure Mode and Effects Analysis (FMEA)		X			
Conduct QI process including root cause analysis and planning phase of PDSA cycle			X	X	X
Submit QI Plan for Corrective Action (QIPCA)			X	X	X
Implement QIPCA interventions			X	X	X
Submit Evaluation of QIPCA intervention(s)			X	X	X
Mandatory meeting between AGE program director, QI staff, Designation team, ASAP ED, and ASAP program director				X	X
ASAP notification of non-compliance to ASAP board				X	X
Contract Discussion					X

ASAP deliverables include conducting a Failure Mode and Effects Analysis (FMEA) for Tier 1B or submitting a QIPCA and implementing corrective actions for Tiers 2-4. Non-compliant programs in Tiers 3 & 4 require mandatory meetings with AGE and notification to the ASAP's Board of Directors.

In 2025, AGE conducted ASAP network-wide trainings on the FMEA and QIPCA processes. AGE plans to add additional information about these processes to future iterations of this handbook.

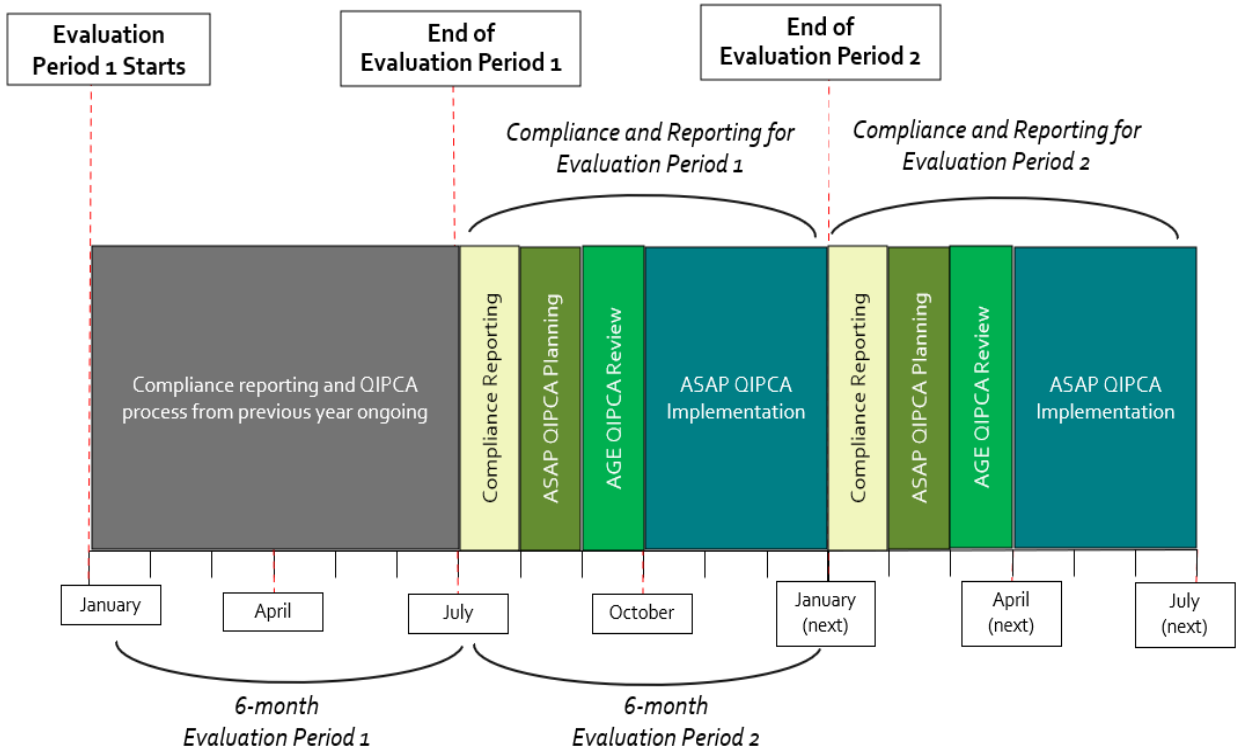
Please see the Timelines section for more information on the timing of the Designation compliance reporting and quality improvement processes.

4. Timelines

A. Compliance Reporting and QIPCA Timeline

The compliance reporting timeline establishes a structured, ongoing cycle to support quality improvement, transparency, and compliance. ASAPs should expect to receive these reports on a regular, predictable schedule each year to help track performance and drive continuous improvement.

The Designation quality improvement (QI) process involves regular compliance reports and evaluation periods every six months. The **Mid-Year Compliance Report will be shared each July (or within 5 business days),** covering the first six-month evaluation period from January through June. The **Year-End Compliance Report, sent to ASAPs each January (or within 5 business days),** will cover the second evaluation period from July through December. These reports provide an in-depth look at retrospective trends, survey or case/record review findings, and areas for improvement.



The QIPCA process, which includes ASAP QIPCA planning, AGE review of proposed QIPCAs, and ASAP QIPCA implementation, immediately follows Compliance Reporting.

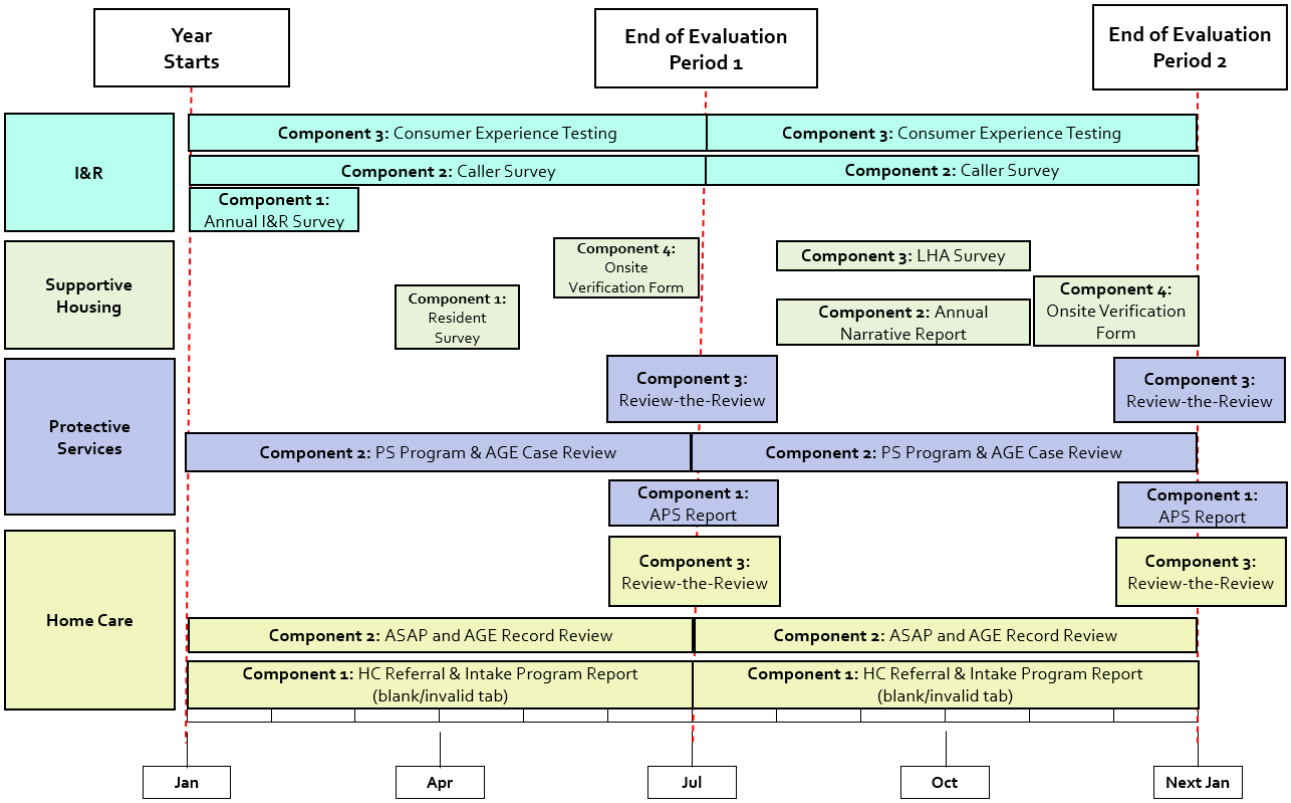
Specifically, QIPCA and FMEA documents are due through the AGE designated survey links about 30 days after compliance documents have been released to ASAPs. Additionally, a post

assessment on QIPCA submitted countermeasures will be distributed by AGE after the end of the evaluation period and must be completed by the prescribed AGE deadline, before Compliance Reports are released by AGE for that evaluation period. AGE will communicate specific deadlines directly with ASAPs via email as appropriate.

Together, compliance reports and the QIPCA process ensure that programs are consistently monitored, holding all partners accountable for delivering high-quality services to vulnerable populations while fostering a culture of continuous improvement.

B. Domain-Specific Deliverable Timelines

The following timeline provides information on the timing of different Designation activities for all live domains.



The domain-specific Designation Handbooks include more information on when ASAPs must submit data for components in that domain. AGE will communicate specific deadlines directly with ASAPs via email as appropriate.

C. Sampling and Survey/Review Timelines

Please see the Designation Handbook for the relevant domain, for information on sampling of data and when surveys and/or reviews are conducted.

5. Communication Expectations

This section outlines key processes related to Designation, communication protocols, and expectations between AGE and ASAPs. It provides detailed guidance on maintaining accurate contact information, responding to communications, scheduling meetings, and adhering to deadlines for submitting required data.

A. AGE Designation Contact Information

For all Designation communication, ASAPs should email EOEA-Designation@mass.gov.

B. ASAP Designation Contact Information

AGE will use email, typically from EOEA-Designation@mass.gov, for all Designation correspondence. ASAPs have provided names and emails for relevant domains and ASAP leaders. Whenever an ASAP changes any of their Designation contacts, they must notify EOEA-Designation@mass.gov.

ASAPs are expected to have either a singular Designation email account or program[3]-specific emails (e.g., Designation@agingservices.com or HomeCare@agingservices.com).

ASAPs should also notify EOEA-Designation@mass.gov if there is a change in the ASAP or site primary (postal) mailing address. Note: This does not supersede existing protocols that ASAPs must follow more broadly regarding notification to AGE of address changes.

C. ASAP Responses to AGE

When AGE requests a response, ASAPs should respond within three business days, unless otherwise specified. This requirement applies to any communication from AGE's Designation Team. In some cases, when the issue is time sensitive and potentially impacts the health or safety of an older adult, AGE[4] can request a faster response (for example, as soon as possible or within one business day). In other cases, for tasks that are further in the future, the deadline could be longer than three business days.

D. Meetings Between AGE and ASAP Staff

ASAPs are required to schedule meetings in a timely manner after AGE requests a meeting with the ASAP. The timeframe in which the meeting must be scheduled will be determined by AGE on

[3] For the SH domain, AGE will continue using the emails that have already been created (October 2023). Therefore, if ASAPs have program-specific emails, they do not need to create a new email account for SH.
[4] If a time sensitive health or safety issue comes up as part of the Designation Update process, communication to the ASAP about that issue will typically come from program staff at AGE, rather than the Designation team.

a case-by-case basis, depending on the urgency of the issue(s) to be discussed. AGE will determine whether the meeting is virtual or in-person.

E. AGE Responses to ASAP Communication

The Designation Team will attempt to respond to all ASAP emails in a timely manner. Given the volume of ASAP communication, AGE's Designation Team may take up to a week (five business days) to respond to emails sent to EOEA-Designation@mass.gov. Response times will vary depending on staff availability, the volume of emails received, and the time required to respond to each inquiry. In many cases, the Designation Team will need to consult with program staff before responding.

If ASAPs do not receive a response from the Designation Team within one week (five business days), ASAPs can follow-up via email.

F. Safe Senders List

ASAPs should add EOEA-Designation@mass.gov to their agency "safe senders" list for any agency/staff email addresses that may receive communication from the Designation Team to ensure that emails from this address are delivered and not sent to junk email folders. ASAPs should also regularly check their spam/junk email folders.

G. Mail from AGE to ASAPs

AGE may mail items to an ASAP's primary office mailing address and require that ASAP to distribute such items to other addresses associated with that ASAP. For example, AGE may mail materials to an ASAP's primary office mailing address for Supportive Housing Resident Surveys and require that ASAP to distribute them to each of their specific Supportive Housing buildings.

H. Submitting Data

Deadlines

AGE establishes the deadlines for ASAP program staff to complete tasks related to Designation Update (for instance, completing and submitting case reviews), and will inform ASAPs of deadlines via email, typically when emailing ASAPs to assign the task. Deadlines are subject to change at the discretion of AGE.

AGE will also provide compliance ratings, which reflect an evaluation of an ASAP's compliance with minimum contracted standards and with the Designation process. Compliance ratings will be subject to penalties if Designation components are submitted late or not submitted at all. These compliance ratings will serve as the ASAP program's final score for Designation update.

Extensions

If an ASAP has a compelling reason for not meeting a deadline, such as a technical outage or natural disaster, they should email EOEA-Designation@mass.gov to request an extension before the deadline. If AGE approves the extension, then the ASAP program's scores will not be impacted by missing the original deadline.

Late Submissions

When possible, AGE will score late components and incorporate them into performance results shared with ASAP programs.[5] *Performance* scores are based on the content of the materials that ASAP programs submit and are not impacted by the timeliness of these submissions. *Compliance* scores are impacted by late submissions. For late submissions initiated by the ASAP,[6] AGE will deduct approximately 25% of the late component's points from their compliance score.[7] For example, if a Supportive Housing Coordinator at a site with one building was onsite each week for 20 hours spread over three days, the performance score would be 100% for the Onsite Verification Form for each week (for more details on scoring, see the domain-specific handbooks). However, if the Onsite Verification Form was submitted late, the Compliance Score would be 75%. If an ASAP does not complete a Designation component and AGE cannot sufficiently evaluate ASAP performance without that information, AGE may reach out to an ASAP to request the missing information. In these instances, AGE will deduct 50% from the compliance score for the component submitted late.

Multiple Submissions

If AGE receives multiple submissions from ASAPs for a component or sub-component, when only one submission was required (for instance, multiple Home Care Referral and Intake record reviews for the same record), then it will proceed as follows when conducting analysis.

- Multiple submissions from ASAPs before deadline: AGE will use the last submission.
- Multiple submissions, before and after deadline: AGE will use the last review submitted before the deadline.
- Multiple submissions after deadline, but none before the deadline: AGE will use the last review submitted, if it includes any late submission in compliance reporting.

For example, if AGE receives multiple HC Referral and Intake record reviews for the same record before and after the deadline, then it will use the last one submitted before the deadline.

Non-Completion by Reporting

[5] Whether AGE includes a late submission in a performance evaluation will largely depend on the timing of late submissions, relative to the timing of AGE completing performance evaluations, and AGE staff capacity.

[6] In some cases, ASAPs may be able to initiate a late submission by completing an online form late without contacting AGE. In other cases, ASAPs may need to contact AGE (via the Designation email) to initiate a late submission by requesting AGE re-opens a form that is no longer available. Initiating means that the ASAP, without an AGE reminder, realizes that they have not submitted and takes action to submit.

[7] This final compliance score is distinct from an ASAP program's performance score. For reviews, this 25% deduction will apply to each review that is submitted late, rather than the entire review score.

ASAP programs will also receive zero points in their compliance score for any other components that are not submitted in time for the Designation Team to include them in performance evaluations.

Proof of Submission

Upon submitting a review or survey via the relevant online system, ASAPs should download and save PDF versions of their completed submission. AGE requests that ASAPs save a copy of these PDFs as proof of submission. ASAPs should not email AGE to confirm their online submission was received.