

2020 MANAGED CARE ACCOUNTABILITY SET (MCAS)¹ QUICK REFERENCE GUIDE

Measure	Description	Required Documentation	Sample Codes ⁴
Adolescent Well-Care Visits (AWC) Hybrid Measure ²	Adolescents, 12 to 21 years of age, who had at least one comprehensive well-care visit with a PCP or OB/GYN in 2019.	Medical record documentation must include a note indicating a visit with a PCP or OB/GYN, date of service, and evidence of the following: <ul style="list-style-type: none"> • Health history. • Physical developmental history. • Mental developmental history. • Physical exam. • Health education / anticipatory guidance. 	CPT: 99381-99385, 99391-99395 ICD-10-CM: Z00.0x, Z00.121, Z00.129
Adult Body Mass Index Assessment (ABA) Hybrid Measure ²	Adults, 18 to 74 years of age, who had an outpatient visit in 2018 or 2019 that included documentation of a body mass index (BMI) assessment.	<ul style="list-style-type: none"> • Members under 20 years of age require documentation of height, weight and BMI percentile. • Members 20 years of age and older require documentation of weight and BMI value. 	CPT: 99201-99205, 99241-99245, 99401-99404 ICD-10-CM: Z68.1, Z68.20-Z68.39
Annual Monitoring for Patients on Persistent Medications (MPM) Administrative Measure ³	Adults, 18 years of age and older, who received at least 180 treatment days of ACE/ARBs or diuretics in 2019 and at least one monitoring lab panel in 2019.	Claims / encounter or lab data with codes indicating a metabolic lab panel was completed. Lab tests do not have to occur on the same date but must be within the measurement year.	CPT: 80047, 80048, 80050, 80053, 80069

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Antidepressant Medication Management (AMM) Administrative Measure ³	Adults, 18 years of age and older, who had a diagnosis of major depression and were treated with antidepressants in 2019. Two rates are reported: <ul style="list-style-type: none"> Effective Acute Phase Treatment: Percentage of members that remained on antidepressant medication for at least 84 days (12 weeks). Effective Continuation Phase Treatment: Percentage of members that remained on antidepressant medication for at least 180 days (6 months). 	Claims or encounter data indicating the member had a diagnosis of depression and pharmacy data indicating antidepressant medication was dispensed.	CPT: 99221-99223, 99304-99310, 99241-99245, 98966-98968 ICD-10-CM: F32.0-F32.4, F33.0-F33.3
Asthma Medication Ratio (AMR) Administrative Measure ²	Members, 5 to 64 years of age, who had persistent asthma and had a ≥ 0.50 ratio of controller medications to total asthma medications in 2019.	Claims / encounter data indicating member had a diagnosis of asthma in 2018 or 2019 and pharmacy data indicating asthma controller medication was dispensed.	CPT: 99201-99205, 99241-99245 ICD-10-CM: J45.20-J45.22, J45.30-J45.32
Breast Cancer Screening (BCS) Administrative Measure ³	Women, 50 to 74 years of age, who had a mammogram to screen for breast cancer between 10/01/17 and 12/31/19.	All types and methods of mammograms (screening, diagnostic, film, digital or digital breast tomosynthesis) qualify for compliance. Note: MRIs, ultrasounds and biopsies do not count as screening mammograms.	CPT: 77055-77057, 77061-77063, 77065-77067
Cervical Cancer Screening (CCS) Hybrid Measure ²	Women, 21 to 64 years of age, who were screened for cervical cancer using one of the following methods: <ul style="list-style-type: none"> Women, 21 to 64 years of age, who had a Pap exam between 01/01/17 to 12/31/19. Women, 30 to 64 years of age, who had a cervical high-risk human papillomavirus (hrHPV) test between 01/01/15 to 12/31/19. Women, 30 to 64 years of age, who had a Pap/hrHPV co-test between 01/01/15 to 12/31/19. 	Claims / encounter or lab data with codes indicating a cervical cancer screening was completed or clinical documentation that included the following: <ul style="list-style-type: none"> The date of the cervical cancer screening. The result or finding. 	CPT: Pap Test: 88141-88143, 88147-88148, 88150, 88152-88154, 88165-88167 HPV Test: 87620-87622, 87624, 87625

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<p>Childhood Immunization Status (CIS) Combo 10</p> <p>Hybrid Measure²</p>	<p>Children who received the following immunizations on or before their second birthday in 2019:</p> <ul style="list-style-type: none"> • 4 DTaP • 4 PCV • 3 Hib • 3 IPV • 3 Hep B • 1 Hep A • 2 Influenza (Flu) • 1 MMR • 1 VZV • RV (two 2-dose or three 3-dose) 	<p>Name of specific antigen or vaccine and date of immunization, or immunization record.</p> <p>All PCPs are required to enter vaccines into their local immunization registry. DHCS recommends entering information within 14 days of administering an immunization to ensure all historical vaccine doses are entered into the registry for children that have moved out of the area.</p> <p>http://cairweb.org/</p>	<p>CPT: DTaP: 90698, 90700 Hep B: 90723, 90740 Hep A: 90633 IPV: 90698, 90713 Flu: 90655, 90657 MMR: 90707, 90710 PCV: 90669, 90670 RV: 90680, 90681 VZV: 90710, 90716 HiB: 90644-90648</p>
<p>Children and Adolescents' Access to Primary Care Practitioners (CAP)</p> <p>Administrative Measure³</p>	<p>Children and adolescents, 12 months to 19 years of age, who had a visit with a PCP during the following period of time:</p> <ul style="list-style-type: none"> • Members, 12 months to 6 years of age, who had at least one PCP visit in 2019. • Members, 7 to 19 years of age, who had least one PCP visit in 2018 or 2019. 	<p>Claims / encounter data for an outpatient or preventive care visit with a PCP.</p>	<p>CPT: 99201-99205, 99211-99215, 99381-99387, 99391-99397 ICD-10-CM: Z00.00 – Z00.129</p>
<p>Chlamydia Screening in Women (CHL)</p> <p>Administrative Measure³</p>	<p>Women, 16 to 24 years of age, who were identified as sexually active and had at least one test for chlamydia in 2019.</p>	<p>Claim / encounter data, pharmacy data and labs to identify members who are sexually active and/or dispensed contraceptives during the measurement year and had at least one chlamydia test.</p>	<p>CPT: 87110, 87270, 87320, 87490-87492, 87810</p>

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<p>Comprehensive Diabetes Care (CDC)</p> <p>Hybrid Measure²</p>	<p>Adults, 18 to 75 years of age, with a diagnosis of diabetes (type 1 and type 2) who had the following screenings in 2019:</p> <ul style="list-style-type: none"> HbA1c test and results. 	<ul style="list-style-type: none"> Note indicating the date when the most recent HbA1c test was performed and the result. A distinct numeric result is required for compliance. Ranges and thresholds do not meet criteria for the measure. 	<p>CPT: 83036, 83037 CPT II: 3044F, 3045F, 3046F</p>
<p>Concurrent Use of Opioids and Benzodiazepines (COB)</p> <p>Administrative Measure³</p>	<p>Adults, 18 years of age and older, with concurrent use of prescription opioids and benzodiazepines.</p>	<p>Claim / encounter and pharmacy data with codes indicating the member had two or more prescription claims for any benzodiazepine with different dates of service and concurrent use of opioids and benzodiazepines for 30 or more cumulative days.</p>	<p>NDC codes used to identify opioid and benzodiazepine use.</p>
<p>Contraceptive Care for All Women Ages 15-44 (CCW)</p> <p>Administrative Measure³</p>	<p>Women, 15 to 44 years of age, at risk of unintended pregnancy, who were provided the following contraceptive care in 2019:</p> <ul style="list-style-type: none"> A most or moderately effective method of contraception. A long-acting reversible method of contraception (LARC). 	<p>Claims / encounter and pharmacy data with codes to identify women who were dispensed contraceptive medication. Note: Contraceptive surveillance codes can be used to document repeat prescriptions of contraceptives, contraceptive maintenance, or routine checking of a contraceptive device or system; contraceptive surveillance codes cannot be used for the initial prescription or provision of a contraception method.</p>	<p>CPT: 58300, 58565, 58600, 58605 HCPCS: J7306, J7307 ICD-10-CM: Z30.2, Z30.014, Z30.433</p>

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Contraceptive Care for Postpartum Women Ages 15-44 (CCP) Administrative Measure ³	Women, 15 to 44 years of age, who had a live birth between 01/01/19 to 10/31/19 and were provided the following contraception in 2019: <ul style="list-style-type: none"> • A most or moderately effective contraceptive within 3 to 60 days of delivery. • A long-acting reversible contraceptive (LARC) within 3 to 60 days of delivery. 	Claims / encounter and pharmacy data to identify women with a live birth delivery who were dispensed contraceptive medication. Note: Contraceptive surveillance codes can be used to document repeat prescriptions of contraceptives, contraceptive maintenance, or routine checking of a contraceptive device or system; contraceptive surveillance codes cannot be used for the initial prescription or provision of a contraception method.	CPT: 58300, 58565, 58600, 58605 HPCPS: J7306, J7307 ICD-10-CM: Z30.2, Z30.014, Z30.433
Controlling Blood Pressure (CBP) Hybrid Measure ²	Adults, 18 to 85 years of age, with a diagnosis of hypertension that had adequately controlled blood pressure (<140/90 mm Hg) in 2019.	Claims / encounter data with codes indicating a hypertension diagnosis on two separate dates and clinic documentation of the most recent blood pressure (BP) reading in 2019. Note: The BP reading must occur on or after the date of the second diagnosis of hypertension.	CPT: 99201-99205, 99211-99215, 99304-99310, 93784-93788 CPT II: 3074F, 3075F, 3077F – 3080F ICD-10-CM: I10
Developmental Screening (DEV) Administrative Measure ³	Children who were screened for risk of developmental, behavioral, and social delays, using a standardized screening tool, on or before their first, second, or third birthday in 2019.	Claims / encounter data with a code indicating a developmental screening was completed using a standardized screening tool.	CPT: 96110

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Follow-Up Care for Children Prescribed ADHD Medications (ADD) Administrative Measure ³	Children, 6 to 12 years of age, who were newly prescribed ADHD medication between 03/01/18 to 02/28/19 and had at least three follow-up care visits during the following ten-month time period: <ul style="list-style-type: none"> Initial phase: Follow-up visit with a practitioner 30-days after first ADHD medication dispensed. Continuation and Maintenance Phase: Children who remained on the medication for at least 210 days and had at least two follow-up visits with a practitioner within 9 months after the Initiation Phase ended. 	Claims / encounter and pharmacy data to identify the following: <ul style="list-style-type: none"> Initial phase: An outpatient, intensive outpatient, observation visit, behavioral health assessment, a community health center visit, or partial hospitalization follow-up visit with a practitioner with prescribing authority within 30 days after the start date of the prescription. Continuation and Maintenance Phase: Members who were prescribed ADHD medication and filled the prescription who had two follow-up visits on different dates of service with any practitioner, from 31 – 300 days (9 months) after the dispensed date. 	CPT: 90832-90834, 98960-98962, 99217-99220, 99251-99255
HIV Viral Load Suppression (HVL) Administrative Measure ³	Adults, 18 years of age and older, with a diagnosis of Human Immunodeficiency Virus (HIV) whose last HIV viral load test in 2019 was < 200 copies/mL.	Claims / encounter and lab data with codes to identify members with a diagnosis of HIV and the results of their most recent viral load test in 2019.	CPT: 99201-99205, 99212-99215, 99241-99245, 33981-33985, 99391-99397 ICD-10-CM: B20, Z21 LOINC: 20447-9, 21333-0, 23876-6

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Immunizations for Adolescents (IMA) Hybrid Measure ²	Adolescents who received the following immunizations on or before their 13th birthday in 2019: <ul style="list-style-type: none"> • 1 MCV (between the 11th and 13th birthday). • 1 Tdap (between the 10th and 13th birthday). • HPV series (between the 9th and 13th birthday). 	Name of specific antigen or vaccine and date of immunization, or immunization record. All PCPs are required to enter vaccines into their local immunization registry. DHCS recommends entering information within 14 days of administering an immunization to ensure all historical vaccine doses are entered into the registry for children that have moved out of the area. http://cairweb.org/	CPT: Meningococcal: 90734 Tdap: 90715 HPV: 90649

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Prenatal and Postpartum Care Hybrid Measure ²	Women, with a live birth delivery between 10/08/18 to 10/07/19, who had prenatal and postpartum care within the following time periods: <ul style="list-style-type: none"> • A prenatal exam within the first trimester on or before the enrollment start date or within 42-days of enrollment in the health plan. • A postpartum exam within 7 to 84 days after delivery. 	Prenatal care visit date AND evidence of ONE of the following: <ul style="list-style-type: none"> • Physical obstetrical exam that includes auscultation for fetal heart tone. • Pelvic exam with obstetric observations. • Measurement of fundus height. • Evidence that a prenatal care procedure was performed, i.e. ultrasound, obstetric panel, or antibody tests. • Documentation of LMP or EDD in conjunction with either prenatal risk assessment or complete obstetrical history. Postpartum visit AND evidence of ONE of the following: <ul style="list-style-type: none"> • Pelvic exam. • Evaluation of weight, BP, breasts, and abdomen. • Notation of postpartum care (PP care, six-week check, or pre-printed postpartum care form). • Perineal or cesarean wound check. • Screening for mental health, tobacco use, substance use disorder. • Glucose screening for GDM women. • Family planning, resumption of intercourse. • Sleep / fatigue. • Resumption of physical activity and attainment of healthy weight. 	Prenatal: CPT: 99201-99205, 99241-99245, 59400, 59425, 59510, 99500 ICD-10-CM: 0009.0x
			Postpartum: CPT: 57170, 59400, 88141 ICD-10-CM: Z01.411, Z01.419, Z01.42

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<p>Screening for Depression and Follow-Up Plan: Ages 12 and Older (CDF)</p> <p>Administrative Measure³</p>	<p>Members, 12 years of age and older, who were screened for depression using an age appropriate standardized screening tool, and if positive, had a follow-up plan documented on the date of the positive screening.</p>	<p>Claims / encounter data with codes indicating a depression screening was completed and the outcome. For members with a positive depression screening, submit claims / encounter data with code indicating a follow-up plan is documented.</p> <p>For clinical records, indicate the date on which the test was performed, the standardized tool used, and evidence of a screening result or screening score. If positive depression screening, the follow-up treatment must include one or more of the following:</p> <ul style="list-style-type: none"> • Additional evaluation for depression. • Suicide risk assessment. • Referral to a practitioner who is qualified to diagnose and treat depression. • Pharmacological interventions. • Other interventions or follow-up for the diagnosis or treatment of depression. 	<p>CPT: 59400, 59510, 59610, 99201-99205</p> <p>HCPCS: G8431, G8510</p>
<p>Use of Opioids at High Dosage in Persons without Cancer (OHD)</p> <p>Administrative Measure³</p>	<p>Adults, 18 years of age and older, who received prescription opioids between 01/01/19 to 10/03/19, with an average daily dosage \geq 90 morphine milligram equivalents (MME) over a period of 90 days or more.</p>	<p>Claims / encounter and pharmacy claims with codes indicating the member was dispensed two or more prescriptions for any opioid medications with different dates of service with a cumulative day supply of 15 or more days during the measurement year.</p>	<p>NDC codes used to identify use of opioids.</p>

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Weight Assessment and Counseling for Nutrition and Physical Activity in Children and Adolescents (WCC - BMI) Hybrid Measure ²	Children and adolescents, 3 to 17 years of age, who had one or more outpatient visits with a PCP or OB/GYN in 2019 that included documentation of BMI percentile.	Height, weight and BMI percentile, all from the same data source. Either of the following meets criteria for BMI percentile: <ul style="list-style-type: none"> BMI percentile documented as a value (e.g., 85th percentile). BMI percentile plotted on an age-growth chart. Only evidence of the BMI percentile or BMI percentile plotted on an age-growth chart meets criteria.	CPT: 99201-99205, 99211-99215, 99241-99245 ICD-10-CM: Z68.51-Z68.54
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life (W34) Hybrid Measure ²	Children, 3 to 6 years of age, who had a well-child visit with a PCP in 2019.	Well-child visit with evidence of all of the following in 2019: <ul style="list-style-type: none"> Health history. Physical and mental developmental history. Physical exam. Health education / anticipatory guidance. 	CPT: 99381-99385, 99391-99395 ICD-10-CM: Z00.121, Z00.129, Z00.5, Z00.8
Well-Child Visits in the First 15 Months of Life (W15) Hybrid Measure ²	Children, 15 months of age in 2019, who had six or more well-child visits with a PCP during their first 15 months of life.	Well-child visit with evidence of all of the following in 2019: <ul style="list-style-type: none"> Health history. Physical and mental developmental history. Physical exam. Health education / anticipatory guidance. 	CPT: 99381-99385, 99391-99395 ICD-10-CM: Z00.110, Z00.111, Z00.121, Z00.129

¹ The 2020 Managed Care Accountability Set (MCAS) is a set of performance measures selected by the state Department of Health Care Services (DHCS) to monitor the performance of Medi-Cal managed care plans in California. The MCAS measures are based on the Centers for Medicare and Medicaid (CMS) Adult and Child Core Sets for Medicaid.

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The data collection methods define the types of data sources used to evaluate if services were performed.

Data Collection Method	Denominator Used to Calculate Rate	Sample Codes ⁴
Hybrid ²	A sample (usually 411) of the eligible population for the measure.	<ul style="list-style-type: none"> • Administrative data sources (e.g. claims, encounter, lab, radiology, pharmacy, immunization registries). • Medical record reviews (e.g. progress notes, immunization records).
Admin ³	The entire eligible population for the measure.	Administrative data sources (e.g. claims, encounter, lab, radiology, pharmacy, immunization registries).

⁴ This is a sample list of codes from each measure's technical specification guidelines and does not represent the complete list of codes used to evaluate compliance with the measure indicators.