



## 2025 Measurement Year

# MCAS MEASURE: ADULTS' ACCESS TO PREVENTIVE / AMBULATORY HEALTH SERVICES (AAP)

Measure Steward: National Committee for Quality Assurance (NCQA)

Gold Coast Health Plan's (GCHP) goal is to help its providers gain compliance with their annual Managed Care Accountability Set (MCAS) scores by providing guidance and resources. This tip sheet provides the key components to the MCAS measure, "Adults' Access to Preventive / Ambulatory Health Services (AAP)."

**Measure Description:** The percentage of members 20 years of age and older who had an ambulatory or preventive care visit within the measurement year.

The following are used to identify ambulatory or preventive care visits:

- ▶ Ambulatory Visits
- ▶ Telephone Visits
- ▶ Online Assessments

**Data Collection Method:** Administrative<sup>1</sup>

### AAP Clinical Code Set

- ▶ For billing, reimbursement, and reporting of services completed, submit claims timely with the appropriate codes for clinical services completed.

### Codes used to identify follow-up care during the Initiation Phase and Continuation / Management Phases.

| Description       | ICD-10-CM   | CPT  | HCPCS   | UBREV  |
|-------------------|---|--|---|--|
| Ambulatory Visits | Z00.00, Z00.01,<br>Z00.121, Z00.129,<br>Z00.3, Z00.5, Z00.8,<br>Z02.0, Z02.1, Z02.2,<br>Z02.3, Z02.4, Z02.5,<br>Z02.6, Z02.71, Z02.79,<br>Z02.81, Z02.82,<br>Z02.83, Z02.89, Z02.9,<br>Z76.1, Z76.2 | 92002, 92004, 92012, 92014, 98966,<br>98967, 98968, 98970, 98971, 98972,<br>98980, 98981, 99202, 99203, 99204,<br>99205, 99211, 99212, 99213, 99214,<br>99215, 99242, 99243, 99244, 99245,<br>99304, 99305, 99306, 99307, 99308,<br>99309, 99310, 99315, 99316, 99341,<br>99342, 99344, 99345, 99347, 99348,<br>99349, 99350, 99381, 99382, 99383,<br>99384, 99385, 99386, 99387, 99391,<br>99392, 99393, 99394, 99395, 99396,<br>99397, 99401, 99402, 99403, 99404,<br>99411, 99412, 99421, 99422, 99423,<br>99429, 99441, 99442, 99443, 99457,<br>99458, 99483 | G0071, G0402,<br>G0438, G0439,<br>G0463, G2010,<br>G2012, G2250,<br>G2251, G2252,<br>S0620, S0621,<br>T1015 | 0510, 0511, 0512, 0513, 0514,<br>0515, 0516, 0517, 0519, 0520,<br>0521, 0522, 0523, 0524, 0525,<br>0526, 0527, 0528, 0529, 0982,<br>0983 |

### Exclusion Criteria:

- ▶ Members in hospice or using hospice services anytime during the measurement year.
- ▶ Members who die anytime during the measurement year.

**Best Practices:**

- ▶ Use the Inovalon® Provider Enablement Quality Gaps Insights to identify members with gaps in care.
- ▶ Make outreach calls and/or send letters to advise members of the need for a preventive care visit.
- ▶ Use proper coding.
- ▶ Make sure clinic staff knows what preventive care visits are needed for members 20 years of age and older through staff discussions and standing orders.

<sup>1</sup> Measures reported using the administrative data collection method report on the entire eligible population and use only administrative data sources (e.g. claims, encounter, lab, immunization registries) to evaluate if services were performed.