

| Measure   | Description   | Required Documentation   | Sample Codes <sup>2</sup>   |
|---|---|--|---|
| Antidepressant Medication Management (AMM)  Administrative Measure <sup>4</sup> | Adults, 18 years of age and older, who had a diagnosis of major depression and were treated with antidepressants. Two rates are reported:  • 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 (six months).   | Claims or encounter data indicating the member had a diagnosis of depression and pharmacy data indicating antidepressant medication was dispensed.   | <b>CPT:</b> 99221-99223, 99304-99310, 99241-99245, 98966-98968 <b>ICD-10-CM:</b> F32.0-F32.4, F33.0-F33.3     |
| Asthma Medication Ratio (AMR)  Administrative Measure <sup>4</sup>              | Members, 5 to 64 years of age, who had persistent asthma and had a $\geq$ 0.50 ratio of controller medications to total asthma medications in 2021.   | Claims / encounter data indicating member had a diagnosis of asthma in 2020 or 2021 and pharmacy data indicating asthma medication was dispensed.  | <b>CPT:</b> 99201-99205, 99241-99245<br><b>ICD-10-CM:</b> J45.21-J45.22, J45.30-J45.32                        |
| Breast Cancer Screening (BCS)  Administrative Measure <sup>4</sup>              | Women, 50 to 74 years of age, who had a mammogram to screen for breast cancer between Oct. 1, 2019 and Dec. 31, 2021.   | Claims / encounter data indicating one of the following types of mammograms was performed: screening, diagnostic, film, digital or digital breast tomosynthesis.  Note: MRIs, ultrasounds and biopsies do not count as screening mammograms. | <b>CPT:</b> 77061-77063, 77065-77067 <b>HCPCS:</b> G0202, G0204   |
| Cervical Cancer Screening (CCS)  Hybrid Measure <sup>3</sup>                    | <ul> <li>Women, 21 to 64 years of age, who were screened for cervical cancer using one of the following methods:</li> <li>Women 21 to 64 years of age who had a Pap exam between Jan. 1, 2019 to Dec. 31, 2021.</li> <li>Women 30 to 64 years of age who had a cervical high-risk human papillomavirus (hrHPV) test between Jan. 1, 2017 to Dec. 31, 2021.</li> <li>Women 30 to 64 years of age, who had a Pap/hrH-PV co-test between Jan. 1, 2017 to Dec. 31, 2021.</li> </ul> | Claims / encounter or lab data indicating a cervical cancer screening was completed or clinical documentation or lab reports that includes the following:  The date of the cervical cancer screening.  The result or finding.                | CPT: Pap Test: 88141-88143, 88147-88148, 88150, 88152-88154, 88164-88167, 88174-88175  HPV Test: 87624, 87625 |



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| Child and Adolescent Well-Care Visits (WCV)  Administrative Measure <sup>4</sup>              | Children and adolescents, 3 to 21 years of age, who had at least one comprehensive well-care exam with a PCP or OB/GYN in 2021.   | Claims / encounter data indicating the member had a well-care exam in 2021.   | <b>CPT:</b> 99381-99385, 99391-99395, 99461 <b>ICD-10-CM:</b> Z00.00, Z00.110, Z00.111, Z00.121   |
| Childhood Immunization Status<br>(CIS) Combo 10<br>Hybrid Measure <sup>3</sup>                | Children who received the following immunizations on or before their second birthday in 2021:  4 DTaP  1 Hep A  4 PCV  2 Influenza (Flu)  3 Hib  1 MMR  3 IPV  1 VZV  RV (two 2-dose or three 3-dose) | Claims / encounter data with codes indicating the vaccine and dose administered or clinical documentation and/or immunization records documenting the vaccine, dose and date administered.  Note: All PCPs are required to enter vaccines into the California Immunization Registry (CAIR). DHCS recommends entering information within 14 days of administering an immunization to ensure all historical vaccines and doses are entered into the registry for children that have moved out of the area. https://cairweb.org/ | CPT: DTaP: 90698, 90700 Hep B: 90723, 90740 Hep A: 90633 IPV: 90698, 90713 Flu: 90655, 90657 MMR: 90707, 90710 PCV: 90670 RV: 90680, 90681 VZV: 90710, 90716 HiB: 90644,90648 |
| Chlamydia Screening in Women (CHL)  Administrative Measure <sup>4</sup>                       | Women, 16 to 24 years of age, who were identified as sexually active and had at least one test for chlamydia in 2021.   | Claims / encounter data, pharmacy data and labs to identify members who are sexually active and/ or dispensed contraceptives and had at least one chlamydia test.   | <b>CPT:</b> 87110, 87270, 87320, 87490-87492, 87810   |
| Comprehensive Diabetes Care  – HbA1c Uncontrolled > 9.0 (CDC-H9)  Hybrid Measure <sup>3</sup> | Adults, 18 to 75 years of age, with a diagnosis of diabetes (type 1 and type 2) who had the following screening in 2021:  HbA1c results for Poor Control (>9.0%)                                      | Claims / encounter and lab data with codes reporting HbA1c results or clinical documentation of HbA1c test date with results.   | <b>CPT II:</b> 3044F, 3046F, 3051F, 3052F   |
| Concurrent Use of Opioids and<br>Benzodiazepines (COB)<br>Administrative Measure <sup>4</sup> | Adults, 18 years of age and older, with concurrent use of prescription opioids and benzodiazepines between Jan. 1, 2021 and Dec. 2, 2021.   | Claim / encounter and pharmacy data with NDC 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.   | NDC:<br>Benzodiazepines:<br>00615800039, 00054318544<br>Opioids: 00023601001,<br>00023600201  |



| Measure  | Description  | Required Documentation   | Sample Codes <sup>2</sup>   |
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| Contraceptive Care for All Women<br>Ages 15-44 (CCW)<br>Administrative Measure <sup>4</sup>                                | Women, 15 to 44 years of age, at risk of unintended pregnancy, who were provided the following contraceptive care in 2021:  • A most or moderately effective contraception.  • A long-acting reversible contraception (LARC).  | Claims / encounter and pharmacy data with codes to identify women who were dispensed contraceptive medication.   | <b>CPT:</b> 58300, 58565, 58600, 58605<br><b>HCPCS:</b> J7306, J7307<br><b>ICD-10-CM:</b> Z30.2, Z30.014, Z30.433<br><b>NDC:</b> 66116043628, 00023585801 |
| Contraceptive Care for<br>Postpartum Women Ages 15-44<br>(CCP)  Administrative Measure <sup>4</sup>                        | <ul> <li>Women, 15 to 44 years of age, who had a live birth between Jan. 1, 2021 to Oct. 31, 2021 and were provided the following contraception in 2021:</li> <li>A most or moderately effective contraceptive within three to 60 days of delivery.</li> <li>A long-acting reversible contraceptive (LARC) within three to 60 days of delivery.</li> </ul> | Claims / encounter and pharmacy data to identify women with a live birth delivery who were dispensed contraceptive medication.   | <b>CPT:</b> 58300, 58565, 58600, 58605<br><b>HCPCS:</b> J7306, J7307<br><b>ICD-10-CM:</b> Z30.2, Z30.014, Z30.433<br><b>NDC:</b> 66116043628, 00023585801 |
| Controlling Blood Pressure (CBP)  Hybrid Measure <sup>3</sup>  | Adults, 18 to 85 years of age, with a diagnosis of hypertension that had adequately controlled blood pressure (<140/90 mm Hg) in 2021.   | Claims / encounter data with codes indicating a hypertension diagnosis on two separate dates between Jan. 1, 2020 to June 30, 2021 and claims / encounter or clinic documentation of the most recent blood pressure (BP) reading in 2021.  Note: The BP reading must occur on or after the date of the second diagnosis of hypertension. | <b>CPT:</b> 93784, 93788, 98969-98972, 99201-99205, 99211-99215, 99304-99310, <b>CPT II:</b> 3074F, 3075F, 3077F – 3080F <b>ICD-10-CM:</b> I10            |
| Developmental Screening (DEV)  Administrative Measure <sup>4</sup>   | Children, 1 to 3 years of age, 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 2021.   | Claims / encounter data with a code indicating a developmental screening was completed using a standardized screening tool.  | <b>CPT:</b> 96110   |
| Diabetes Screening for People<br>with Schizophrenia or Bipolar<br>Disorder Who Are Using<br>Antipsychotic Medication (SSD) | Adults, 18 to 64 years of age, diagnosed with schizophrenia, schizoaffective disorder or bipolar disorder who were dispensed an antipsychotic medication and had a glucose or HbA1c test in 2021 to screen for diabetes.   | Claims / encounter, pharmacy and lab data indicating the member was dispensed antipsychotic medication and had a diabetes screening test (glucose or HbA1c test).  | ICD-10-CM: F20.0, F30.10<br>CPT:<br>Glucose Test: 80047, 80048<br>HbA1c Test: 83036, 83037  |



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| Follow-Up After Emergency Department Visit for Alcohol and Other drug Abuse or Dependence (FUA)  New Measure for 2022 Administrative Measure <sup>4</sup> | Members, 13 years of age and older, who had an emergency department (ED) visit between Jan. 1, 2021 and Dec. 1, 2021 with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence and had two follow-up visits with a principal diagnosis of AOD within seven and 30 days after the ED visit.   | Claims / encounter data indicating the member had a principal diagnosis of AOD in the ED and in the two follow-up visits within seven and 30 days of the ED visit.   | ICD-10-CM: F10.10, F15.20,<br>F19.29<br>CPT: 90791, 98971, 99217,<br>99281, 99510   |
| Follow-Up After Emergency<br>Department Visit for Mental<br>Illness (FUM)<br>New Measure for 2022<br>Administrative Measure <sup>4</sup>                  | Members, 16 years of age and older, who had an emergency department (ED) visit between Jan. 1, 2021 and Dec. 1, 2021 with a principal diagnosis of mental illness or intentional self-harm and had two follow-up visits with a principal diagnosis of mental illness or intentional self-harm within seven and 30 days after the ED visit.   | Claims / encounter data indicating the member had a principal diagnosis of mental illness or intentional self-harm in the ED and in the two follow-up visits within seven and 30 days of the ED visit.   | ICD-10-CM: F20.0, F32.1,<br>F93.0, T14.91XA, T40.7X2A,<br>T53.5X2A, T71.112A<br>CPT: 90791, 98960, 98966,<br>99245, 99281 |
| Follow-Up Care for Children Prescribed ADHD Medications (ADD) Administrative Measure <sup>4</sup>   | <ul> <li>Children, 6 to 12 years of age, who were newly prescribed ADHD medication between Mar. 1, 2020 to Feb. 28, 2021 and had at least three follow-up care visits during the following 10-month time period: <ul> <li>Initial phase: One follow-up visit with a prescribing practitioner 30 days after first ADHD medication is dispensed.</li> <li>Continuation and Maintenance Phase: The rate of children who completed an Initiation Phase visit, remained on the medication for at least 210 days and had at least two follow-up visits with a practitioner within nine months after the Initiation Phase ended.</li> </ul> </li> </ul> | Claims / encounter and pharmacy data to identify the following:  Initial Phase: Members dispensed ADHD medication and had a follow-up visit with a prescribing provider within 30 days of dispensing date.  Continuation and Maintenance Phase: Members who remained on ADHD medication for 210 days and had at least two follow-up visits on different dates of service with any practitioner, within nine months (31 – 300 days) after the dispensed date. | <b>CPT:</b> 90832-90834, 98960-98962, 99217-99220, 99251-99255  |



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|---|---|--|---|
| Immunizations for Adolescents<br>(IMA)<br>Administrative Measure <sup>4</sup>                     | Adolescents who received the following immunizations on or before their 13th birthday in 2021:  1 MCV (between the 11th and 13th birthday)  1 Tdap (between the 10th and 13th birthday)  HPV series (between the 9th and 13th birthday)                         | Claims / encounter data with codes indicating the vaccine and dose administered or clinical documentation and/or immunization records documenting the vaccine, dose and date administered.   | CPT:<br>Meningococcal: 90734<br>Tdap: 90715<br>HPV: 90649                   |
|   |   | Note: All PCPs are required to enter vaccines into the California Immunization Registry (CAIR). DHCS recommends entering information within 14 days of administering an immunization to ensure all historical vaccines and doses are entered into the registry for children that have moved out of the area. <a href="https://cairweb.org/">https://cairweb.org/</a> |   |
| Metabolic Monitoring for Children<br>and Adolescents (APM)<br>Administrative Measure <sup>4</sup> | Children and adolescents, 1 to 17 years of age, who had two or more antipsychotic prescriptions and had metabolic testing in 2021. Three rates are reported:  Rate of blood glucose testing  Rate of cholesterol testing  Rate of blood and cholesterol testing | Claims / encounter, pharmacy and lab data indicating the member was dispensed antipsychotic medication and had the following tests:  Blood glucose Cholesterol   | CPT:<br>Cholesterol Test: 82465<br>LDL-C Test: 80061<br>Glucose Test: 80047 |



| Measure   | Description  | Required Documentation   | Sample Codes <sup>2</sup>  |
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| Prenatal and Postpartum Care (PPC)  Hybrid Measure <sup>3</sup> | Women, with a live birth delivery between Oct. 8, 2020 to Oct. 7, 2021, who had prenatal and postpartum care within the following time periods:  • 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 seven to 84 days after delivery. | Prenatal Exam: Claims / encounter data indicating a prenatal exam was completed or clinical documentation with the date of a prenatal care visit AND evidence of ONE of the following:  Physical obstetrical exam that includes auscultation for fetal heart tone or fundus height or pelvic exam with obstetric observations.  Evidence that a prenatal care procedure was performed, i.e., ultrasound, obstetric panel, or TORCH antibody panel.  Documentation of pregnancy or reference to pregnancy, i.e., LMP or EDD, prenatal risk assessment or complete obstetrical history.  Postpartum Exam: Claims / encounter data indicating a postpartum exam was completed or clinical documentation with the date of a postpartum visit AND evidence of ONE of the following:  Pelvic exam  Evaluation of weight, BP, breasts, and abdomen  Notation of postpartum care (PP care, sixweek check, or pre-printed postpartum care form)  Perineal or cesarean wound check  Screening for depression, tobacco use, substance use disorder  Glucose screening for GDM women  Family planning, resumption of intercourse  Infant care or breastfeeding | Prenatal: CPT: 99201-99205, 99241- 99245, 59400, 59425, 59510, 99500 ICD-10-CM: 009.0x  Postpartum: CPT: 57170, 59400, 88141 ICD-10-CM: Z01.411, Z01.419, Z01.42 |



| Measure   | Description  | Required Documentation  | Sample Codes <sup>2</sup>  |
|---|--|---|--|
| Screening for Depression and Follow-Up Plan: Ages 12 and Older (CDF)  Administrative Measure <sup>4</sup>                           | 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.                             | Claims / encounter data with codes indicating a depression screening was completed and the outcome; positive and a follow-up plan is documented or negative and a follow-up plan is not required.   | <b>CPT:</b> 59400, 59510, 59610, 99201-99205 <b>HCPCS:</b> G8431, G8510  |
| Use of Opioids at High Dosage in Persons without Cancer (OHD)  Administrative Measure <sup>4</sup>                                  | Adults, 18 years of age and older, who received prescription opioids between Jan. 1, 2021 to Oct. 3, 2021, with an average daily dosage ≥ 90 morphine milligram equivalents (MME) over a period of 90 days or more.                            | 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.   | NDC Codes:<br>Opioids: 00023601001,<br>00023600201   |
| Weight Assessment and Counseling for Nutrition and Physical Activity in Children and Adolescents (WCC)  Hybrid Measure <sup>3</sup> | Children and adolescents, 3 to 17 years of age, who had one or more outpatient visits with a PCP or OB/GYN in 2021 that included all of the following assessments:  BMI percentile  Counseling for nutrition  Counseling for physical activity | Claims / encounter data with separate codes for BMI, nutrition and physical activity assessments or the following dated clinical documentation:  BMI assessment: i.e., documentation of height, weight and BMI percentile or BMI percentile plotted on a growth chart.  Counseling for nutrition: i.e., current nutrition behaviors, referral for nutritional education, anticipatory guidance, or weight or obesity counseling.  Counseling for physical activity: i.e., documentation of physical activity behaviors, referrals for physical activity, anticipatory guidance. | OP Visit: CPT: 99201-99205, 99211- 99215, 99241-99245  BMI: ICD-10-CM: Z68.51-Z68.54  Nutrition Counseling: ICD-10-CM: Z71.3 CPT: 97802 HCPCS: G0270  Physical Activity Counseling: ICD-10-CM: Z02.5, Z71.82 HCPCS: G0477, S9451 |



| Measure  | Description  | Required Documentation  | Sample Codes <sup>2</sup>  |
|--|--|---|--|
| Well-Child Visits in the First 30<br>Months of Life (W30)<br>Administrative Measure <sup>4</sup> | Children who had the following number of well-child visits with a PCP during the last 15 months:  Children who turned 15 months old in 2021 and had six or more well-child visits.  Children who turned 30 months old in 2021 and had two or more well-child visits. | Claims / encounter data indicating a well-care exam were completed in 2021. | <b>CPT:</b> 99381-99385, 99391-99395<br><b>ICD-10-CM:</b> Z00.110, Z00.111, Z00.121, Z00.129 |

<sup>&</sup>lt;sup>1</sup> The 2021 measurement year / 2022 reporting year 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 health plans in California. The MCAS measures are based on the Centers for Medicaid (CMS) Adult and Child Core Sets for Medicaid.

### The data collection methods defines the types of data sources used to evaluate if services were performed and report rates.

| Data Collection Method      | Denominator Used to Calculate Rate                                 | Data Sources Used to Evaluate if Services Were Performed  |
|-----------------------------|--|---|
| Hybrid <sup>3</sup>         | A sample (usually 411) of the eligible population for the measure. | <ul> <li>Administrative data sources (e.g., claims, encounter, lab, radiology, pharmacy, immunization registries)</li> <li>Medical Record Reviews (e.g., progress notes, immunization records)</li> </ul> |
| Administrative <sup>4</sup> | The entire eligible population for the measure.                    | Administrative data sources (e.g., claims, encounter, lab, radiology, pharmacy, immunization registries)  |

<sup>&</sup>lt;sup>2</sup> 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.