## 2021 MANAGED CARE ACCOUNTABILITY SET (MCAS) QUICK REFERENCE GUIDE

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</table>
| Antidepressant Medication Management (AMM) | 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. | CPT: 99221-99223, 99304-99310, 99241-99245, 98966-98968  
ICD-10-CM: F32.0-F32.4, F33.0-F33.3 |
| Asthma Medication Ratio (AMR)            | 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 2020. | Claims / encounter data indicating member had a diagnosis of asthma in 2019 or 2020 and pharmacy data indicating asthma medication was dispensed. | CPT: 99201-99205, 99241-99245  
ICD-10-CM: J45.21-J45.22, J45.30-J45.32 |
| Breast Cancer Screening (BCS)            | Women, 50 to 74 years of age, who had a mammogram to screen for breast cancer between Oct. 1, 2018 and Dec. 31, 2020. | 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. | CPT: 77055-77057, 77061-77063, 77065-77067 |
| Cervical Cancer Screening (CCS)          | Women, 21 to 64 years of age, who were screened for cervical cancer using one of the following methods:  
- Women 21 to 64 years of age who had a Pap exam between Jan. 1, 2018 to Dec. 31, 2020.  
- Women 30 to 64 years of age who had a cervical high-risk human papillomavirus (hrHPV) test between Jan. 1, 2016 to Dec. 31, 2020.  
- Women 30 to 64 years of age, who had a Pap/hrHPV co-test between Jan. 1, 2016 to Dec. 31, 2020. | 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: 87620-87622, 87624, 87625 |
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| Child and Adolescent Well-Care Visits (WCV) | 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 2020. | Claims / encounter data indicating the member had a well-care exam in 2020. | **CPT:** 99381-99385, 99391-99395, 99461  
**ICD-10-CM:** Z00.0x, Z00.100, Z00.111, Z00.121 |
| **New Measure for 2021** Administrative Measure\(^4\) | Children who received the following immunizations on or before their second birthday in 2020:  
- 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) | 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/](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 |
| Childhood Immunization Status (CIS) Combo 10 Hybrid Measure\(^3\) | Women, 16 to 24 years of age, who were identified as sexually active and had at least one test for chlamydia in 2020. | 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. | **CPT:** 87110, 87270, 87320, 87490-87492, 87810  
87490-87492, 87810 |
| Chlamydia Screening in Women (CHL) Administrative Measure\(^4\) | Adults, 18 to 75 years of age, with a diagnosis of diabetes (type 1 and type 2) who had the following screening in 2020:  
- 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.  
**Note:** A distinct numeric value is required to report HbA1c results. Ranges or thresholds do not meet criteria for this measure. | **CPT II:** 3044F, 3046F, 3051F, 3052F |
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<tr>
<td>Concurrent Use of Opioids and Benzodiazepines (COB)</td>
<td>Adults, 18 years of age and older, with concurrent use of prescription opioids and benzodiazepines between Jan. 1, 2020 and Dec. 2, 2020.</td>
<td>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.</td>
<td>Click here for the list of NDC codes used to identify opioid and benzodiazepine prescriptions.</td>
</tr>
</tbody>
</table>
| Contraceptive Care for All Women Ages 15-44 (CCW)  | Women, 15 to 44 years of age, at risk of unintended pregnancy, who were provided the following contraceptive care in 2020:  
- 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.                                                                                                                         | CPT: 58300, 58565, 58600, 58605  
HCPCS: J7306, J7307  
| Contraceptive Care for Postpartum Women Ages 15-44 (CCP) | Women, 15 to 44 years of age, who had a live birth between Jan. 1, 2020 to Oct. 31, 2020 and were provided the following contraception in 2020:  
- A most or moderately effective contraceptive within three to 60 days of delivery.  
- A long-acting reversible contraception (LARC) within three to 60 days of delivery. | Claims / encounter and pharmacy data to identify women with a live birth delivery who were dispensed contraceptive medication.                                                                                   | CPT: 58300, 58565, 58600, 58605  
HCPCS: J7306, J7307  
| Controlling Blood Pressure (CBP)                   | Adults, 18 to 85 years of age, with a diagnosis of hypertension that had adequately controlled blood pressure (<140/90 mm Hg) in 2020. | Claims / encounter data with codes indicating a hypertension diagnosis on two separate dates between Jan. 1, 2019 to June 30, 2020 and claims / encounter or clinic documentation of the most recent blood pressure (BP) reading in 2020.  
Note: The BP reading must occur on or after the date of the second diagnosis of hypertension. | CPT: 93784, 93788, 98969-98972, 99201-99205, 99211-99215, 99304-99310  
CPT II: 3074F, 3075F, 3077F – 3080F  
ICD-10-CM: I10 |
<p>| Developmental Screening (DEV)                     | 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 2020. | Claims / encounter data with a code indicating a developmental screening was completed using a standardized screening tool.                                                                                       | CPT: 96110 |</p>
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<td>Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD)</td>
<td>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 2020 to screen for diabetes.</td>
<td>Claims / encounter, pharmacy and lab data indicating the member was dispensed antipsychotic medication and had a diabetes screening test (glucose or HbA1c test).</td>
<td>ICD-10-CM: F20.0, F30.10 CPT: Glucose Test: 80047 HbA1c Test: 83036</td>
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<tr>
<td>New Measure for 2021 Administrative Measure</td>
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<td>Follow-Up Care for Children Prescribed ADHD Medications (ADD)</td>
<td>Children, 6 to 12 years of age, who were newly prescribed ADHD medication between Mar. 1, 2019 to Feb. 29, 2020 and had at least three follow-up care visits during the following 10-month time period: • Initial phase: One follow-up visit with a prescribing practitioner 30 days after first ADHD medication is dispensed. • 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.</td>
<td>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.</td>
<td>CPT: 90832-90834, 98960-98962, 99217-99220, 99251-99255</td>
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<td><strong>Immunizations for Adolescents (IMA)</strong>&lt;br&gt;Administrative Measure(^3)</td>
<td>Adolescents who received the following immunizations on or before their 13(^{th}) birthday in 2020:&lt;br&gt;• 1 MCV (between the 11(^{th}) and 13(^{th}) birthday)&lt;br&gt;• 1 Tdap (between the 10(^{th}) and 13(^{th}) birthday)&lt;br&gt;• HPV series (between the 9(^{th}) and 13(^{th}) birthday)</td>
<td>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. &lt;br&gt;<strong>Note:</strong> 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></td>
<td>CPT:&lt;br&gt;Meningococcal: 90734&lt;br&gt;Tdap: 90715&lt;br&gt;HPV: 90649</td>
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<tr>
<td><strong>Metabolic Monitoring for Children and Adolescents (APM)</strong>&lt;br&gt;<em>New Measure for 2021</em>&lt;br&gt;Administrative Measure(^3)</td>
<td>Children and adolescents, 1 to 17 years of age, who had two or more antipsychotic prescriptions and had metabolic testing in 2020. Three rates are reported:&lt;br&gt;• Rate of blood glucose testing&lt;br&gt;• Rate of cholesterol testing&lt;br&gt;• Rate of blood and cholesterol testing</td>
<td>Claims / encounter, pharmacy and lab data indicating the member was dispensed antipsychotic medication and had the following tests:&lt;br&gt;• Blood glucose&lt;br&gt;• Cholesterol</td>
<td>CPT:&lt;br&gt;Cholesterol Test: 82465&lt;br&gt;LDL-C Test: 80061&lt;br&gt;Glucose Test: 80047</td>
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| Prenatal and Postpartum Care (PPC) Hybrid Measure¹ | Women, with a live birth delivery between Oct. 8, 2019 to Oct. 7, 2020, 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, six-week 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, 99510, 99500  
ICD-10-CM: O09.0x  
**Postpartum:**  
CPT: 57170, 59400, 88141  
ICD-10-CM: Z01.411, Z01.419, Z01.42 |
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| Screening for Depression and Follow-Up Plan: Ages 12 and Older (CDF) | 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. | CPT: 59400, 59510, 59610, 99201-99205  
HCPCS: G8431, G8510 |
| Use of Opioids at High Dosage in Persons without Cancer (OHD) | Adults, 18 years of age and older, who received prescription opioids between Jan. 1, 2020 to Oct. 3, 2020, 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. | Click here for a list of NDC codes used to identify opioid prescriptions. |
| Weight Assessment and Counseling for Nutrition and Physical Activity in Children and Adolescents (WCC) | Children and adolescents, 3 to 17 years of age, who had one or more outpatient visits with a PCP or OB/GYN in 2020 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  
Physical Activity Counseling:  
ICD-10-CM: Z02.5, Z71.82 |
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| Well-Child Visits in the First 30 Months of Life (W30) | 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 2020 and had six or more well-child visits.  
• Children who turned 30 months old in 2020 and had two or more well-child visits. | Claims / encounter data indicating a well-care exam were completed in 2020. | CPT: 99381-99385, 99391-99395  
ICD-10-CM: Z00.110, Z00.111, Z00.121, Z00.129 |
| New Measure for 2021 Administrative Measure⁴ | | | |

¹ The 2021 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 Medicare and Medicaid (CMS) Adult and Child Core Sets for Medicaid.

² 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.

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

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<tr>
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<th>Denominator Used to Calculate Rate</th>
<th>Data Sources Used to Evaluate if Services Were Performed</th>
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</table>
| Hybrid³               | A sample (usually 411) of the eligible population for the measure. | • Administrative data sources (e.g., claims, encounter, lab, radiology, pharmacy, immunization registries)  
• Medical Record Reviews (e.g., progress notes, immunization records) |
| Administrative⁴       | The entire eligible population for the measure. | Administrative data sources (e.g., claims, encounter, lab, radiology, pharmacy, immunization registries) |