

2026 Measurement Year

MCAS MEASURE: FOLLOW-UP AFTER ACUTE AND URGENT CARE VISITS FOR ASTHMA (AAF-E)

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, “*Follow-Up After Acute and Urgent Care Visits for Asthma (AAF-E)*.”

Measure Description: *This measures the percentage of members 5 to 64 years of age with an urgent care visit, acute inpatient discharge, observation stay discharge or emergency department (ED) visit with a diagnosis of asthma between Jan. 1 and Dec. 1 of the measurement period that had a corresponding outpatient follow-up visit with a diagnosis of asthma within 30 days.*

Data Collection Method: Administrative¹

AAF-E Clinical Code Sets

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

Codes to identify members with a diagnosis of asthma during an urgent care visit, acute inpatient discharge, observation stay discharge or ED visit.

Setting	ICD-10-CM	CPT	HCPCS	UBREV
Urgent Care (Outpatient and Telehealth)	J45.20, J45.21, J45.22, J45.30, J45.31, J45.32, J45.40, J45.41, J45.42, J45.50, J45.51, J45.52, J45.901, J45.902, J45.909, J45.990, J45.991, J45.998	98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016, 98966, 98967, 98968, 98970, 98971, 98972, 98980, 98981, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99421, 99422, 99423, 99429, 99441, 99442, 99443, 99455, 99456, 99457, 99458, 99483	G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2250, G2251, G2252, T1015	0510, 0511, 0513, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0982, 0983
Emergency Department		99281, 99282, 99283, 99284, 99285		0450, 0451, 0452, 0456, 0459, 0981
Acute Inpatient				0100, 0101, 0110, 0111, 0112, 0113, 0114, 0116, 0117, 0118, 0119, 0120, 0121, 0122, 0123, 0124, 0126, 0127, 0128, 0129, 0130, 0131, 0132, 0133, 0134, 0136, 0137, 0138, 0139, 0140, 0141, 0142, 0143, 0144, 0146, 0147, 0148, 0149, 0150, 0151, 0152, 0153, 0154, 0156, 0157, 0158, 0159, 0160, 0164, 0167, 0169, 0170, 0171, 0172, 0173, 0174, 0179, 0190, 0191, 0192, 0193, 0194, 0199, 0200, 0201, 0202, 0203, 0204, 0206, 0207, 0208, 0209, 0210, 0211, 0212, 0213, 0214, 0219, 1000, 1001, 1002
Observation Stay				0760, 0762, 0769

Codes to identify follow-up care within 30 days in an outpatient visit, telephone visit, e-visit or virtual check-in with a diagnosis of asthma.

Note: Cannot include visits that occur on the same day as the acute asthma episode.

Setting	ICD-10-CM	CPT	HCPCS	UBREV
Outpatient and Telehealth	J45.20, J45.21, J45.22, J45.30, J45.31, J45.32, J45.40, J45.41, J45.42, J45.50, J45.51, J45.52, J45.901, J45.902, J45.909, J45.990, J45.991, J45.998	98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016, 98966, 98967, 98968, 98970, 98971, 98972, 98980, 98981, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99421, 99422, 99423, 99429, 99441, 99442, 99443, 99455, 99456, 99457, 99458, 99483	G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2250, G2251, G2252, T1015	0510, 0511, 0513, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0982, 0983

Exclusionary Criteria – Members with any of the following conditions are excluded from the AAF-E measure:

- ▶ Members in hospice or using hospice services anytime during the measurement year.
- ▶ Members who die anytime during the measurement year
- ▶ Member with a diagnosis of cystic fibrosis anytime during the member’s history through the measurement period.

Best Practices:

- ▶ Streamline transfer of patient information among urgent care, ED, and hospitals by sharing patient information electronically, such as through Health Information Exchanges.
- ▶ Establish clinic protocols for clinic staff to scheduled visits and prepare necessary documentation such as discharge summaries and medication lists.
- ▶ Offer flexible scheduling and appointment options, such a telehealth, to increase access to care and make it easier for members to attend their appointments.
- ▶ Utilize automated appointments reminders to reduce no-shows.
- ▶ Document and code for all clinical conditions evaluated and services completed and submit claims timely.
- ▶ Ensure your documentation is clear and concise.
- ▶ Use proper coding.

¹ 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.