



# Medi-Cal Managed Care Accountability Set (MCAS) For Health Care Delivery Systems

Updated November 2024

## Measurement Year 2025 | Reporting Year 2026

Total Number of Measures = 31 (15 Administrative,  
6 Hybrid/Administrative, and 10 ECDS)  
MPL means Minimum Performance Level

#	MEASURE REQUIRED OF MCP	MEASURE ACRONYM	MEASURE STEWARD	MEASURE TYPE METHODOLOGY	HELD TO MPL <sup>i</sup>
Behavioral Health Domain Measures					
1	Follow-Up After ED Visit for Mental Illness—30 days <sup>*iv</sup>	FUM	NCQA	Administrative	Yes
2	Follow-Up After ED Visit for Substance Use—30 days <sup>*</sup>	FUA	NCQA	Administrative	Yes

#	MEASURE REQUIRED OF MCP	MEASURE ACRONYM	MEASURE STEWARD	MEASURE TYPE METHODOLOGY	HELD TO MPL <sup>i</sup>
<b>Children's Health Domain Measures</b>					
3	Child and Adolescent Well-Care Visits <sup>*</sup>	WCV	NCQA	Administrative	Yes
4	Childhood Immunization Status—Combination 10 <sup>*</sup>	CIS-10-E	NCQA	ECDS	Yes
5	Developmental Screening in the First Three Years of Life	DEV-CH	CMS	Hybrid/Admin	Yes <sup>iii</sup>
6	Immunizations for Adolescents—Combination 2 <sup>*</sup>	IMA-2-E	NCQA	ECDS	Yes
7	Lead Screening in Children	LSC	NCQA	Hybrid/Admin <sup>**</sup>	Yes
8	Topical Fluoride for Children	TFL-CH	DQA	Administrative	Yes <sup>iii</sup>
9	Well-Child Visits in the First 30 Months of Life—0 to 15 Months—Six or More Well-Child Visits <sup>*</sup>	W30-6+	NCQA	Administrative	Yes
10	Well-Child Visits in the First 30 Months of Life—15 to 30 Months—Two or More Well-Child Visits <sup>*</sup>	W30-2+	NCQA	Administrative	Yes
<b>Chronic Disease Management Domain Measures</b>					
11	Asthma Medication Ratio <sup>*</sup>	AMR	NCQA	Administrative	Yes
12	Controlling High Blood Pressure <sup>*,iv</sup>	CBP	NCQA	Hybrid/Admin <sup>**</sup>	Yes
13	Glycemic Status Assessment for Patients With Diabetes (>9%) <sup>*,iv</sup>	GSD	NCQA	Hybrid/Admin <sup>**</sup>	Yes

#	MEASURE REQUIRED OF MCP	MEASURE ACRONYM	MEASURE STEWARD	MEASURE TYPE METHODOLOGY	HELD TO MPL <sup>i</sup>
<b>Reproductive Health Domain Measures</b>					
14	Chlamydia Screening	CHL	NCQA	Administrative	Yes
15	Prenatal and Postpartum Care: Postpartum Care*	PPC-Pst	NCQA	Hybrid/Admin**	Yes
16	Prenatal and Postpartum Care: Timeliness of Prenatal Care*	PPC-Pre	NCQA	Hybrid/Admin**	Yes
<b>Cancer Prevention Domain Measures</b>					
17	Breast Cancer Screening <sup>*,ii</sup>	BCS-E	NCQA	ECDS	Yes
18	Cervical Cancer Screening	CCS-E	NCQA	ECDS	Yes
<b>Report Only Measures to DHCS</b>					
19	Adults' Access to Preventive/Ambulatory Health Services <sup>ii</sup>	AAP	NCQA	Administrative	No
20	Colorectal Cancer Screening*	COL-E	NCQA	ECDS	No <sup>^^</sup>
21	Depression Remission or Response for Adolescents and Adults	DRR-E	NCQA	ECDS	No <sup>^^</sup>
22	Depression Screening and Follow-Up for Adolescents and Adults*	DSF-E	NCQA	ECDS	No <sup>^^</sup>
23	Low-Risk Cesarean Delivery*	LRCD	CMS	Administrative	No <sup>iii</sup>

#	MEASURE REQUIRED OF MCP	MEASURE ACRONYM	MEASURE STEWARD	MEASURE TYPE METHODOLOGY	HELD TO MPL <sup>i</sup>
24	Pharmacotherapy for Opioid Use Disorder <sup>*</sup>	POD	NCQA	Administrative	No <sup>^^</sup>
25	Plan All-Cause Readmissions <sup>*,ii,iv</sup>	PCR	NCQA	Administrative	No
26	Postpartum Depression Screening and Follow Up	PDS-E	NCQA	ECDS	No <sup>^^</sup>
27	Prenatal Depression Screening and Follow Up	PND-E	NCQA	ECDS	No <sup>^^</sup>
28	Prenatal Immunization Status	PRS-E	NCQA	ECDS	No <sup>^^</sup>
<b>LTC Report Only Measures to DHCS</b>					
29	Number of Out-patient ED Visits per 1,000 Long Stay Resident Days <sup>*</sup>	HFS	CMS <sup>#</sup>	Administrative <sup>^</sup>	No
30	Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization <sup>*</sup>	SNF HAI	CMS <sup>#</sup>	Administrative <sup>^</sup>	No
31	Potentially Preventable 30-day Post-Discharge Readmission <sup>*</sup>	PPR	CMS <sup>#</sup>	Administrative <sup>^</sup>	No

# MCAS Population Specific Plans (PSPs)

## Measurement Year 2025 | Reporting Year 2026

Total number of measures = 13 (7 Administrative,  
2 Hybrid/Admin, and 4 ECDS)

PSPs:

- » AIDS Healthcare Foundation (AHF)
- » SCAN Health Plan (SCAN)

#	MEASURE REQUIRED OF PSP	MEASURE ACRONYM	MEASURE STEWARD	MEASURE TYPE METHODOLOGY	PSP	HELD TO MPL <sup>i</sup>
Behavioral Health Domain Measures						
1	Follow-Up After ED Visit for Mental Illness—30 days*	FUM	NCQA	Administrative	AHF, SCAN	Yes
2	Follow-Up After ED Visit for Substance Use—30 days*	FUA	NCQA	Administrative	AHF, SCAN	Yes
Chronic Disease Management Domain Measures						
3	Controlling High Blood Pressure*	CBP	NCQA	Hybrid/Admin**	AHF, SCAN	Yes
4	Glycemic Status Assessment for Patients With Diabetes (>9%)*	GSD	NCQA	Hybrid/Admin**	AHF, SCAN	Yes

#	MEASURE REQUIRED OF PSP	MEASURE ACRONYM	MEASURE STEWARD	MEASURE TYPE METHODOLOGY	PSP	HELD TO MPL <sup>i</sup>
<b>Cancer Prevention Domain Measures</b>						
5	Breast Cancer Screening*	BCS-E	NCQA	ECDS	SCAN	Yes
<b>Report Only Measures to DHCS</b>						
6	Adults' Access to Preventive/ Ambulatory Health Services	AAP	NCQA	Administrative	AHF, SCAN	No
7	Colorectal Cancer Screening*	COL-E	NCQA	ECDS	SCAN	No <sup>^^</sup>
8	Depression Remission or Response for Adolescents and Adults	DRR-E	NCQA	ECDS	AHF, SCAN	No <sup>^^</sup>
9	Depression Screening and Follow-Up for Adolescents and Adults*	DSF-E	NCQA	ECDS	AHF, SCAN	No <sup>^^</sup>
10	Pharmacotherapy for Opioid Use Disorder*	POD	NCQA	Administrative	AHF, SCAN	No <sup>^^</sup>
<b>LTC Report Only Measures to DHCS</b>						
11	Number of Out-patient ED Visits per 1,000 Long Stay Resident Days*	HFS	CMS <sup>#</sup>	Administrative <sup>^</sup>	SCAN	No
12	Skilled Nursing Facility Healthcare Associated Infections Requiring Hospitalization*	SNF HAI	CMS <sup>#</sup>	Administrative <sup>^</sup>	SCAN	No
13	Potentially Preventable 30-day Post Discharge Readmission*	PPR	CMS <sup>#</sup>	Administrative <sup>^</sup>	SCAN	No

- i MCPs held to the MPL for the HEDIS<sup>®</sup> total rates only; the National Committee for Quality Assurance (NCQA) Quality Compass<sup>®</sup> Medicaid HMO 50<sup>th</sup> and 90<sup>th</sup> percentiles represent the MPLs and high-performance levels (HPLs), respectively. MCPs will only be held to the MPL for historically established benchmarks.
- ii Stratified by Seniors and Persons with Disabilities (SPDs)
- iii CMS calculated national median is considered the MPL.
- iv If applicable, stratify by Members dually enrolled in Medi-Cal and Medicare with the same MCP

ECDS: Electronic Clinical Data Systems (electronic reporting method for certain HEDIS measures)

- \* Measures must be stratified by race/ethnicity per NCQA categorizations.
- \*\* Hybrid/Admin: MCPs/PSPs have the option to choose the methodology for reporting applicable measure rates
- # CMS modified measure to reflect Medi-Cal and dual data sources
- ^ Measures to be calculated at the facility level for each MCP that can be aggregated to the plan level
- ^^ Measure possibly held to the MPL in the future

## Measure Steward Key

**CMS**—Centers for Medicare & Medicaid Services

**DQA**—Dental Quality Alliance

**NCQA**—National Committee for Quality Assurance

**TJC**—The Joint Commission