

# **MEDI-CAL MANAGED CARE PLANS: CLINICAL QUALITY PERFORMANCE BY DOMAIN FOR MEASUREMENT YEAR 2024 (MY24)**

**This report provides information on the performance of Medi-Cal managed care plans (MCPs) in four key health domains:**



Children's Health



Reproductive Health & Cancer Prevention



Behavioral Health



Chronic Disease Management

**MY24 quality performance stratified by race and ethnicity will be shared in an upcoming document when those data become available.**

Overview

DHCS’ Comprehensive Quality Strategy (CQS) is driven by DHCS’ Bold Goals: 50x2025 initiative that, in partnership with stakeholders across the state, will help achieve significant improvements in Medi-Cal clinical and health equity outcomes by 2025.

The 2025 CQS focuses on three main clinical areas of focus:

- » Children’s Preventive Care
- » Maternity Outcomes & Birth Equity
- » Behavioral Health Integration

True North

Medi-Cal members deserve to have longer, healthier, and happier lives.

To support this vision, DHCS works to drive forward the provision of equitable access to quality health care. DHCS uses a data-driven approach to determine key clinical areas of focus to address significant quality and health equity gaps in care.

Overall Trends in Quality Performance

DHCS measures MCP performance based on:

1. The National Committee for Quality Assurance (NCQA) Quality Compass Medicaid HMO 50th percentile benchmark.
2. The Centers for Medicare & Medicaid Services Federal Fiscal Year National Median. According to CMS, the state median is calculated as the median of all states.

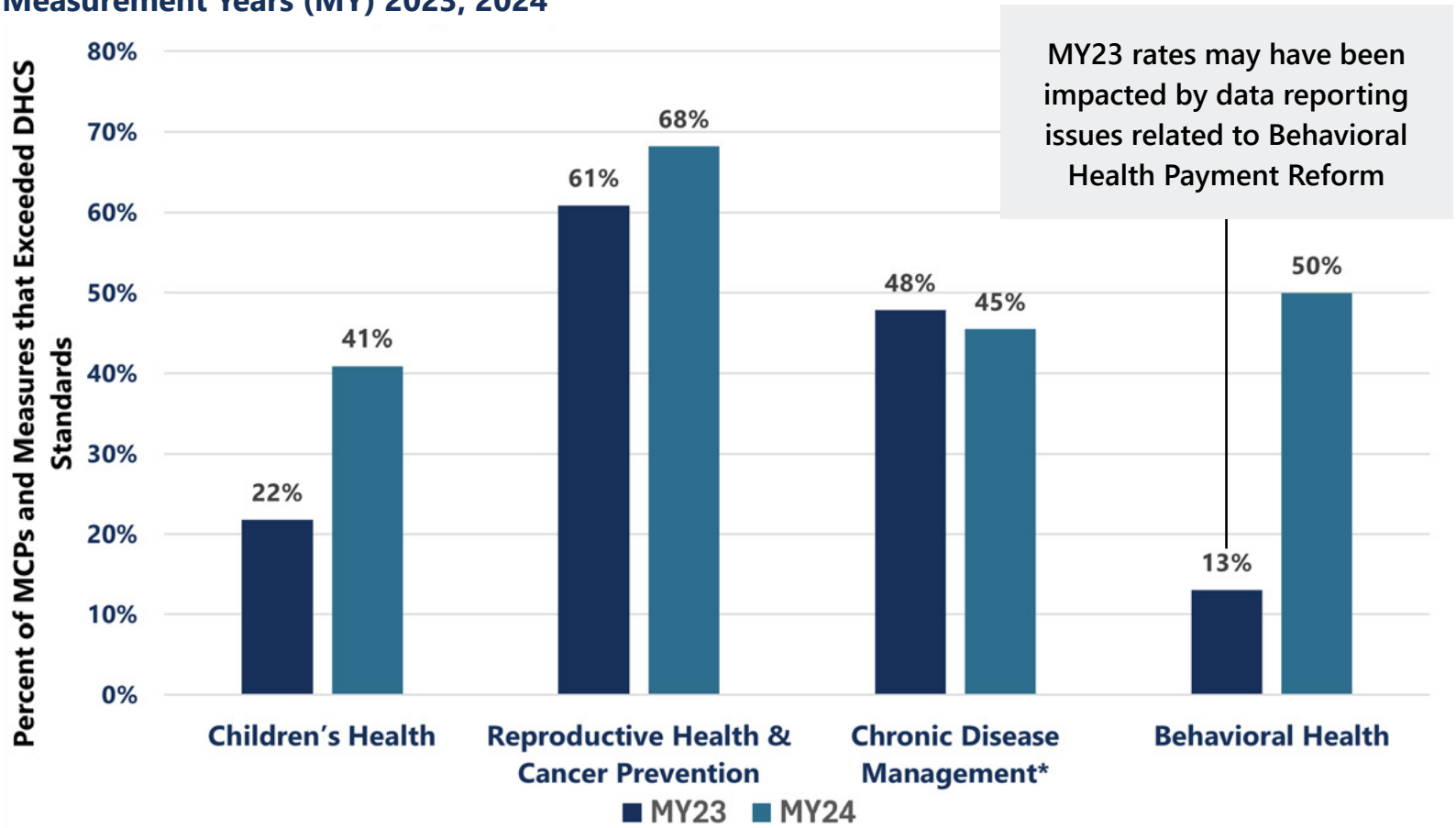
The goal is for all MCPs to meet and exceed the established benchmarks. To assess overall quality, DHCS evaluates whether an MCP meets and exceeds the standard set for each key measure. Figure 1 shows the percentage of MCPs that successfully met and exceeded these standards for all measures within a health domain for Measurement Years 2023 and 2024 (M23 and MY24).

Previously, MCPs were required to report performance rates by Quality Reporting Unit (QRU). DHCS defines a “quality reporting unit” as a single county or combined set of counties. This definition is sourced from the Population Health Management Policy Guide by CalAIM, published in July 2025. The shift from quality reporting unit to county-based reporting results in different rates of MPL compliance than what was reported in the past.

In MY24, MCPs were required to report performance rates at the Plan Level to align with Health Plan Accreditation reporting requirements. To be able to compare performance across years, rates were rolled up to Plan Level for MY23.

Figure 1: Overall Quality by Domain

Measurement Years (MY) 2023, 2024



\*Decreased performance in the AMR (Asthma Medication Ratio) measure, especially among children, was a main factor in the decrease in overall quality for Chronic Disease Management.



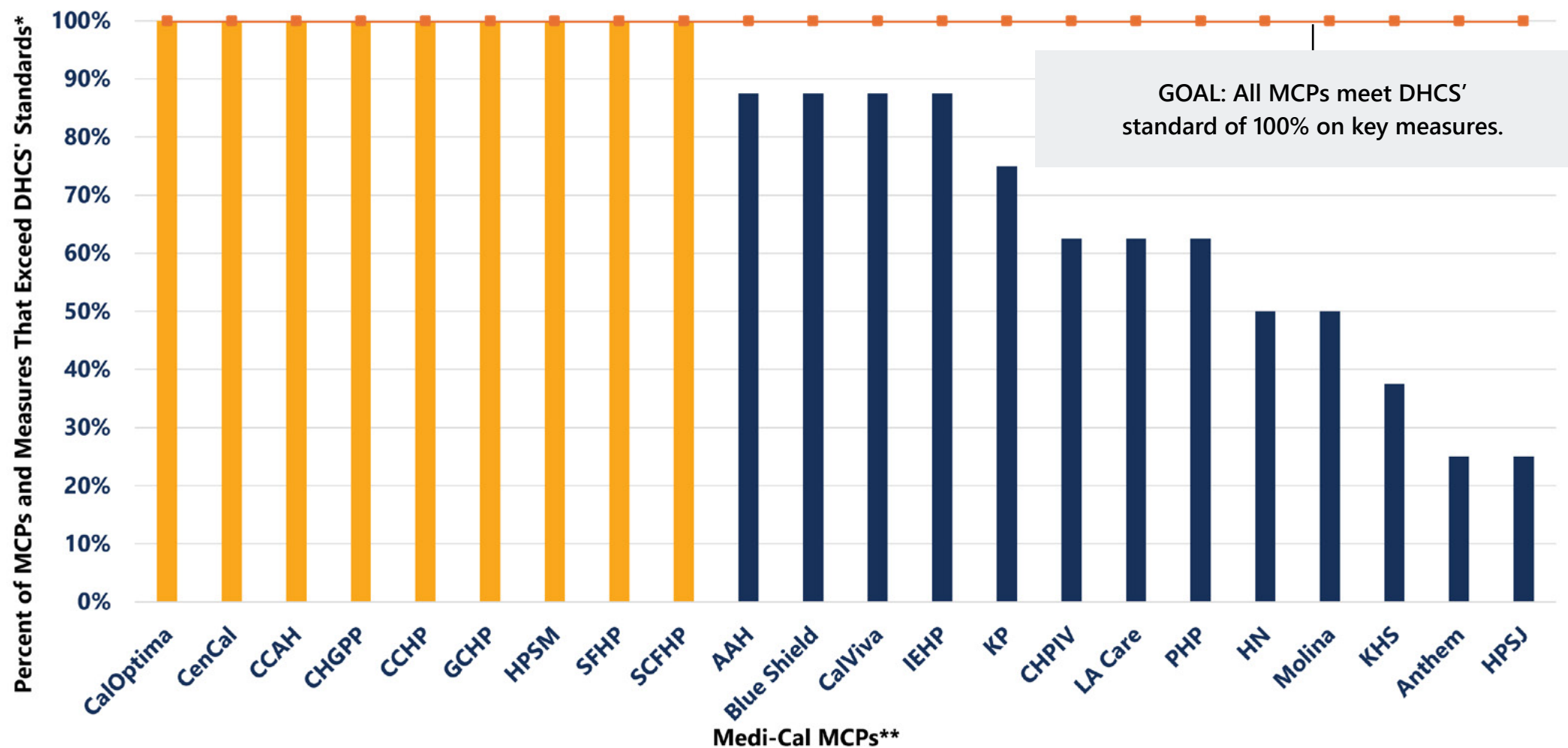
## CHILDREN'S HEALTH: HOW DO MEDI-CAL MCPS COMPARE IN QUALITY?

### There are eight key measures in the Children's Health Domain:

1. Childhood Immunization Status (CIS-10)
2. Developmental Screening in the First Three Years of Life (DEV)
3. Immunizations for Adolescents (IMA-2)
4. Lead Screening in Children (LSC)
5. Topical Fluoride for Children (TFL-CH)
6. Well-Child Visits in the First 30 Months of Life – 0 to 15 Months – Six or More Well-Child Visits (W30-6+)
7. Well-Child Visits in the First 30 Months of Life – 15 to 30 Months – Two or More Well-Child Visits (W30-2+)
8. Child and Adolescent Well-Care Visits (WCV)

To assess overall quality, DHCS evaluates whether an MCP meets and exceeds the established standard for each key measure. Figure 2 shows the percentage of key measures in Children's Health for which each MCP successfully met and exceeded these standards.

**Figure 2: Children's Health Quality**



\*DHCS' standard is based on national averages or median benchmarks for Medicaid plans.

\*\*See Appendix for a list of MCPs.

### CalOptima, CenCal, CCAH, CHGPP, CCHP, GCHP, HPSM, SFHP & SCFHP

met and exceeded DHCS' standard  
for all measures.

### 40.91% of MCPs

exceeded DHCS' standard  
for all measures.

### 86.36% of MCPs

met and exceeded DHCS' standard  
for at least 50% of measures.

**Overall quality in the Children's  
Health Domain increased  
compared to last year  
(from 21.74% to 40.91% of  
MCPs meeting and exceeding  
the DHCS standard).**

**There remain opportunities for  
improvement, particularly in  
enhancing coordination across  
care delivery systems.**



# REPRODUCTIVE HEALTH & CANCER PREVENTION: HOW DO MEDI-CAL MCPS COMPARE IN QUALITY?

There are five key measures in the Reproductive Health & Cancer Prevention Domain.

1. Breast Cancer Screening (BCS-E)

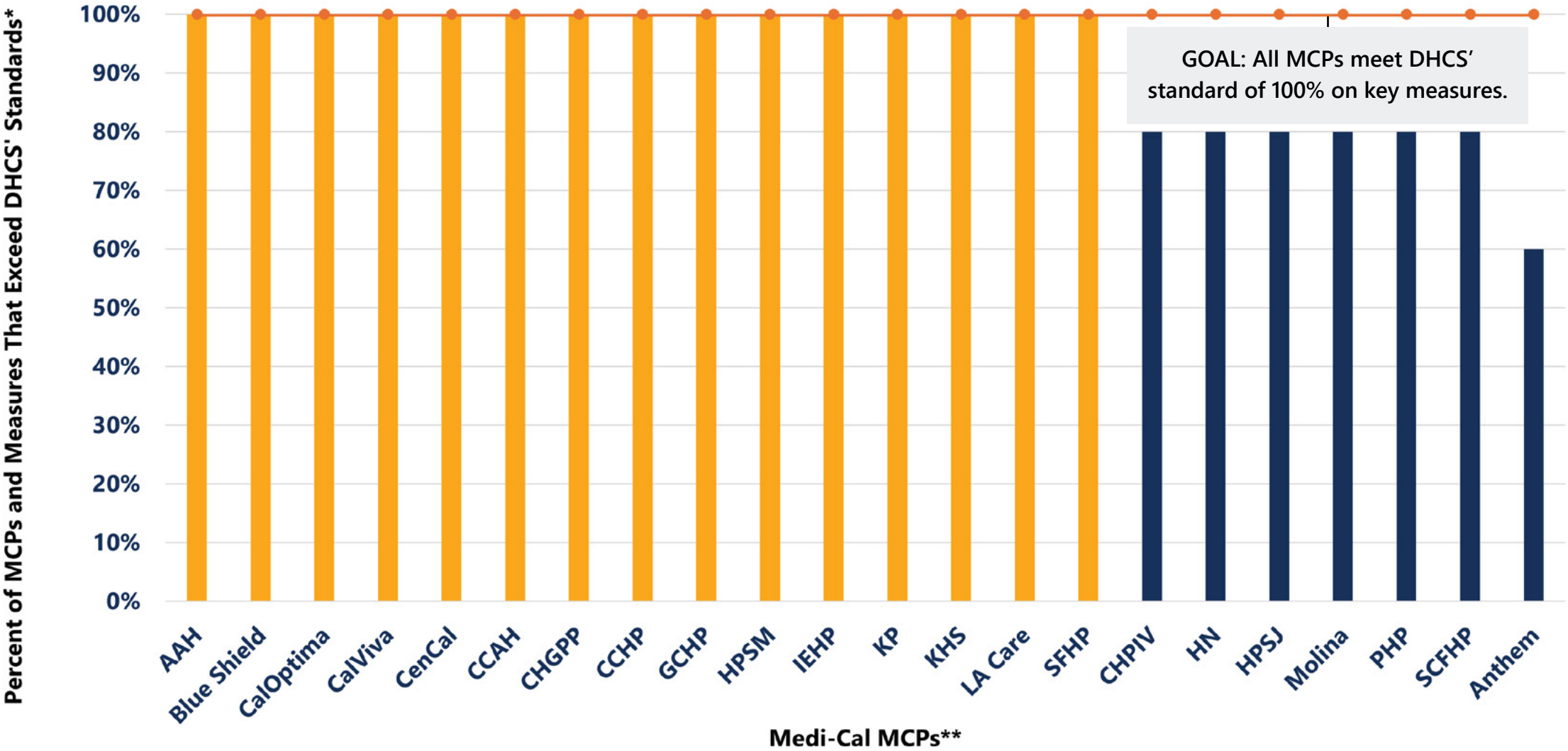
2. Cervical Cancer Screening (CCS)

3. Chlamydia Screening (CHL)
4. Prenatal and Postpartum Care: Timeliness of Prenatal Care (PPC-Pre)

5. Prenatal and Postpartum Care: Postpartum Care (PPC-Pst)

To assess overall quality, DHCS evaluates whether an MCP meets and exceeds the established standard for each key measure. Figure 3 shows the percentage of key measures in Reproductive Health & Cancer Prevention for which each MCP successfully met and exceeded these standards.

Figure 3: Reproductive Health & Cancer Prevention Quality



\*DHCS' standard is based on national averages or median benchmarks for Medicaid plans.

\*\*See Appendix for a list of MCPs.

AAH, Blue Shield,  
CalOptima, CalViva,  
CenCal, CCAH,  
CHGP, CCHP, GCHP,  
HPSM, IEHP, KP, KHS,  
LA Care & SFHP

met and exceeded DHCS' standard  
for all measures.

68.18% of MCPs

exceeded DHCS' standard  
for all measures.

100% of MCPs

met and exceeded DHCS' standard  
for at least 50% of measures.

Overall quality in the  
Reproductive Health & Cancer  
Prevention Domain increased  
compared to last year  
(from 60.87% to 68.18% of  
MCPs meeting and exceeding  
the DHCS standard).

There are opportunities  
for improvement, particularly  
addressing disparities  
in access to care.



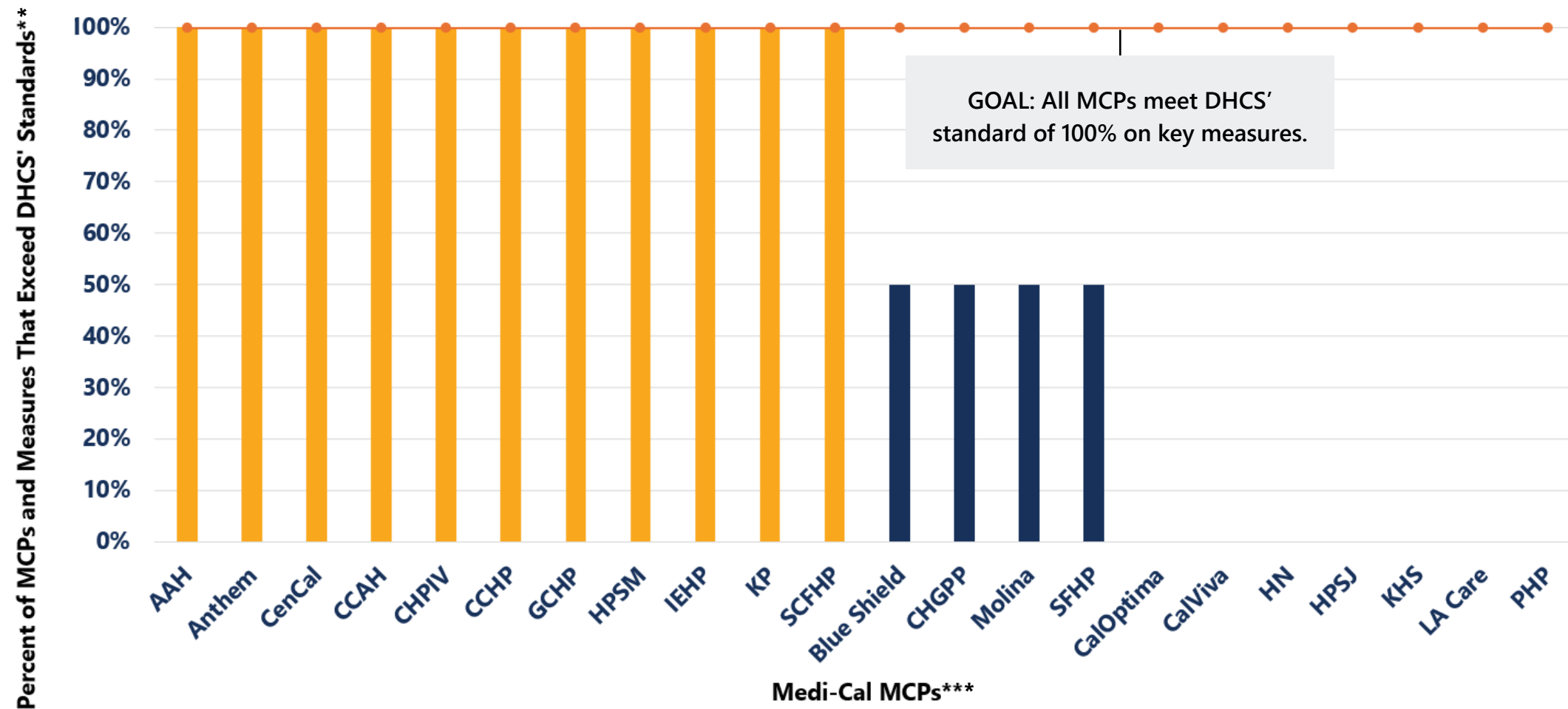
## BEHAVIORAL HEALTH: HOW DO MEDI-CAL MCPS COMPARE IN QUALITY?

There are two key measures in the Behavioral Health Domain.

1. Follow-Up After Emergency Department Visit for Mental Illness (FUM-30)
2. Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA-30)

To assess overall quality, DHCS evaluates whether an MCP meets and exceeds the established standard for each key measure. Figure 4 shows the percentage of key measures in Behavioral Health for which each MCP successfully met and exceeded these standards.

Figure 4: Behavioral Health\*



\*Plans showing 0% in the chart above did not meet the MPL for any measure.

\*\*DHCS' standard is based on national averages or median benchmarks for Medicaid plans.

\*\*\*See Appendix for a list of MCPs.

**AAH, Anthem, CenCal,  
CCAH, CHPIV, CCHP, GCHP,  
HPSM, IEHP, KP & SCFHP**

met and exceeded DHCS' standard  
for all behavioral health measures.

**50% of all MCPs**

exceeded DHCS' standard  
for all measures.

**68.18% of all MCPs**

met and exceeded DHCS' standard  
for 50% of measures.

**Overall quality in Behavioral Health  
increased compared to last year  
(from 13.04% to 50.00% of MCPs meeting  
and exceeding the DHCS standard).**

**However, opportunities for  
improvement remain, particularly in  
enhancing care coordination and data  
collection across delivery systems. It is  
important to note that the performance  
rates for the previous year (MY23) may  
have been impacted by data reporting  
issues related to Behavioral Health  
Payment Reform, which could have  
influenced the baseline measurements.**





## CHRONIC DISEASE MANAGEMENT: HOW DO MEDI-CAL MCPS COMPARE IN QUALITY?

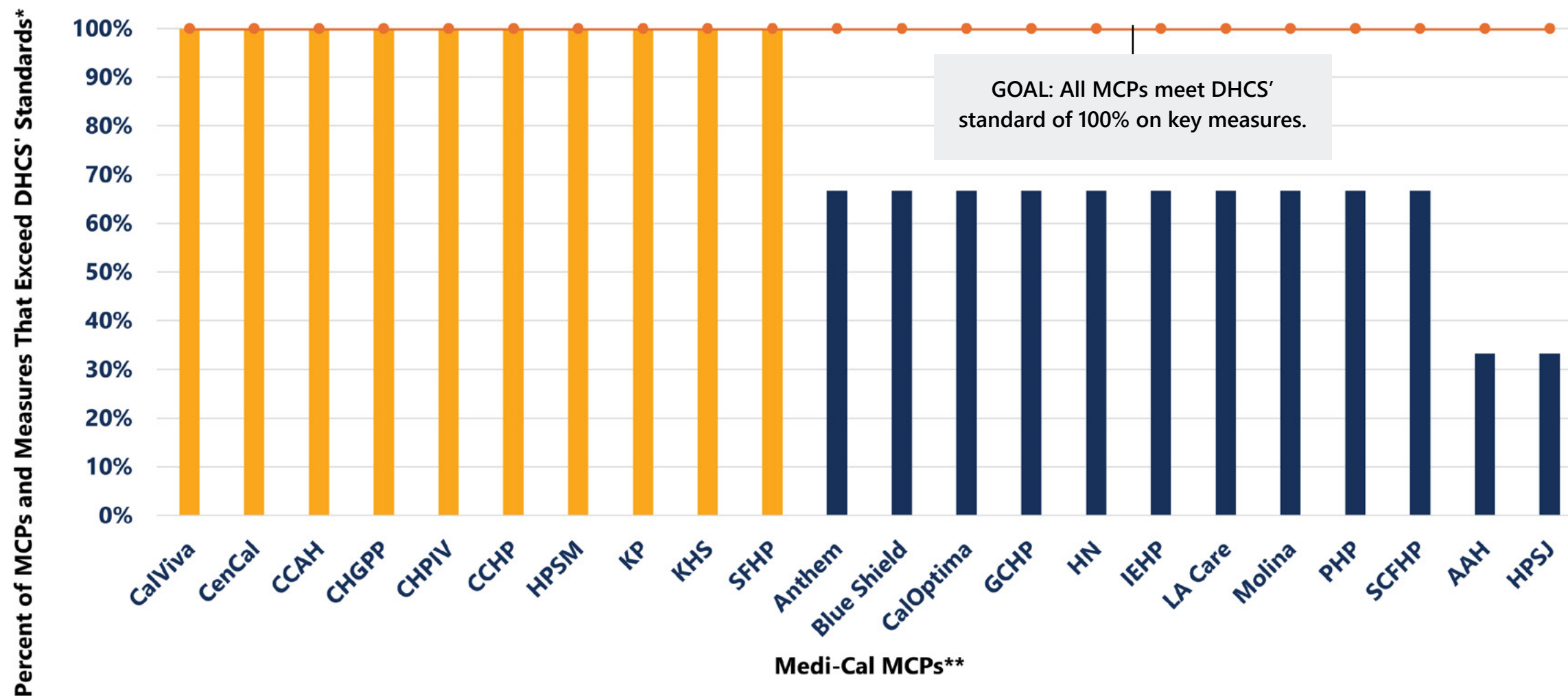
### There are three key measures in the Chronic Disease Management Domain:

1. Asthma Medication Ratio (AMR)
2. Controlling High Blood Pressure (CBP)
3. Glycemic Status Assessment for Patients With Diabetes (>9%) (GSD)\*

\*Note: A lower rate is better for this measure

To assess overall quality, DHCS evaluates whether an MCP meets and exceeds the established standard for each key measure. Figure 5 shows the percentage of key measures in Chronic Disease Management for which each MCP successfully met and exceeded these standards.

Figure 5: Chronic Disease Management



\*DHCS' standard is based on national averages or median benchmarks for Medicaid plans.

\*\*See Appendix for a list of MCPs.

### CalViva, CenCal CCAH, CHG, CHPIV, CCHP, HPSM, KP, KHS & SFHP

met or exceeded DHCS' standard  
for all measures.

### 45.45% of all MCPs

exceeded DHCS' standard  
for all measures.

### 90.91% of all MCPs

met and exceeded DHCS' standard  
for at least 50% of measures.

Overall quality in Chronic  
Disease Management  
decreased compared to last  
year (from 47.83% to 45.45% of  
MCPs meeting and exceeding  
the DHCS standard).

Opportunities for  
improvement include  
addressing chronic diseases  
in children, such as asthma.

APPENDIX

**MCPs** (Medi-Cal managed care plans contracted with DHCS) and **COUNTIES** served by MCP.

Managed Care Plan (MCP) Legend			
Acronym	MCP Name	Number of Counties	County(ies)
AAH	Alameda Alliance for Health	1	Alameda
Anthem	Blue Cross of Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan	15	Alpine, Amador, Calaveras, El Dorado, Fresno, Inyo, Kern, Kings, Madera, Mono, Sacramento, San Francisco, Santa Clara, Tulare, Tuolumne
Blue Shield	Blue Shield of California Promise Health Plan	1	San Diego
CalOptima	CalOptima	1	Orange
CalViva	CalViva Health	3	Fresno, Kings, Madera
CenCal	CenCal Health	2	San Luis Obispo, Santa Barbara
CCAH	Central California Alliance for Health	5	Mariposa, Merced, Monterey, San Benito, Santa Cruz
CHGPP	Community Health Group Partnership Plan	1	San Diego
CHPIV	Community Health Plan of Imperial Valley	1	Imperial
CCHP	Contra Costa Health Plan	1	Contra Costa
GCHP	Gold Coast Health Plan	1	Ventura
HN	Health Net Community Solutions Inc.	10	Amador, Calaveras, Inyo, Los Angeles, Mono, Sacramento, San Joaquin, Stanislaus, Tulare, Tuolumne
HPSJ	Health Plan of San Joaquin	2	San Joaquin, Stanislaus
HPSM	Health Plan of San Mateo	1	San Mateo
IEHP	Inland Empire Health Plan	2	Riverside, San Bernardino
KP	Kaiser Permanente	32	Alameda, Amador, Contra Costa, El Dorado, Fresno, Imperial, Kern, Kings, Los Angeles, Madera, Marin, Mariposa, Napa, Orange, Placer, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma, Stanislaus, Sutter, Tulare, Ventura, Yolo, Yuba
KHS	Kern Health Systems	1	Kern
LA Care	L.A. Care Health Plan	1	Los Angeles
Molina	Molina Healthcare of California	4	Riverside, Sacramento, San Bernardino, San Diego
PHP	Partnership Health Plan of California	24	Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Marin, Mendocino, Modoc, Napa, Nevada, Placer, Plumas, Shasta, Sierra, Siskiyou, Solano, Sonoma, Sutter, Tehama, Trinity, Yolo, Yuba
SFHP	San Francisco Health Plan	1	San Francisco
SCFHP	Santa Clara Family Health Plan	1	Santa Clara