

2022 Preventive Services Report

Quality Population Health Management
California Department of Health Care Services

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Property of the California Department of Health Care Services



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Commonly Used Abbreviations and Acronyms

Following is a list of abbreviations and acronyms used throughout this report.

- ◆ **A**—administrative
- ◆ **AUS**—*Alcohol Use Screening*
- ◆ **BLS**—*Blood Lead Screening*
- ◆ **BMI**—body mass index
- ◆ **CA**—California
- ◆ **CalAIM**—California Advancing and Innovating Medi-Cal
- ◆ **CDF**—*Screening for Depression and Follow-Up Plan*
- ◆ **CDPH**—California Department of Public Health
- ◆ **CDT**—Code on Dental Procedures and Nomenclature
- ◆ **CHIP**—Children’s Health Insurance Program
- ◆ **CHL**—*Chlamydia Screening in Women*
- ◆ **CIS**—*Childhood Immunization Status*
- ◆ **CMS**—Centers for Medicare & Medicaid Services
- ◆ **COHS**—County Organized Health System
- ◆ **COVID-19**—coronavirus disease 2019
- ◆ **CPT**—Current Procedural Terminology
- ◆ **DEV**—*Developmental Screening in the First Three Years of Life*
- ◆ **DFV**—*Dental Fluoride Varnish*
- ◆ **DHCS**—California Department of Health Care Services
- ◆ **EHR**—electronic health record
- ◆ **EPSDT**—Early and Periodic Screening, Diagnostic, and Treatment
- ◆ **EQR**—external quality review
- ◆ **FFY**—federal fiscal year
- ◆ **FUH**—*Follow-Up After Hospitalization for Mental Illness*
- ◆ **FUM**—*Follow-Up After Emergency Department Visit for Mental Illness*
- ◆ **H**—hybrid
- ◆ **HEDIS[®]**—Healthcare Effectiveness Data and Information Set¹

¹ HEDIS[®] is a registered trademark of the National Committee for Quality Assurance (NCQA).

- ◆ **HIPAA**—Health Insurance Portability and Accountability Act of 1996
- ◆ **HMO**—health maintenance organization
- ◆ **HPV**—human papillomavirus
- ◆ **HSAG**—Health Services Advisory Group, Inc.
- ◆ **IMA**—*Immunizations for Adolescents*
- ◆ **LSC**—*Lead Screening in Children*
- ◆ **MCAS**—Managed Care Accountability Set
- ◆ **MCMC**—Medi-Cal Managed Care program
- ◆ **MCP**—managed care health plan
- ◆ **MRR**—medical record review
- ◆ **MS**—Microsoft
- ◆ **N**—number
- ◆ **NA**—suppressed rate due to small denominator
- ◆ **N/A**—not available
- ◆ **NCQA**—National Committee for Quality Assurance
- ◆ **OB/GYN**—obstetrician/gynecologist
- ◆ **PCP**—primary care provider
- ◆ **PIP**—performance improvement project
- ◆ **PNA**—population needs assessment
- ◆ **QMR**—Quality Measure Reporting
- ◆ **S**—suppressed rate due to small numerator
- ◆ **Tdap**—tetanus, diphtheria toxoids, and acellular pertussis
- ◆ **TUS**—*Tobacco Use Screening*
- ◆ **VBP**—Value-Based Payment
- ◆ **W30**—*Well-Child Visits in the First 30 Months of Life*
- ◆ **WCC**—*Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents*
- ◆ **WCV**—*Child and Adolescent Well-Care Visits*

1. Executive Summary

Background

At the request of the Joint Legislative Audit Committee, the California State Auditor published an audit report in March 2019 regarding the California Department of Health Care Services' (DHCS') oversight of the delivery of preventive services to children enrolled in the California Medi-Cal Managed Care program (MCMC). The audit report recommended DHCS expand the performance measures it collects and reports on to ensure all age groups receive preventive services from the managed care health plans (MCPs).² In response to this recommendation, DHCS requested that Health Services Advisory Group, Inc. (HSAG), start producing an annual Preventive Services Utilization Report in 2020.

For the 2022 Preventive Services Report, HSAG continued to analyze child and adolescent performance measures either calculated by HSAG or DHCS, or reported by the 25 full-scope MCPs for measurement year 2021 from the Managed Care Accountability Set (MCAS). MCAS measures reflect clinical quality, timeliness, and access to care provided by MCPs to their members, and each MCP is required to report audited MCAS results to DHCS annually. The 2022 Preventive Services Report presents statewide and regional results for a total of 21 indicators that assess utilization of preventive services by MCMC children and adolescents during measurement year 2021, and includes regional and demographic trends, findings, and recommendations. Comparisons to measurement year 2020 results are presented, when available.

Overall, the Preventive Services Report is an additional tool that DHCS can use to identify and monitor appropriate utilization of preventive services for children in MCMC as outlined in the 2022 Comprehensive Quality Strategy.³ DHCS will leverage findings from the Preventive Services Report to work with MCPs and other stakeholders to implement targeted improvement strategies that can drive positive change and ensure MCMC children receive the right care at the right time.

² California State Auditor. Department of Health Care Services: Millions of Children in Medi-Cal Are Not Receiving Preventive Health Services, March 2019. Available at: <https://www.auditor.ca.gov/pdfs/reports/2018-111.pdf>. Accessed on: Feb 14, 2023.

³ State of California Department of Health Care Services. Comprehensive Quality Strategy. February 2022. Available at: <https://www.dhcs.ca.gov/services/Documents/Formatted-Combined-CQS-2-4-22.pdf>. Accessed on: Feb 14, 2023.

Coronavirus Disease 2019 (COVID-19) Cases and Vaccinations

Table 1.1 displays a summary of the COVID-19 cases per 100,000 members during measurement years 2020 and 2021, and vaccinations during measurement year 2021 for the applicable pediatric MCMC population.

Table 1.1—Measurement Years 2020 and 2021 COVID-19 Cases per 100,000 Members and Measurement Year 2021 Vaccination Data

Stratification	Measurement Year 2020: COVID-19 Cases Per 100,000 Members—0 to 17 Years	Measurement Year 2021: COVID-19 Cases Per 100,000 Members—0 to 17 Years	Measurement Year 2021: Received at Least One Dose of COVID-19 Vaccine—12 to 17 Years
Total			
Total	164.85	285.00	50.48%
Race/Ethnicity			
American Indian or Alaska Native	108.48	410.64	33.95%
Asian/Pacific Islander	68.74	161.76	71.77%
Black or African American	70.21	277.87	34.28%
Hispanic or Latino	211.40	312.83	52.59%
White	77.79	250.28	38.01%
Other	129.66	251.14	51.91%
Unknown/Missing	128.49	255.67	43.90%
Gender			
Female	169.07	286.54	51.94%
Male	160.83	283.54	49.09%

Determination of Key Findings

To focus the 2022 Preventive Services Report on more actionable results for stakeholders, HSAG and DHCS developed criteria to determine which results to include in the body of the report. These criteria include: large rate changes from year-to-year (i.e., rate increases or decreases from the prior measurement year by at least a 10 percent relative difference); indicator rates with overall low performance (i.e., below the applicable national benchmark by at least a 10 percent relative difference); racial/ethnic, primary language, gender, and age

groups with disparate performance across indicators (i.e., a demographic group that had more than half of its indicator rates below the respective benchmark by at least a 10 percent relative difference); indicator rates with regional variations in performance (i.e., geographic regions with consistently high or low performance across indicators relative to the statewide aggregate); and domains with overall poor performance (i.e., more than half of the indicators within a domain with low performance relative to national benchmarks).

HSAG and DHCS then decided on a final list of indicators with the most actionable results for stakeholders to include in the body of the report. For more details, see the “Determination of Key Findings” subheading in the Reader’s Guide.

Overall Findings and Items for Consideration

The 2022 Preventive Services Report includes the results from the analysis of 21 indicators that assess the utilization of preventive services by pediatric MCMC members at the statewide and regional levels as well as by key demographic characteristics (i.e., race/ethnicity, primary language, gender, and age). Table 1.2 displays the 21 indicators included in the 2022 Preventive Services Report, as well as the three age indicators for the *Child and Adolescent Well-Care Visits* indicator and the COVID-19 metrics related to cases and vaccinations. Where possible, HSAG indicated if the measurement years 2020 and 2021 statewide indicator rates met the respective National Committee for Quality Assurance’s (NCQA’s) Quality Compass[®],⁴ national Medicaid Health Maintenance Organization (HMO) 50th percentile or the Centers for Medicare & Medicaid Services’ (CMS’) Core Set of Children’s Health Care Quality Measures for Medicaid and Children’s Health Insurance Program (CHIP) (Child Core Set) National Median (henceforth referred to as national benchmarks).

The source for certain health plan measure rates and benchmark (averages and percentiles) data (“the Data”) is Quality Compass[®] 2020 and 2021 is used with the permission of the National Committee for Quality Assurance (“NCQA”). Any analysis, interpretation or conclusion based on the Data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation or conclusion. Quality Compass is a registered trademark of NCQA.

The Data comprises audited performance rates and associated benchmarks for Healthcare Effectiveness Data and Information Set measures (“HEDIS[®]”) and HEDIS CAHPS[®] survey measure results. HEDIS measures and specifications were developed by and are owned by NCQA. HEDIS measures and specifications are not clinical guidelines and do not establish standards of medical care. NCQA makes no representations, warranties or endorsement about the quality of any organization or clinician who uses or reports performance measures, or any data or rates calculated using HEDIS measures and specifications, and NCQA has no liability to anyone who relies on such measures or specifications.

⁴ Quality Compass[®] is a registered trademark of the National Committee for Quality Assurance (NCQA).

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Table 1.2—Statewide Indicator Rates

An em dash (—) indicates the statewide rate is not available because the indicator is new for measurement year 2021.

N/A indicates that a national benchmark is not available.

* indicates that measurement year 2021 national benchmarks are not available; therefore, this indicator is compared to measurement year 2020 national benchmarks.

 indicates that the indicator rate was above the national benchmark for its respective measurement year.

Benchmark sources for each indicator listed in the table below are available in Table 2.4 in the Reader's Guide.

Indicator	Measurement Year 2020 Statewide Rate	Measurement Year 2021 Statewide Rate	Measurement Year 2021 National Benchmark
MCP-Calculated Indicators			
<i>Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)</i>	37.70%	40.23%	55.72%
<i>Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 to 30 Months—Two or More Well-Child Visits (W30–2)</i>	66.40%	60.28%	65.83%
<i>Child and Adolescent Well-Care Visits—3 to 11 Years (WCV)</i>	47.84%	55.24%	51.35%
<i>Child and Adolescent Well-Care Visits—12 to 17 Years (WCV)</i>	41.57%	49.91%	45.05%
<i>Child and Adolescent Well-Care Visits—18 to 21 Years (WCV)</i>	20.89%	23.34%	24.63%

Indicator	Measurement Year 2020 Statewide Rate	Measurement Year 2021 Statewide Rate	Measurement Year 2021 National Benchmark
<i>Child and Adolescent Well-Care Visits—Total (WCV)</i>	41.13%	47.51%	48.93%
<i>Childhood Immunization Status—Combination 10 (CIS-10)</i>	39.84%	37.81%	34.79%
<i>Chlamydia Screening in Women—16 to 20 Years (CHL-1620)</i>	57.94%	59.23%	50.14%
<i>Developmental Screening in the First Three Years of Life—Total (DEV)*</i>	23.11%	28.83%	35.60%
<i>Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)</i>	—	43.47%	67.79%
<i>Immunizations for Adolescents—Combination 2 (Meningococcal; Tetanus, Diphtheria Toxoids, and Acellular Pertussis [Tdap]; and Human Papillomavirus [HPV]) (IMA-2)</i>	41.05%	37.96%	35.04%
<i>Screening for Depression and Follow-Up Plan (CDF)</i>	16.52%	19.25%	N/A
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Body Mass Index (BMI) Percentile Documentation—Total (WCC-BMI)</i>	79.12%	82.92%	79.68%
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC-N)</i>	71.29%	77.94%	72.26%

Indicator	Measurement Year 2020 Statewide Rate	Measurement Year 2021 Statewide Rate	Measurement Year 2021 National Benchmark
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total (WCC-PA)</i>	68.71%	76.17%	68.61%
HSAG-Calculated Indicators			
<i>Alcohol Use Screening (AUS)</i>	1.83%	2.31%	N/A
<i>Dental Fluoride Varnish (DFV)</i>	19.35%	22.62%	N/A
<i>Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)</i>	59.60%	58.80%	47.65%
<i>Tobacco Use Screening (TUS)</i>	2.54%	3.83%	N/A
DHCS-Calculated Indicators			
<i>Blood Lead Screening—Test at 12 Months of Age (BLS-1)</i>	46.21%	43.98%	N/A
<i>Blood Lead Screening—Test at 24 Months of Age (BLS-2)</i>	34.50%	34.50%	N/A
<i>Blood Lead Screening—Two Tests by 24 Months of Age (BLS-1 and 2)</i>	24.15%	21.26%	N/A
<i>Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS-316)</i>	34.99%	32.29%	N/A
<i>Lead Screening in Children (LSC)</i>	58.21%	52.06%	63.99%
<i>COVID-19 Cases Per 100,000—0 to 17 Years</i>	164.85	285.00	N/A
<i>Received at Least One Dose of COVID-19 Vaccine—12 to 17 Years</i>	—	50.48%	N/A

The following are the overall findings and considerations from the 2021 Preventive Services Report analyses. Please note, Overall Finding 1 includes all indicators contained in this report, but the remaining overall findings are limited to those indicators considered key findings and included in Section 3. Detailed statewide and regional results for the indicators considered key findings can be found in Section 3, and the results for the remaining indicators can be found in Appendix A. MCP reporting unit results can be found in Appendix B.

- ◆ **Overall Finding 1: Performance for measurement year 2021 improved from measurement year 2020, and the majority of indicators that could be compared to national benchmarks exceeded the national benchmarks for measurement year 2021.**
 - From measurement year 2020 to measurement year 2021, 11 of 20 (55.00 percent) indicator rates that had reportable rates in both years increased. The majority of indicators that increased in measurement year 2021 were related to well-child visits; the majority of indicators that decreased were related to immunizations and blood lead screenings. This finding also existed nationally as benchmarks declined for the immunization and blood lead screening indicators from measurement year 2020 to measurement year 2021, with the blood lead screening benchmark decreasing by approximately 8 percentage points in measurement year 2021. It is important to note that COVID-19 likely impacted the blood lead screenings for measurement year 2021 given that many children who turned 2 years of age in measurement year 2021 would have typically received a blood lead screening after 1 year of age, which would have occurred during measurement year 2020.
 - Seven of the 10 (70.00 percent) indicators that had benchmarks in both measurement years (i.e., *Childhood Immunization Status—Combination 10*, *Chlamydia Screening in Women—16 to 20 Years*, *Immunizations for Adolescents—Combination 2*, *Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years*, and all three *Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents* indicators) exceeded the national benchmark in both years.
- ◆ **Conclusions and Considerations for Overall Finding 1:**
 - DHCS continues to make progress on outreach activities designed to encourage utilization of preventive services for children under age 21. An initial mailing by DHCS and the outbound call campaign by MCPs were part of the Phase 1 efforts to promote Early and Periodic Screening, Diagnostic, and Treatment (EPSDT). Through Phase 2 of the outreach project, DHCS developed new key messaging and outreach materials that were a product of beneficiary and stakeholder research and interviews conducted by the Center for Health Literacy. DHCS is aiming to distribute the outreach materials in March 2023. MCPs should continue their efforts to provide educational materials and make calls to parents/guardians of MCMC children to help them understand the services, including preventive care (e.g., well-child visits and blood lead screenings) available to them.
 - While COVID-19 continued to impact indicator rates in measurement year 2021, it is expected that performance on preventive service indicators, like immunizations and blood lead screening, will improve or at least return to pre-COVID-19 levels during measurement year 2022. This is especially true for the *Blood Lead Screening*

indicators given that MCPs are required to report the *Lead Screening in Children* indicator as part of MCAS for measurement year 2022.

- DHCS began implementing the California Advancing and Innovating Medi-Cal (CalAIM) program in early 2022. As part of CalAIM, each MCP is required to create or maintain a population health management program and submit a description of the MCP's population health management plan to DHCS annually, which includes how the MCP will keep members healthy by focusing on preventive and wellness services.⁵ While CalAIM will not impact most performance measures until measurement year 2023, it will be important for DHCS to assess how CalAIM impacts the utilization of preventive pediatric services.

◆ **Overall Finding 2: Performance is regional.**

- The highest performance was seen in the Central Coast (Monterey, San Benito, San Luis Obispo, Santa Barbara, Santa Cruz, and Ventura counties), San Francisco Bay/Sacramento (Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano, Sonoma, and Sacramento counties), and Southern Coast (Los Angeles, Orange, and San Diego counties) geographic regions.
 - From measurement year 2020 to measurement year 2021, performance in the Central Coast and San Francisco Bay/Sacramento geographic regions continued to be high, with more than half of county rates in the top two quintiles (i.e., above the 60th percentile of statewide performance). However, San Benito and Ventura counties in the Central Coast geographic region, and Solano County in the San Francisco Bay/Sacramento geographic region were the only counties to have more than one indicator rate in the bottom two quintiles for both measurement years 2020 and 2021.
- The lowest performance was seen in the North/Mountain (Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Inyo, Lake, Lassen, Mariposa, Mendocino, Modoc, Mono, Nevada, Plumas, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, Placer, El Dorado, Sutter, Yolo, and Yuba counties) geographic region.
 - From measurement year 2020 to measurement year 2021, performance in the North/Mountain geographic region continued to be low, with more than half of county rates in the bottom two quintiles (i.e., below the 40th percentile of statewide performance). Of note, at least half of the rates for Calaveras, Humboldt, Inyo, Lake, Lassen, Mariposa, Nevada, Plumas, Shasta, Siskiyou, Trinity, and Tuolumne counties were in the bottom two quintiles for both measurement years 2020 and 2021.

◆ **Conclusions and Considerations for Overall Finding 2:**

- Given the low performance of rural counties in the North/Mountain geographic region, MCPs operating in these counties should determine the factors contributing to the low performance (e.g., access to providers, distance to providers, education about the

⁵ California Department of Health Care Services. Medi-Cal Healthier California for All Proposal. Available at: <https://www.dhcs.ca.gov/provgovpart/Documents/6422/PHM-Revised-Proposal-02112020.pdf>. Accessed on: Feb 8, 2023.

importance of preventive care). Additionally, MCPs operating in the North/Mountain geographic region should leverage and learn from quality improvement successes of MCPs operating in higher-performing rural counties by implementing similar practices in order to drive improvement.

- MCPs operating in lower-performing rural counties should consider expanding the use of telehealth visits, where appropriate, and assess ways to expand the managed care provider networks to improve performance.

◆ **Overall Finding 3: Statewide performance varies based on race/ethnicity and primary language.**

- For the eight indicators considered to be key findings, five of eight (62.50 percent) indicator rates for the Asian racial/ethnic group and two of eight (25.00 percent) indicator rates for the Hispanic or Latino racial/ethnic group were above the statewide aggregate by more than a 10 percent relative difference.
 - The rates for the Asian racial/ethnic group were above the statewide aggregate by more than a 10 percent relative difference for both *Well-Child Visits in the First 30 Months of Life* indicators, and for the *Childhood Immunization Status—Combination 10, Immunizations for Adolescents—Combination 2* and *Lead Screening in Children* indicators. Of note, the Asian racial/ethnic group rates for both immunization indicators were also above the national benchmark by more than a 10 percent relative difference.
 - The rates for the Hispanic or Latino racial/ethnic group were above the statewide aggregate by more than a 10 percent relative difference for the *Immunizations for Adolescents—Combination 2* and *Lead Screening in Children* indicators. Of note, the Hispanic or Latino racial/ethnic group rate for the immunization indicator was also above the national benchmark by more than a 10 percent relative difference.
- For measurement year 2021, all eight indicator rates for the American Indian or Alaska Native racial/ethnic group were below the statewide aggregate by more than a 10 percent relative difference. For the Black or African American, Native Hawaiian or Other Pacific Islander, and White racial/ethnic groups, rates were below the statewide aggregate by more than a 10 percent relative difference for six, five, and five indicators, respectively.
 - The majority of indicator rates for the American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander, and White racial/ethnic groups were also below the national benchmark by more than a 10 percent relative difference during measurement year 2021.
 - The rates for the Native Hawaiian or Other Pacific Islander racial/ethnic group were below the statewide aggregates and national benchmarks by more than a 10 percent relative difference for both *Well-Child Visits in the First 30 Months of Life* indicators, and for the *Child and Adolescent Well-Care Visits—Total* and *Lead Screening in Children* indicators. Additionally, the rates for the White racial/ethnic group were below the statewide aggregates and national benchmarks by more than a 10 percent relative difference for *Childhood Immunization Status—Combination 10*,

Immunizations for Adolescents—Combination 2, Lead Screening in Children, and Child and Adolescent Well-Care Visits—Total indicators.

- From measurement year 2020 to measurement year 2021, rates for the *Lead Screening in Children* indicator declined by more than a 10 percent relative difference for five of eight (62.50 percent) racial/ethnic groups (Black or African American, Hispanic or Latino, Native Hawaiian or Other Pacific Islander, Other, and Unknown/Missing).
- The majority of reportable rates for the Chinese, Farsi, Hmong, Spanish, and Vietnamese primary language groups were higher than the statewide aggregate by more than a 10 percent relative difference, while the majority of reportable rates for the Russian primary language group were lower than the statewide aggregate by more than a 10 percent relative difference.
 - The measurement year 2021 findings are consistent with the measurement year 2020 findings. Of note, for measurement year 2021, the majority of rates for the Armenian primary language group were no longer below the statewide aggregate by more than a 10 percent relative difference; however, a majority of rates for the Armenian primary language group were below the national benchmark by more than a 10 percent relative difference.
 - For measurement year 2021, rates for the Chinese, Farsi, Hmong, Spanish, and Vietnamese primary language groups were above the national benchmark by more than a 10 percent relative difference for the *Childhood Immunization Status—Combination 10* indicator. Additionally, rates for four of these five primary language groups (Chinese, Farsi, Spanish, and Vietnamese) were also above the national benchmark by more than a 10 percent relative difference for the *Immunizations for Adolescents—Combination 2* indicator.

◆ **Conclusions and Considerations for Overall Finding 3:**

- Given that the rates for the same racial/ethnic groups (American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander, and White) and primary language groups (Armenian and Russian) continued to be low statewide, MCPs have opportunities to use this information to address lower rates in their population needs assessment (PNA) process.
 - DHCS requires MCPs to conduct a PNA to improve health outcomes for members and ensure that MCPs are meeting the needs of their members. The PNA must address the special needs of the Seniors and Persons with Disabilities population, children with special health care needs, members with limited English proficiency, and other member subgroups from diverse cultural and racial/ethnic backgrounds. Starting in 2023, DHCS is modifying the PNA process, which will require the MCPs to provide a more robust assessment of the population needs of their members and the communities in which they live by evaluating the health and social needs of their members, including cultural, linguistic, and health education needs. Additionally, as part of this process, MCPs will be required to determine root causes of barriers

related to coverage, access, quality, health outcomes, and social determinants of health.⁶

- DHCS required MCPs to conduct a performance improvement project (PIP) for an area in need of improvement related to child and adolescent health, and health equity. These PIPs were completed in December 2022. MCPs should apply the lessons learned from these PIPs, as well as leverage information from the Preventive Services Report, to assist in their ongoing quality improvement efforts.
- ◆ **Overall Finding 4: Overall performance across California’s six largest counties was high for a majority of indicators, but improvement is needed for well-child visits, childhood immunizations, and blood lead screenings.**
 - Six counties in California (i.e., Los Angeles, San Bernardino, Riverside, San Diego, Orange, and Sacramento counties) account for approximately 59 percent of the pediatric MCMC population.
 - Overall, four of these six counties (i.e., Los Angeles, San Diego, Orange, and Sacramento counties) demonstrated high performance across the indicators analyzed in this report (i.e., at least half of their reportable indicator rates were in the top two quintiles).
 - The majority of indicator rates for Riverside and San Bernardino counties declined from measurement year 2020 to measurement year 2021 and were in the bottom two quintiles for measurement year 2021. Both counties had rates in the bottom two quintiles for the *Childhood Immunization Status—Combination 10, Lead Screening in Children*, and both *Well-Child Visits in the First 30 Months of Life* indicators.
 - Opportunities exist to improve performance on the *Childhood Immunization Status—Combination 10, Lead Screening in Children*, and *Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits* indicators given that at least half of the six counties had rates in the bottom two quintiles. Further, only two counties (i.e., Orange and San Diego) had rates for all eight indicators that did not fall into the bottom two quintiles.
 - While the *Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits* indicator rates for Orange, Sacramento, and San Diego counties improved by more than a 10 percent relative difference from measurement year 2020 to 2021, the rates for all six counties fell below the national benchmark by at least a 10 percent relative difference.
 - All six counties had rates in the top two quintiles for the *Child and Adolescent Well-Care Visits—Total* and *Chlamydia Screening in Women—16 to 20 Years* indicators.
- ◆ **Conclusions and Considerations for Overall Finding 4:**
 - Given that the six largest counties continued to have low performance related to well-child visits and blood lead screenings and saw a decline in childhood immunizations

⁶ Department of Health Care Services. CalAIM: Population Health Management (PHM) Policy Guide, Updated: December 2022. Available at: <https://www.dhcs.ca.gov/CalAIM/Documents/2023-PHM-Policy-Guide.pdf>. Accessed on: Feb 9, 2023.

during measurement year 2021, implementing efforts to improve well-child visits within the six largest counties may contribute to substantial improvement for California overall.

- DHCS continues to make progress on outreach activities designed to encourage utilization of preventive services for children under age 21 (e.g., initial mailing by DHCS, outbound call campaign by MCPs) and should continue to monitor the rates for well-child visits, childhood immunizations, and blood lead screenings for measurement year 2022, as these are expected to improve.
- ◆ **Overall Finding 5: More than half of younger children received well-child visits and received immunizations at higher rates than seen nationally.**
 - Approximately 40 percent of MCMC children ages 15 months old and younger had six recommended comprehensive well-care visits during measurement year 2021.
 - Approximately 60 percent of MCMC children ages 15 to 30 months had two or more comprehensive well-care visits during measurement year 2021.
 - Approximately 55 percent of MCMC children ages 3 to 11 years had at least one comprehensive well-care visit during measurement year 2021.
 - Approximately 38 percent of MCMC children received necessary vaccinations by their second birthday. Despite the decline from measurement year 2020 to 2021, this is approximately 3 percentage points higher than the national benchmark.
- ◆ **Conclusions and Considerations for Overall Finding 5:**
 - MCPs should continue to ensure children and adolescents receive all their necessary well-child visits, especially for children ages 15 months and younger. Well-child visits are an opportunity for parents to raise concerns about their child’s development and behavior; receive important immunizations; and develop a relationship between the pediatrician, parents, and child.⁷
 - MCPs should leverage best practices shared through the CMS Infant Well-Child Visit Learning Collaborative Affinity Group on improving infant well-child visit rates during the first 30 months of life.
 - DHCS initiated a Value-Based Payment (VBP) program to incentivize the provision of certain preventive services, including well-child visits, immunizations, blood lead screenings, and dental fluoride varnish, to increase provider participation and delivery of these key pediatric services. DHCS should continue to monitor whether these incentive payments contribute to improved provision of services during measurement year 2022.
- ◆ **Overall Finding 6: Adolescent rates for well-care visits are lower than rates for younger children, but adolescents do receive immunizations at higher rates than seen nationally.**
 - Approximately 50 percent of adolescents ages 12 to 17 years had at least one comprehensive well-care visit during measurement year 2021.

⁷ American Academy of Pediatrics. AAP Schedule of Well-Child Care Visits. Available at: <https://www.healthychildren.org/English/family-life/health-management/Pages/Well-Child-Care-A-Check-Up-for-Success.aspx>. Accessed on: Feb 8, 2023.

- Approximately 23 percent of adolescents ages 18 to 21 years had at least one comprehensive well-care visit during measurement year 2021.
 - Approximately 38 percent of adolescents 13 years of age had one dose of meningococcal vaccine, one Tdap vaccine, and completed the HPV vaccine series by their 13th birthday. This is approximately 3 percentage points higher than the national benchmark in measurement year 2021.
- ◆ **Conclusions and Considerations for Overall Finding 6:**
- Given that adolescents ages 12 to 21 years account for approximately 47 percent of the pediatric MCMC population, there are opportunities for MCPs to work with providers to ensure that as children get older, they continue to receive comprehensive well-care visits and recommended screenings.
 - According to the American Academy of Pediatrics and the U.S. Preventive Services Task Force, alcohol and tobacco use and depression can lead to life-long detrimental health complications, and early screening is necessary to prevent chronic health and social issues.^{8,9}
 - Opportunities exist to improve the provision of critical adolescent screenings (i.e., screenings for depression and alcohol and tobacco use) in adolescents ages 11 to 21 years during comprehensive well-care visits with PCPs and obstetricians/gynecologists (OB/GYNs).
 - DHCS' VBP program includes measures related to tobacco use, alcohol use, and depression screenings. Given that little improvement in billing for tobacco and alcohol screenings was seen during measurement year 2021, MCPs should continue to work with providers to improve billing practices to capture alcohol and tobacco screenings.
 - DHCS required MCPs to conduct a PIP for an area in need of improvement related to child and adolescent health, which was completed in December 2022. MCPs should apply the lessons learned from this PIP, as well as leverage information from the Preventive Services Report, to assist in their ongoing quality improvement efforts.
- ◆ **Overall Finding 7: Over half of MCMC children received a blood lead screening by their second birthday, but MCMC children received blood lead screenings at lower rates than seen nationally.**
- Approximately 52 percent of MCMC children received a blood lead screening by their second birthday, which was a decrease of approximately 6 percentage points from measurement year 2020 to measurement year 2021. Additionally, the statewide rate fell

⁸ American Academy of Pediatrics. Teens and Tobacco Use. Available at: <https://www.healthychildren.org/English/ages-stages/teen/substance-abuse/Pages/Teens-and-Tobacco-Use.aspx>. Accessed on: Feb 9, 2023.

⁹ Siu A (on behalf of the US Preventive Services Task Force). Screening for Depression in Children and Adolescents: US Preventive Services Task Force Recommendation Statement, *Pediatrics*. Available at: <https://pediatrics.aappublications.org/content/early/2016/02/04/peds.2015-4467>. Accessed on: Feb 9, 2023.

below the national benchmark by approximately 12 percentage points, demonstrating opportunities to improve blood lead screenings statewide.

- Twelve counties (i.e., Glenn, Humboldt, Imperial, Kings, Madera, Marin, Mendocino, Monterey, Napa, San Francisco, Santa Cruz, and Tulare) had *Lead Screening in Children* indicator rates above the national benchmark for measurement year 2021. Kings, Mendocino, Napa, and Tulare were the only counties with rates not also above the national benchmark in measurement year 2020. Of note, San Mateo County's rate was above the national benchmark in measurement year 2020; however, the rate declined by approximately 10 percentage points in measurement year 2021 and no longer exceeded the national benchmark (63.99 percent).

◆ **Conclusions and Considerations for Overall Finding 7:**

- DHCS continues to make progress on outreach activities designed to encourage utilization of preventive services for children under age 21 (e.g., initial mailing by DHCS, outbound call campaign by MCPs), and MCPs should continue their efforts to provide educational materials and make calls to parents/guardians of MCMC children to help them understand the services, including preventive care (e.g., well-child visits and blood lead screenings) available to them.
 - It is important to note that COVID-19 likely impacted the blood lead screenings given that many children who turned 2 years of age in measurement year 2021 would have typically received a blood lead screening after 1 year of age, which would have occurred during measurement year 2020.
- MCPs will be required to report the *Lead Screening in Children* indicator for measurement year 2022 and will be held to a minimum performance level. This will help encourage MCPs and their providers to ensure provision of necessary blood lead screenings for MCMC children.

Introduction

The “Reader’s Guide” is designed to provide supplemental information to the reader that may aid in the interpretation and use of the results presented in this report.

Preventive Services Population Characteristics

Table 2.1 and Table 2.2 display the statewide counts and percentages for the demographic and regional stratifications, respectively, of the pediatric MCMC population for both measurement years 2020 and 2021. Appendix C provides the county and MCP reporting unit counts and percentages for the pediatric MCMC population.

Table 2.1—Measurement Years 2020 and 2021 Statewide Population Characteristics

*The percentage for the total pediatric population (i.e., 21 years of age and younger as of December 31 of the corresponding measurement year) is based on all MCMC members enrolled during the respective measurement year.

Stratification	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Total Pediatric Population*				
Total	6,491,660	39.44%	6,296,488	38.87%
Race/Ethnicity				
American Indian or Alaska Native	20,377	0.32%	19,594	0.31%
Asian	399,135	6.18%	383,580	6.12%
Black or African American	423,670	6.56%	404,654	6.46%
Hispanic or Latino	3,648,314	56.53%	3,520,605	56.22%
Native Hawaiian or Other Pacific Islander	15,087	0.23%	13,847	0.22%
White	865,693	13.41%	816,752	13.04%

Stratification	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Other	429,697	6.66%	456,342	7.29%
Unknown/Missing	651,504	10.10%	647,310	10.34%
Primary Language				
Arabic	21,268	0.33%	20,526	0.33%
Armenian	15,678	0.24%	15,622	0.25%
Cambodian	3,304	0.05%	2,980	0.05%
Chinese	62,250	0.96%	60,092	0.96%
English	4,141,997	64.18%	4,047,747	64.63%
Farsi	9,593	0.15%	10,455	0.17%
Hmong	9,669	0.15%	8,784	0.14%
Korean	11,412	0.18%	10,194	0.16%
Russian	15,237	0.24%	15,216	0.24%
Spanish	2,047,428	31.73%	1,949,902	31.14%
Tagalog	8,432	0.13%	7,465	0.12%
Vietnamese	58,050	0.90%	53,526	0.85%
Other	33,651	0.52%	35,040	0.56%
Unknown/Missing	15,508	0.24%	25,135	0.40%
Age				
Less Than 1 Year	231,782	3.59%	228,000	3.64%
1 to 2 Years	556,587	8.62%	526,131	8.40%
3 to 6 Years	1,191,085	18.46%	1,126,369	17.99%
7 to 11 Years	1,503,293	23.29%	1,451,305	23.17%
12 to 17 Years	1,845,133	28.59%	1,825,687	29.15%
18 to 21 Years	1,125,597	17.44%	1,105,192	17.65%

Stratification	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Gender				
Female	3,173,588	49.18%	3,078,033	49.15%
Male	3,279,889	50.82%	3,184,651	50.85%

Table 2.2—Measurement Years 2020 and 2021 Statewide Population Regional Characteristics

*The percentage for the total pediatric population (i.e., 21 years of age and younger as of December 31 of the corresponding measurement year) is based on all MCMC members enrolled during the respective measurement year.

Stratification	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Total Pediatric Population*				
Total	6,491,660	39.44%	6,296,488	38.87%
Delivery Type Model				
County Organized Health Systems	1,246,667	19.32%	1,206,779	19.27%
Geographic Managed Care	705,027	10.92%	680,156	10.86%
Two-Plan (Local Initiative or Commercial Plan)	4,253,707	65.91%	4,132,588	65.99%
Regional	189,165	2.93%	185,607	2.96%
San Benito	10,511	0.16%	10,269	0.16%
Imperial	48,400	0.75%	47,285	0.76%
Population Density				
Rural	406,643	6.30%	398,782	6.37%
Urban	6,046,834	93.70%	5,863,902	93.63%

Medi-Cal Managed Care Health Plans and Geographic Regions

Table 2.3 displays the 58 California counties and the corresponding full-scope Medi-Cal MCPs operating within each county for ease of interpreting the results of this analysis.

Figure 2.1 displays a map of California with all counties labeled, and Figure 2.2 displays a map of California with all counties shaded to their appropriate geographic region.

Table 2.3—Counties and Applicable MCPs

County	MCP Names
Alameda	Alameda Alliance for Health; Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan
Alpine	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Amador	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan, California Health & Wellness Plan; Kaiser NorCal (KP Cal, LLC)
Butte	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Calaveras	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Colusa	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Contra Costa	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; Contra Costa Health Plan
Del Norte	Partnership HealthPlan of California
El Dorado	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan; Kaiser NorCal (KP Cal, LLC)
Fresno	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; CalViva Health
Glenn	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan

County	MCP Names
Humboldt	Partnership HealthPlan of California
Imperial	California Health & Wellness Plan, Molina Healthcare of California
Inyo	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Kern	Health Net Community Solutions, Inc.; Kern Health Systems, DBA Kern Family Health Care
Kings	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; CalViva Health
Lake	Partnership HealthPlan of California
Lassen	Partnership HealthPlan of California
Los Angeles	Health Net Community Solutions, Inc.; L.A. Care Health Plan
Madera	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; CalViva Health
Marin	Partnership HealthPlan of California
Mariposa	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Mendocino	Partnership HealthPlan of California
Merced	Central California Alliance for Health
Modoc	Partnership HealthPlan of California
Mono	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Monterey	Central California Alliance for Health
Napa	Partnership HealthPlan of California
Nevada	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Orange	CalOptima

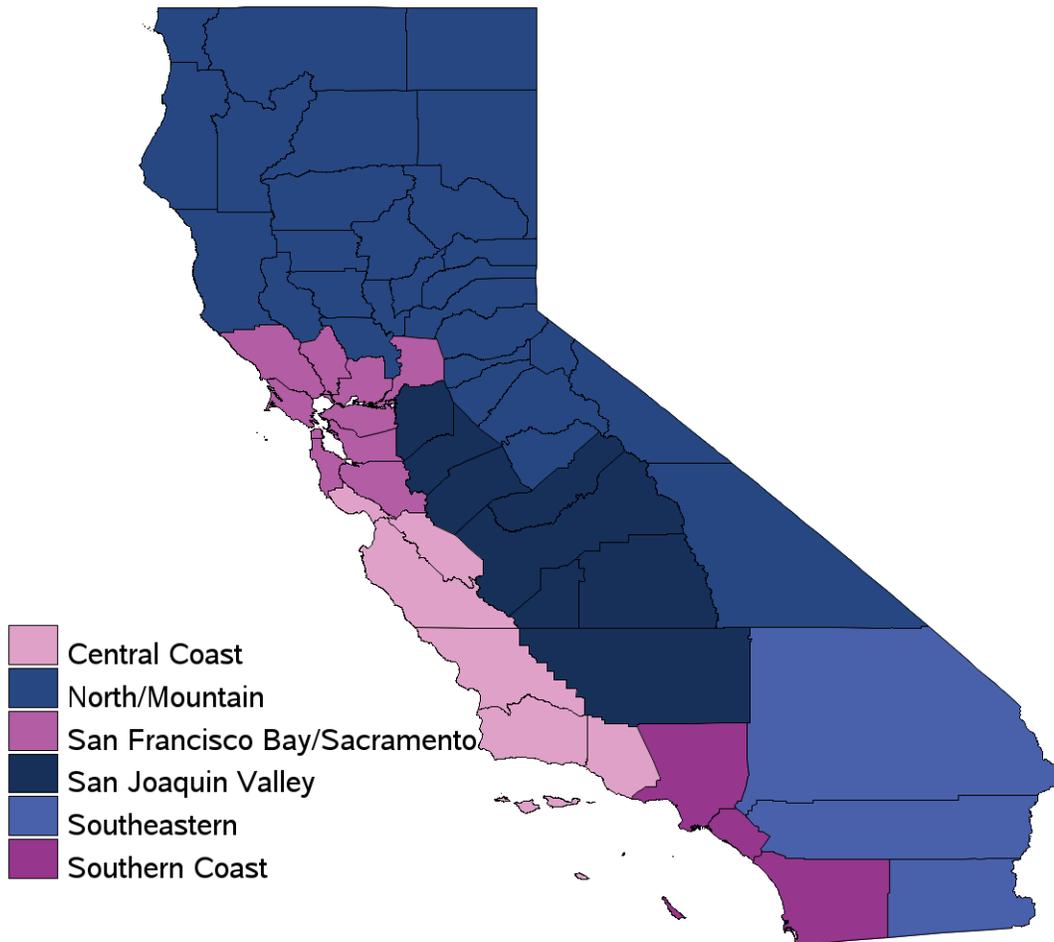
County	MCP Names
Placer	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan; Kaiser NorCal (KP Cal, LLC)
Plumas	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Riverside	Inland Empire Health Plan; Molina Healthcare of California
Sacramento	Aetna Better Health of California; Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; Health Net Community Solutions, Inc.; Kaiser NorCal (KP Call, LLC); Molina Healthcare of California
San Benito	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan
San Bernardino	Inland Empire Health Plan; Molina Healthcare of California
San Diego	Aetna Better Health of California; Blue Shield of California Promise Health Plan; Community Health Group Partnership Plan; Health Net Community Solutions, Inc.; Kaiser SoCal (KP Cal, LLC); Molina Healthcare of California; UnitedHealthcare Community Plan
San Francisco	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; San Francisco Health Plan
San Joaquin	Health Net Community Solutions, Inc.; Health Plan of San Joaquin
San Luis Obispo	CenCal Health
San Mateo	Health Plan of San Mateo
Santa Barbara	CenCal Health
Santa Clara	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; Santa Clara Family Health Plan
Santa Cruz	Central California Alliance for Health
Shasta	Partnership HealthPlan of California

County	MCP Names
Sierra	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Siskiyou	Partnership HealthPlan of California
Solano	Partnership HealthPlan of California
Sonoma	Partnership HealthPlan of California
Stanislaus	Health Net Community Solutions, Inc.; Health Plan of San Joaquin
Sutter	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Tehama	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Trinity	Partnership HealthPlan of California
Tulare	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; Health Net Community Solutions, Inc.
Tuolumne	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan
Ventura	Gold Coast Health Plan
Yolo	Partnership HealthPlan of California
Yuba	Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan

Figure 2.1—California Map by County



Figure 2.2—California Map by Geographic Region



Summary of Performance Indicators

DHCS selected a total of 12 MCP-calculated indicators, four HSAG-calculated indicators (i.e., administrative indicators calculated by HSAG for DHCS), and five DHCS-calculated indicators for inclusion in the 2022 Preventive Services Report. Table 2.4 displays the indicators included in the analysis, reporting methodology (“A” indicates administrative and “H” indicates hybrid), age groups for each indicator, and the benchmark source used for comparisons for each applicable indicator.

For each MCP-calculated indicator, MCPs used numerator and denominator criteria and minimum enrollment requirements defined either by the HEDIS specification for the Medicaid population or by the CMS Child Core Set. For the HSAG-calculated indicators, HSAG developed specifications for three indicators and used the CMS Child Core Set specifications for the remaining indicator. For the DHCS-calculated indicators, DHCS developed

specifications for four of the indicators (i.e., the Title 17 *Blood Lead Screening* indicators) and used the HEDIS specifications for the remaining indicator (i.e., *Lead Screening in Children*).

Table 2.4—Indicators, Age Groups, and Benchmarks

“NCQA Quality Compass” refers to NCQA’s Quality Compass national Medicaid HMO 50th percentiles for each of the corresponding indicators.

“CMS Child Core Set” refers to CMS’ Child Core Set National Median. This is the calculated 50th percentile of the total statewide rates reported by 28 states.

*For measurement year 2020, HSAG only compared the *Well-Child Visits in the First 15 Months—Six or More Well-Child Visits* stratification of the *Well-Child Visits in the First 30 Months of Life* indicator to NCQA Quality Compass benchmarks.

^Given that CMS transitioned to the Quality Measure Reporting (QMR) system, state reporting for measurement year 2020 was delayed; therefore, federal fiscal year (FFY) 2021 benchmarks are unavailable. As a result, HSAG compared measurement year 2021 rates for this indicator to the FFY 2020 benchmarks.

N/A indicates that national benchmarks are unavailable for the corresponding indicator.

Indicators	Methodology	Age Groups	Benchmarks
MCP-Calculated Indicators			
<i>Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6) and Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30–2)*</i>	A	15 Months; 30 Months	Measurement years 2021 NCQA Quality Compass*
<i>Child and Adolescent Well-Care Visits—Total (WCV)</i>	A	3 to 11 Years; 12 to 17 Years; 18 to 21 Years	Measurement year 2021 NCQA Quality Compass
<i>Childhood Immunization Status—Combination 10 (CIS–10)</i>	H	2 Years	Measurement years 2020 and 2021 NCQA Quality Compass
<i>Chlamydia Screening in Women—16 to 20 Years (CHL–1620)</i>	A	16 to 20 Years	Measurement years 2020 and 2021 NCQA Quality Compass

Indicators	Methodology	Age Groups	Benchmarks
<i>Developmental Screening in the First Three Years of Life—Total (DEV)[^]</i>	A	1 Year; 2 Years; 3 Years	FFY 2020 CMS Child Core Set
<i>Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)</i>	A	6 to 17 Years	Measurement years 2020 and 2021 NCQA Quality Compass
<i>Immunizations for Adolescents—Combination 2 (Meningococcal, Tdap, and HPV) (IMA-2)</i>	H	13 Years	Measurement years 2020 and 2021 NCQA Quality Compass
<i>Screening for Depression and Follow-Up Plan (CDF)</i>	A	12 to 17 Years; 18 to 21 Years	N/A
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC-BMI), Counseling for Nutrition—Total (WCC-N), and Counseling for Physical Activity (WCC-PA)</i>	H	3 to 11 Years; 12 to 17 Years; Total	Measurement years 2020 and 2021 NCQA Quality Compass
HSAG-Calculated Indicators			
<i>Alcohol Use Screening (AUS)</i>	A	11 to 17 Years; 18 to 21 Years	N/A
<i>Dental Fluoride Varnish (DFV)</i>	A	6 Months to 5 Years	N/A
<i>Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)</i>	A	6 to 17 Years	Measurement years 2020 and 2021 NCQA Quality Compass
<i>Tobacco Use Screening (TUS)</i>	A	11 to 17 Years; 18 to 21 Years	N/A
Title 17 Blood Lead Screening Indicators			
<i>Blood Lead Screening—Test at 12 Months of Age (BLS-1)</i>	A	1 Year	N/A

Indicators	Methodology	Age Groups	Benchmarks
<i>Blood Lead Screening—Test at 24 Months of Age (BLS–2)</i>	A	2 Years	N/A
<i>Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)</i>	A	2 Years	N/A
<i>Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS–316)</i>	A	6 Years	N/A
HEDIS Blood Lead Screening Indicator			
<i>Lead Screening in Children (LSC)</i>	A	2 Years	Measurement years 2020 and 2021 NCQA Quality Compass

Methodology Overview

The information presented below provides a high-level overview of the preventive services analyses. For the detailed methodology, please see Appendix D.

Data Sources

For the MCP-calculated indicators listed in Table 2.4, HSAG received the CA-required patient-level detail file from each Medi-Cal MCP for each HEDIS reporting unit. The measurement years 2020 and 2021 patient-level detail files followed HSAG’s patient-level detail file instructions and included the Medi-Cal client identification number, date of birth, and member months for members included in the audited MCP-calculated indicator rates. Additionally, the patient-level detail files indicated whether a member was included in the numerator and/or denominator for each applicable MCP-calculated indicator. HSAG validated the patient-level detail files to ensure the numerator and denominator counts matched what was reported by MCPs in the audited HEDIS Interactive Data Submission System files and non-HEDIS Microsoft (MS) Excel reporting files. Please note, it is possible that some or all MCPs included non-certified eligible members in their rates. HSAG used these patient-level detail files, along with supplemental files (e.g., demographic data provided by DHCS), to perform the measure analysis.

For the HSAG-calculated indicators listed in Table 2.4, HSAG received claims/encounter data; member enrollment, eligibility, and demographic data; and provider files from DHCS. Upon receipt of these data from DHCS, HSAG evaluated the data files and performed preliminary file validation. HSAG verified that the data were complete and accurate by ensuring correct formatting, confirming reasonable value ranges for critical data fields, assessing monthly enrollment and claim counts, and identifying fields with a high volume of missing values.

For the DHCS-calculated indicators listed in Table 2.4, HSAG received a member-level file that provided the Medi-Cal client identification number and numerator and denominator flags for each *Blood Lead Screening* indicator. Using the member-level file provided by DHCS, HSAG combined with the demographic and enrollment data provided by DHCS to limit the member-level file to those members who met the continuous enrollment requirements at the statewide and MCP reporting unit levels. HSAG then calculated statewide and MCP reporting unit-level rates for each *Blood Lead Screening* indicator.

Statistical Analysis

Using the data sources described above, HSAG performed statewide-, regional-, and MCP-level analyses for the applicable indicators.

Statewide-Level Analysis

HSAG calculated statewide rates for the MCP-calculated and HSAG-calculated indicators and derived statewide rates from the member-level data for the DHCS-calculated indicators listed in Table 2.4. HSAG also compared the statewide indicator rates to national benchmarks as displayed in Table 2.4. All statewide indicator rates were stratified by the demographic stratifications outlined in Table 2.5.

Table 2.5—Statewide Stratifications

*Primary language stratifications were derived from the current threshold languages for Medi-Cal Managed Care counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

Stratification	Groups
Demographic	
Race/ethnicity	Hispanic or Latino, White, Black or African American, Asian, American Indian or Alaska Native, Native Hawaiian or Other Pacific Islander, Other, and Unknown/Missing (see Table 2.6 for more detail)
Primary language*	English, Spanish, Arabic, Armenian, Cambodian, Chinese (Mandarin or Cantonese), Farsi, Hmong, Korean, Russian, Tagalog, Vietnamese, Other, and Unknown/Missing
Age	Vary depending on indicator specifications (see Table 2.4 for more detail)
Gender	Male and Female

Table 2.6 displays the individual racial/ethnic groups that comprise the Asian and Native Hawaiian or Other Pacific Islander racial/ethnic demographic stratifications. Racial/ethnic stratifications were based on data collection guidance from the federal Office of Management and Budget as well as the U.S. Department of Health and Human Services.

Table 2.6—Asian and Native Hawaiian or Other Pacific Islander Racial/Ethnic Stratification Groups

*Some “Other Pacific Islanders” who would not be considered part of the Asian racial/ethnic group were included in the Asian racial/ethnic group due to limitations of existing data fields (i.e., the data do not allow HSAG to parse out racial/ethnic groups that may not be considered Asian).

Stratification	Groups
Asian	Filipino, Amerasian, Chinese, Cambodian, Japanese, Korean, Asian Indian, Laotian, Vietnamese, Hmong, and Other Asian or Pacific Islander*
Native Hawaiian or Other Pacific Islander	Hawaiian, Guamanian, and Samoan

Regional-Level Analysis

HSAG calculated regional-level rates for the MCP-calculated and HSAG-calculated indicators and derived regional rates from the member-level data for the DHCS-calculated indicators listed in Table 2.4. The regional stratifications are listed in Table 2.7 and Table 2.8.

Table 2.7—Regional Stratification Groups

*The Imperial and San Benito delivery models are not included in the delivery type model analysis since the rates for those models are represented in the county stratifications.

Stratification	Groups
County	Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Fresno, Glenn, Humboldt, Imperial, Inyo, Kern, Kings, Lake, Lassen, Los Angeles, Madera, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Orange, Placer, Plumas, Riverside, Sacramento, San Benito, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Clara, Santa Cruz, Shasta,

Stratification	Groups
	Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tulare, Tuolumne, Ventura, Yolo, Yuba
Delivery Type Model*	County Organized Health Systems, Geographic Managed Care, Two-Plan (i.e., Local Initiative or Commercial Plan), Regional
Population Density	Urban, Rural

Table 2.8—Geographic Regions and Applicable Counties

Geographic Region	Counties
Central Coast	Monterey, San Benito, San Luis Obispo, Santa Barbara, Santa Cruz, Ventura
Southeastern	Imperial, Riverside, San Bernardino
San Francisco Bay/Sacramento	Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano, Sonoma, Sacramento
North/Mountain	Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Inyo, Lake, Lassen, Mariposa, Mendocino, Modoc, Mono, Nevada, Plumas, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, Placer, El Dorado, Sutter, Yolo, Yuba
San Joaquin Valley	Fresno, Kern, Kings, Madera, Merced, San Joaquin, Stanislaus, Tulare
Southern Coast	Los Angeles, Orange, San Diego

MCP Reporting Unit-Level Analysis

HSAG used the MCP reporting unit-level rates for the MCP-calculated indicators and calculated MCP reporting unit-level rates for the Title 17 and HEDIS *Blood Lead Screening* indicators, and HSAG-calculated indicators listed in Table 2.4.

For the three HSAG-calculated indicators, HSAG included a member in an MCP reporting unit's rate calculation if the member met the indicator's continuous enrollment criteria with the MCP reporting unit. HSAG calculated rates for the 56 MCP reporting units as displayed in Table 2.9.

Table 2.9—MCP Reporting Units

MCP Name	Reporting Units
Aetna Better Health of California	Sacramento, San Diego
Alameda Alliance for Health	Alameda
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan	Alameda, Contra Costa, Fresno, Kings, Madera, Region 1 (Butte, Colusa, Glenn, Plumas, Sierra, Sutter, and Tehama counties), Region 2 (Alpine, Amador, Calaveras, El Dorado, Inyo, Mariposa, Mono, Nevada, Placer, Tuolumne, and Yuba counties), Sacramento, San Benito, San Francisco, Santa Clara, Tulare
Blue Shield of California Promise Health Plan	San Diego
California Health & Wellness Plan	Imperial, Region 1, Region 2
CalOptima	Orange
CalViva Health	Fresno, Kings, Madera
CenCal Health	San Luis Obispo, Santa Barbara
Central California Alliance for Health	Merced, Monterey/Santa Cruz
Community Health Group Partnership Plan	San Diego
Contra Costa Health Plan	Contra Costa
Gold Coast Health Plan	Ventura
Health Net Community Solutions, Inc.	Kern, Los Angeles, Sacramento, San Diego, San Joaquin, Stanislaus, Tulare
Health Plan of San Joaquin	San Joaquin, Stanislaus
Health Plan of San Mateo	San Mateo

MCP Name	Reporting Units
Inland Empire Health Plan	Riverside/San Bernardino
Kaiser NorCal (KP Cal, LLC)	KP North (Amador, El Dorado, Placer, and Sacramento counties)
Kaiser SoCal (KP Cal, LLC)	San Diego
Kern Health Systems, DBA Kern Family Health Care	Kern
L.A. Care Health Plan	Los Angeles
Molina Healthcare of California	Imperial, Riverside/San Bernardino, Sacramento, San Diego
Partnership HealthPlan of California	Northeast (Lassen, Modoc, Shasta, Siskiyou, and Trinity counties), Northwest (Del Norte and Humboldt counties), Southeast (Napa, Solano, and Yolo counties), Southwest (Lake, Marin, Mendocino, and Sonoma counties)
San Francisco Health Plan	San Francisco
Santa Clara Family Health Plan	Santa Clara
UnitedHealthcare Community Plan	San Diego

Coronavirus Disease 2019 (COVID-19) Analysis

DHCS provided HSAG with summary data from its COVID-19 module, which included COVID-19 case and vaccination rates for the pediatric MCMC population, stratified by demographics (i.e., race/ethnicity, age, and gender), where applicable, to better understand the prevalence of COVID-19 within the pediatric MCMC population.

Determination of Key Findings

To focus the 2022 Preventive Services Report on more actionable results for stakeholders, HSAG worked with DHCS to determine which results were considered to be key findings for inclusion in the body of the 2022 Preventive Services Report. At a minimum, results had to meet at least one of the following criteria to be considered a key finding:

- ◆ Indicators with large rate changes from year-to-year
 - Rate increases or decreases from the prior measurement year by at least a 10 percent relative difference
- ◆ Indicator rates with overall low performance
 - Indicators with rates below the applicable national benchmark by at least a 10 percent relative difference

- ◆ Racial/ethnic, primary language, gender, and age groups with disparate performance for indicators
 - A demographic group that had more than half of its indicator rates below the respective benchmark by at least a 10 percent relative difference
- ◆ Indicator rates with regional variations in performance
 - Geographic regions with consistently high or low performance across indicators relative to the statewide aggregate
- ◆ Domains with overall poor performance
 - More than half of the indicators within a domain with low performance relative to national benchmarks

After testing results, HSAG provided DHCS with a spreadsheet containing the results as well as its recommendations regarding which results to include in the body of the report. HSAG and DHCS then decided on a final list of indicators with the most actionable results for stakeholders to include in the body of the report.

Cautions and Limitations

Administrative Data Incompleteness

For the *Alcohol Use Screening*, *Lead Screening in Children*, and *Tobacco Use Screening* indicators, the administrative rates may be artificially low due to a lack of reporting within administrative data sources (i.e., medical record review or electronic health record data could be necessary to capture this information). Of note, alcohol or tobacco screenings and the administration of dental fluoride varnish that occur during a visit to a Federally Qualified Health Center are not captured in administrative data; therefore, rates for these indicators may be incomplete due to provider billing practices.

Benchmark Comparisons

National benchmarks for the *Lead Screening in Children* indicator are derived from data collected using the hybrid methodology (i.e., administrative and medical record review data); however, the *Lead Screening in Children* indicator rates calculated by DHCS relied on administrative and supplemental registry data. Therefore, exercise caution when comparing *Lead Screening in Children* indicator rates presented in the Preventive Services Report to national benchmarks.

COVID-19 Rate Impacts

The COVID-19 pandemic and subsequent public health emergency likely impacted measurement year 2020 rates given stay-at-home orders and other statewide and national efforts taken to mitigate the spread of COVID-19. Additionally, for the *Lead Screening in Children* measure, many children who turned 2 years of age in measurement year 2021 would have typically received a blood lead screening after 1 year of age, which would have occurred during measurement year 2020; therefore, COVID-19 likely impacted these children receiving

blood lead screenings. Given this, please exercise caution when comparing measurement years 2020 and 2021 rates.

Demographic Characteristic Assignment

Members' demographic characteristics may change as their records are updated over time. For instance, a member may relocate and change ZIP Codes during the reporting year. HSAG assigned demographic characteristics using the most recent non-missing record for each member. Therefore, members' assigned demographic characteristics may not always reflect their demographic characteristics at the time of the indicator events.

Discrepancies with the External Quality Review (EQR) Technical Report

HSAG used the patient-level detail files reported by the MCPs to calculate the MCP reporting unit rates for the MCAS indicators presented in this report. However, HSAG did remove members from the indicator rates if they did not meet the age or gender requirements for the indicator. As a result, the MCP reporting unit rates presented in this report may not align with those presented in the EQR technical report, since the MCPs' reported rates were used as reported. Additionally, HSAG did not weight the statewide aggregate rates for hybrid indicators presented in this report. As a result, the statewide aggregate rates for hybrid indicators presented in this report will not match the rates reported in the EQR technical report, since the EQR technical report presents weighted statewide rates derived from MCPs' reported MCAS rates.

Hybrid Indicators

For hybrid indicators reported by the MCPs, NCQA recommends the submission of a sample of 411 members per reporting unit to limit bias and to allow for results from the sample to be generalizable to the entire eligible population. As the rates for individual strata were based on fewer than 411 members, it should be noted that the stratified rates may not be generalizable to the total eligible population. Due to this caveat, the stratified rates produced for hybrid indicators should be interpreted with caution. Additionally, HSAG did not weight the statewide rates for hybrid indicators by the total eligible population, so all MCPs, regardless of size, count equally toward the statewide rates. As such, performance may not be representative of actual statewide performance.

Medi-Cal Specialty Mental Health Services Program Impacts

While DHCS administers Medi-Cal, the Medi-Cal Specialty Mental Health Services program is "carved-out" of the broader Medi-Cal program and operates under the authority of a waiver approved by CMS under Section 1915(b) of the Social Security Act. As such, county mental health plans are required to provide Specialty Mental Health Services.¹⁰ Given this, MCPs are

¹⁰ DHCS. Specialty Mental Health Services for Children and Youth. March 2021. Available at: <https://www.dhcs.ca.gov/services/MH/Pages/Specialty-Mental-Health-Services-for-Children-and-Youth.aspx>. Accessed on: Feb 14, 2023.

not responsible for comprehensive mental health care among pediatric MCMC members, and MCPs may not have access to the Specialty Mental Health Services data. Therefore, rates displayed for the *Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—Ages 6 to 17 (FUM-30)* and *Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)* indicators may not be indicative of MCP performance. Additionally, the rates may be related to referrals being made across delivery systems, and diagnosis information may be incomplete.

Evaluating Results

Section 3 and Appendix A of this report present the statewide demographic and regional results for each indicator, while Appendix B presents the MCP reporting unit results for each indicator. Where possible, measurement years 2020 and 2021 results are presented for each indicator.

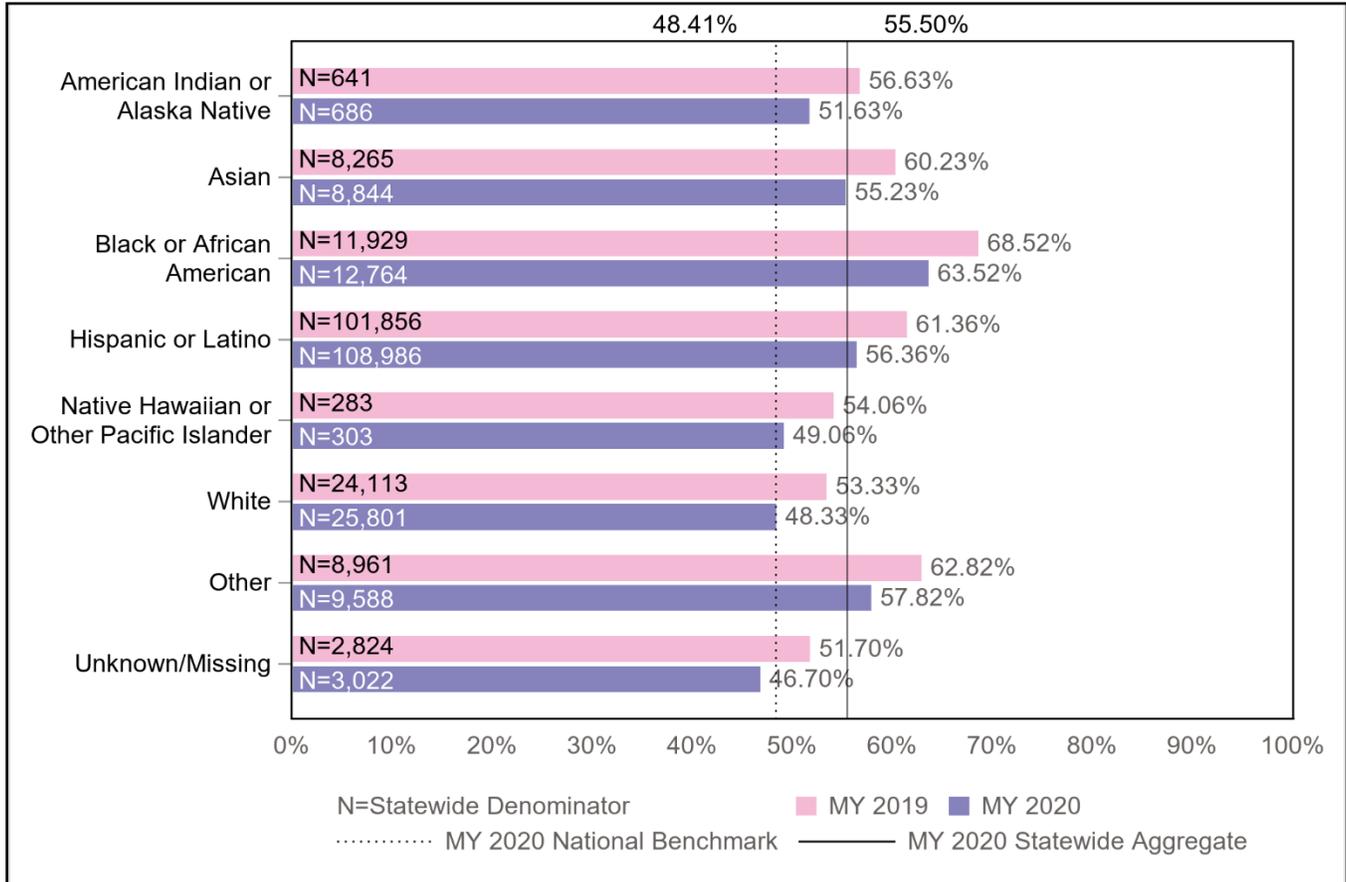
Figure Interpretation

For each indicator presented within Section 3 and Appendix A of this report, horizontal bar charts display the rates for the racial/ethnic, primary language, gender, age, delivery type model, population density, and geographic region stratifications for measurement year 2021. The figures display a single dotted reference line that represents the national benchmark for measurement year 2021, where applicable, and a single solid reference line that represents the statewide aggregate rate for measurement year 2021. The national benchmark value (i.e., the 50th percentile), where applicable, and statewide aggregate are displayed above the corresponding reference lines. “N” represents the total statewide denominator for an indicator for a particular group. The value of “N” is displayed in the figure, when possible. However, when the bar is too short to display the value, it is displayed as a note above the figure. When available, the horizontal bar chart also displays comparisons to measurement year 2020. The measurement year 2020 national benchmark and statewide aggregate values are presented above the figure as a note. An example of the horizontal bar chart for the racial/ethnic stratification is shown in Figure 2.3. All data in the sample figure are mock data.

Figure 2.3—Sample Indicator-Level Horizontal Bar Chart Figure

FIGURE CONTAINS MOCK DATA

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 53.70 percent and 60.50 percent, respectively.



County-Level Map Interpretation

In Section 3 and Appendix A, HSAG presents measurement year 2021 county-level rates using a map of California which includes shading to indicate performance. To highlight regional performance differences, HSAG shaded each county using a color gradient based on how the rate for each county compared to the performance quintiles. For each indicator, HSAG calculated performance quintiles (i.e., 20th percentile, 40th percentile, 60th percentile, and 80th percentile) based on county performance. HSAG then determined into which quintile each county fell (e.g., below the 20th percentile, between the 20th and 40th percentiles). HSAG shaded each county based on the corresponding quintiles as displayed in Table 2.10.

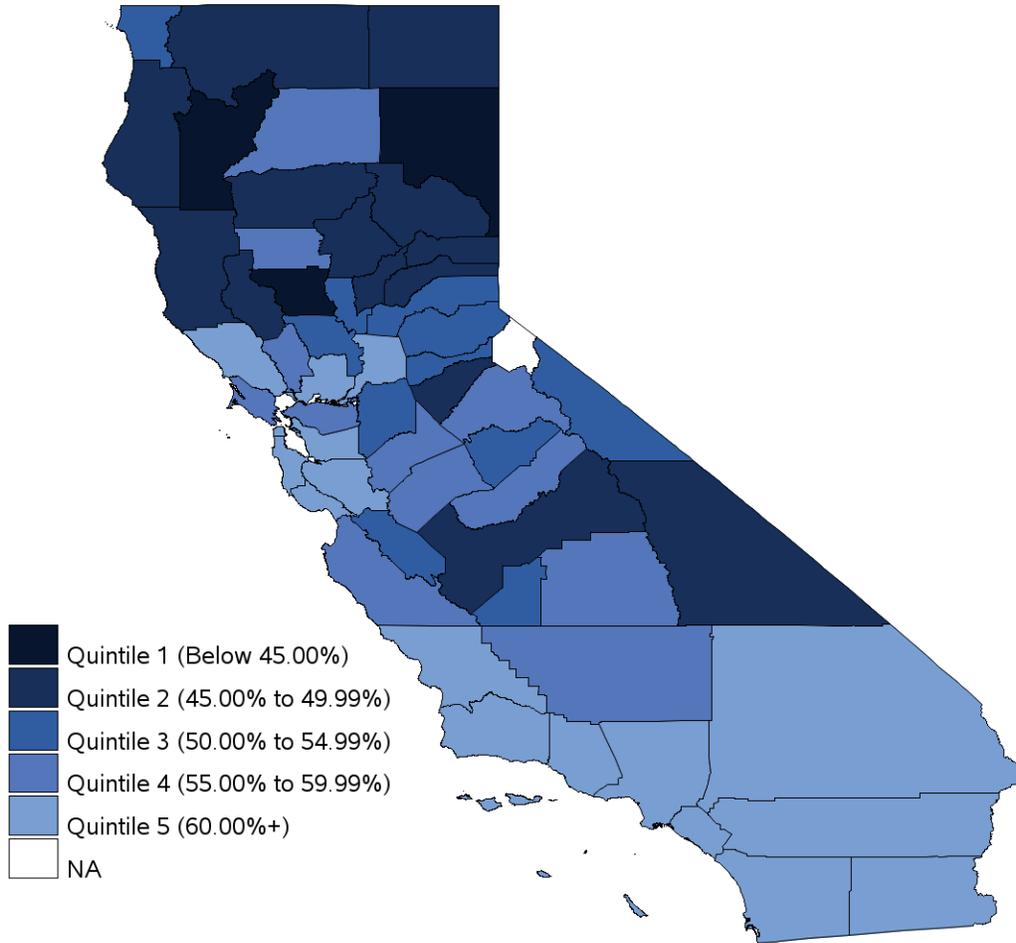
Table 2.10—Statewide Performance Quintile Thresholds and Corresponding Colors

For county rates with a small denominator (i.e., less than 30) or small numerator (i.e., less than 11), HSAG shaded the county white.

Statewide Performance Quintile	Performance Thresholds and Corresponding Colors
NA	Small denominator or suppressed rate
Quintile 1 (least favorable rates)	Below the 20th percentile
Quintile 2	At or above the 20th percentile but below the 40th percentile
Quintile 3	At or above the 40th percentile but below the 60th percentile
Quintile 4	At or above the 60th percentile but below the 80th percentile
Quintile 5 (most favorable rates)	At or above the 80th percentile

An example of a statewide map shaded to indicate county-level performance is shown in Figure 2.4. All data in the sample figure are mock data.

Figure 2.4—Statewide Map—County-Level Results
FIGURE CONTAINS MOCK DATA



3. Statewide Key Findings

The Statewide Key Findings section presents the statewide and regional results for measurement year 2021, and provides comparisons to measurement year 2020 results, where possible, for indicators meeting the key finding criteria described under the “Determination of Key Findings” subheading in the Reader’s Guide.

For each MCP-, HSAG-, and DHCS-calculated indicator presented within the Statewide Key Findings section, horizontal bar charts display the rates for the racial/ethnic, primary language, age, gender, delivery type model, population density, and geographic region stratifications for measurement years 2021 and 2020, where possible. The figures display a single dotted reference line that represents the national benchmark for measurement year 2021 (i.e., the 50th percentile), where applicable, and a single solid reference line that represents the statewide aggregate rate for measurement year 2021. The national benchmark value, where applicable, and statewide aggregate are displayed above the corresponding reference lines. “N” represents the total statewide denominator for an indicator for a particular group. The measurement year 2020 statewide aggregate rate and national benchmark are displayed as a note above the figure, if available.

HSAG also presents measurement year 2021 county-level rates using a map of California which includes shading to indicate performance. To highlight regional performance differences, HSAG shaded each county using a color gradient based on how the rate for each county compared to the performance quintiles. HSAG shaded each county based on the corresponding quintiles as displayed in Table 2.10 in the Reader’s Guide.

MCP-Calculated MCAS Indicator Results

Figure 3.1 through Figure 3.42 display the measurement years 2020 and 2021 statewide and regional results for the MCAS indicators reported by the 25 full-scope Medi-Cal MCPs with results considered to be key findings. Please note that MCPs’ data and HEDIS rate production processes go through an extensive independent audit and verification process before their performance measure rates are finalized and submitted to DHCS.

The following MCP-calculated indicators are not presented in Section 3 as HSAG and DHCS identified no key findings:

- ◆ *Developmental Screening in the First Three Years of Life—Total (DEV)*
- ◆ *Immunizations for Adolescents—Combination 2 (IMA-2)*
- ◆ *Screening for Depression and Follow-Up Plan (CDF)*
- ◆ *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC-BMI)*
- ◆ *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC-N)*

- ◆ *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity (WCC–PA)*

The results for these indicators are available in Appendix A.

Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits

The *Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)* indicator measures the percentage of children who turned 15 months old during the measurement year who received six or more well-child visits with a primary care provider (PCP). Figure 3.1 through Figure 3.7 display the *Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure 3.1—Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 54.92 percent and 37.70 percent, respectively.

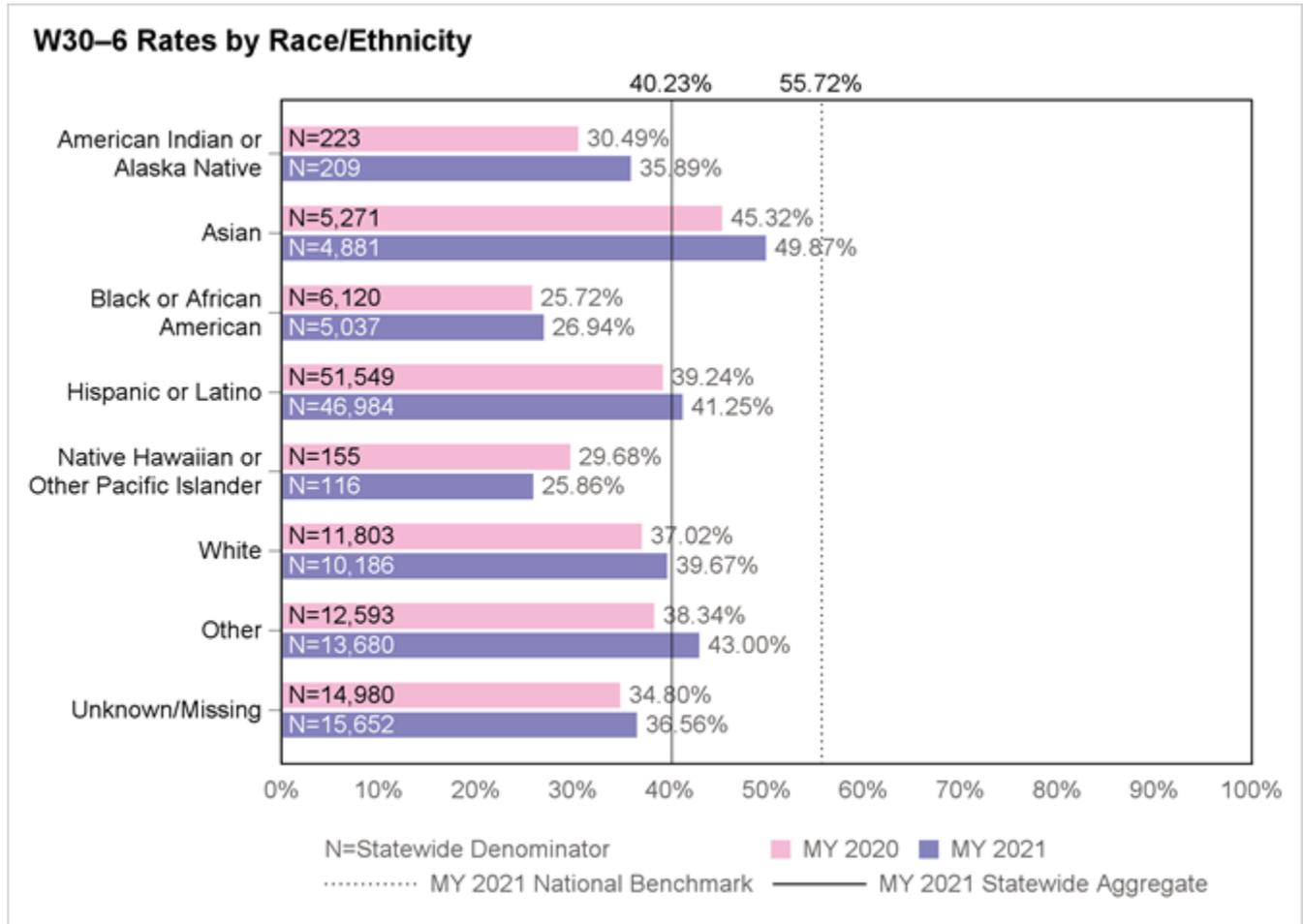


Figure 3.2—Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 54.92 percent and 37.70 percent, respectively.

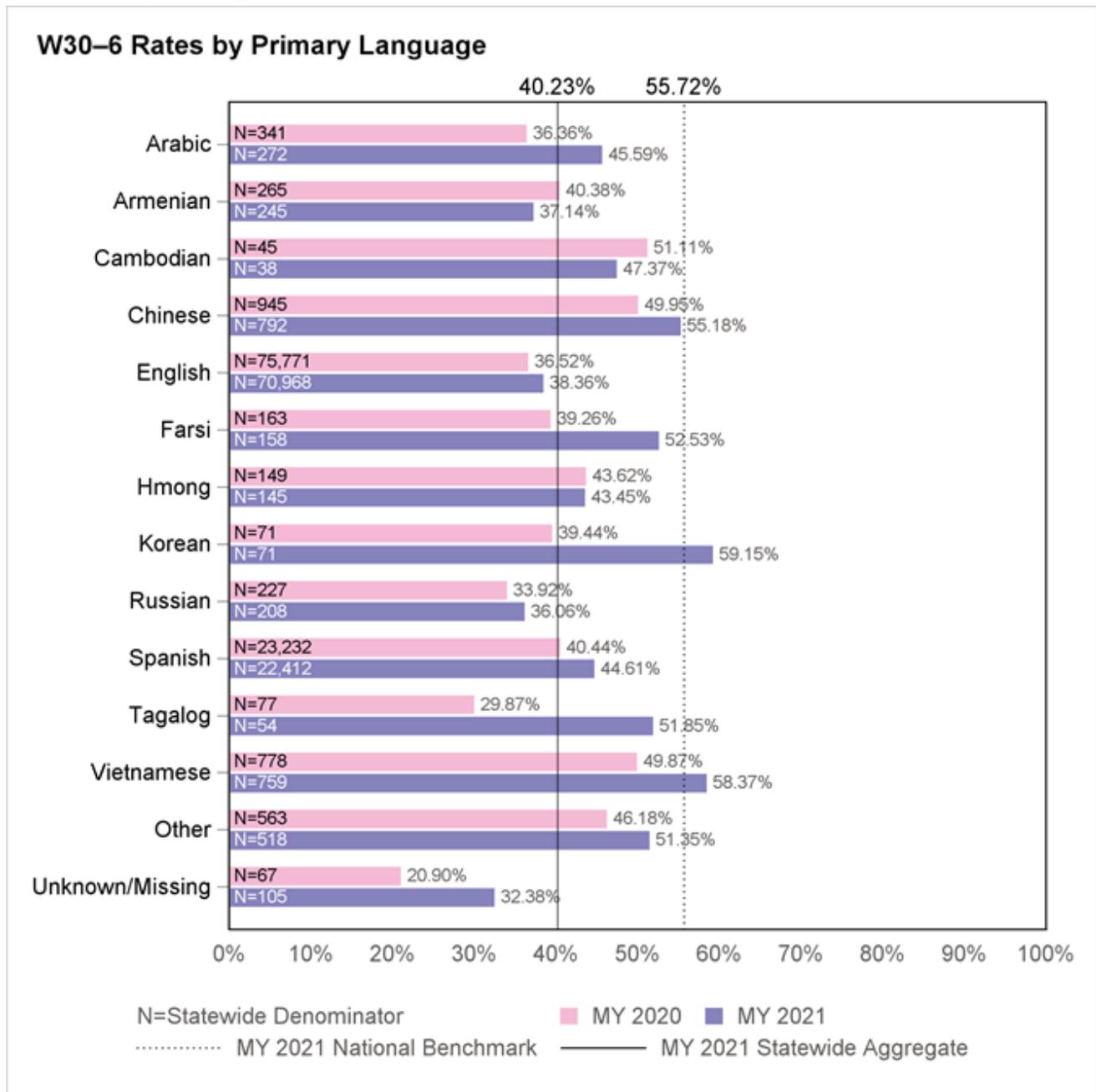
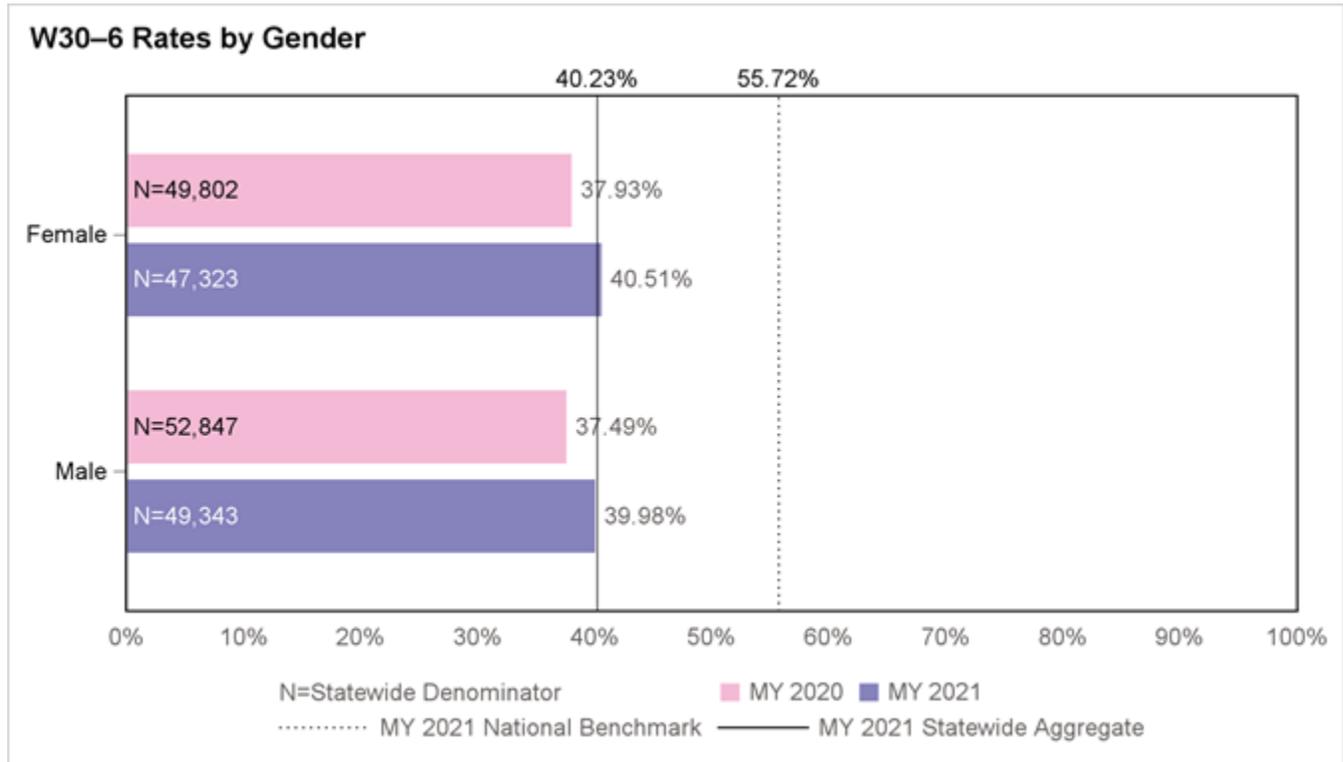


Figure 3.3—Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 54.92 percent and 37.70 percent, respectively.



- ◆ While the statewide aggregate for measurement year 2021 fell below the national benchmark by approximately 15 percentage points, it also increased from measurement year 2020 by more than a 5 percent relative difference, indicating that MCPs made progress toward ensuring an adequate number of children received comprehensive well-child visits.
- ◆ For both measurement years 2020 and 2021, reportable rates for all racial/ethnic groups, 12 of 14 (85.71 percent) primary language groups (Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Russian, Spanish, Tagalog, Other, and Unknown/Missing), and both gender groups fell below the national benchmark.
- ◆ For both measurement years 2020 and 2021, rates for three of eight (37.50 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, and Native Hawaiian or Other Pacific Islander) and two of 14 (14.29 percent) primary language groups (Russian and Unknown/Missing) were below the statewide aggregate by more than a 10 percent relative difference.
- ◆ From measurement year 2020 to measurement year 2021, rates for three of eight (37.50 percent) racial/ethnic groups (American Indian or Alaska Native, Asian, and Other) and nine of 14 (64.29 percent) primary language groups (Arabic, Chinese, Farsi, Korean,

Spanish, Tagalog, Vietnamese, Other, and Unknown/Missing) increased by more than a 10 percent relative difference. However, rates for the Native Hawaiian or Other Pacific Islander racial/ethnic group decreased by more than a 10 percent relative difference.

Figure 3.4—Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 54.92 percent and 37.70 percent, respectively.

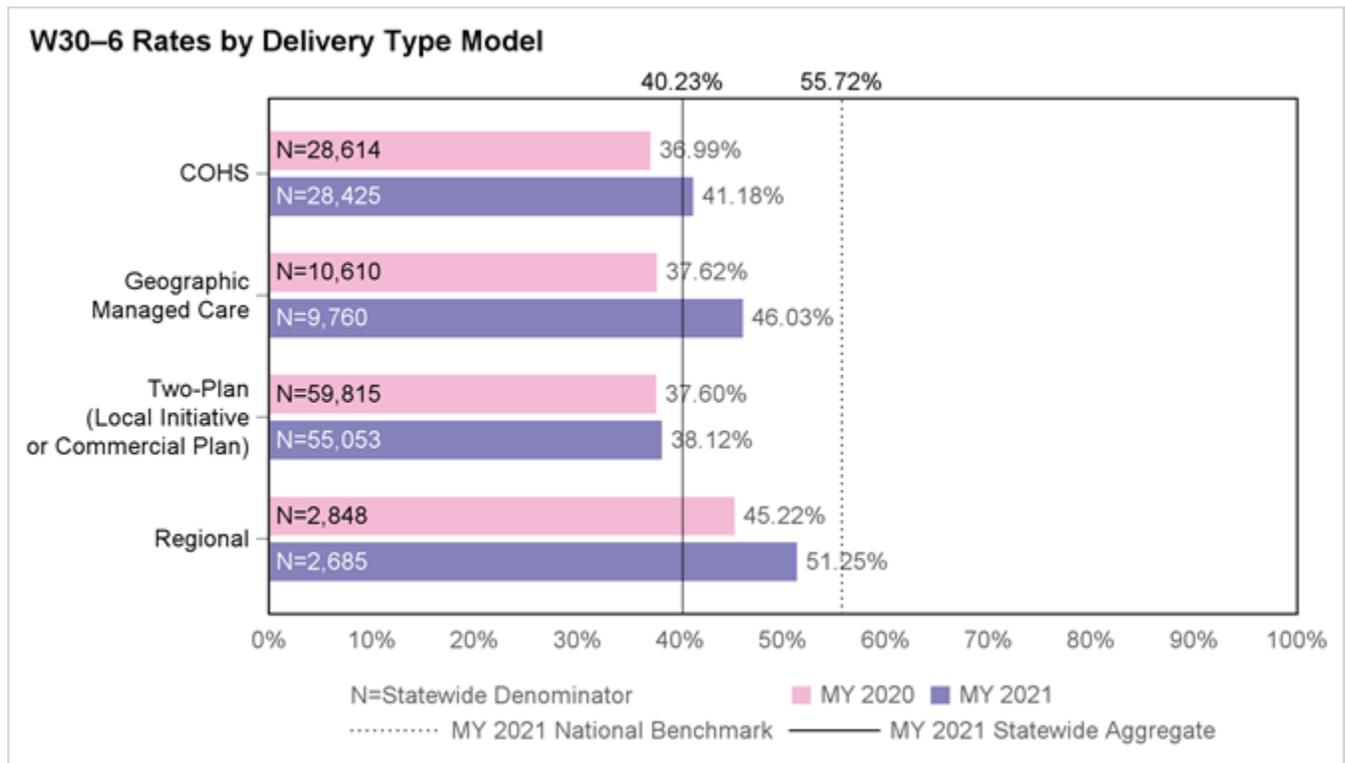


Figure 3.5—Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 54.92 percent and 37.70 percent, respectively.

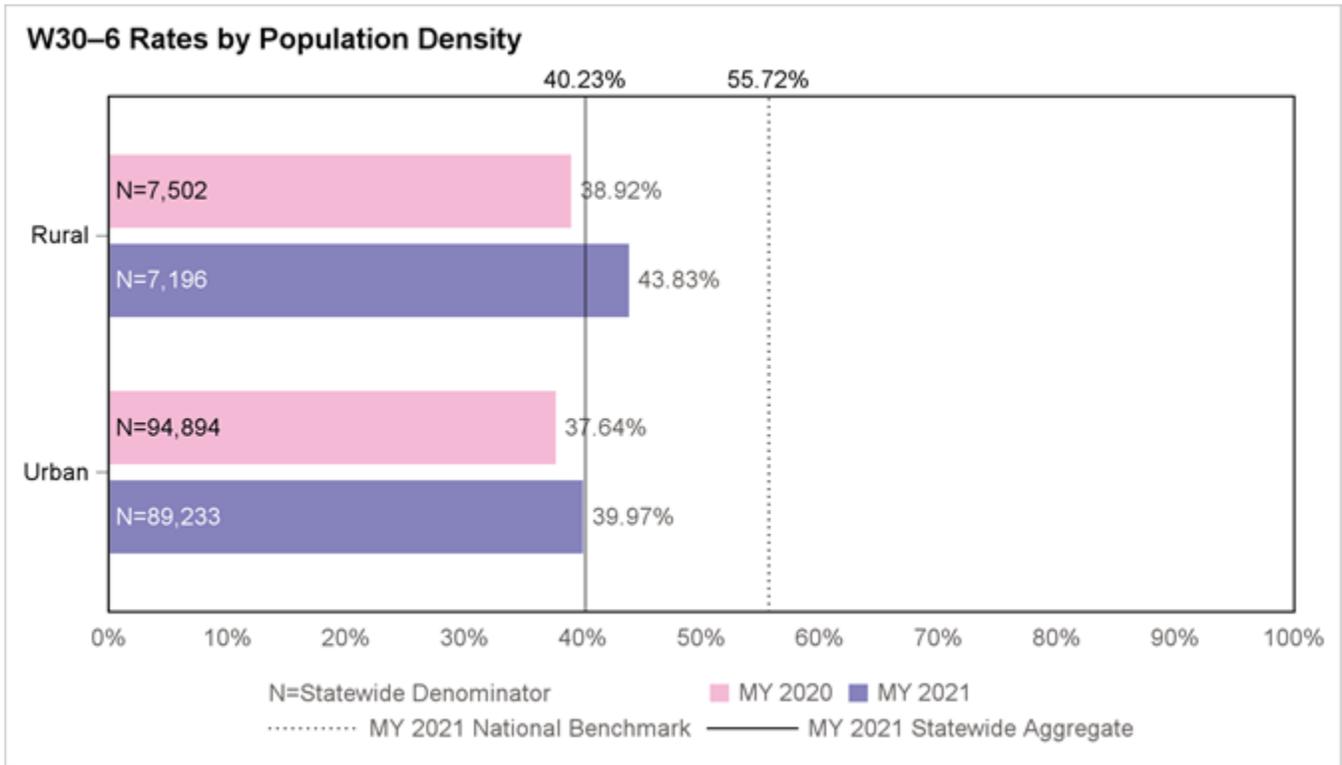
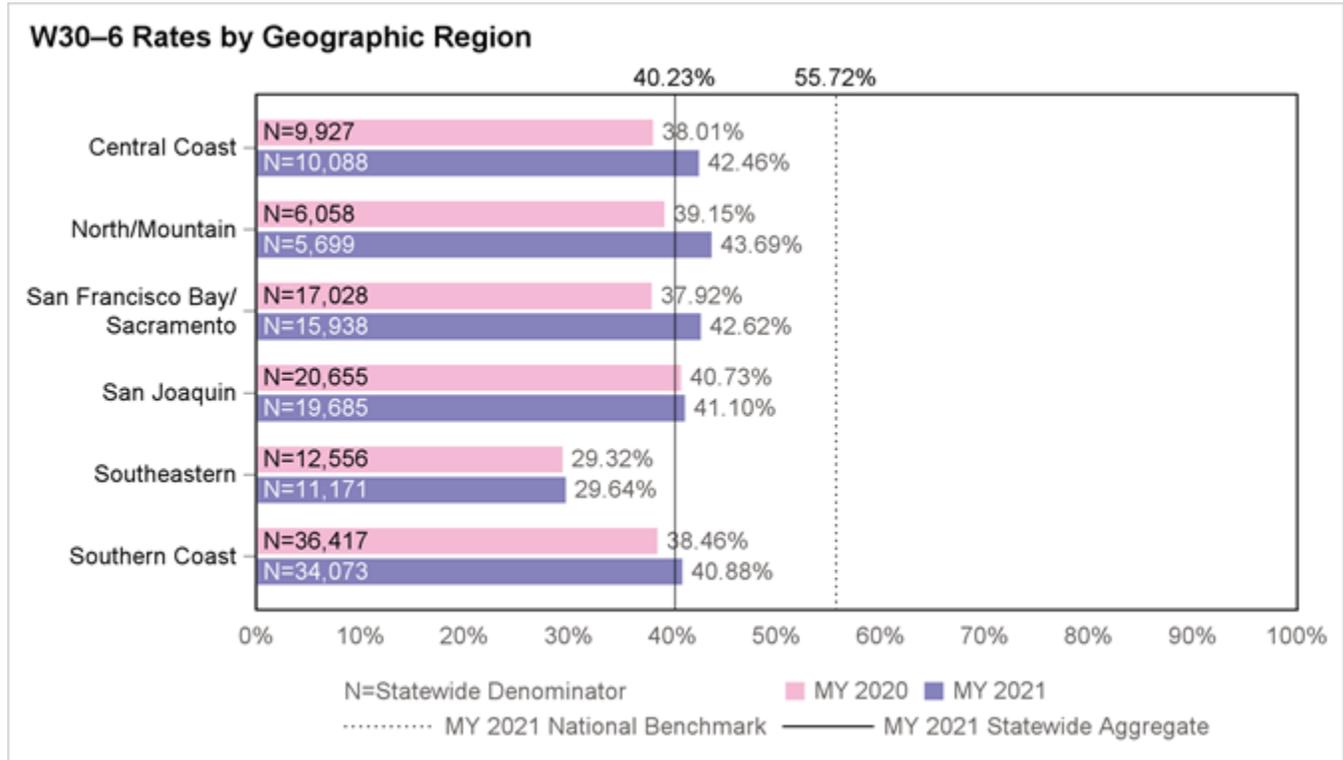


Figure 3.6—Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 54.92 percent and 37.70 percent, respectively.

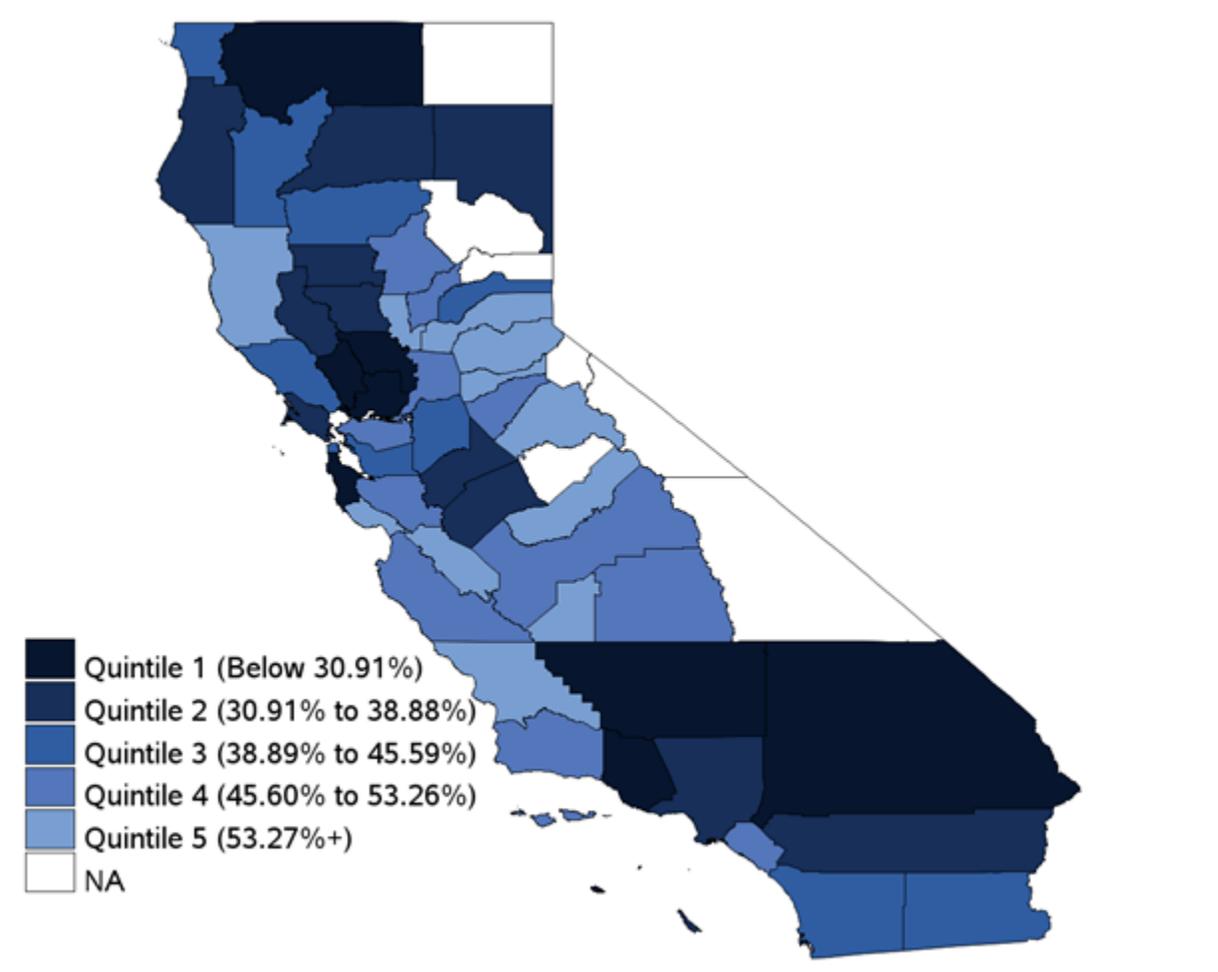


- ◆ For both measurement years 2020 and 2021, the *Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits* indicator rates for all delivery type model groups, population density groups, and geographic regions fell below the national benchmark.
- ◆ For both measurement years 2020 and 2021, rates for the Southeastern geographic region were below the statewide aggregate by more than a 20 percent relative difference.
- ◆ From measurement year 2020 to measurement year 2021, rates for three of four (75.00 percent) delivery type model groups (COHS, Geographic Managed Care, and Regional), the rural population density group, and three of six (50.00 percent) geographic regions (Central Coast, North/Mountain, and San Francisco Bay/Sacramento) increased by more than a 10 percent relative difference.

Figure 3.7—Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader's Guide for a list of MCPs operating in each county.



- ◆ From measurement year 2020 to measurement year 2021, 34 of 51 (66.67 percent) counties with reportable *Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits* indicator rates increased, and rates for 26 of these 34 (76.47 percent) counties increased by at least a 10 percent relative difference. Additionally, reportable rates for 43 of 51 (84.31 percent) counties were below the national benchmark for measurement year 2021, with rates for all 43 counties below the national benchmarks for both measurement years 2020 and 2021.
- ◆ Kern, Napa, San Bernardino, San Mateo, Siskiyou, Solano, Ventura, and Yolo counties were in Quintile 1 (i.e., had the least favorable rates).
 - Of note, reportable rates for two of three (66.67 percent) counties (Riverside and San Bernardino) in the Southeastern geographic region were in Quintiles 1 or 2. MCPs

operating in the Southeastern geographic region include California Health & Wellness Plan, Inland Empire Health Plan, and Molina Healthcare of California.

- ◆ Amador, El Dorado, Kings, Madera, Mendocino, Placer, San Benito, San Luis Obispo, Santa Cruz, Sutter, and Tuolumne counties were in Quintile 5 (i.e., had the most favorable rates).
 - Of note, rates for five of six (83.33 percent) counties (Monterey, San Benito, San Luis Obispo, Santa Barbara, and Santa Cruz) in the Central Coast geographic region were in Quintiles 4 or 5. Additionally, rates for four of five (80.00 percent) counties (Monterey, San Benito, San Luis Obispo, and Santa Cruz) in the Central Coast geographic region that were in Quintiles 4 or 5 increased by at least a 10 percent relative difference from measurement year 2020 to measurement year 2021. MCPs operating in the Central Coast geographic region include Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; CenCal Health; Central California Alliance for Health; and Gold Coast Health Plan.

Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits

The *Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 to 30 Months—Two or More Well-Child Visits (W30–2)* indicator measures the percentage of children who turned 30 months old during the measurement year who received two or more well-child visits with a PCP. Figure 3.8 through Figure 3.14 display the *Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30–2)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021. Please note, measurement year 2020 benchmarks were not available for this indicator.

Figure 3.8—Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30–2)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 66.40 percent.

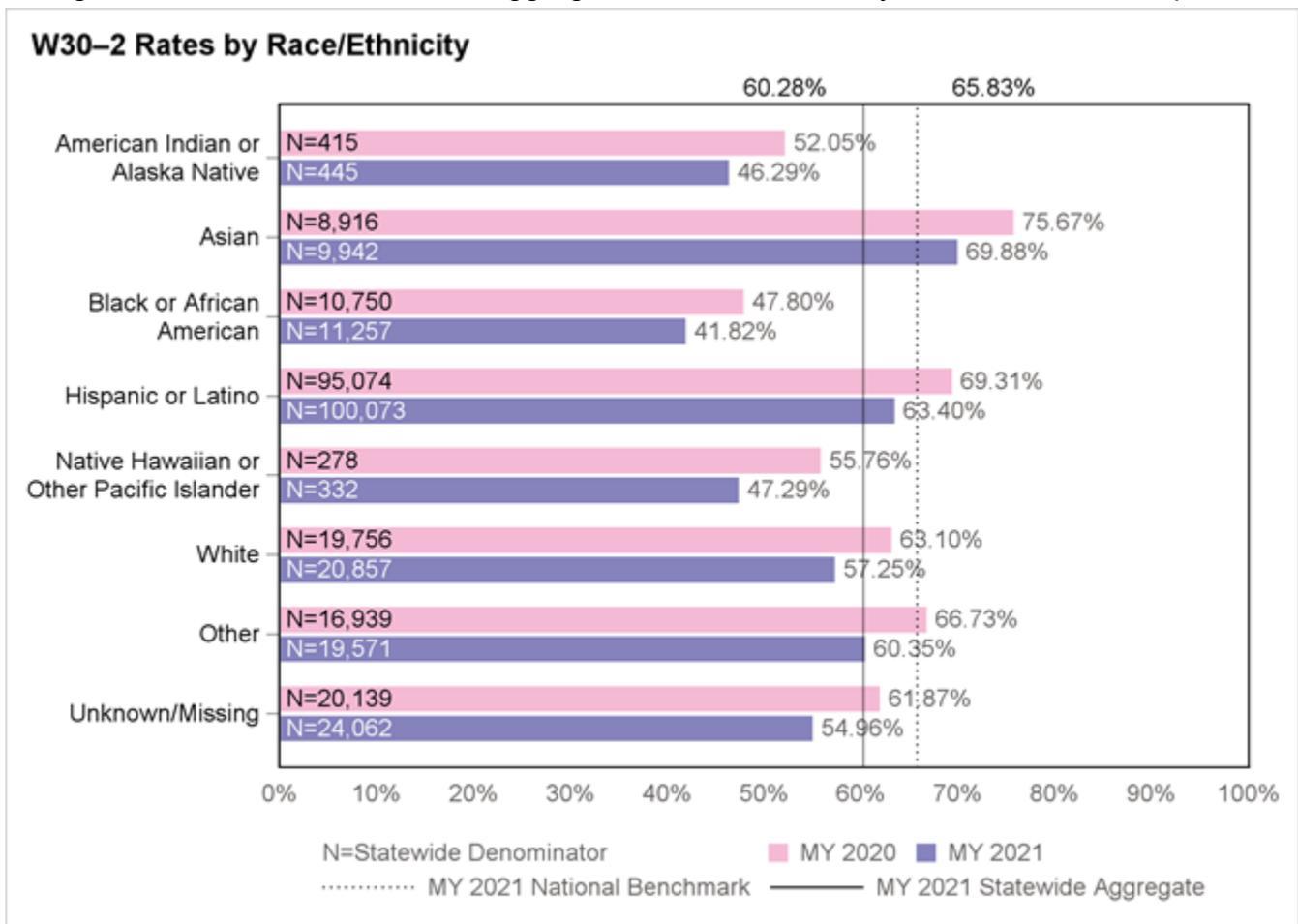


Figure 3.9—Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30–2)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 66.40 percent.

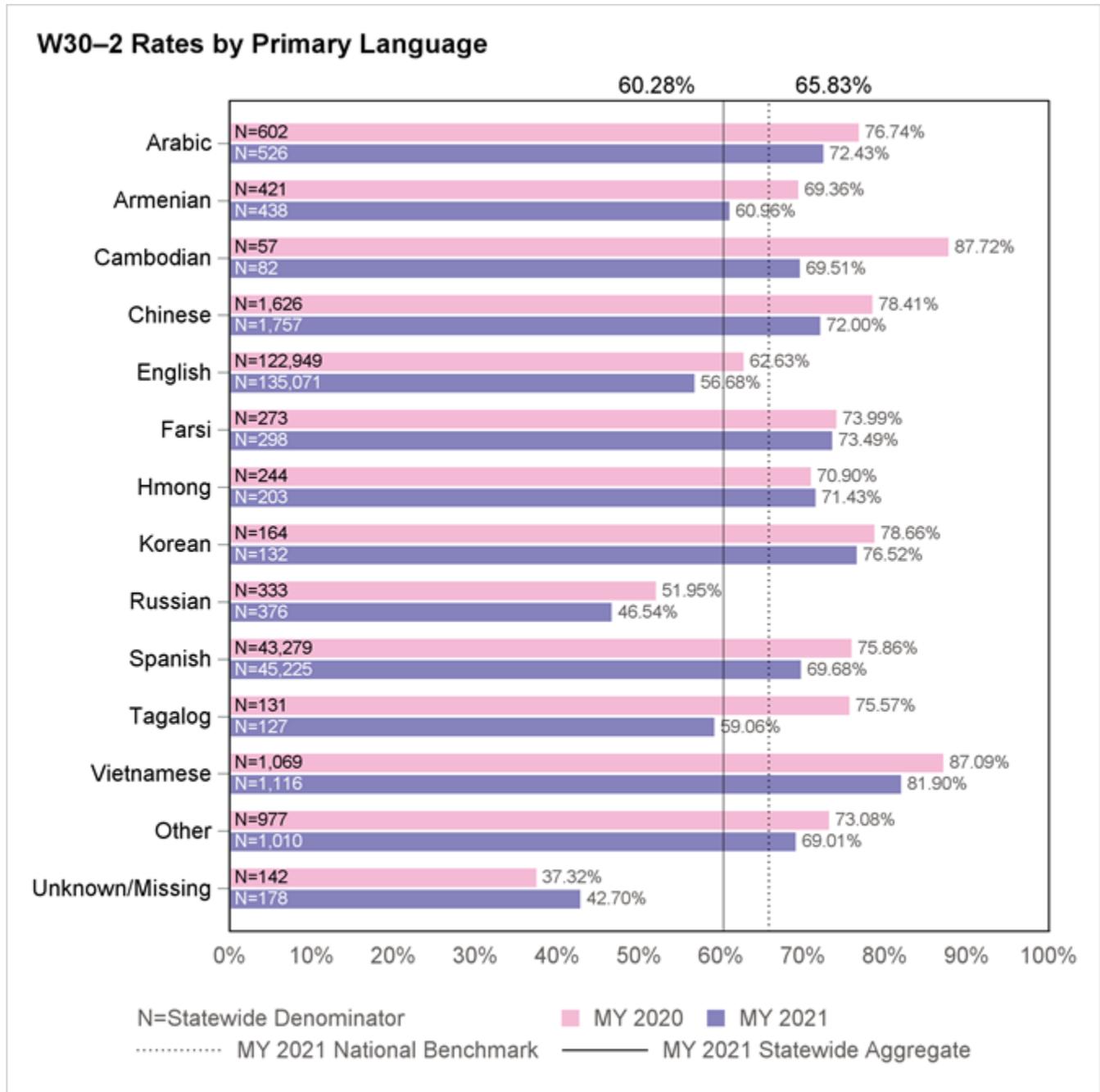
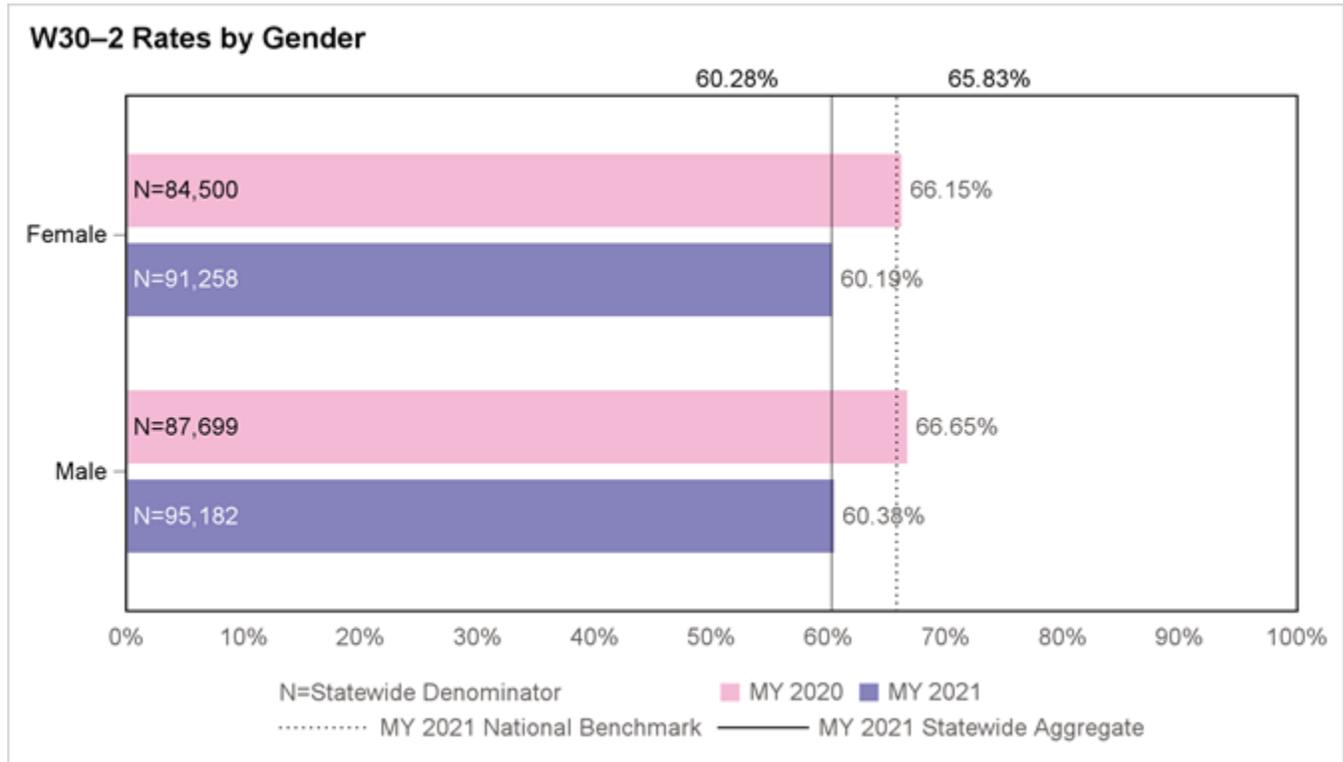


Figure 3.10—Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30–2)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 66.40 percent.



- ◆ For measurement year 2021, the statewide aggregate for the *Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 to 30 Months—Two or More Well-Child Visits (W30–2)* indicator fell below the national benchmark by approximately 5 percentage points and decreased from measurement year 2020 by nearly a 10 percent relative difference. This indicates that MCPs have opportunities to ensure an adequate number of children ages 15 to 30 months receive comprehensive well-child visits.
- ◆ For measurement year 2021, reportable rates for seven of eight (87.50 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, Hispanic or Latino, Native Hawaiian or Other Pacific Islander, White, Other, and Unknown/Missing), five of 14 (35.71 percent) primary language groups (Armenian, English, Russian, Tagalog, and Unknown/Missing), and both gender groups fell below the national benchmark.
- ◆ For both measurement years 2020 and 2021, rates for three of eight (37.50 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, and Native Hawaiian or Other Pacific Islander) and two of 14 (14.29 percent) primary language groups (Russian and Unknown/Missing) were below the statewide aggregate by more than a 10 percent relative difference.

- ◆ From measurement year 2020 to measurement year 2021, rates for four of eight (50.00 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander, and Unknown/Missing) and four of 14 (28.57 percent) primary language groups (Armenian, Cambodian, Russian, and Tagalog) decreased by more than a 10 percent relative difference.

Figure 3.11—Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30-2)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 66.40 percent.

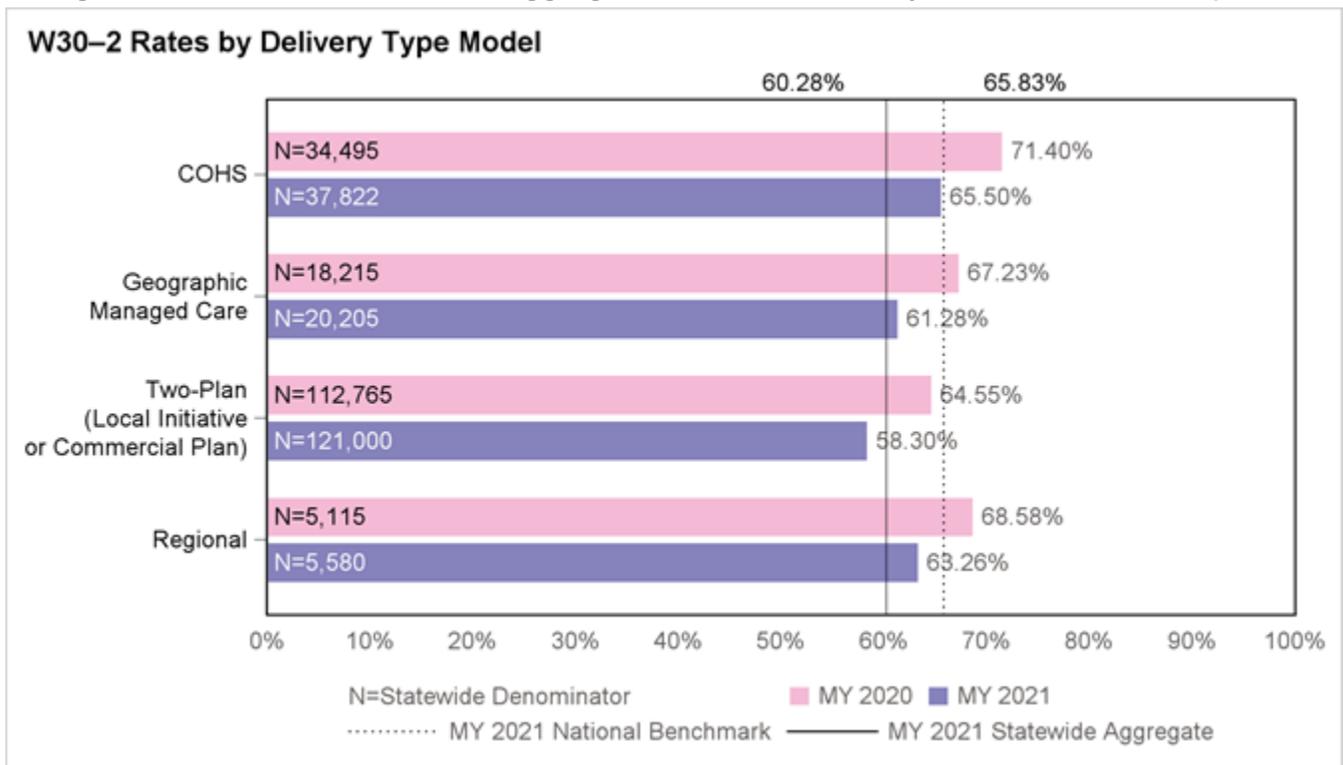


Figure 3.12—Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30–2)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 66.40 percent.

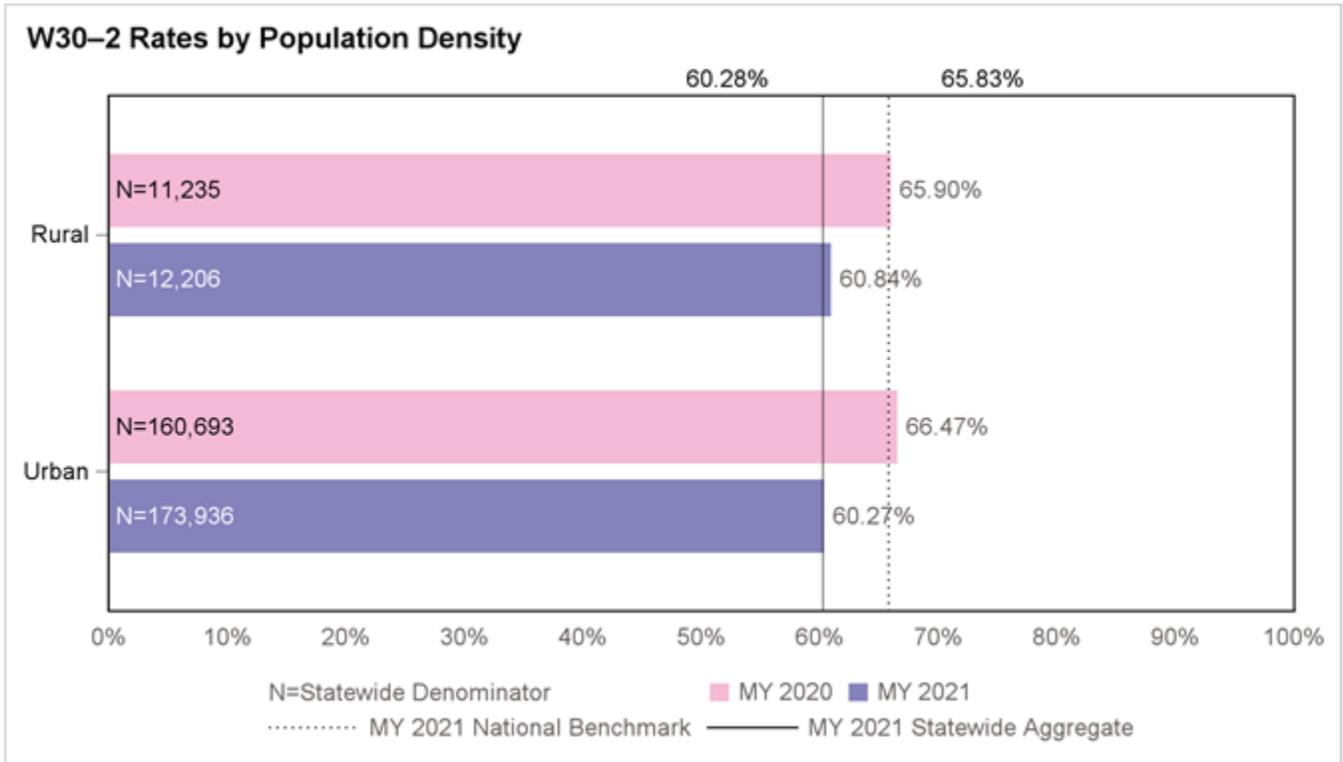
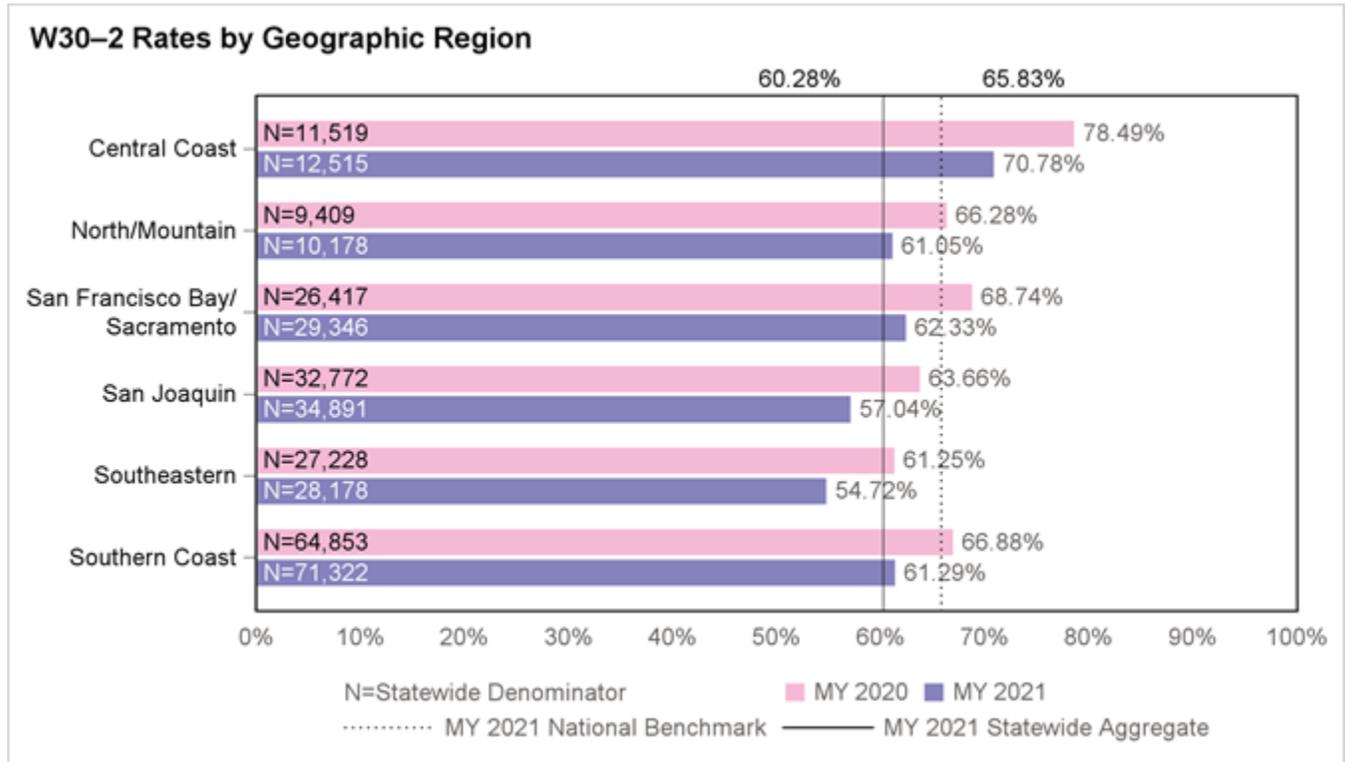


Figure 3.13—Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30–2)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 66.40 percent.

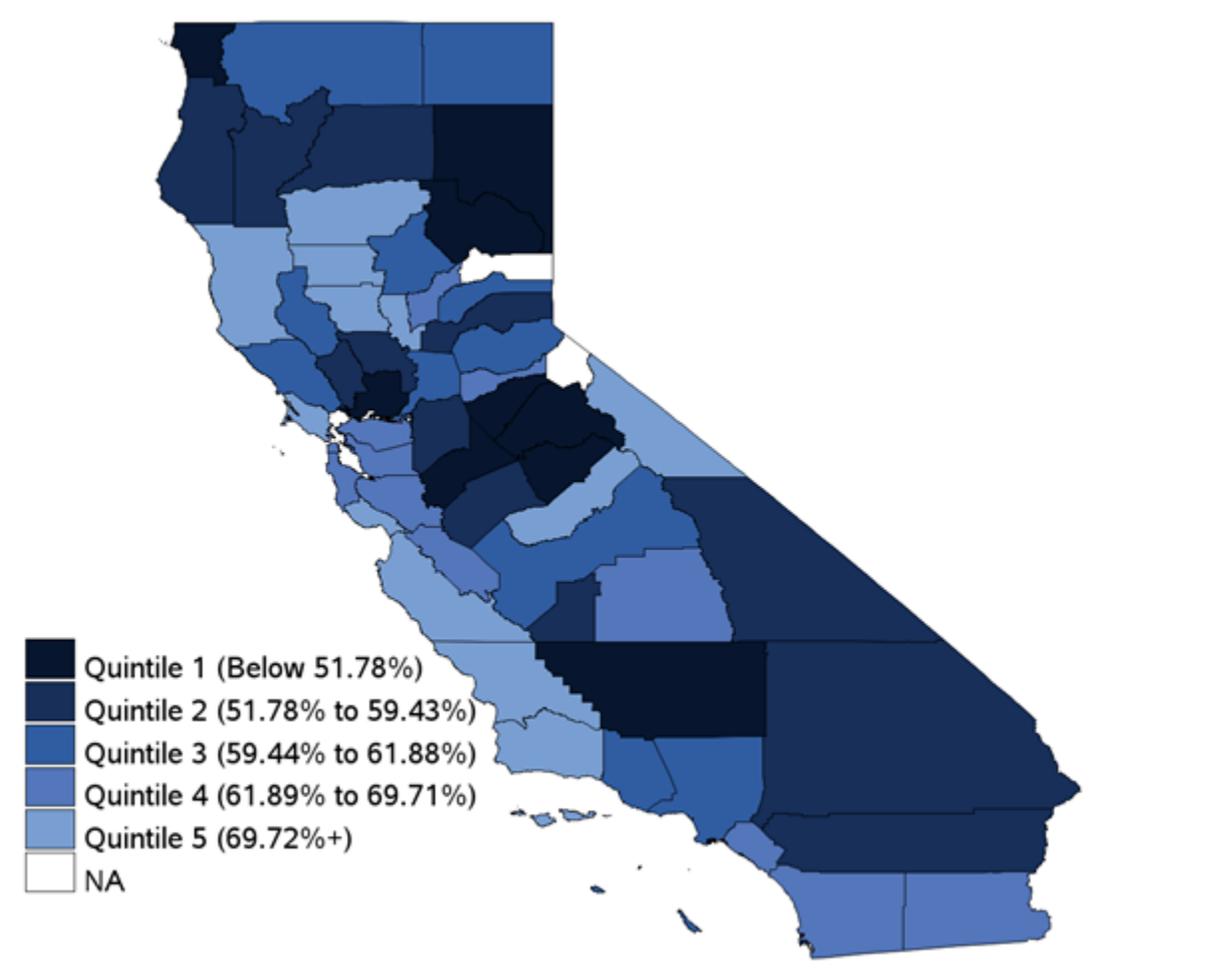


- ◆ For measurement year 2021, the *Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits* indicator rates for all delivery type model groups, both population density groups, and five of six (83.33 percent) geographic regions (North/Mountain, San Francisco Bay/Sacramento, San Joaquin, Southeastern, and Southern Coast) fell below the national benchmark.
- ◆ For both measurement years 2020 and 2021, the rate for the Central Coast region was above the statewide aggregate by more than a 15 percent relative difference.
- ◆ From measurement year 2020 to measurement year 2021, rates for two of six (33.33 percent) geographic regions (San Joaquin and Southeastern) decreased by more than a 10 percent relative difference.

Figure 3.14—Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30-2)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader's Guide for a list of MCPs operating in each county.



- ◆ From measurement year 2020 to measurement year 2021, 51 of 56 (91.07 percent) counties with reportable *Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits* indicator rates decreased, and rates for 21 of these 51 (41.18 percent) counties decreased by at least a 10 percent relative difference. Additionally, reportable rates for 40 of 56 (71.43 percent) counties fell below the national benchmark in measurement year 2021.
- ◆ Calaveras, Del Norte, Kern, Lassen, Mariposa, Plumas, Solano, Stanislaus, and Tuolumne counties were in Quintile 1 (i.e., had the least favorable rates).
 - Of note, reportable rates for five of eight (62.50 percent) counties (Kern, Kings, Merced, San Joaquin, and Stanislaus) in the San Joaquin geographic region and two of three (66.67 percent) counties (Riverside and San Bernardino) in the Southeastern geographic region were in Quintiles 1 or 2. MCPs operating in the San Joaquin and/or

Southeastern geographic regions include Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan; CalViva Health; Central California Alliance for Health; Health Net Community Solutions, Inc.; Health Plan of San Joaquin; Inland Empire Health Plan; Kern Health Systems, DBA Kern Family Health Care; and Molina Healthcare of California.

- ◆ Colusa, Glenn, Madera, Marin, Mendocino, Mono, Monterey, San Luis Obispo, Santa Barbara, Santa Cruz, Sutter, and Tehama counties were in Quintile 5 (i.e., had the most favorable rates).
 - Of note, reportable rates for five of six (83.33 percent) counties (Monterey, San Benito, San Luis Obispo, Santa Barbara, and Santa Cruz) in the Central Coast geographic region were in Quintiles 4 or 5. MCPs operating in the Central Coast geographic region include Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; CenCal Health; Central California Alliance for Health; and Gold Coast Health Plan.

Child and Adolescent Well-Care Visits—Total

The *Child and Adolescent Well-Care Visits—Total (WCV)* indicator measures the percentage of children ages 3 to 21 years who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year. Figure 3.15 through Figure 3.22 display the *Child and Adolescent Well-Care Visits—Total (WCV)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021. Please note, measurement year 2020 benchmarks were not available for this indicator.

Figure 3.15—Child and Adolescent Well-Care Visits—Total (WCV)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 41.13 percent.

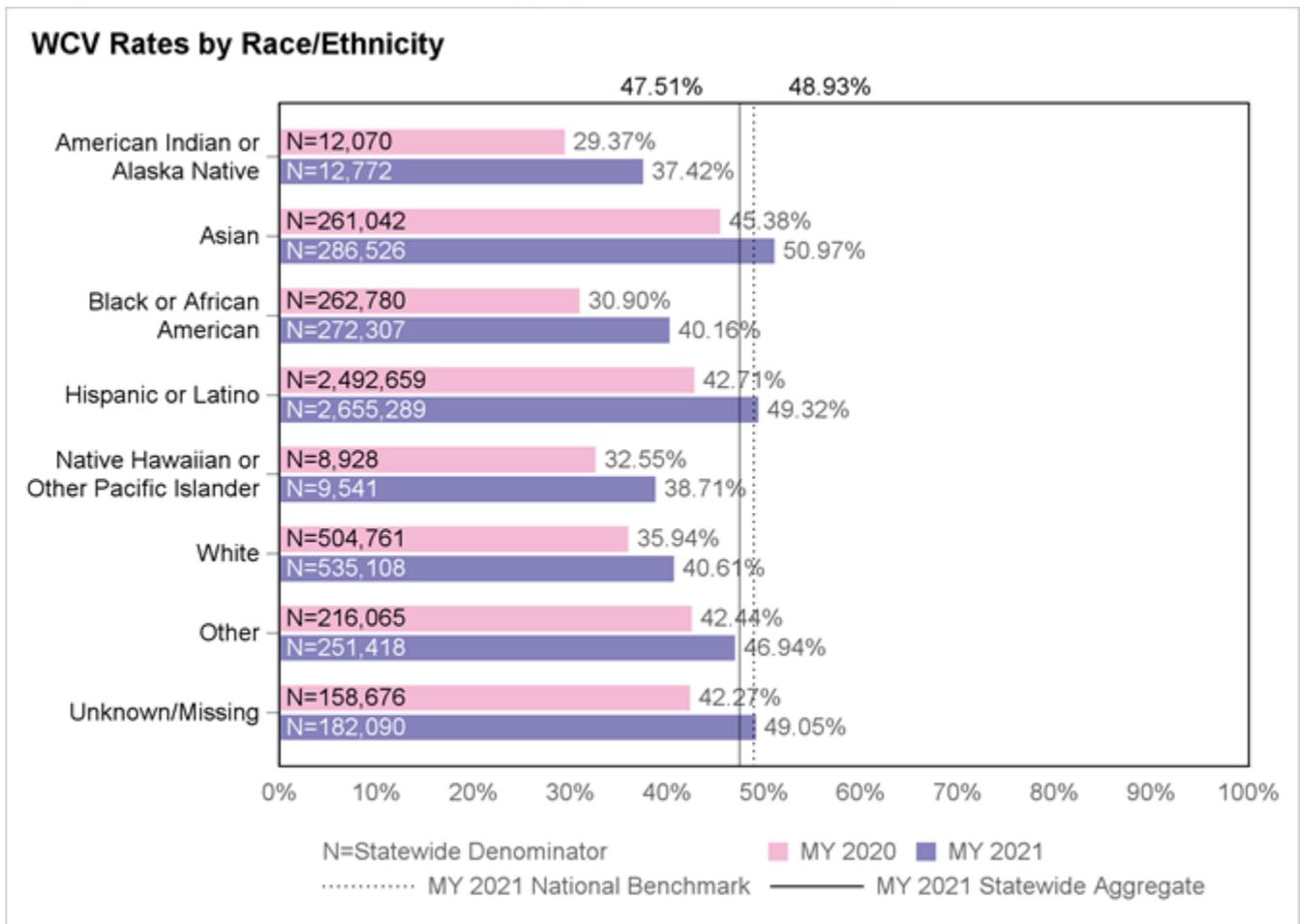


Figure 3.16—Child and Adolescent Well-Care Visits—Total (WCV)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 41.13 percent.

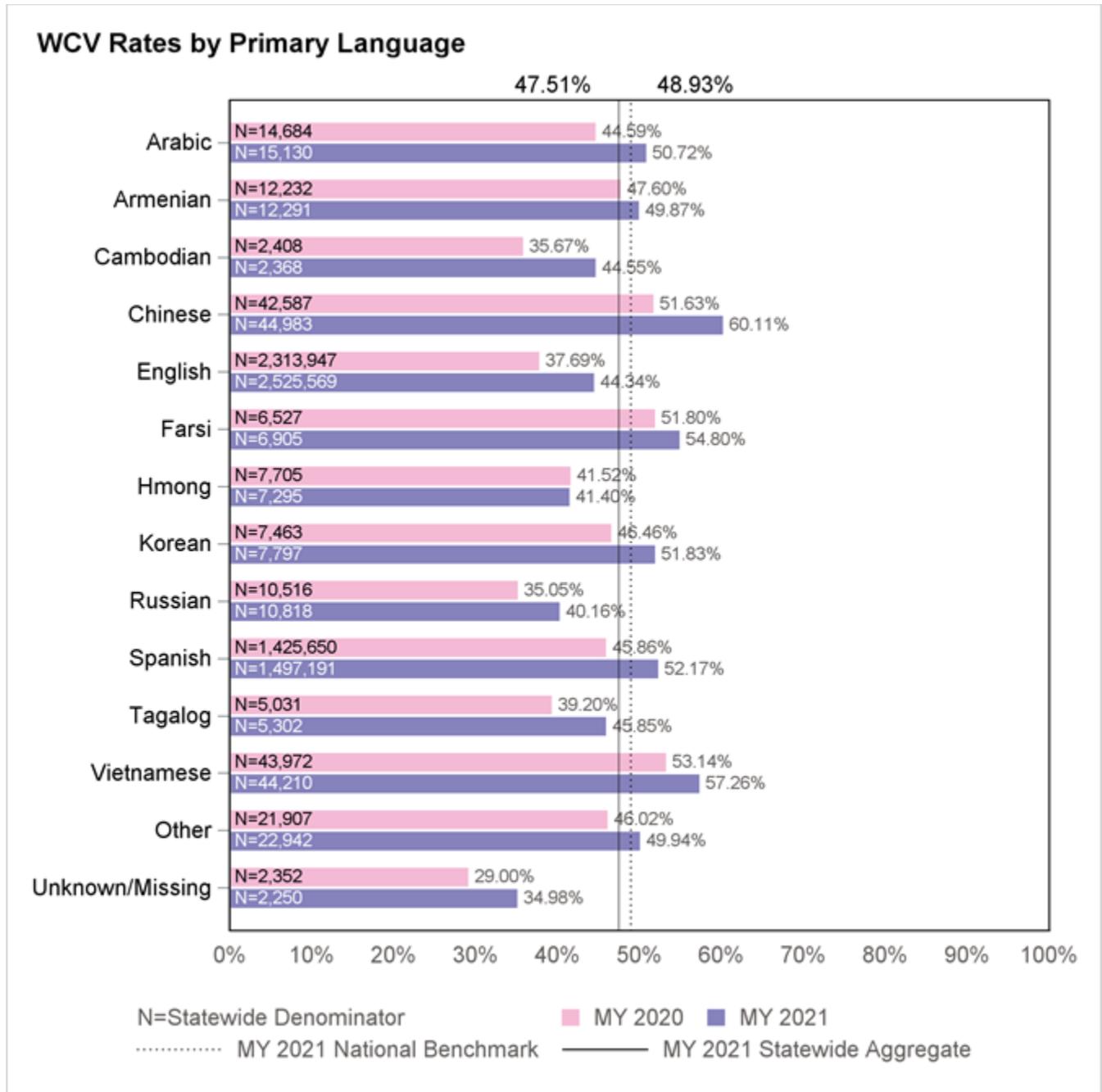


Figure 3.17—Child and Adolescent Well-Care Visits—Total (WCV)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 41.13 percent.

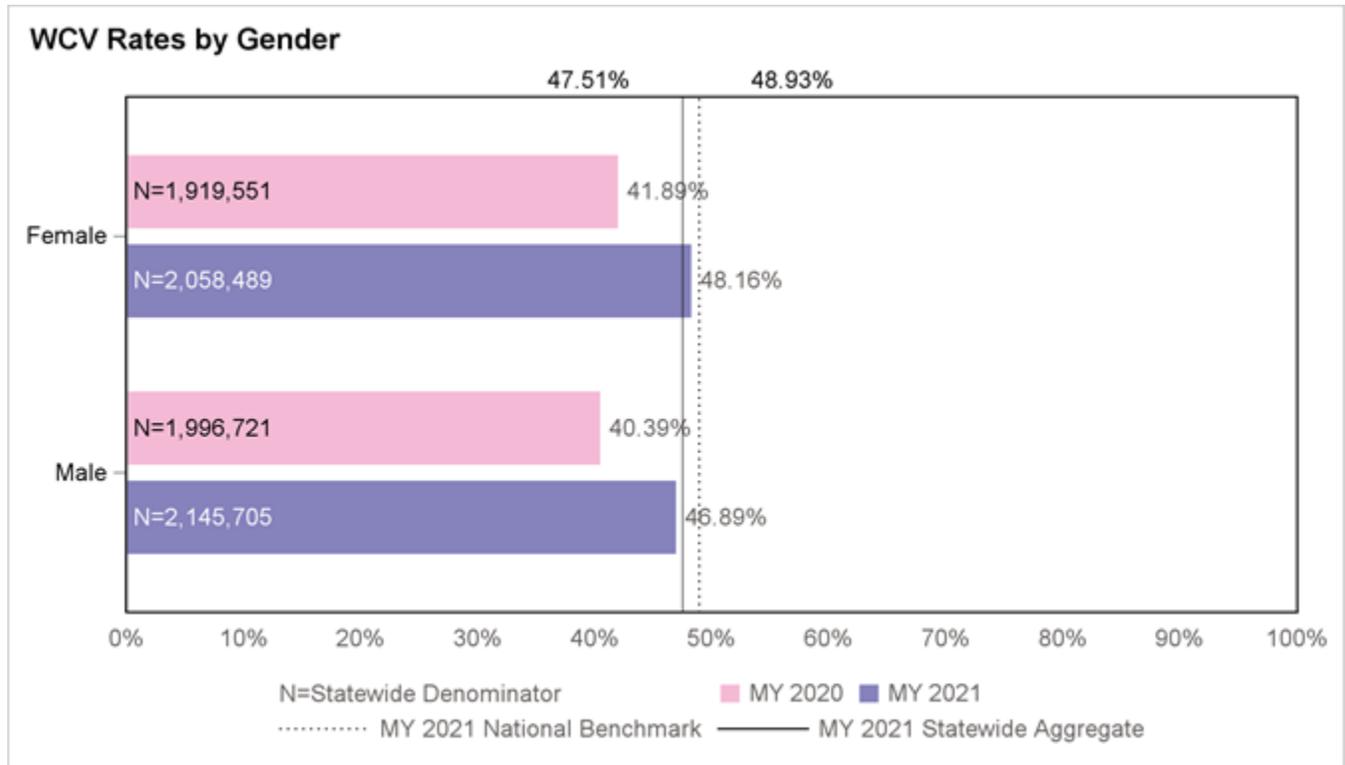
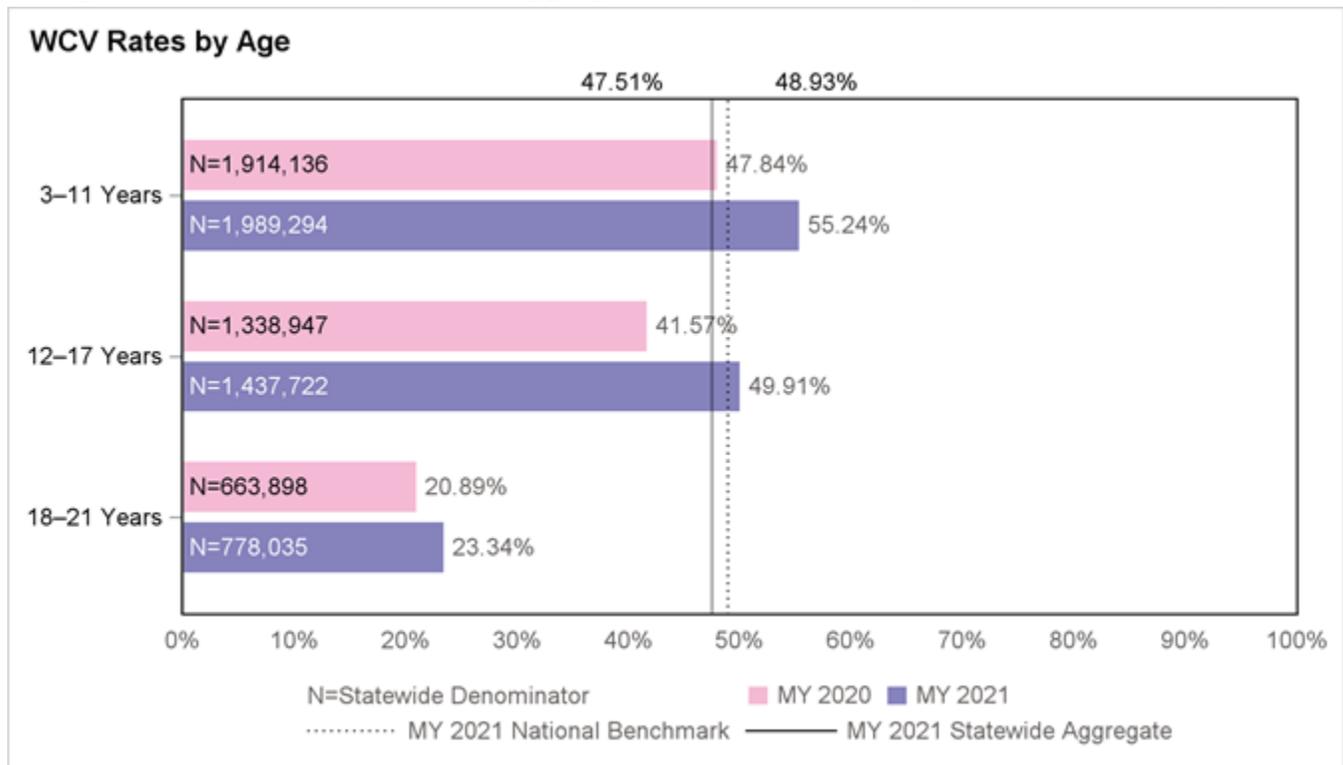


Figure 3.18—Child and Adolescent Well-Care Visits—Total (WCV)—Statewide Age Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 41.13 percent.



- ◆ While the statewide aggregate for measurement year 2021 fell below the national benchmark by approximately 1 percentage point, the statewide aggregate for the *Child and Adolescent Well-Care Visits—Total* indicator also increased from measurement year 2020 by more than a 15 percent relative difference, indicating that MCPs made progress toward ensuring an adequate number of children received comprehensive well-care visits.
- ◆ For measurement year 2021, reportable rates for five of eight (62.50 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander, White, and Other), six of 14 (42.86 percent) primary language groups (Cambodian, English, Hmong, Russian, Tagalog, and Unknown/Missing), both gender groups, and one of three (33.33 percent) age groups (18–21 Years) fell below the national benchmark.
- ◆ For measurement year 2021, reportable rates for four of eight (50.00 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander, and White) and three of 14 (21.43 percent) primary language groups (Hmong, Russian, and Unknown/Missing) were below the statewide aggregate by more than a 10 percent relative difference.
 - Rates for four of eight (50.00 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander, and

White) and two of 14 (14.29 percent) primary language groups (Russian and Unknown/Missing) were below the statewide aggregate rates by more than a 10 percent relative difference in both measurement years 2020 and 2021.

- ◆ From measurement year 2020 to measurement year 2021, rates for all racial/ethnic groups, nine of 14 (64.29 percent) primary language groups (Arabic, Cambodian, Chinese, English, Korean, Russian, Spanish, Tagalog, and Unknown/Missing), all gender groups, and all age groups increased by more than a 10 percent relative difference.
- ◆ For both measurement years 2020 and 2021, the rate for the 18–21 Years age group fell below the statewide aggregate by more than a 45 percent relative difference.

Figure 3.19—Child and Adolescent Well-Care Visits—Total (WCV)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 41.13 percent.

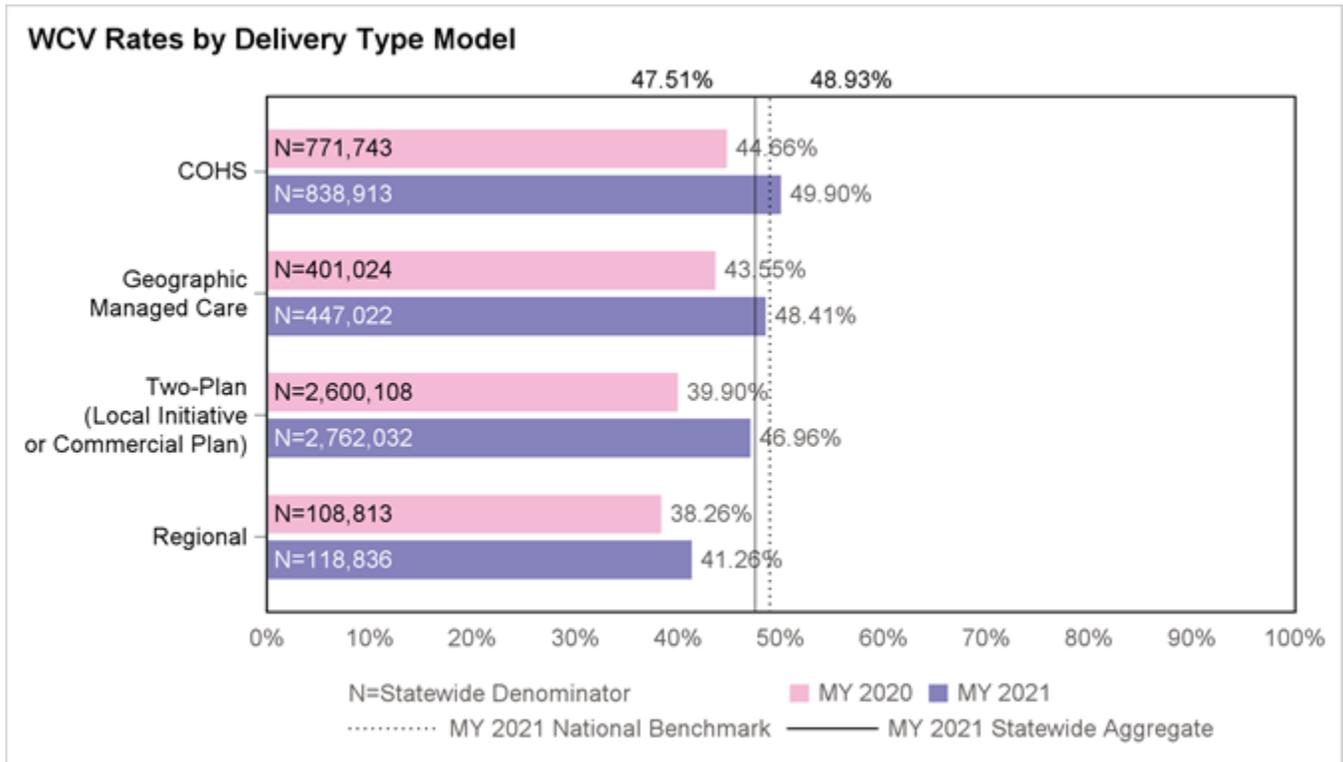


Figure 3.20—Child and Adolescent Well-Care Visits—Total (WCV)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 41.13 percent.

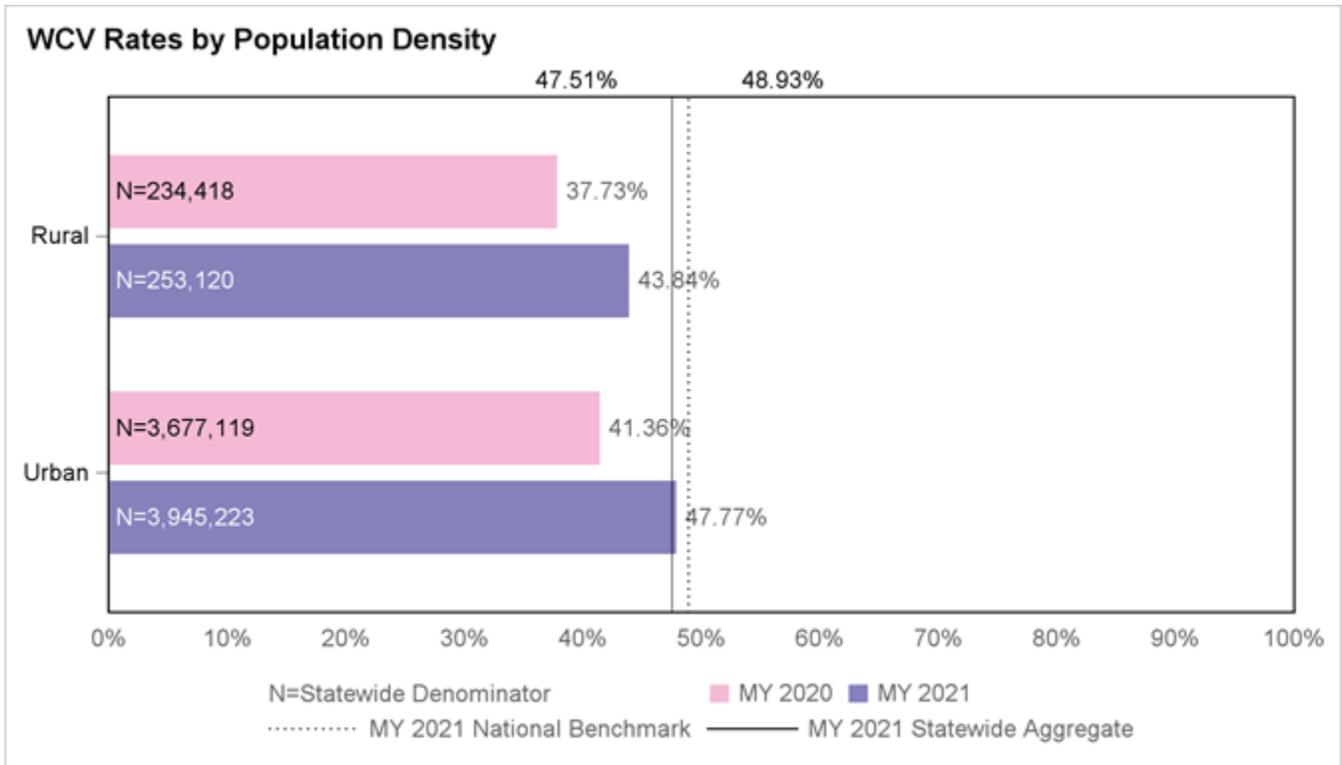
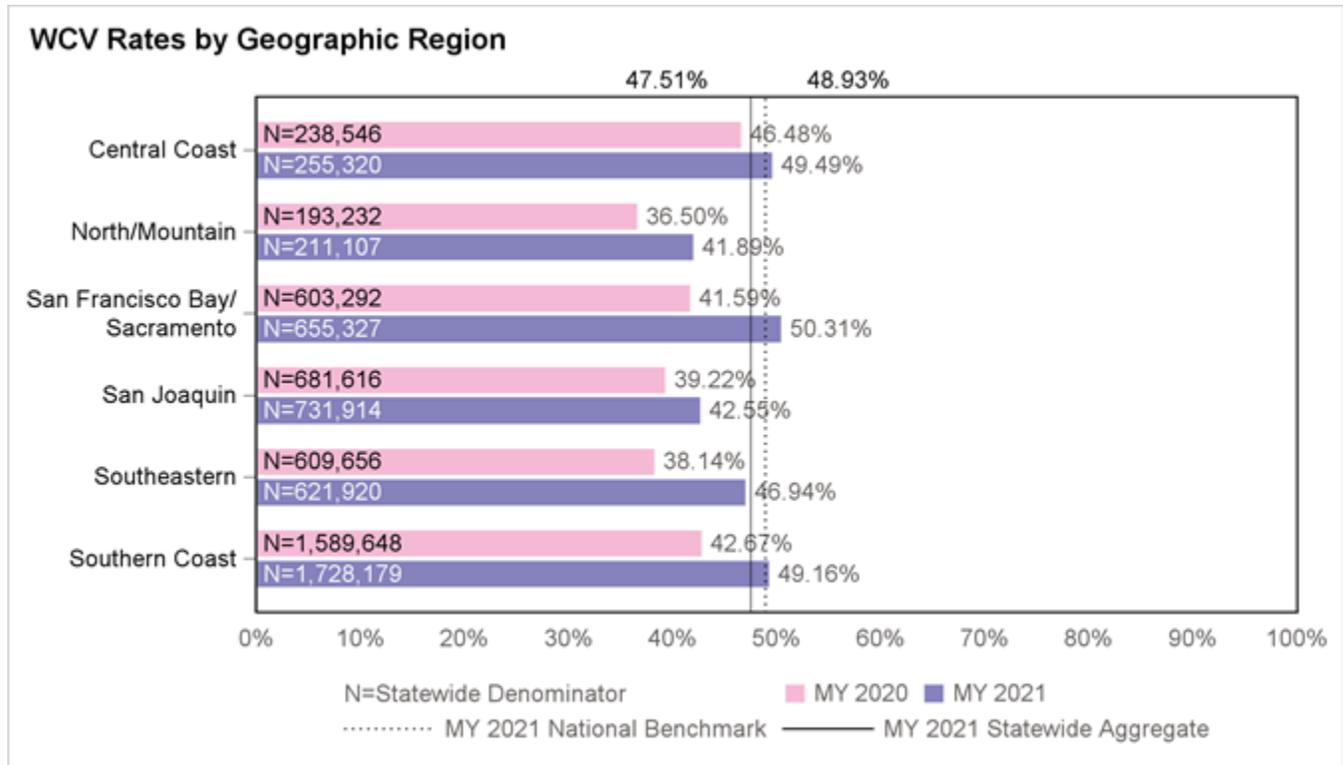


Figure 3.21—Child and Adolescent Well-Care Visits—Total (WCV)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the statewide aggregate for measurement year 2020 was 41.13 percent.

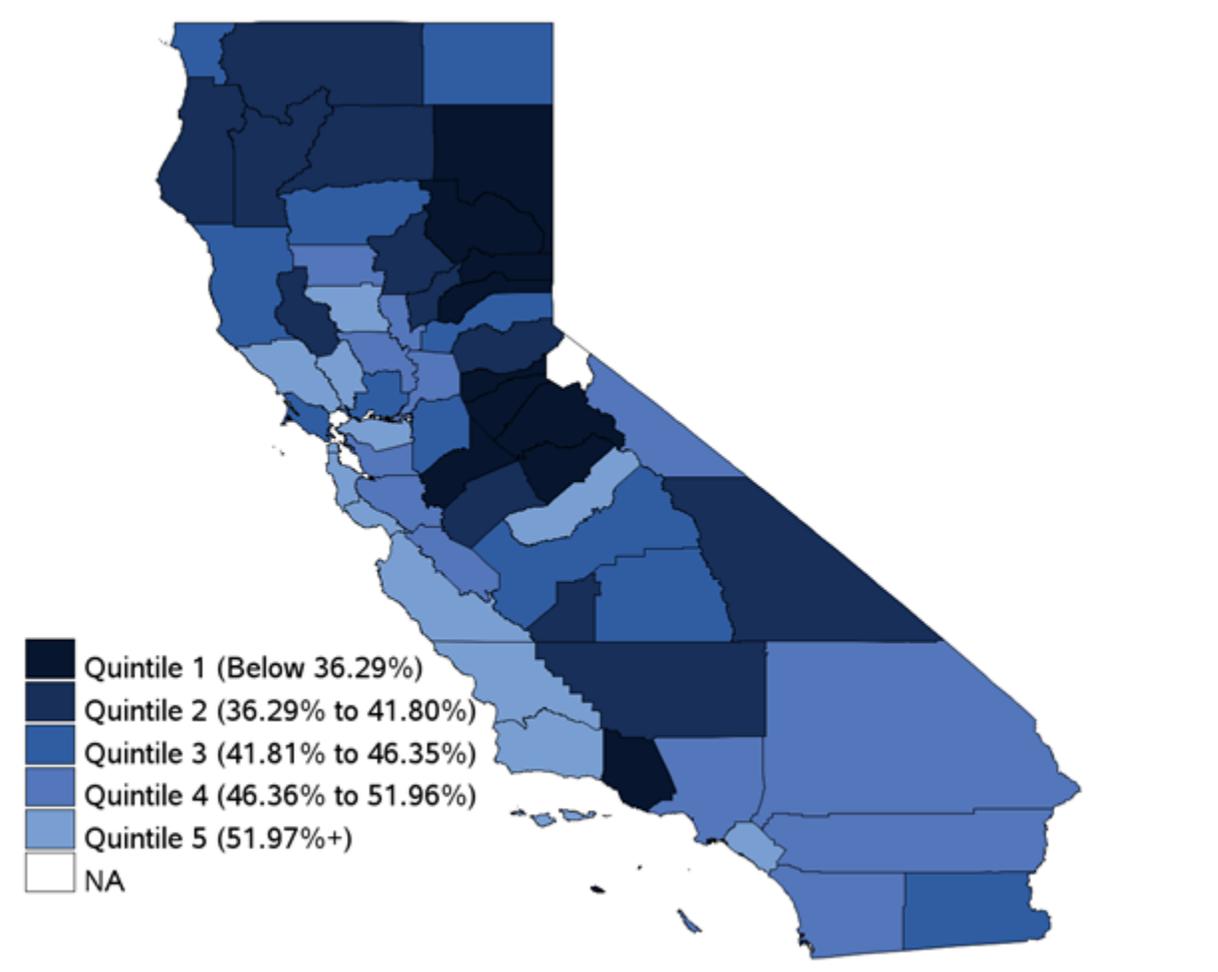


- ◆ For measurement year 2021, the *Child and Adolescent Well-Care Visits—Total* indicator rates for three of four (75.00 percent) delivery type model groups (Geographic Managed Care, Regional, and Two-Plan), both population density groups, and three of six (50.00 percent) geographic regions (North/Mountain, San Joaquin, and Southeastern) fell below the national benchmark.
- ◆ For measurement year 2021, rates for the Regional delivery type model group and the North/Mountain and San Joaquin geographic regions were below the statewide aggregate by more than a 10 percent relative difference.
 - For both measurement years 2020 and 2021, the rate for the North/Mountain geographic region was below the statewide aggregate by more than a 10 percent relative difference.
- ◆ From measurement year 2020 to measurement year 2021, rates for three of four (75.00 percent) delivery type model groups (COHS, Geographic Managed Care, and Two-Plan), both population density groups, and four of six (66.67 percent) geographic regions (North/Mountain, San Francisco Bay/Sacramento, Southeastern, and Southern Coast) increased by more than a 10 percent relative difference.

Figure 3.22—Child and Adolescent Well-Care Visits—Total (WCV)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader's Guide for a list of MCPs operating in each county.



- ◆ From measurement year 2020 to measurement year 2021, 51 of 57 (89.47 percent) counties with reportable *Child and Adolescent Well-Care Visits—Total* indicator rates increased, and rates for 31 of these 51 (60.78 percent) counties increased by at least a 10 percent relative difference. However, reportable rates for 41 of 57 (71.93 percent) counties fell below the national benchmark in measurement year 2021.
- ◆ Amador, Calaveras, Lassen, Mariposa, Nevada, Plumas, Sierra, Stanislaus, Tuolumne, and Ventura counties were in Quintile 1 (i.e., had the least favorable rates). Eight of these 10 (80.00 percent) counties are located in the North/Mountain geographic region.
 - Of note, nine of the 12 (75.00 percent) counties (Butte, El Dorado, Humboldt, Inyo, Lake, Shasta, Siskiyou, Trinity, and Yuba) in Quintile 2 were also in the North/Mountain geographic region. MCPs operating in the North/Mountain geographic region include Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership

Plan; California Health & Wellness Plan; Kaiser NorCal (KP Cal, LLC); and Partnership HealthPlan of California.

- ◆ Colusa, Contra Costa, Madera, Monterey, Napa, Orange, San Francisco, San Luis Obispo, San Mateo, Santa Barbara, Santa Cruz, and Sonoma counties were in Quintile 5 (i.e., had the most favorable rates). Nine of these 12 (75.00 percent) counties were in the San Francisco Bay/Sacramento and Central Coast geographic regions.
 - Of note, eight of 10 (80.00 percent) counties (Alameda, Contra Costa, Napa, Sacramento, San Francisco, San Mateo, Santa Clara, and Sonoma) in the San Francisco Bay/Sacramento geographic region and five of six (83.33 percent) counties (Monterey, San Benito, San Luis Obispo, Santa Barbara, and Santa Cruz) in the Central Coast geographic region were in Quintiles 4 or 5. MCPS operating in the San Francisco Bay Area/Sacramento and Central Coast geographic regions include Aetna Better Health of California; Alameda Alliance for Health; Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; Central California Alliance for Health; CenCal Health; Contra Costa Health Plan; Gold Coast Health Plan; Health Net Community Solutions, Inc.; Health Plan of San Mateo; Kaiser NorCal (KP Cal, LLC); Molina Healthcare of California; Partnership HealthPlan of California; San Francisco Health Plan; and Santa Clara Family Health Plan.

Childhood Immunization Status—Combination 10

The *Childhood Immunization Status—Combination 10 (CIS-10)* indicator measures the percentage of children 2 years of age who had four diphtheria, tetanus, and acellular pertussis; three polio; one measles, mumps, and rubella; three haemophilus influenza type B; three hepatitis B; one chicken pox; four pneumococcal conjugate; one hepatitis A; two or three rotavirus; and two influenza vaccines by their second birthday. Figure 3.23 through Figure 3.29 display the *Childhood Immunization Status—Combination 10 (CIS-10)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure 3.23—Childhood Immunization Status—Combination 10 (CIS-10)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 38.20 percent and 39.84 percent, respectively.

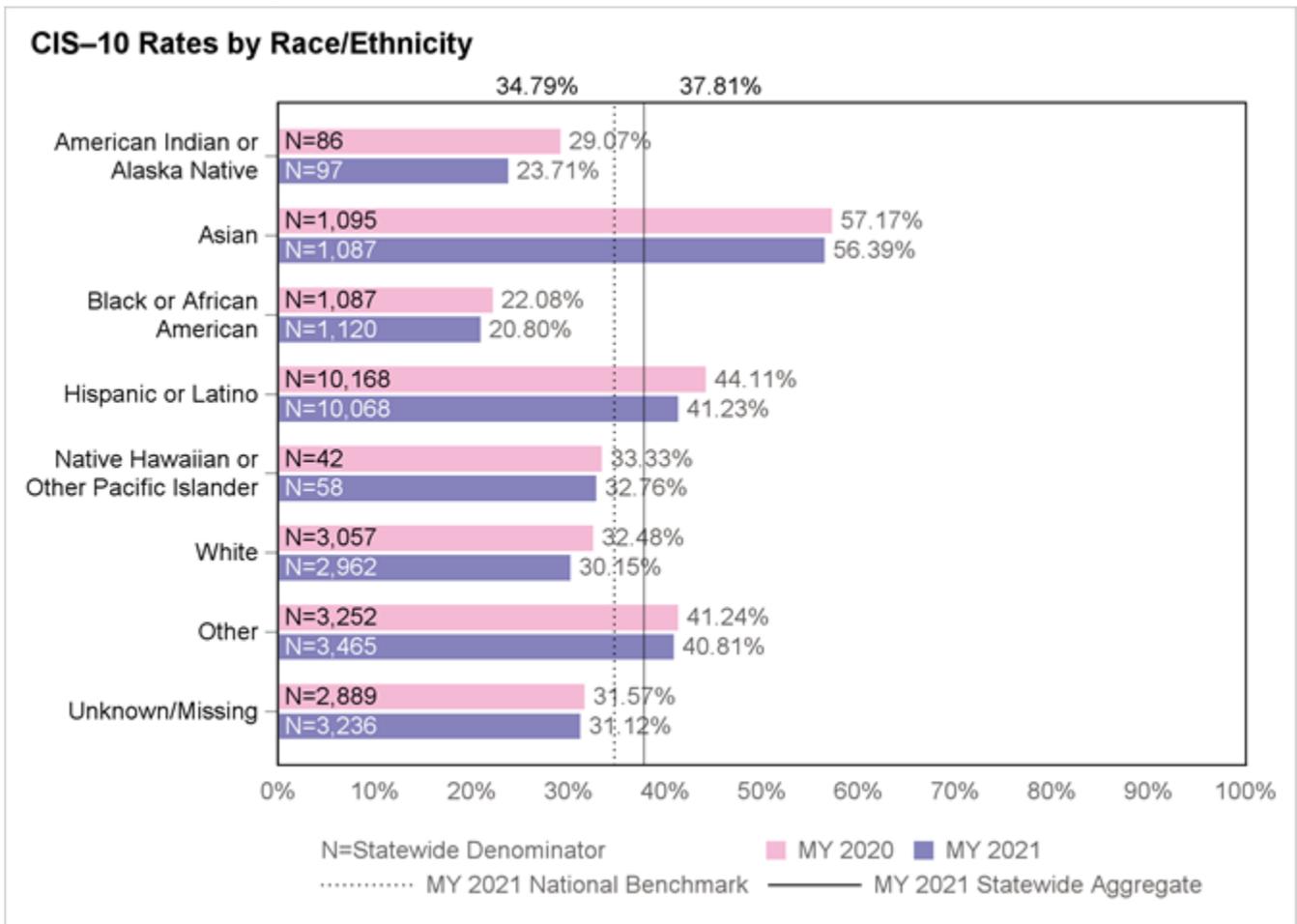


Figure 3.24—Childhood Immunization Status—Combination 10 (CIS-10)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

NA indicates the rate had a small denominator (i.e., less than 30).

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule’s de-identification standard.

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 38.20 percent and 39.84 percent, respectively.

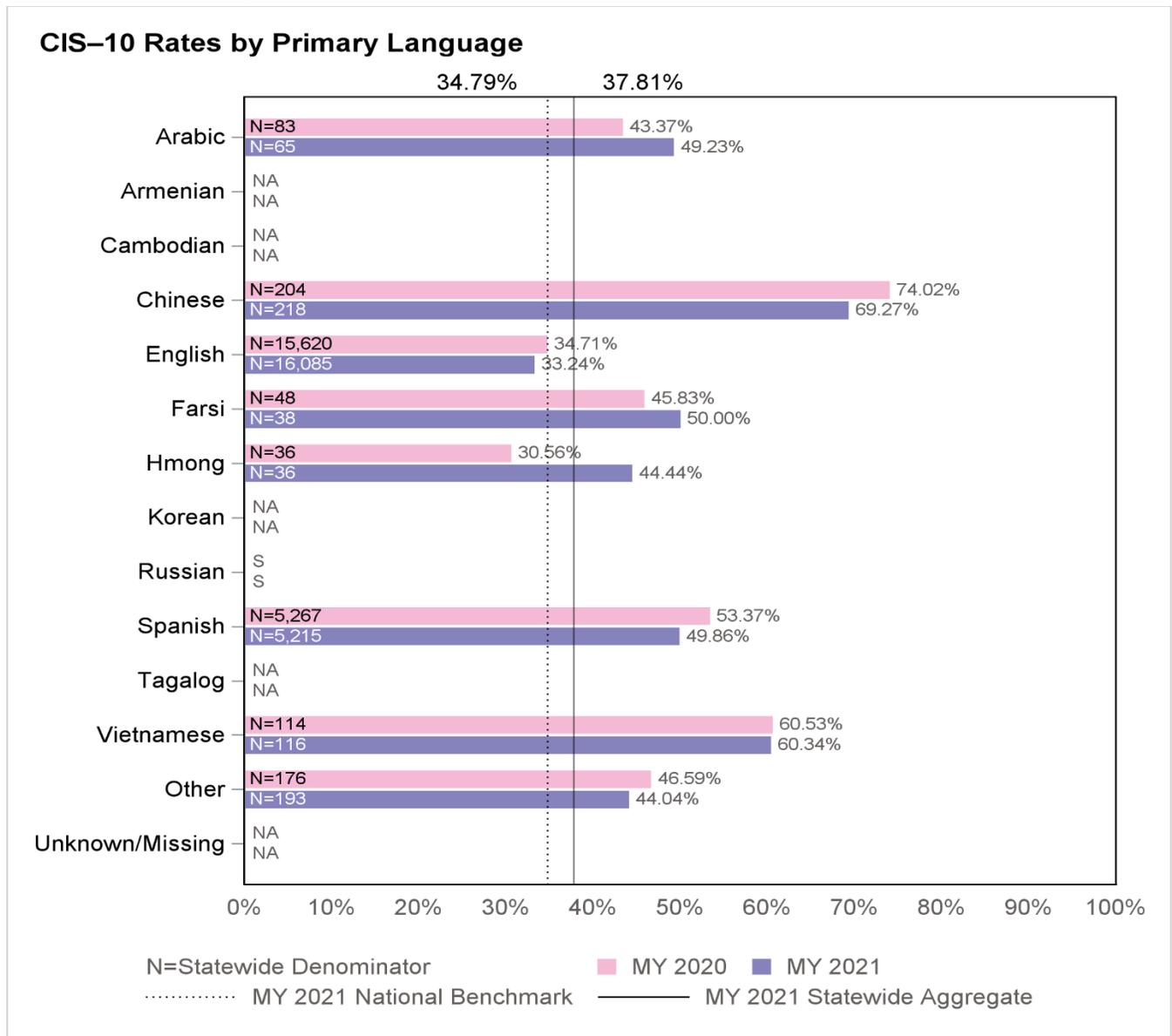
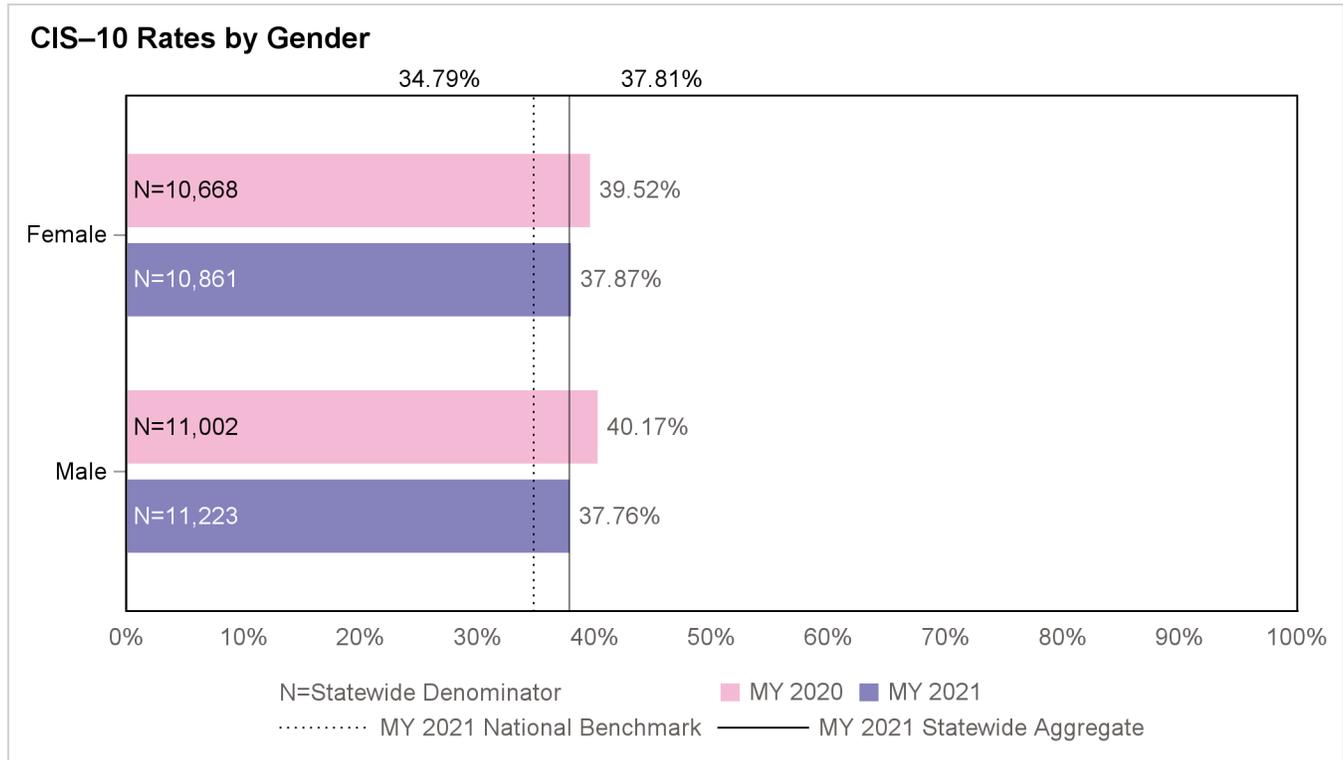


Figure 3.25—Childhood Immunization Status—Combination 10 (CIS-10)—Statewide Gender Results

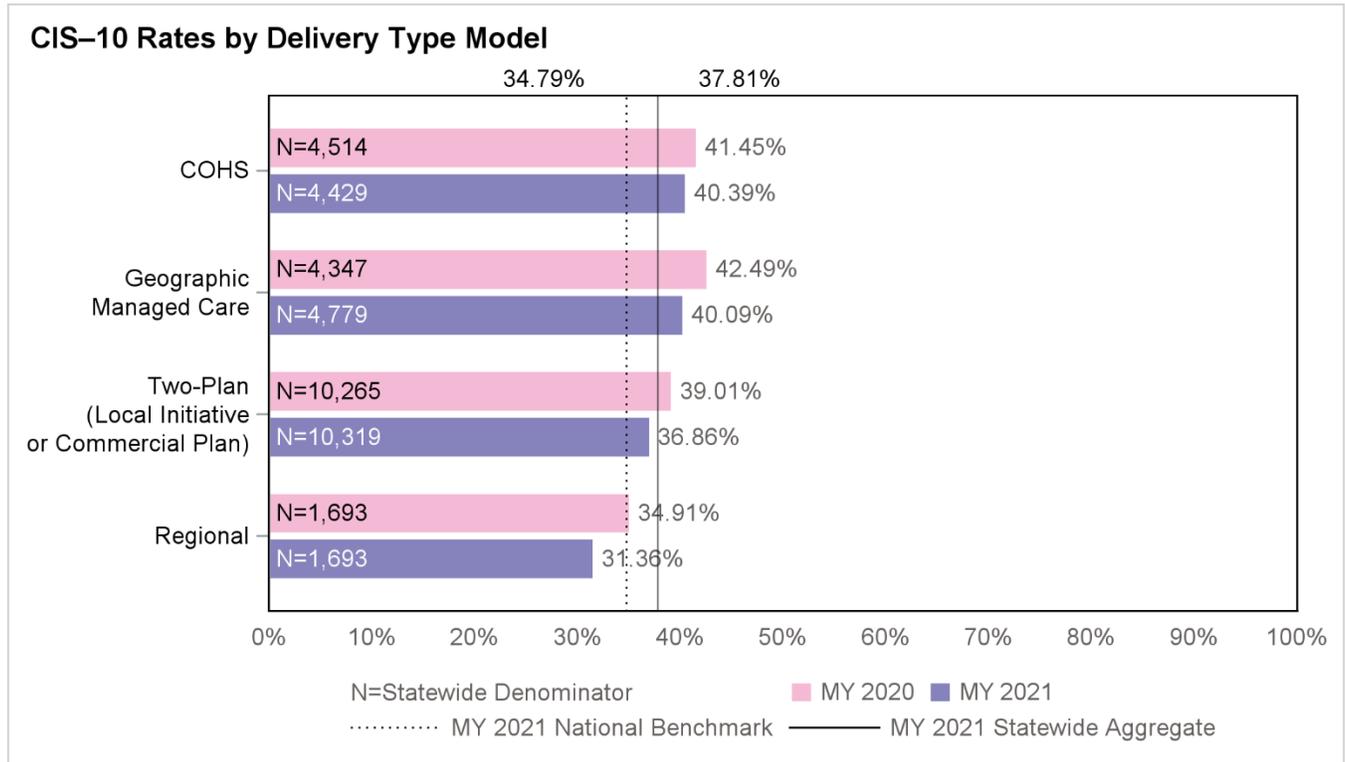
The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 38.20 percent and 39.84 percent, respectively.



- ◆ While both the statewide aggregate and national benchmark decreased by more than 2 percentage points from measurement year 2020 to measurement year 2021, the statewide aggregate for the *Childhood Immunization Status—Combination 10* indicator was above the national benchmark for both measurement years, indicating that MCPs ensured an adequate number of pediatric members received appropriate vaccinations.
- ◆ For both measurement years 2020 and 2021, reportable rates for five of eight (62.50 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander, White, and Unknown/Missing) and one of eight (12.50 percent) primary language groups (English) fell below the national benchmark and were below the statewide aggregate by more than a 10 percent relative difference.
- ◆ Reportable rates for one of eight (12.50 percent) racial/ethnic groups (American Indian or Alaska Native) decreased by at least a 10 percent relative difference from measurement year 2020 to measurement year 2021, and reportable rates for two of eight (25.00 percent) primary language groups (Arabic and Hmong) increased by at least a 10 percent relative difference from measurement year 2020 to measurement year 2021.

**Figure 3.26—Childhood Immunization Status—Combination 10 (CIS-10)—
Regional-Level Delivery Type Model Results**

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 38.20 percent and 39.84 percent, respectively.



**Figure 3.27—Childhood Immunization Status—Combination 10 (CIS-10)—
Regional-Level Population Density Results**

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 38.20 percent and 39.84 percent, respectively.

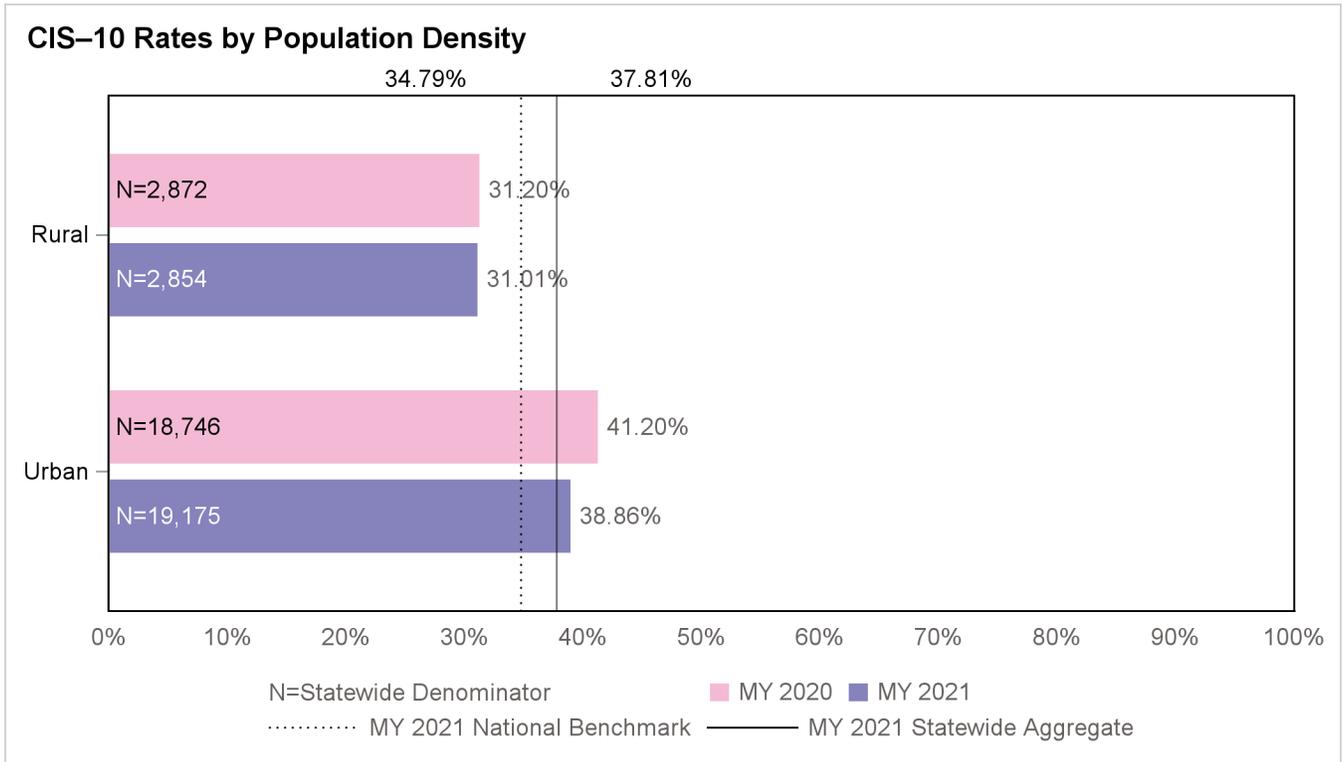
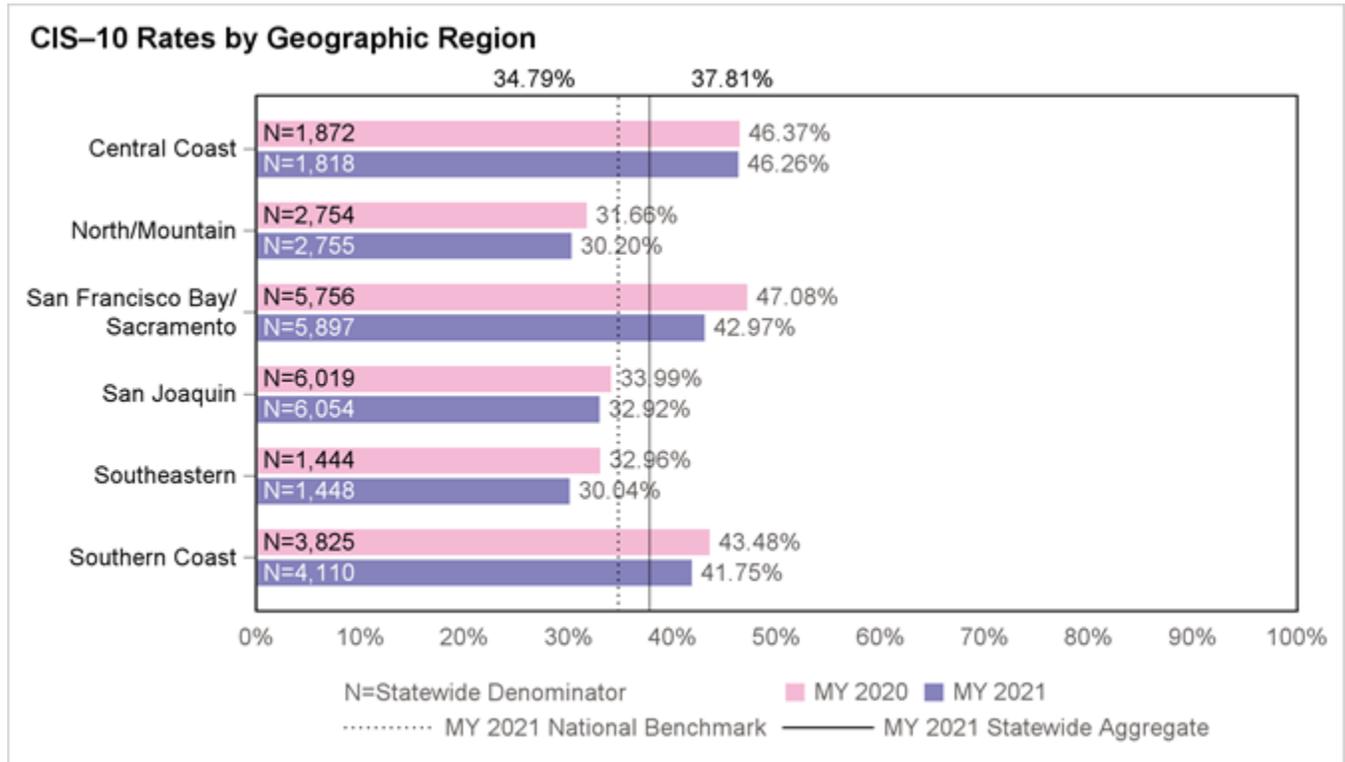


Figure 3.28—Childhood Immunization Status—Combination 10 (CIS-10)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 38.20 percent and 39.84 percent, respectively.

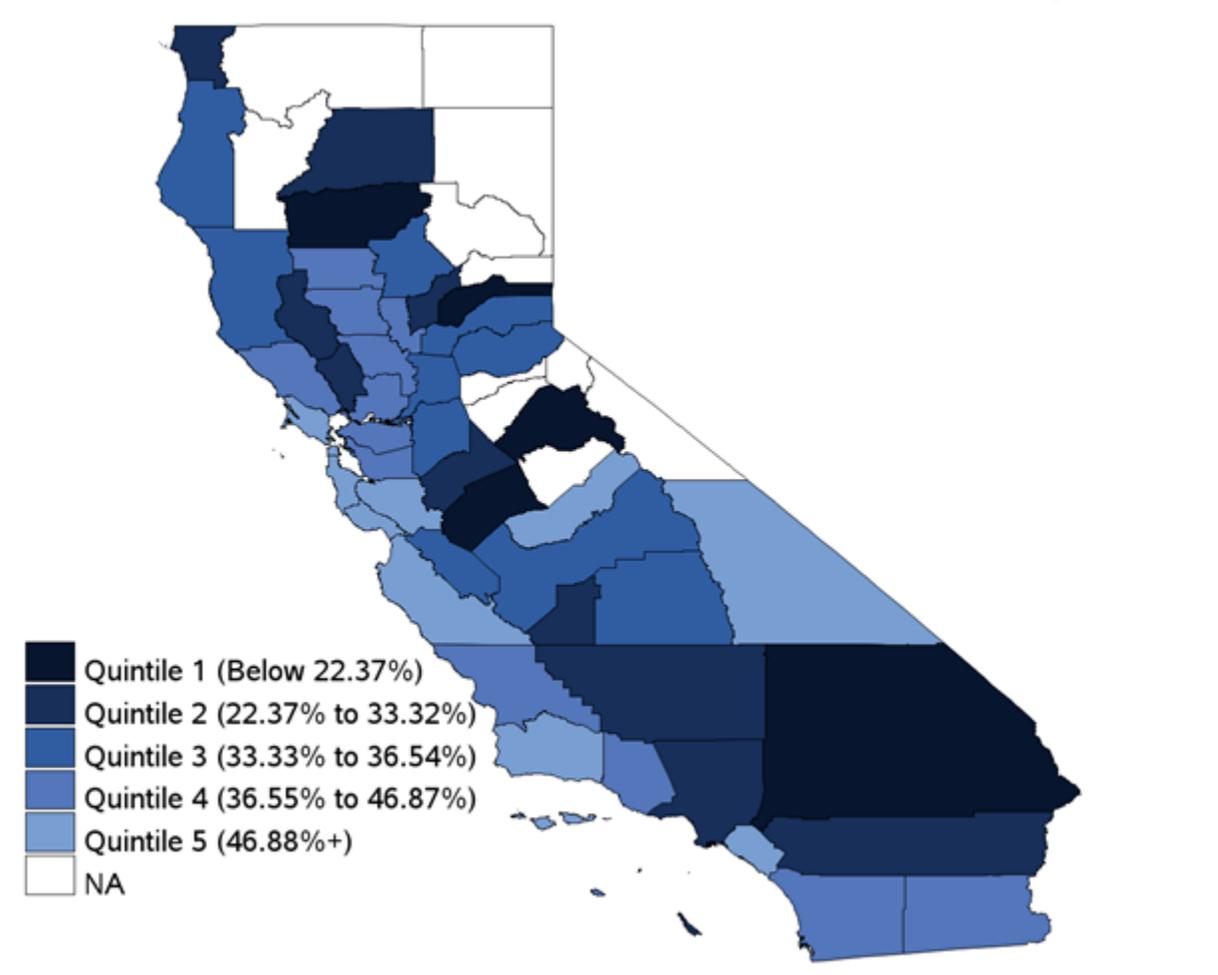


- ◆ For measurement years 2020 and 2021, the *Childhood Immunization Status—Combination 10* indicator rates for the Regional delivery type model group, rural population density, and three of six (50.00 percent) geographic regions (North/Mountain, San Joaquin, and Southeastern) fell below the national benchmark and were below the statewide aggregate by more than a 10 percent relative difference.
- ◆ From measurement year 2020 to measurement year 2021, rates for all delivery type model groups, population density groups, and geographic regions decreased, and the rates for the Regional delivery type model decreased by more than a 10 percent relative difference.

Figure 3.29—Childhood Immunization Status—Combination 10 (CIS-10)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader's Guide for a list of MCPs operating in each county.



- ◆ From measurement year 2020 to measurement year 2021, 29 of 47 (61.70 percent) counties with reportable *Childhood Immunization Status—Combination 10* indicator rates decreased, and rates for 14 of these 29 (48.28 percent) counties decreased by at least a 10 percent relative difference. Additionally, reportable rates for 20 of 47 (42.55 percent) counties were below the national benchmark for measurement year 2021, with rates for 18 of these 20 (90.00 percent) counties below the national benchmarks for both measurement years 2020 and 2021.
- ◆ Merced, Nevada, San Bernardino, Tehama, and Tuolumne counties were in Quintile 1 (i.e., had the least favorable rates).
 - Of note, rates for two of three (66.67 percent) counties (Riverside and San Bernadino) in the Southeastern geographic region were in Quintiles 1 or 2, and the rate for San Bernardino County decreased by over a 15 percent relative difference from

measurement year 2020 to measurement year 2021. MCPs operating in the Southeastern geographic region include California Health & Wellness Plan, Inland Empire Health Plan, and Molina Healthcare of California.

- ◆ Inyo, Madera, Marin, Monterey, Orange, San Francisco, San Mateo, Santa Barbara, Santa Clara, and Santa Cruz counties were in Quintile 5 (i.e., had the most favorable rates).
 - Of note, rates for five of six (83.33 percent) counties (Monterey, San Luis Obispo, Santa Barbara, Santa Cruz, and Ventura) in the Central Coast geographic region; eight of 10 (80.00 percent) counties (Alameda, Contra Costa, Marin, San Francisco, San Mateo, Santa Clara, Solano, and Sonoma) in the San Francisco Bay/Sacramento geographic region; and two of three (66.67 percent) counties (Orange and San Diego) in the Southern Coast geographic region were in Quintiles 4 or 5.
 - MCPs operating in the Central Coast, San Francisco Bay/Sacramento, and Southern Coast geographic regions include Aetna Better Health of California; Alameda Alliance for Health; Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan; CenCal Health; Central California Alliance for Health; Contra Costa Health Plan; Gold Coast Health Plan; Health Net Community Solutions, Inc.; Health Plan of San Mateo; Inland Empire Health Plan; Kaiser NorCal (KP Cal, LLC); Molina Healthcare of California; Partnership HealthPlan of California; San Francisco Health Plan; Santa Clara Family Health Plan; and UnitedHealthcare Community Plan.

Chlamydia Screening in Women—16 to 20 Years

The *Chlamydia Screening in Women—16 to 20 Years (CHL-1620)* indicator measures the percentage of women 16 to 20 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year. Figure 3.30 through Figure 3.35 display the *Chlamydia Screening in Women—16 to 20 Years (CHL-1620)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure 3.30—Chlamydia Screening in Women—16 to 20 Years (CHL-1620)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 50.46 percent and 57.94 percent, respectively.

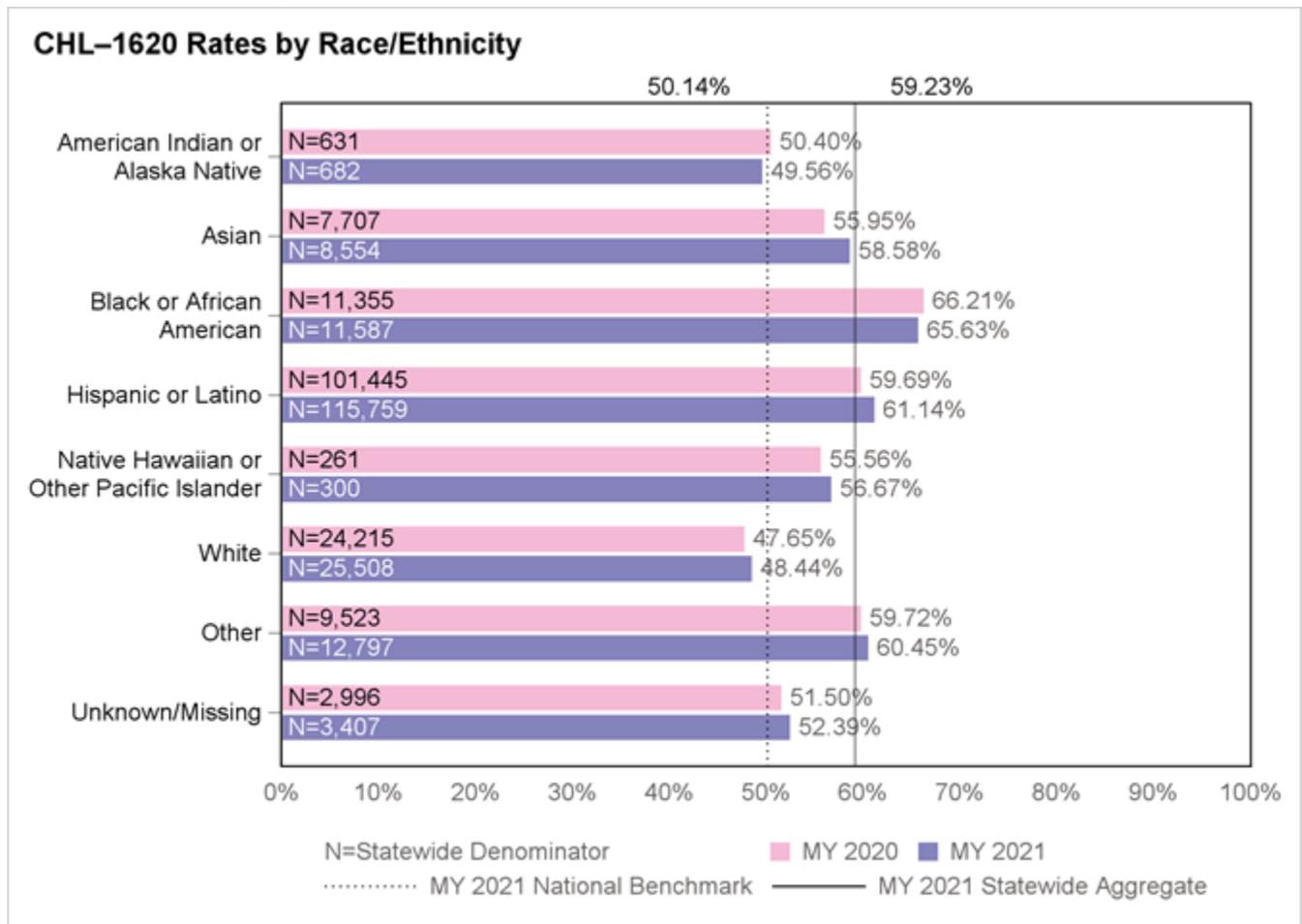
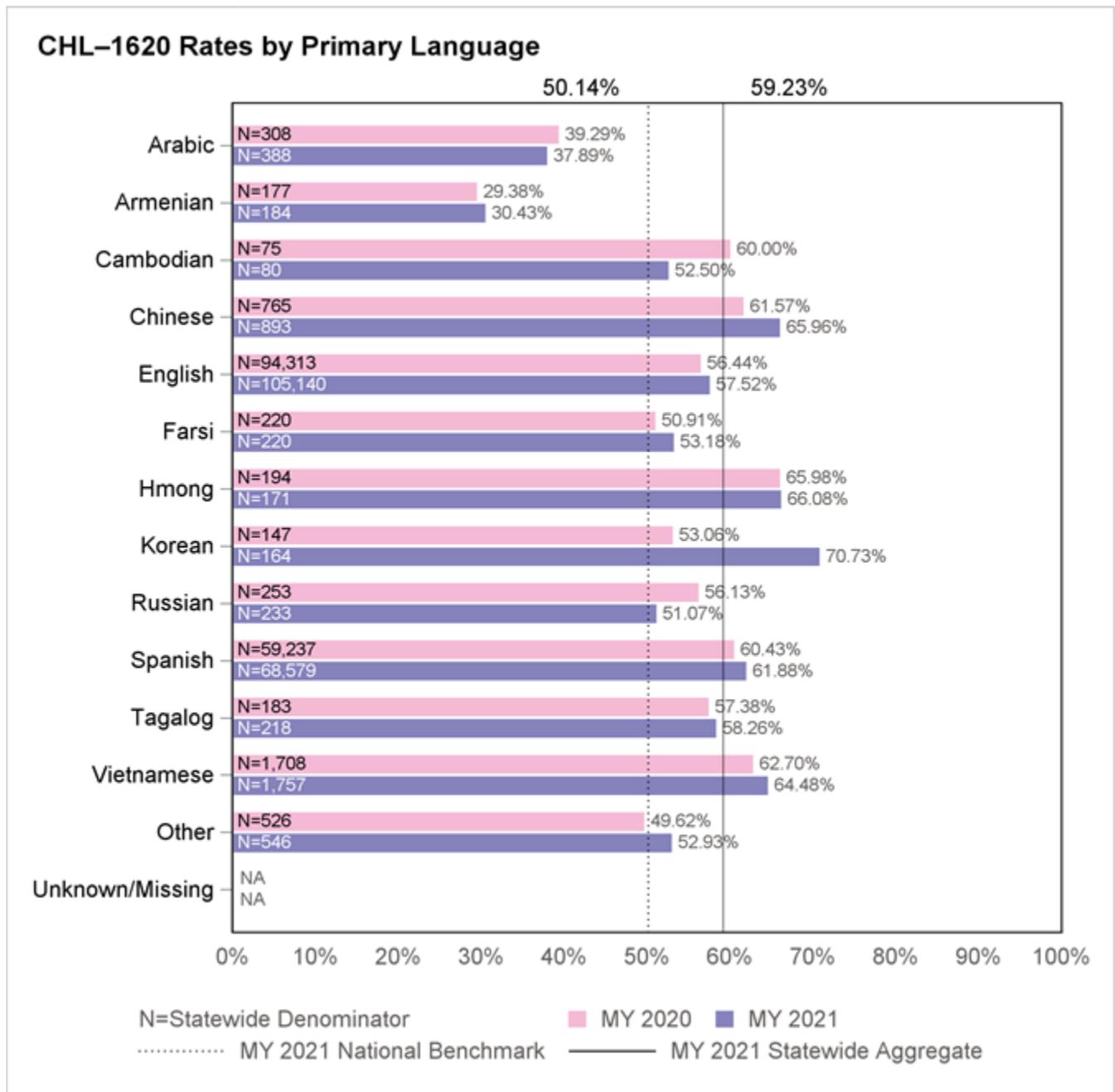


Figure 3.31—Chlamydia Screening in Women—16 to 20 Years (CHL-1620)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

NA indicates the rate had a small denominator (i.e., less than 30).

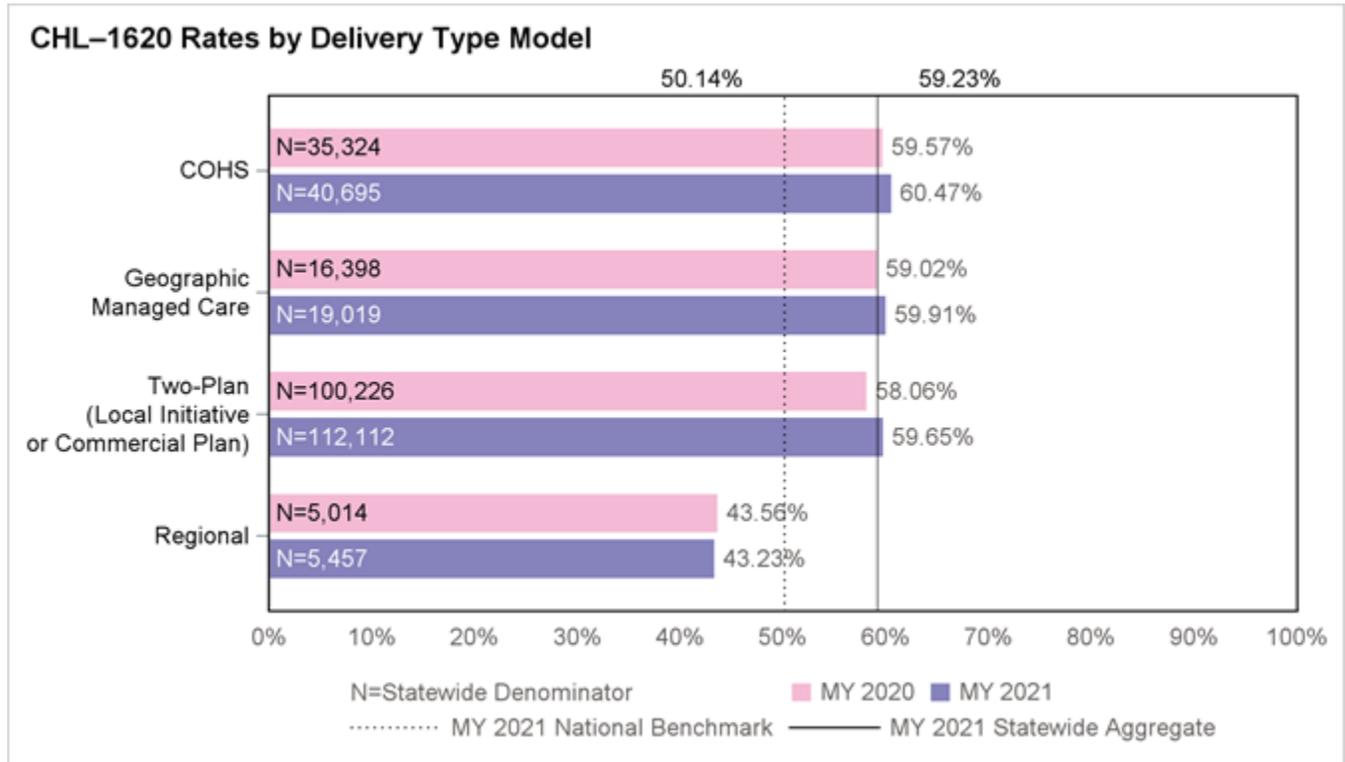
The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 50.46 percent and 57.94 percent, respectively.



- ◆ While the national benchmark decreased from measurement year 2020 to measurement year 2021, the statewide aggregate for the *Chlamydia Screening in Women—16 to 20 Years* indicator increased by approximately 1 percentage point and remained above the national benchmark by more than 10 percent relative difference for measurement year 2021, indicating that MCPs ensured an adequate number of female members received appropriate chlamydia screenings
- ◆ For both measurement years 2020 and 2021, reportable rates for two of eight (25.00 percent) racial/ethnic groups (American Indian or Alaska Native and White) and two of 13 (15.38 percent) primary language groups (Arabic and Armenian) fell below the national benchmark.
- ◆ For measurement year 2021, reportable rates for three of eight (37.50 percent) racial/ethnic groups (American Indian or Alaska Native, White, and Unknown/Missing) and six of 13 (46.15 percent) primary language groups (Arabic, Armenian, Cambodian, Farsi, Russian, and Other) were below the statewide aggregate by more than a 10 percent relative difference.
 - Rates for three of eight (37.50 percent) racial/ethnic groups (American Indian or Alaska Native, White, and Unknown/Missing) and four of 13 (30.77 percent) primary language groups (Arabic, Armenian, Farsi, and Other) were below the statewide aggregate by more than a 10 percent relative difference in both measurement years 2020 and 2021.
- ◆ From measurement year 2020 to measurement year 2021, the rate for the Cambodian primary language group decreased by more than a 10 percent relative difference, and the rate for the Korean primary language group increased by more than a 30 percent relative difference.

**Figure 3.32—Chlamydia Screening in Women—16 to 20 Years (CHL-1620)—
Regional-Level Delivery Type Model Results**

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 50.46 percent and 57.94 percent, respectively.



**Figure 3.33—Chlamydia Screening in Women—16 to 20 Years (CHL-1620)—
Regional-Level Population Density Results**

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 50.46 percent and 57.94 percent, respectively.

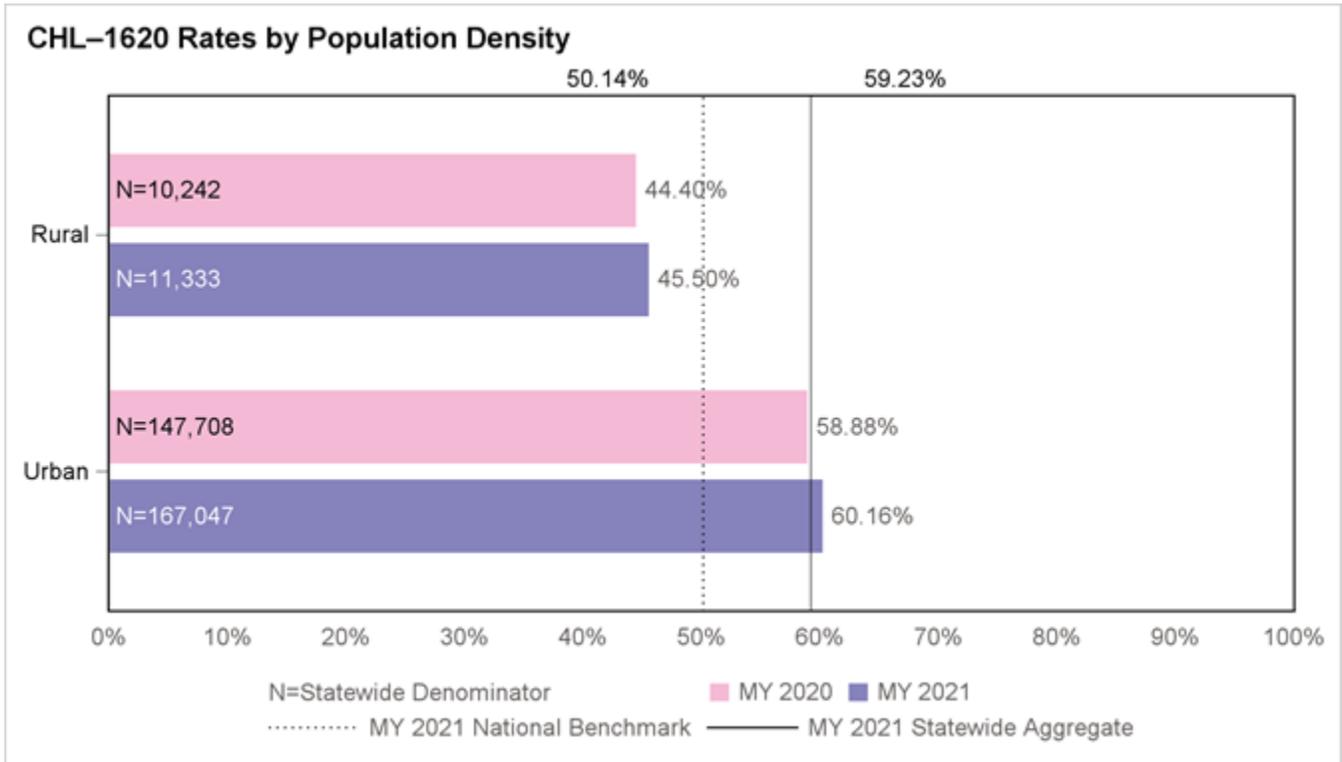
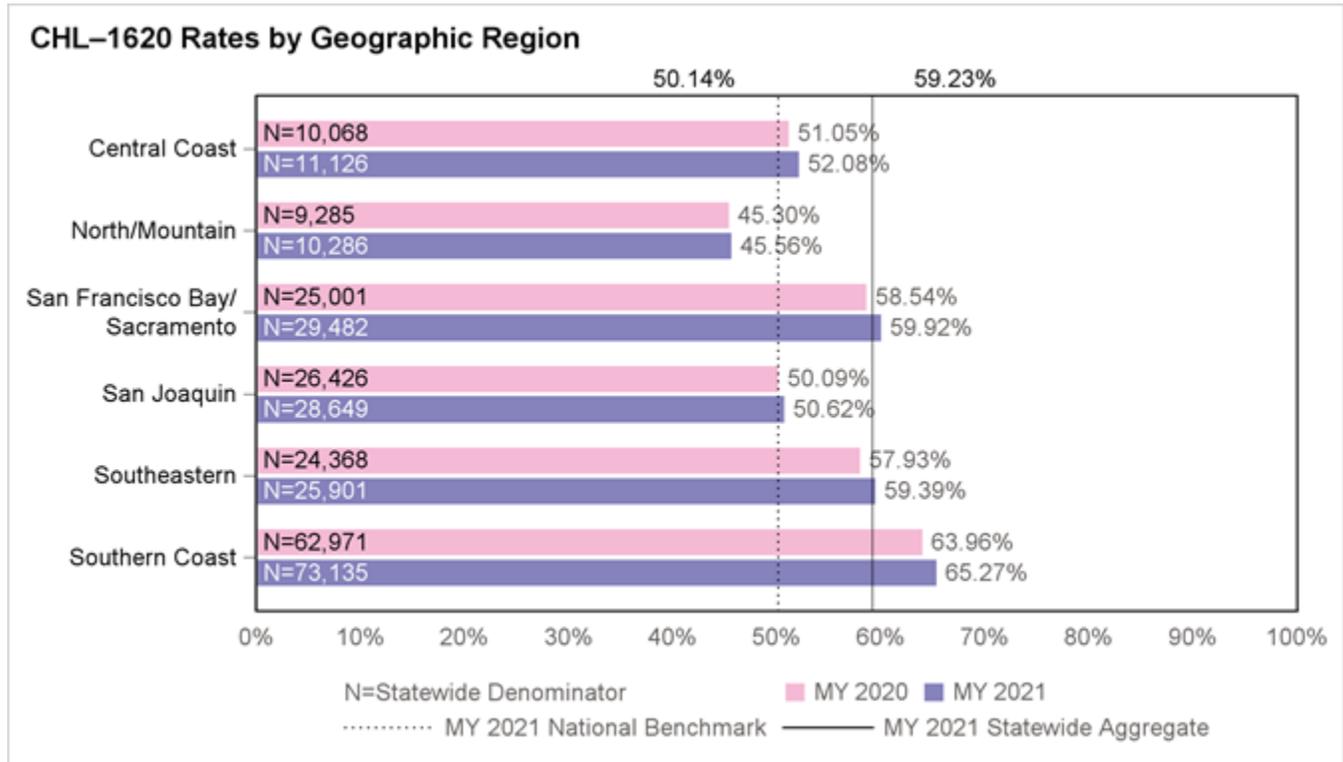


Figure 3.34—Chlamydia Screening in Women—16 to 20 Years (CHL-1620)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 50.46 percent and 57.94 percent, respectively.

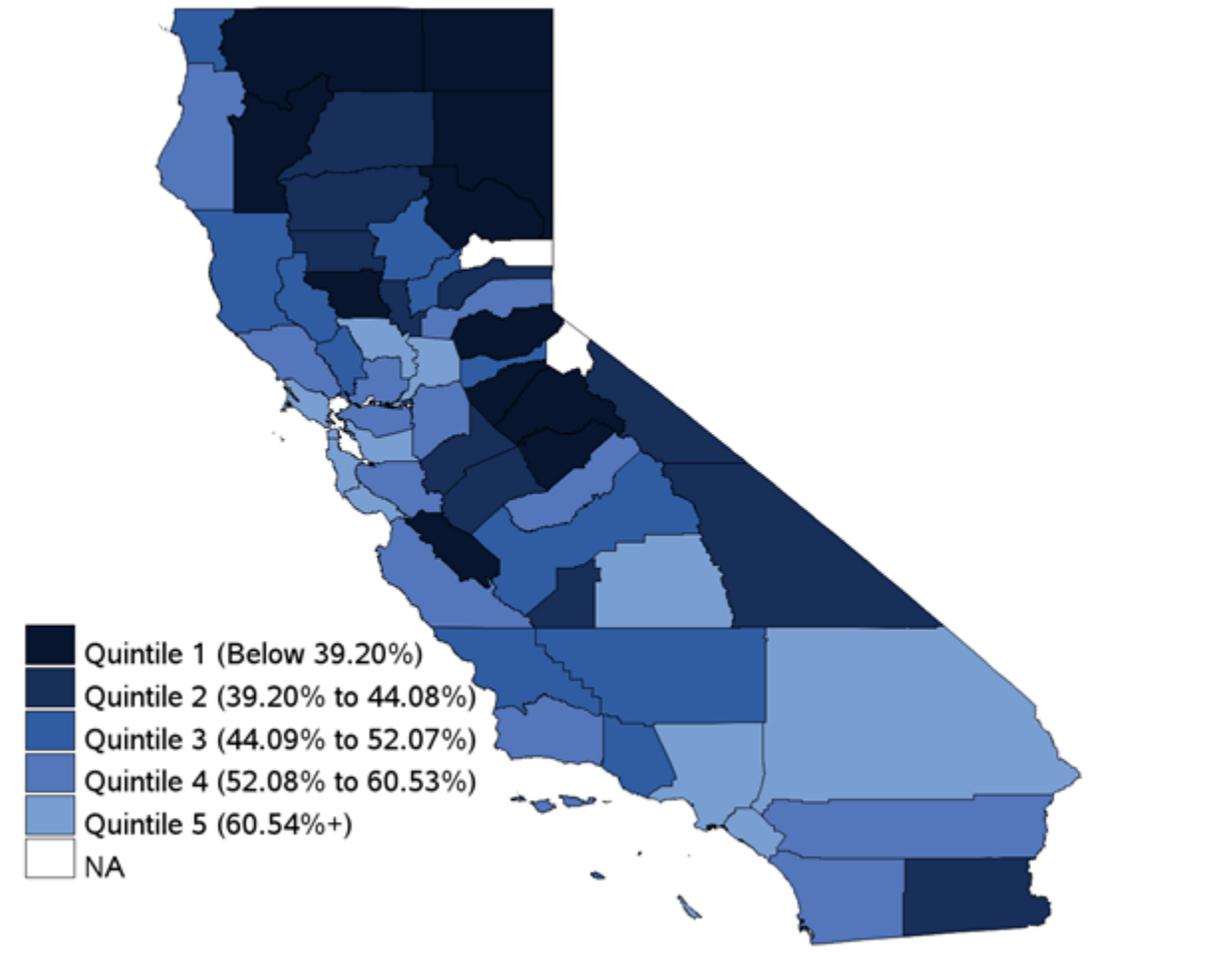


- ◆ For both measurement years 2020 and 2021, the *Chlamydia Screening in Women—16 to 20 Years* indicator rates for the Regional delivery type model group, rural population density group, and North/Mountain geographic region fell below the national benchmark.
- ◆ For both measurement years 2020 and 2021, rates for the Regional delivery type model group, rural population density group, and three of six (50.00 percent) geographic regions (Central Coast, North/Mountain, and San Joaquin) were below the statewide aggregate by more than a 10 percent relative difference.
- ◆ From measurement year 2020 to measurement year 2021, rates for three of four (75.00 percent) delivery type model groups (COHS, Geographic Managed Care, and Two-Plan), both population density groups, and all geographic regions increased.

Figure 3.35—Chlamydia Screening in Women—16 to 20 Years (CHL-1620)— County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader's Guide for a list of MCPs operating in each county.



- ◆ From measurement year 2020 to measurement year 2021, 34 of 56 (60.71 percent) counties with reportable *Chlamydia Screening in Women—16 to 20 Years* indicator rates increased, and rates for 10 of these 34 (29.41 percent) counties increased by at least a 10 percent relative difference. Additionally, reportable rates for 32 of 56 (57.14 percent) counties were below the national benchmark for measurement year 2021, with rates for 28 of these 32 (87.50 percent) counties below the national benchmarks for both measurement years 2020 and 2021.
- ◆ Calaveras, Colusa, El Dorado, Lassen, Mariposa, Modoc, Plumas, San Benito, Siskiyou, Trinity, and Tuolumne counties were in Quintile 1 (i.e., had the least favorable rates). Ten of these 11 (90.91 percent) counties are located in the North/Mountain geographic region.
 - Of note, reportable rates for 17 of 26 (65.38 percent) counties (Calaveras, Colusa, El Dorado, Glenn, Inyo, Lassen, Mariposa, Modoc, Mono, Nevada, Plumas, Shasta,

Siskiyou, Sutter, Tehama, Trinity, and Tuolumne) in the North/Mountain geographic region were in Quintiles 1 or 2. MCPs operating in the North/Mountain geographic region include Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan; Kaiser NorCal (KP Cal, LLC); and Partnership HealthPlan of California.

- ◆ Alameda, Los Angeles, Marin, Orange, Sacramento, San Bernardino, San Francisco, San Mateo, Santa Cruz, Tulare, and Yolo counties were in Quintile 5 (i.e., had the most favorable rates). Five of these 11 (45.45 percent) counties are located in the San Francisco Bay/Sacramento geographic region.
 - Of note, rates for nine of 10 (90.00 percent) counties (Alameda, Contra Costa, Marin, Sacramento, San Francisco, San Mateo, Santa Clara, Solano, and Sonoma) in the San Francisco Bay/Sacramento geographic region were in Quintiles 4 or 5. Additionally, rates for all three counties (Los Angeles, Orange, and San Diego) in the Southern Coast geographic region and two of three (66.67 percent) counties (Riverside and San Bernadino) in the Southeastern geographic region were in Quintiles 4 or 5.
 - MCPs operating in the San Francisco Bay/Sacramento, Southern Coast, and Southeastern geographic regions include Aetna Better Health of California; Alameda Alliance for Health; Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; Blue Shield of California Promise Health Plan; California Health & Wellness Plan; CalOptima; Community Health Group Partnership Plan; Contra Costa Health Plan; Health Net Community Solutions, Inc.; Health Plan of San Mateo; Inland Empire Health Plan; Kaiser NorCal (KP Cal, LLC); Kaiser SoCal (KP Cal, LLC); L.A. Care Health Plan; Molina Healthcare of California; Partnership HealthPlan of California; San Francisco Health Plan; Santa Clara Family Health Plan; and UnitedHealthcare Community Plan.

Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years

The *Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)* indicator measures the percentage of emergency department visits for members 6 to 17 years of age and older with a principal diagnosis of mental illness or intentional self-harm who had a follow-up visit for mental illness within 30 days of the emergency department visit. Figure 3.36 through Figure 3.42 display the *Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)* indicator rates at the statewide and regional levels for measurement year 2021. Please note, the *Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—Ages 6 to 17 (FUM-30)* indicator is new for measurement year 2021; therefore, trending results are not available.

Figure 3.36—Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)—Statewide Racial/Ethnic Results

NA indicates the rate had a small denominator (i.e., less than 30).

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below.

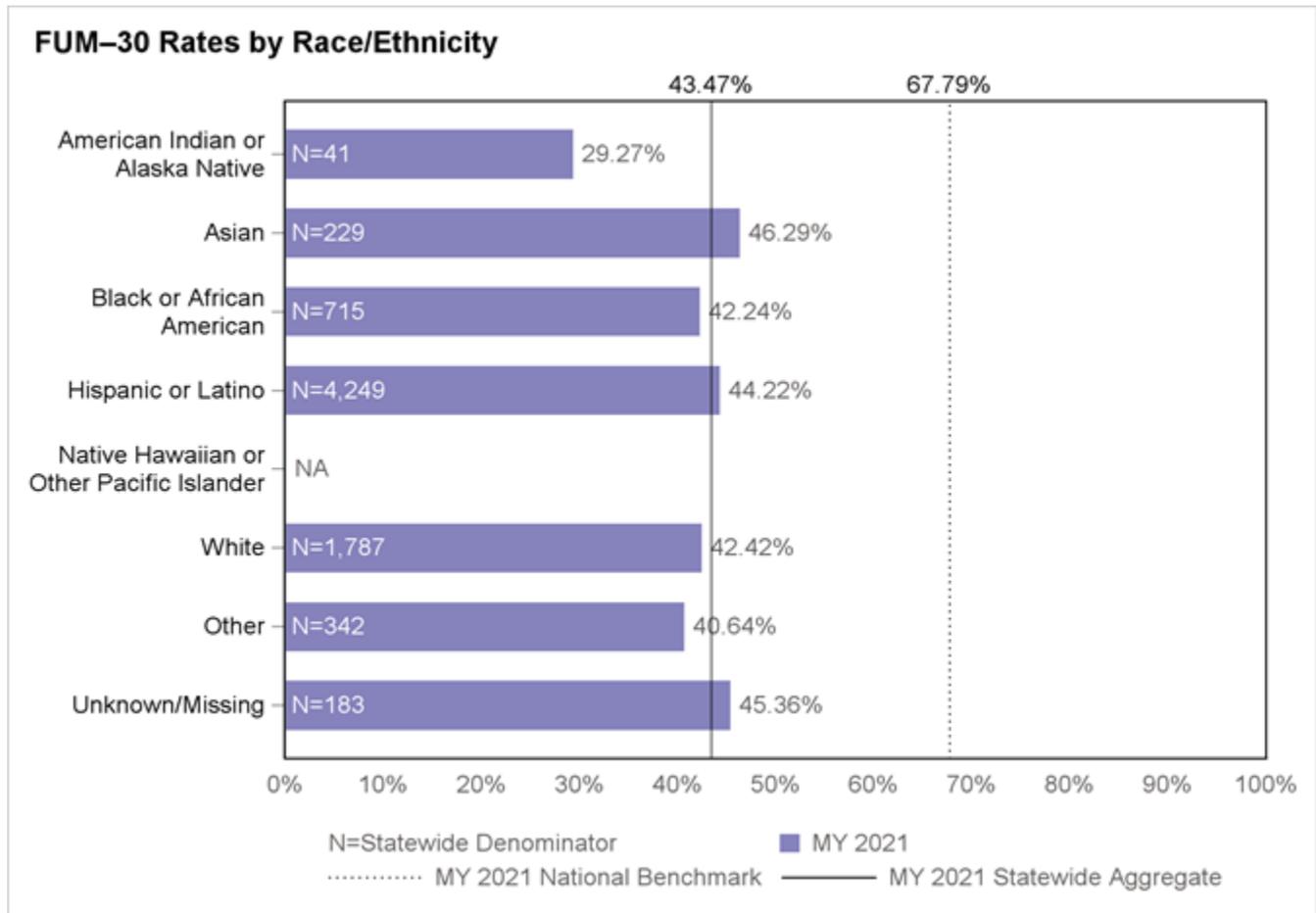


Figure 3.37—Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

NA indicates the rate had a small denominator (i.e., less than 30).

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below.

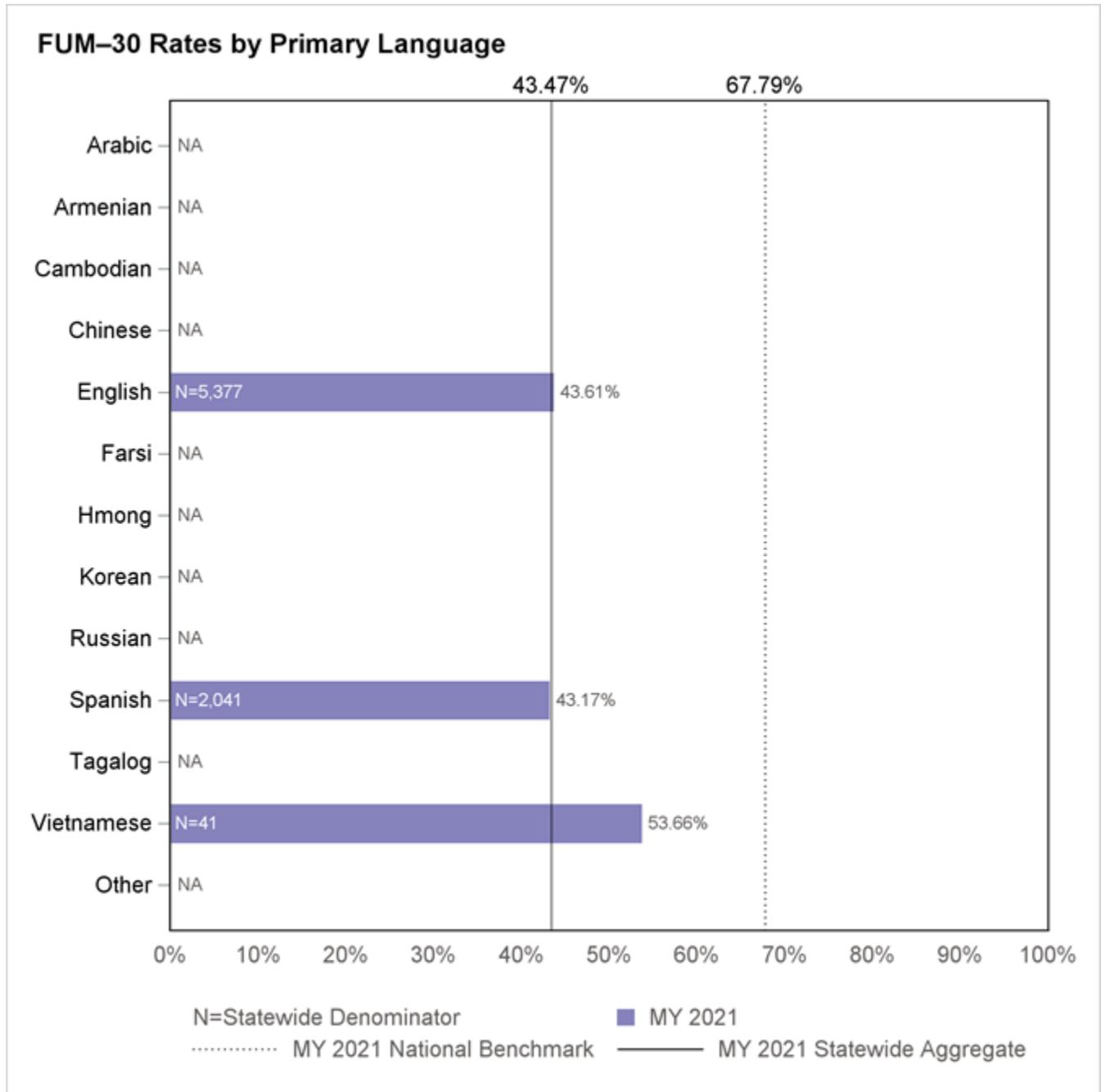
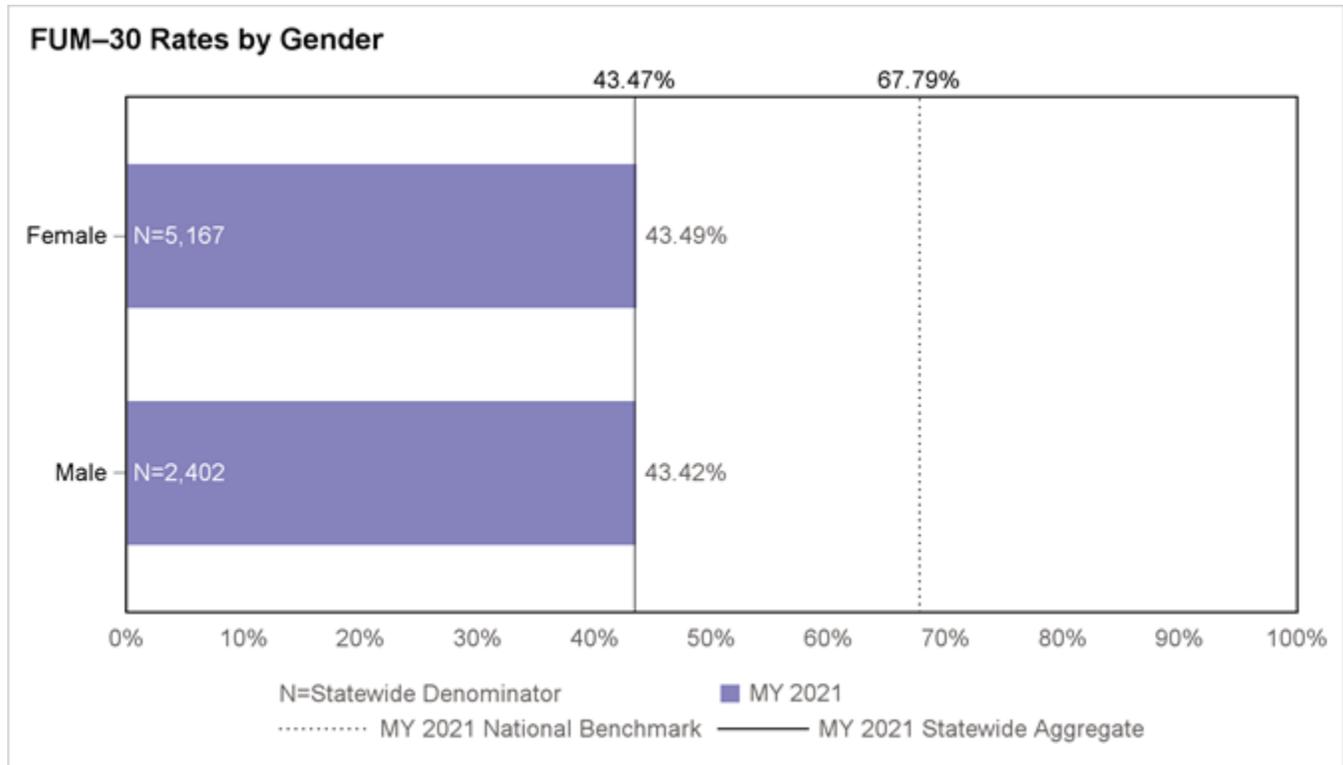


Figure 3.38—Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below.



- ◆ While the measurement year 2021 statewide aggregate for the *Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years* indicator fell below the national benchmark by approximately 24 percentage points. Given that county mental health plans are required to provide specialty mental health services and MCPs may not have received data from the county mental health plans, rates displayed may not be indicative of MCP performance.
- ◆ For measurement year 2021, reportable rates for all racial/ethnic, primary language, and gender groups fell below the national benchmark by more than a 20 percent relative difference.
- ◆ For measurement year 2021, the rate for the American Indian or Alaska Native racial/ethnic group was lower than the statewide aggregate by more than a 30 percent relative difference, while the rate for the Vietnamese primary language group was above the statewide aggregate by at least a 10 percent relative difference.

Figure 3.39—Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below.

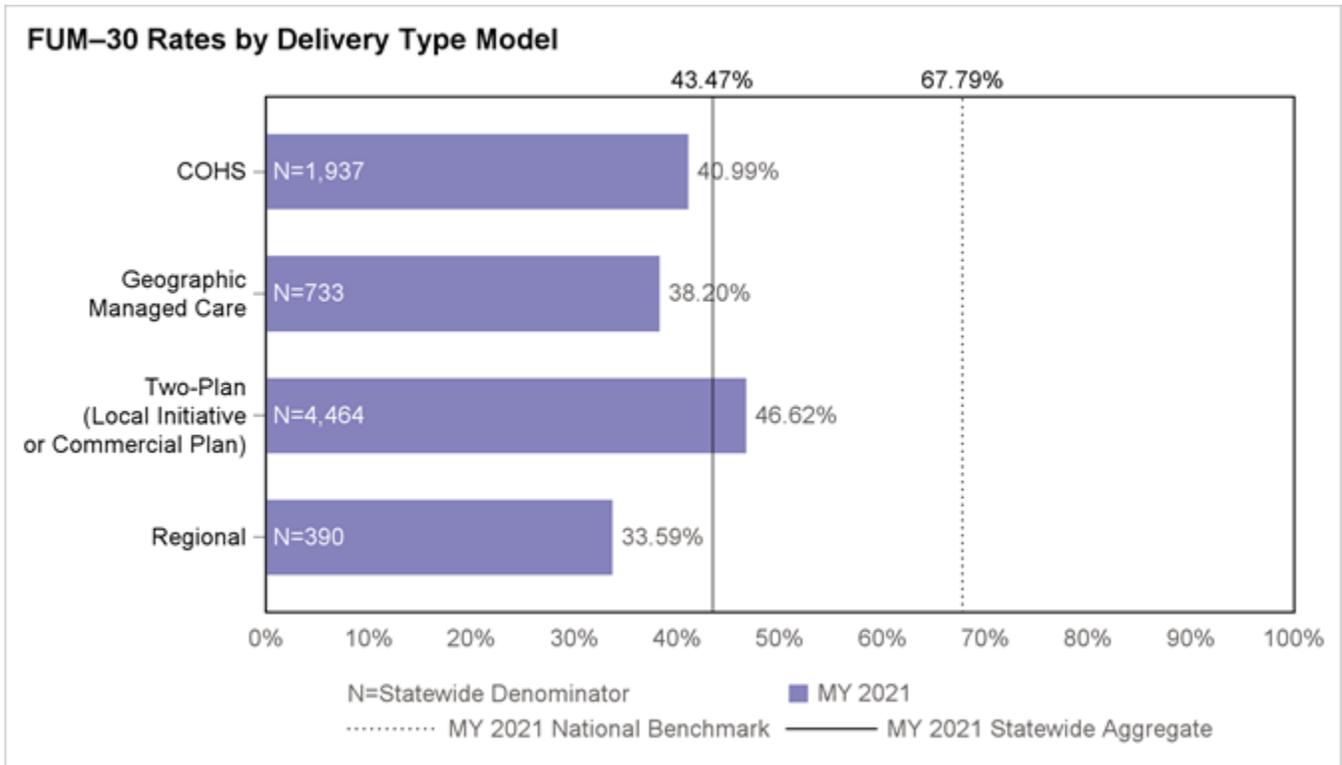


Figure 3.40—Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below.

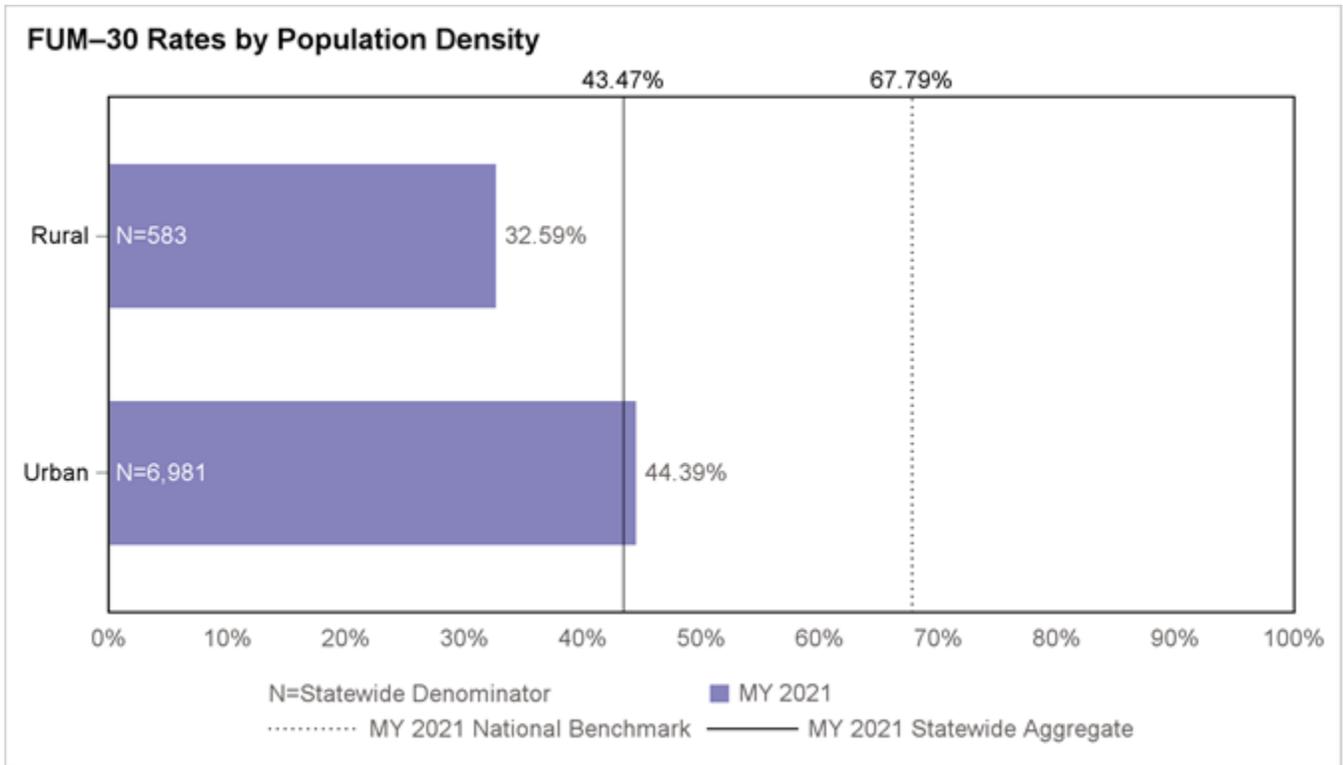
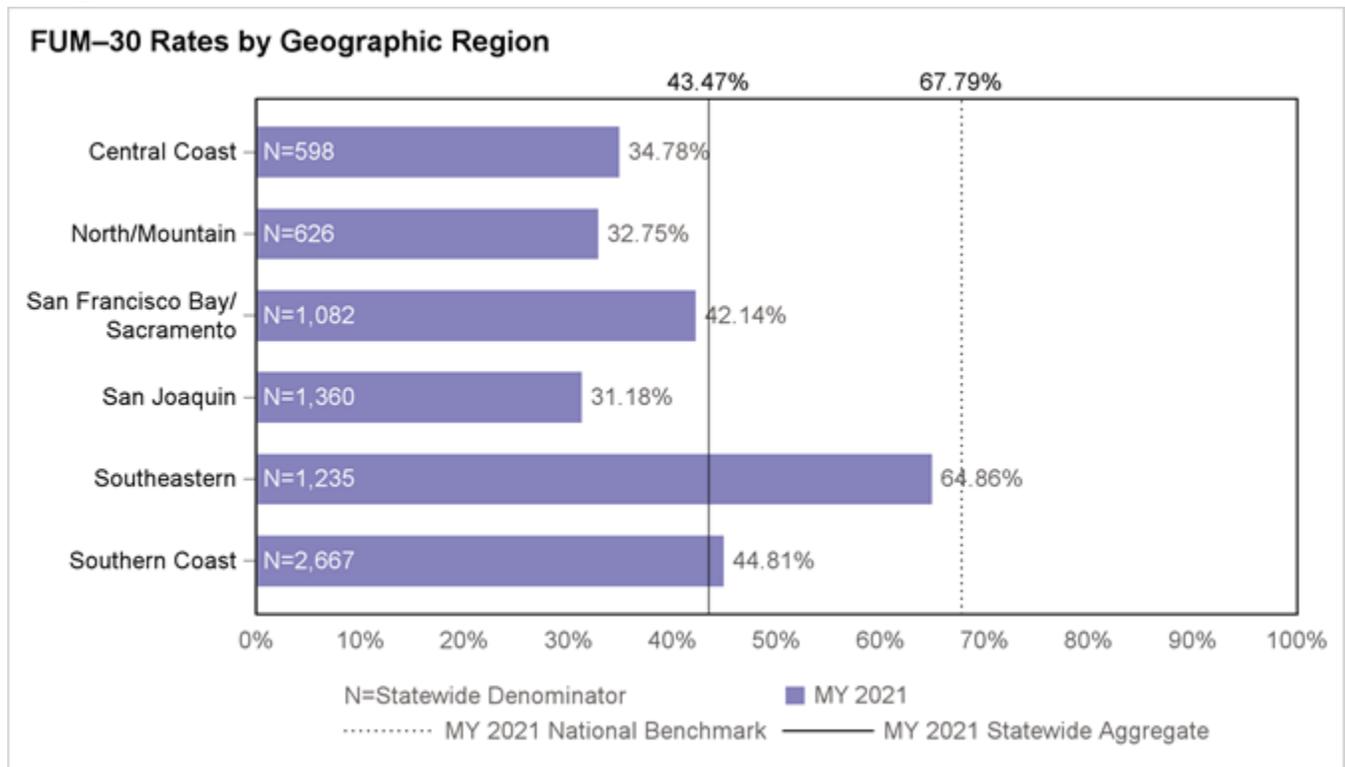


Figure 3.41—Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below.

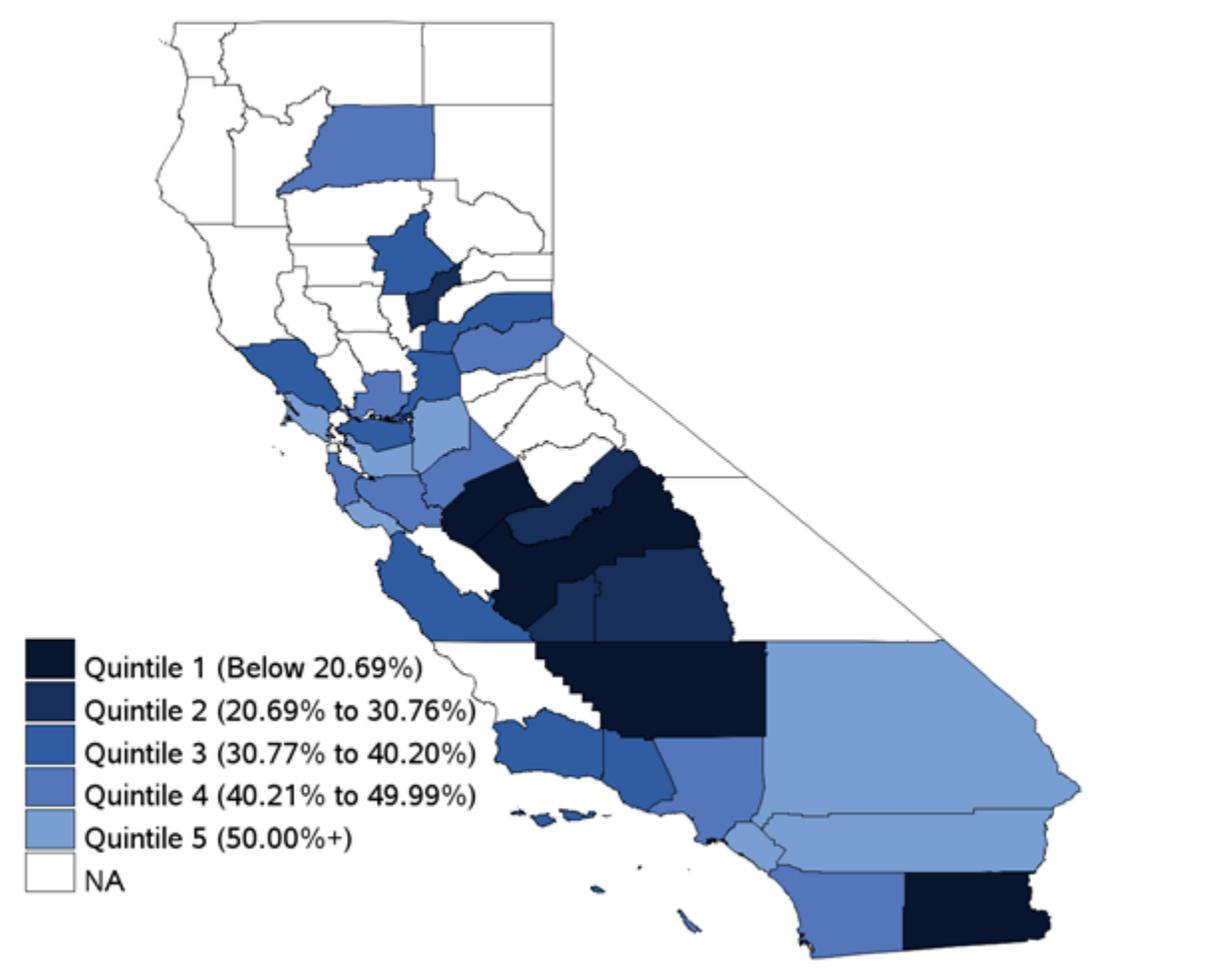


- ◆ For measurement year 2021, the *Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years* indicator rates for all delivery type model groups, population density groups, and geographic regions fell below the national benchmark.
- ◆ For measurement year 2021, rates for two of four (50.00 percent) delivery type model groups (Geographic Managed Care and Regional), the rural population density group, and three of six (50.00 percent) geographic regions (Central Coast, North/Mountain, and San Joaquin) were below the statewide aggregate by more than a 10 percent relative difference.

Figure 3.42—Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader's Guide for a list of MCPs operating in each county.



- ◆ For measurement year 2021, 30 of 31 (96.77 percent) counties with reportable *Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up —6 to 17 Years* indicator rates fell below the national benchmark. San Bernadino County was the only county with a rate above the national benchmark in measurement year 2021.
- ◆ Fresno, Imperial, Kern, and Merced counties were in Quintile 1 (i.e., had the least favorable rates). Three of these four (75.00 percent) counties are located in the San Joaquin geographic region.
 - Of note, six of eight (75.00 percent) counties (Fresno, Kern, Kings, Madera, Merced, and Tulare) in the San Joaquin geographic region were in Quintiles 1 or 2. MCPs operating in the San Joaquin geographic region include Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; CalViva Health;

Central California Alliance for Health; Kern Health Systems, DBA Kern Family Health Care; Health Net Community Solutions, Inc.; and Health Plan of San Joaquin.

- ◆ Alameda, Marin, Orange, Riverside, San Bernardino, San Joaquin, and Santa Cruz counties were in Quintile 5 (i.e., had the most favorable rates).
 - Of note, rates for two of three (66.67 percent) counties (Riverside and San Bernadino) in the Southeastern geographic region were in Quintile 5. Additionally, reportable rates for all three counties (Los Angeles, Orange, and San Diego) in the Southern Coast geographic region and five of eight (62.50 percent) counties (Alameda, Marin, San Mateo, Santa Clara, and Solano) in the San Francisco Bay/Sacramento geographic region were in Quintiles 4 or 5.
 - MCPs operating in the Southeastern, Southern Coast, and San Francisco Bay/Sacramento geographic regions include Aetna Better Health of California; Alameda Alliance for Health; Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; Blue Shield of California Promise Health Plan; California Health & Wellness Plan; CalOptima; Community Health Group Partnership Plan; Contra Costa Health Plan; Health Net Community Solutions, Inc.; Health Plan of San Mateo; Kaiser NorCal (KP Call, LLC); Kaiser SoCal (KP Cal, LLC); Inland Empire Health Plan; L.A. Care Health Plan; Molina Healthcare of California; Partnership HealthPlan of California; San Francisco Health Plan; Santa Clara Family Health Plan; and UnitedHealthcare Community Plan.

HSAG-Calculated Indicator Results

HSAG and DHCS did not identify key findings for any of the HSAG-calculated indicators. As a result, the following HSAG-calculated indicators are not presented in Section 3:

- ◆ *Alcohol Use Screening (AUS)*
- ◆ *Dental Fluoride Varnish (DFV)*
- ◆ *Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)*
- ◆ *Tobacco Use Screening (TUS)*

The results for these indicators are available in Appendix A.

DHCS-Calculated Indicator Results

Figure 3.43 through Figure 3.49 display the measurement years 2020 and 2021 statewide and regional results for the DHCS-calculated indicators with results considered to be key findings.

The following DHCS-calculated indicators are not presented in Section 3 as HSAG and DHCS identified no key findings:

- ◆ *Blood Lead Screening—Test at 12 Months of Age (BLS-1)*
- ◆ *Blood Lead Screening—Test at 24 Months of Age (BLS-2)*
- ◆ *Blood Lead Screening—Two Tests by 24 Months of Age (BLS-1 and 2)*
- ◆ *Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS-316)*

The results for these indicators are available in Appendix A.

Lead Screening in Children

The *Lead Screening in Children (LSC)* indicator measures the percentage of children who turned 2 years old during the measurement year who had a screening by their second birthday. Members must be enrolled on their second birthday and continuously enrolled for 12 months prior to their second birthday, with no more than one gap in enrollment during the 12-month period where the gap is no longer than one month. The *Lead Screening in Children (LSC)* indicator aligns with DHCS' VBP program specifications, which are based on the specifications for NCQA's HEDIS *Lead Screening in Children (LSC)* measure. The *Lead Screening in Children (LSC)* indicator does not meet California regulatory requirements; please refer to the measure descriptions for the California Title 17 indicators in Appendix A. Figure 3.43 through Figure 3.49 display the *Lead Screening in Children (LSC)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure 3.43—Lead Screening in Children (LSC)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 71.53 percent and 58.21 percent, respectively.

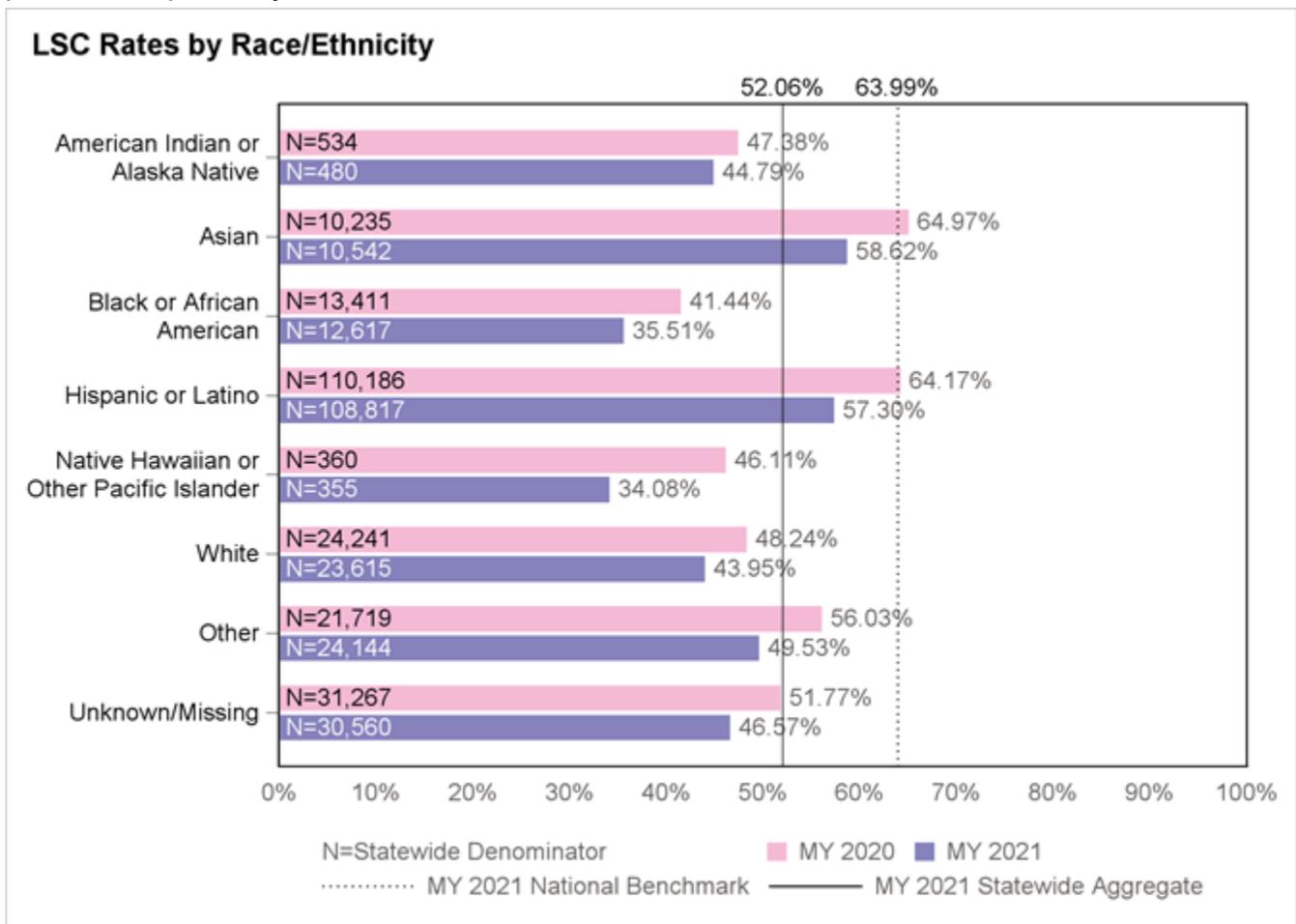


Figure 3.44—Lead Screening in Children (LSC)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 71.53 percent and 58.21 percent, respectively.

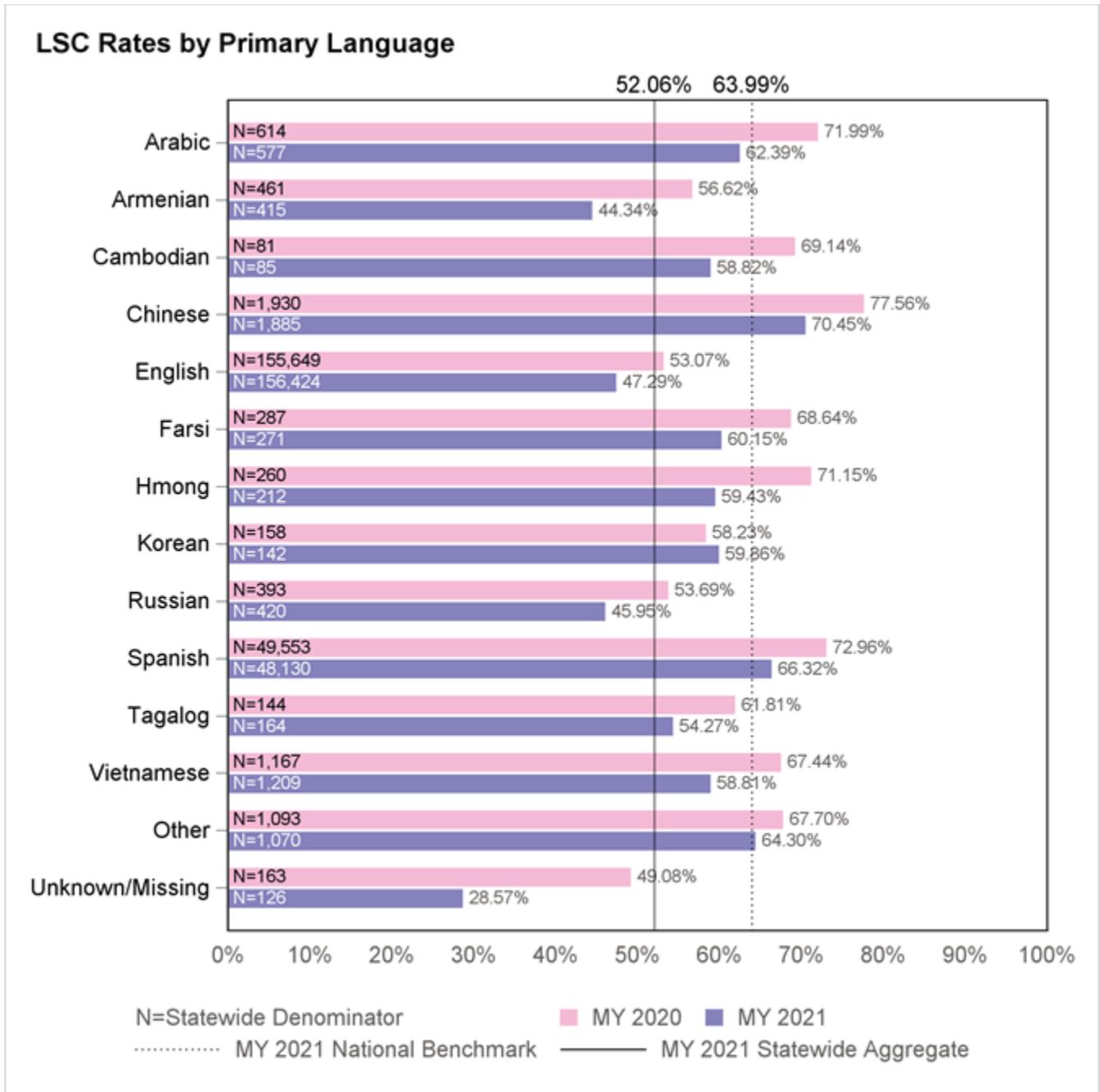
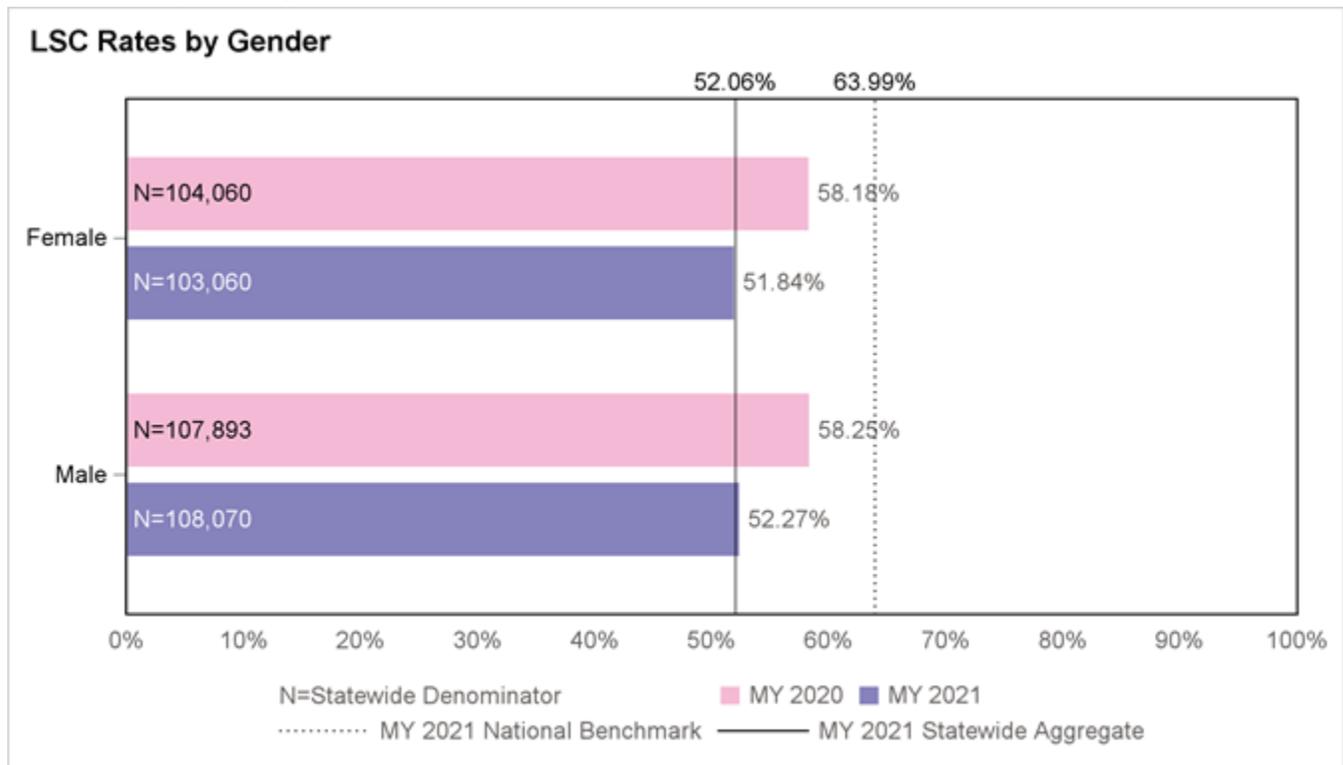


Figure 3.45—Lead Screening in Children (LSC)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 71.53 percent and 58.21 percent, respectively.



- ◆ The measurement year 2021 statewide aggregate for the *Lead Screening in Children* indicator fell below the national benchmark by approximately 12 percentage points and decreased from measurement year 2020 by more than a 10 percent relative difference. Of note, the *Blood Lead Screening—Test at 12 Months of Age* and *Blood Lead Screening—Test at 24 Months of Age* indicators in Appendix A show that children were more likely to receive a screening around their first birthday compared to their second birthday. As a result, children who turned 2 years of age during measurement year 2021 would have been more likely to have been screened during measurement year 2020, and COVID-19 likely impacted these children receiving blood lead screenings. Therefore, MCP performance is expected to rebound in measurement year 2022; however, given that MCP performance for this indicator has historically been lower than national performance, opportunities exist to ensure children receive appropriate blood lead screenings.
- ◆ For measurement year 2021, rates for all racial/ethnic groups, 11 of 14 (78.57 percent) primary language groups (Arabic, Armenian, Cambodian, English, Farsi, Hmong, Korean, Russian, Tagalog, Vietnamese, and Unknown/Missing), and both gender groups fell below the national benchmark.
 - Rates for all eight racial/ethnic groups, 11 of 14 (78.57 percent) primary language groups (Armenian, Armenian, Cambodian, English, Farsi, Hmong, Korean, Russian,

Tagalog, Vietnamese, and Unknown/Missing), and both gender groups fell below the national benchmarks in both measurement years 2020 and 2021.

- ◆ For measurement year 2021, rates for five of eight (62.50 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander, White, and Unknown/Missing) and three of 14 (21.43 percent) primary language groups (Armenian, Russian, and Unknown/Missing) were below the statewide aggregate by more than a 10 percent relative difference.
 - Rates for five of eight (62.50 percent) racial/ethnic groups (American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander, White, and Unknown/Missing) and the Unknown/Missing primary language group were below the statewide aggregate rates by more than a 10 percent relative difference in both measurement years 2020 and 2021.
- ◆ Rates for five of eight (62.50 percent) racial/ethnic groups (Black or African American, Hispanic or Latino, Native Hawaiian or Other Pacific Islander, Other, and Unknown/Missing), 10 of 14 (71.43 percent) primary language groups (Arabic, Armenian, Cambodian, English, Farsi, Hmong, Russian, Tagalog, Vietnamese, and Unknown/Missing), and both gender groups decreased by at least a 10 percent relative difference from measurement year 2020 to measurement year 2021.

Figure 3.46—Lead Screening in Children (LSC)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 71.53 percent and 58.21 percent, respectively.

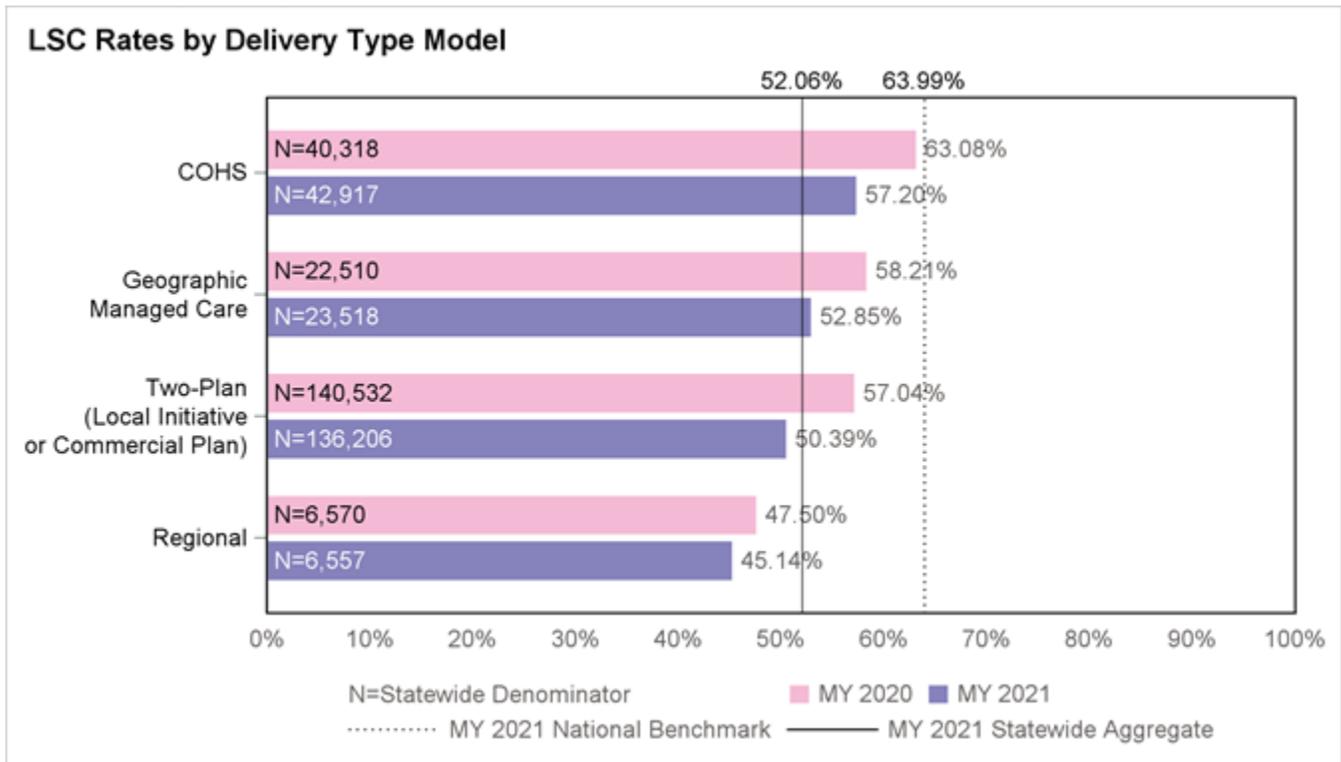


Figure 3.47—Lead Screening in Children (LSC)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 71.53 percent and 58.21 percent, respectively.

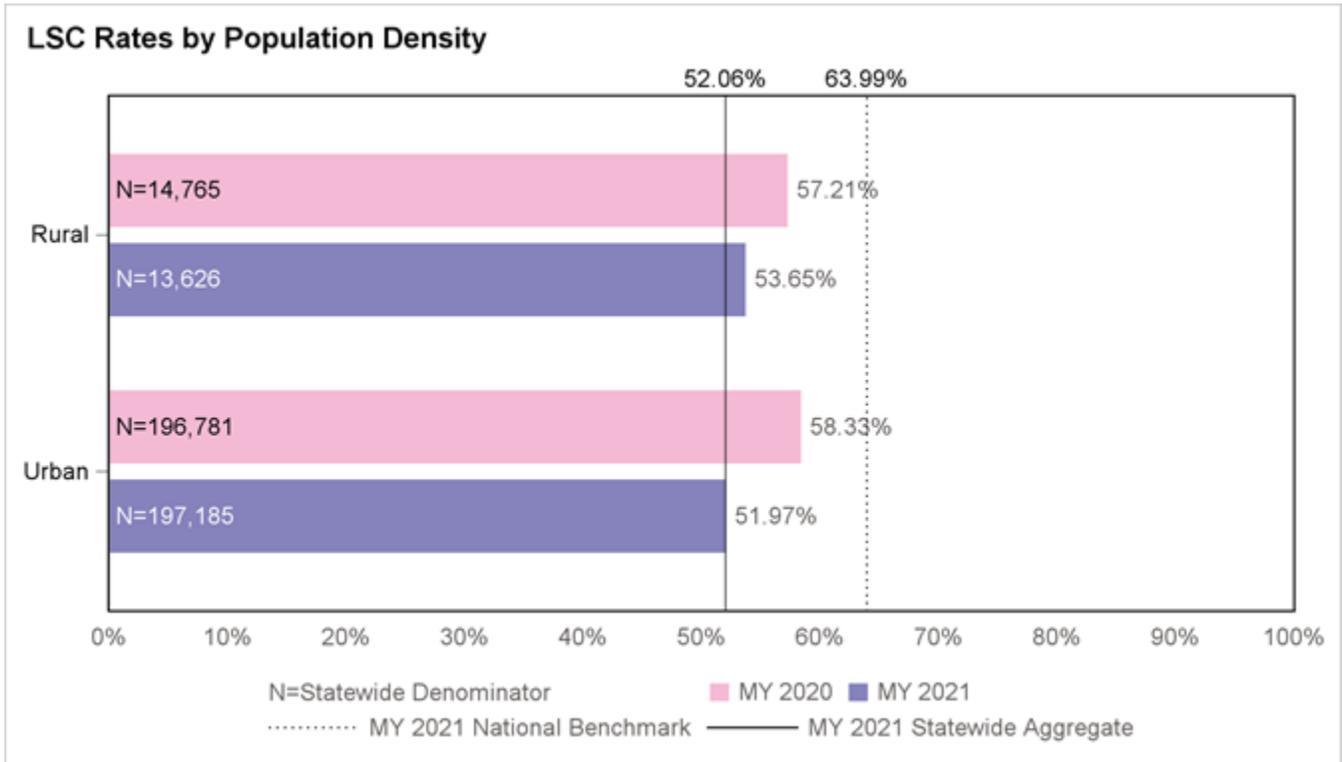
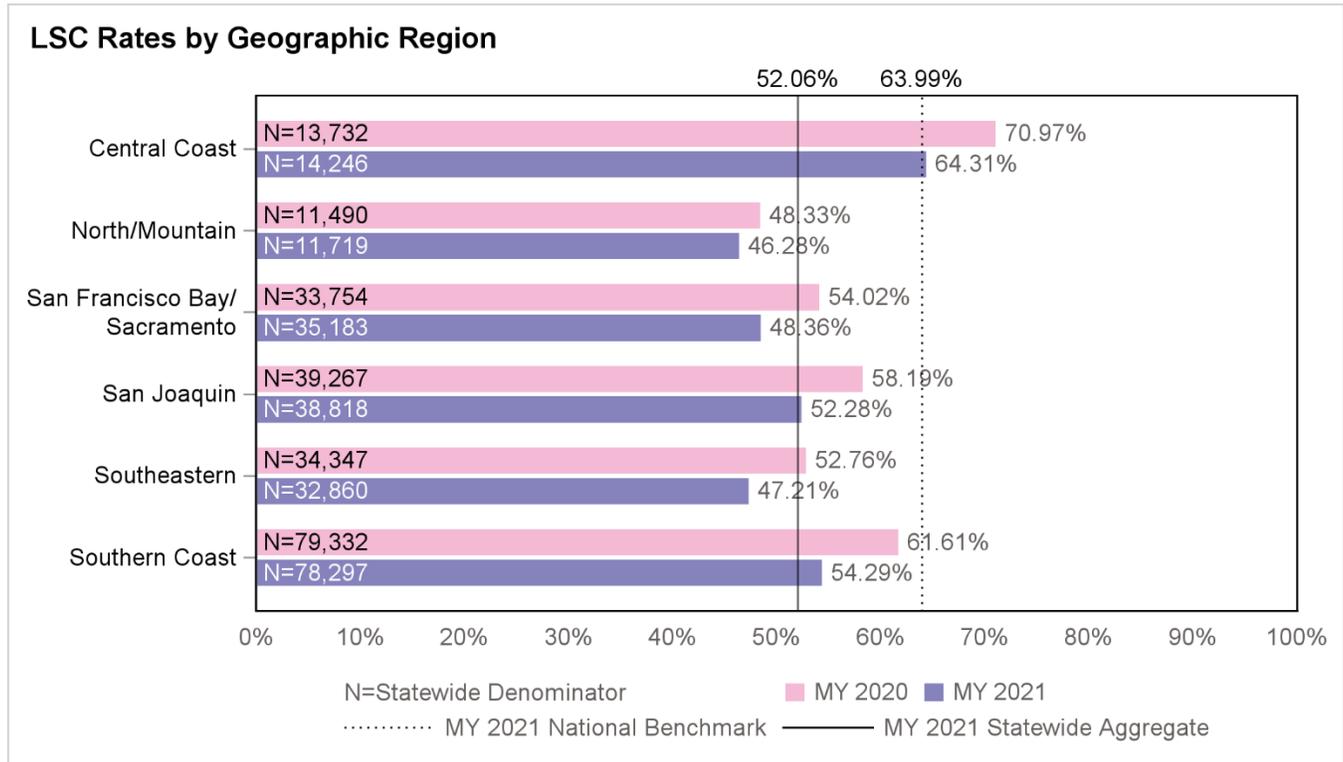


Figure 3.48—Lead Screening in Children (LSC)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 71.53 percent and 58.21 percent, respectively.

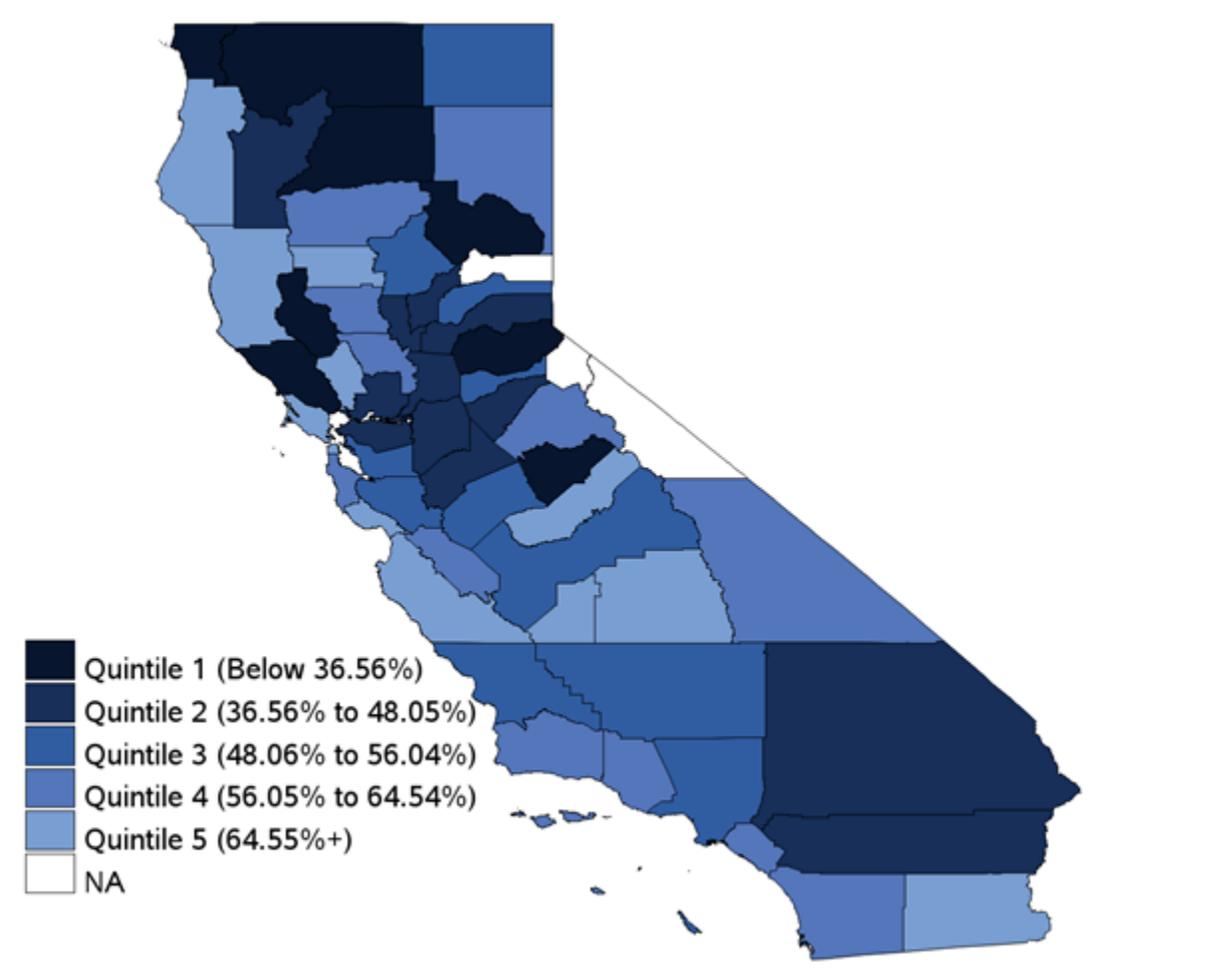


- ◆ For both measurement years 2020 and 2021, the *Lead Screening in Children* indicator rates for all delivery type model groups, both population density groups, and five of six (83.33 percent) geographic regions (North/Mountain, San Francisco Bay/Sacramento, San Joaquin, Southeastern, and Southern Coast) fell below the national benchmarks.
- ◆ For both measurement years 2020 and 2021, rates for the Regional delivery type model group and the North/Mountain geographic region were below the statewide aggregate rates by more than a 10 percent relative difference.
- ◆ From measurement year 2020 to measurement year 2021, rates for the Two-Plan delivery type model group, the urban population density group, and four of six (66.67 percent) geographic regions (San Francisco Bay/Sacramento, San Joaquin, Southeastern, and Southern Coast) decreased by more than a 10 percent relative difference.

Figure 3.49—Lead Screening in Children (LSC)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



- ◆ From measurement year 2020 to measurement year 2021, 45 of 55 (81.82 percent) counties with reportable *Lead Screening in Children* indicator rates decreased, and rates for 21 of these 45 (46.67 percent) counties decreased by at least a 10 percent relative difference. Additionally, reportable rates for 43 of 55 (78.18 percent) counties fell below the national benchmark in measurement year 2021, with rates for 42 of these 43 (97.67 percent) counties below the national benchmarks in measurement years 2020 and 2021.
- ◆ Del Norte, El Dorado, Lake, Mariposa, Plumas, Shasta, Siskiyou, and Sonoma counties were in Quintile 1 (i.e., had the least favorable rates). Seven of these eight (87.50 percent) counties (Del Norte, El Dorado, Lake, Mariposa, Plumas, Shasta, and Siskiyou) are located in the North/Mountain geographic region.
 - Of note, rates for two of three (66.67 percent) counties (Riverside and San Bernadino) in the Southeastern geographic region were in Quintile 2. MCPs operating in the North/Mountain and Southeastern geographic region include Blue Cross of California

Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; California Health & Wellness Plan; Inland Empire Health Plan; Kaiser NorCal (KP Cal, LLC); Molina Healthcare of California; and Partnership HealthPlan of California.

- ◆ Glenn, Humboldt, Imperial, Kings, Madera, Marin, Mendocino, Monterey, Napa, San Francisco, Santa Cruz, and Tulare counties were in Quintile 5 (i.e., had the most favorable rates).
 - Of note, rates for five of six (83.33 percent) counties (Monterey, San Benito, Santa Barbara, Santa Cruz, and Ventura) in the Central Coast geographic region were in Quintiles 4 or 5. Additionally, rates for two of three (66.67 percent) counties (Orange and San Diego) in the Southern Coast geographic region were in Quintile 4. MCPs operating in the Central Coast and Southern Coast geographic regions include Aetna Better Health of California; Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan; Blue Shield of California Promise Health Plan; CalOptima; CenCal Health; Central California Alliance for Health; Community Health Group Partnership Plan; Gold Coast Health Plan; Health Net Community Solutions, Inc.; Kaiser SoCal (KP Cal, LLC); L.A. Care Health Plan; Molina Healthcare of California; and UnitedHealthcare Community Plan.

Appendix A. Full Statewide Results

Appendix A displays all MCP-, HSAG, and DHCS-calculated indicator results that did not meet the key finding criteria and therefore were not presented in the body of the report. Measurement years 2020 and 2021 rates stratified by race/ethnicity, primary language, gender, age, delivery type model, population density, geographic region, and county are displayed along with reference lines for the statewide aggregate and national benchmark, where applicable. Figure A.1 through Figure A.106 display all results not presented in the body of the report.

MCP-Calculated MCAS Indicators

Figure A.1 through Figure A.47 display the measurement years 2020 and 2021 statewide and regional results for the MCAS indicators reported by the 25 full-scope Medi-Cal MCPs with results not considered to be key findings. Please note that MCPs' data and HEDIS rate production processes undergo an extensive independent audit and verification process before MCPs' performance measure rates are finalized and submitted to DHCS.

Developmental Screening in the First Three Years of Life—Total

The *Developmental Screening in the First Three Years of Life—Total (DEV)* indicator measures the percentage of children who were screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months preceding or on the child's first, second, or third birthday. Due to MCPs' inconsistent reporting of electronic health record (EHR) data, differences in rates may be impacted by data completeness. Figure A.1 through Figure A.8 display the *Developmental Screening in the First Three Years of Life—Total (DEV)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure A.1—Developmental Screening in the First Three Years of Life—Total (DEV)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 35.60 percent and 23.11 percent, respectively.

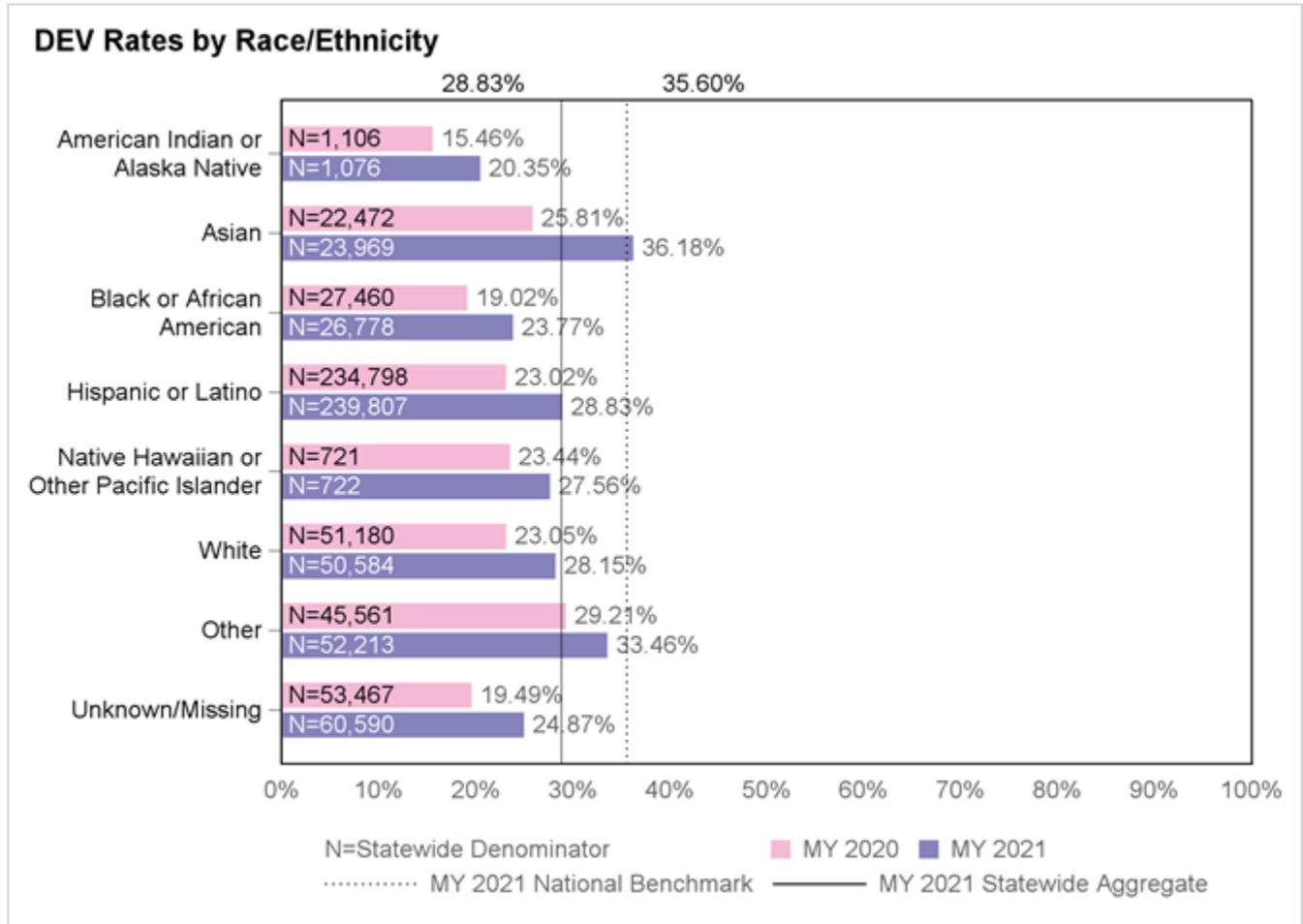


Figure A.2—Developmental Screening in the First Three Years of Life—Total (DEV)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 35.60 percent and 23.11 percent, respectively.

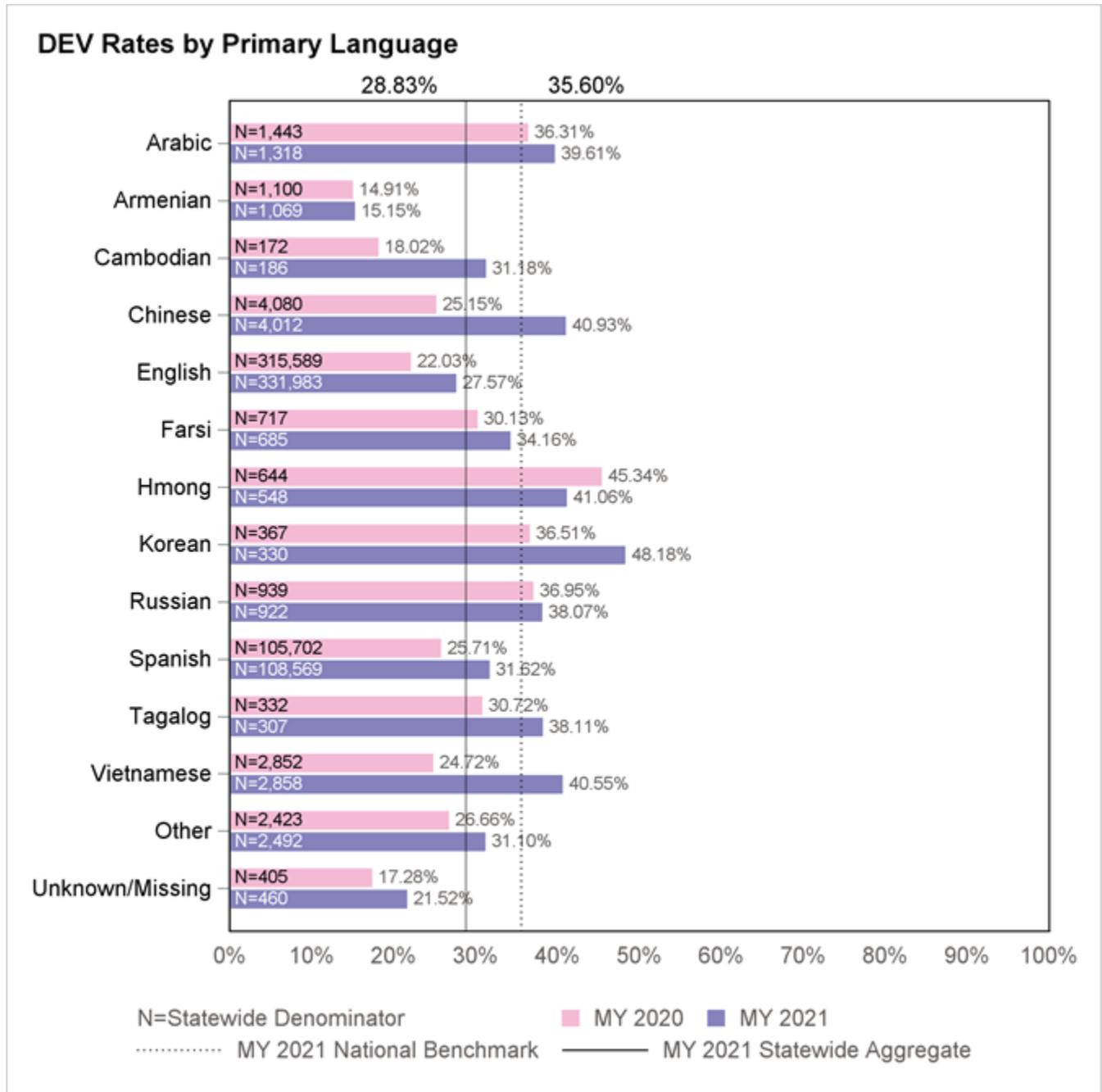


Figure A.3—Developmental Screening in the First Three Years of Life—Total (DEV)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 35.60 percent and 23.11 percent, respectively.

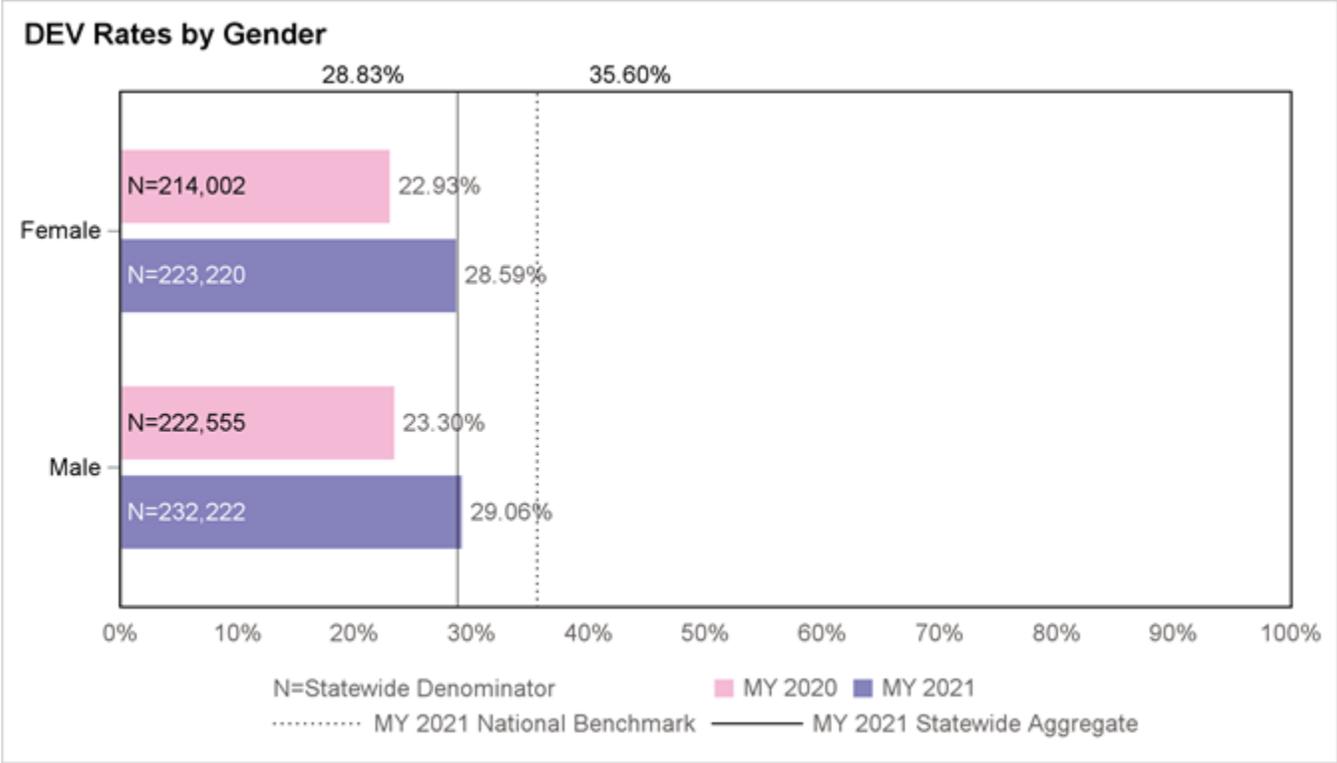


Figure A.4—Developmental Screening in the First Three Years of Life—Total (DEV)—Statewide Age Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 35.60 percent and 23.11 percent, respectively.

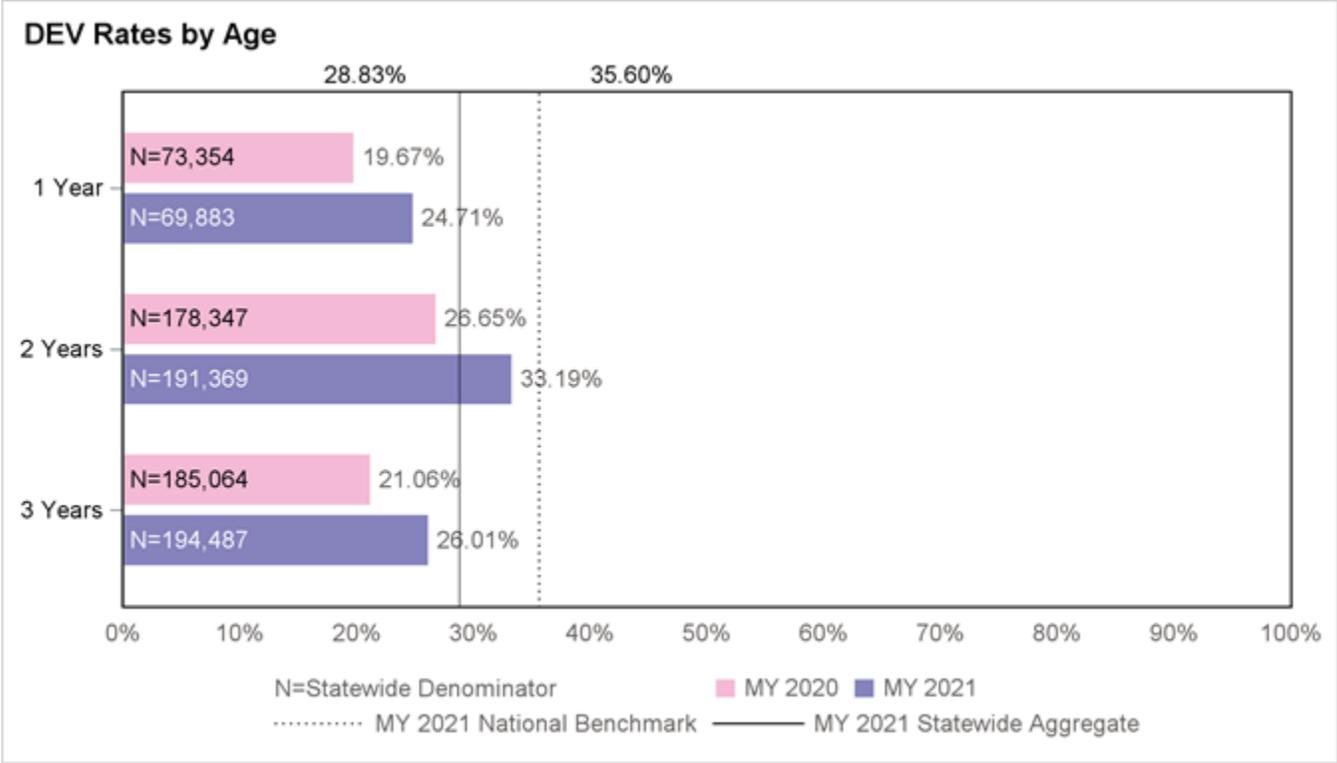


Figure A.5—Developmental Screening in the First Three Years of Life—Total (DEV)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 35.60 percent and 23.11 percent, respectively.

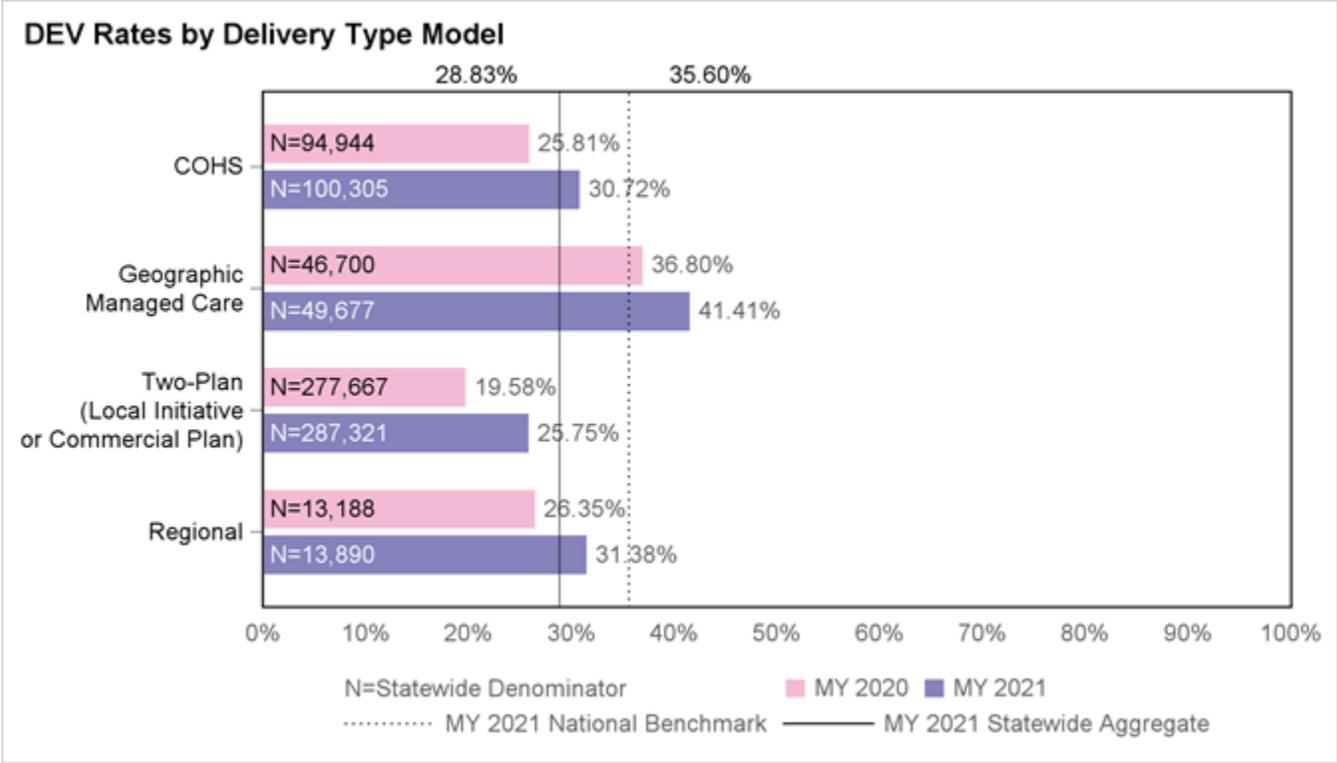


Figure A.6—Developmental Screening in the First Three Years of Life—Total (DEV)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 35.60 percent and 23.11 percent, respectively.

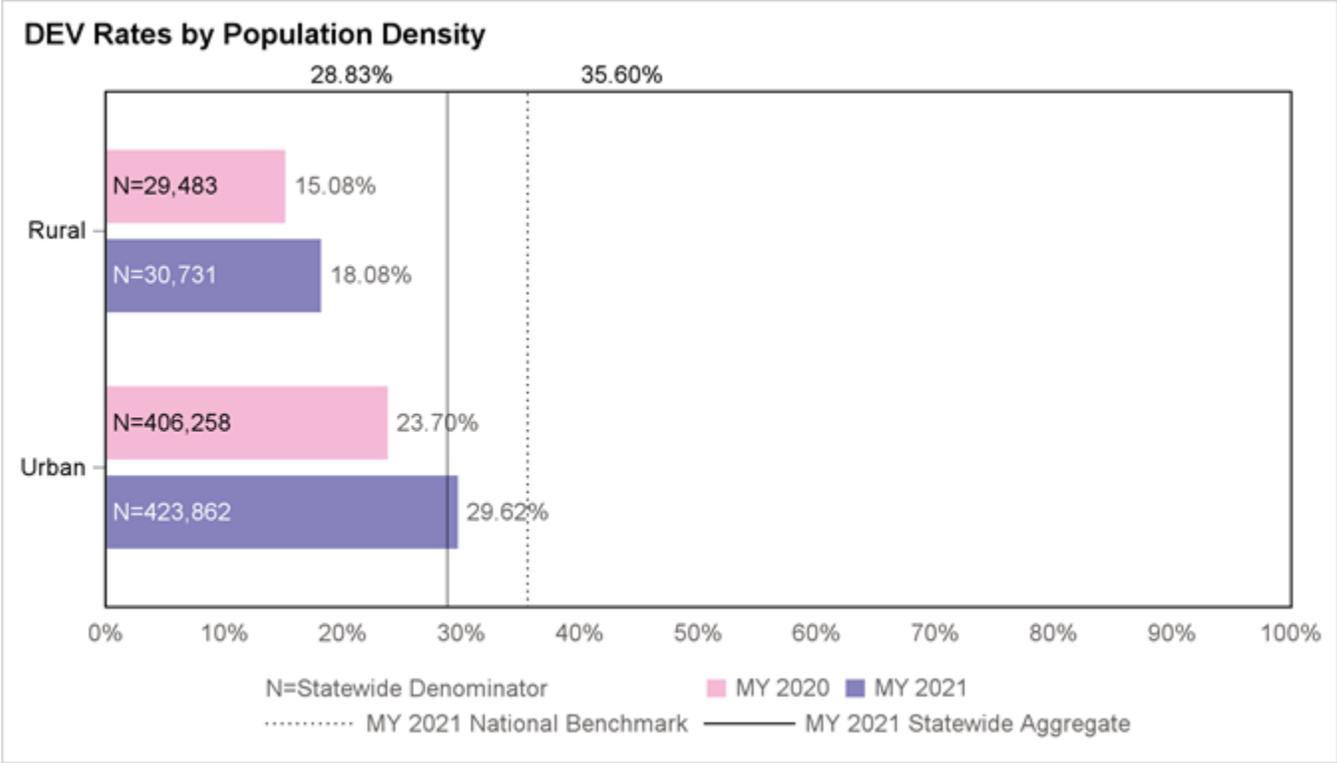


Figure A.7—Developmental Screening in the First Three Years of Life—Total (DEV)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 35.60 percent and 23.11 percent, respectively.

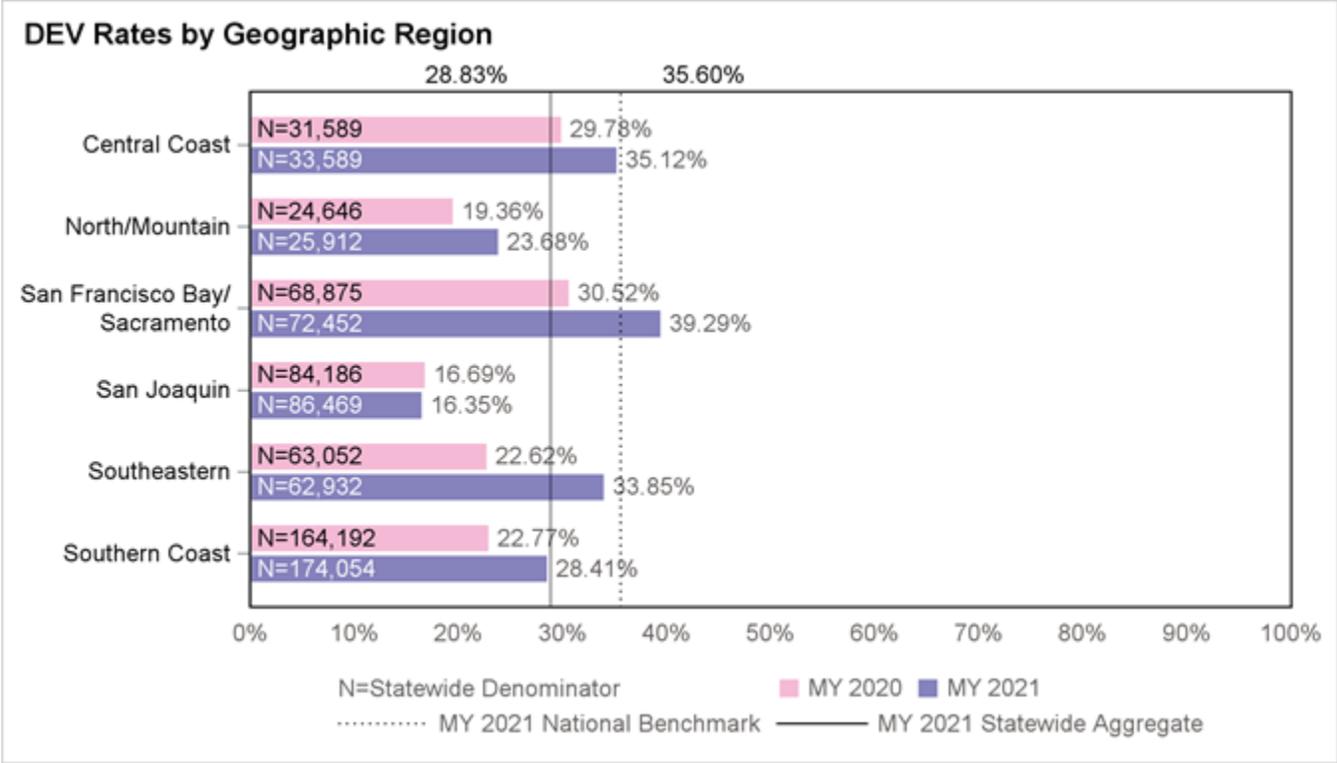
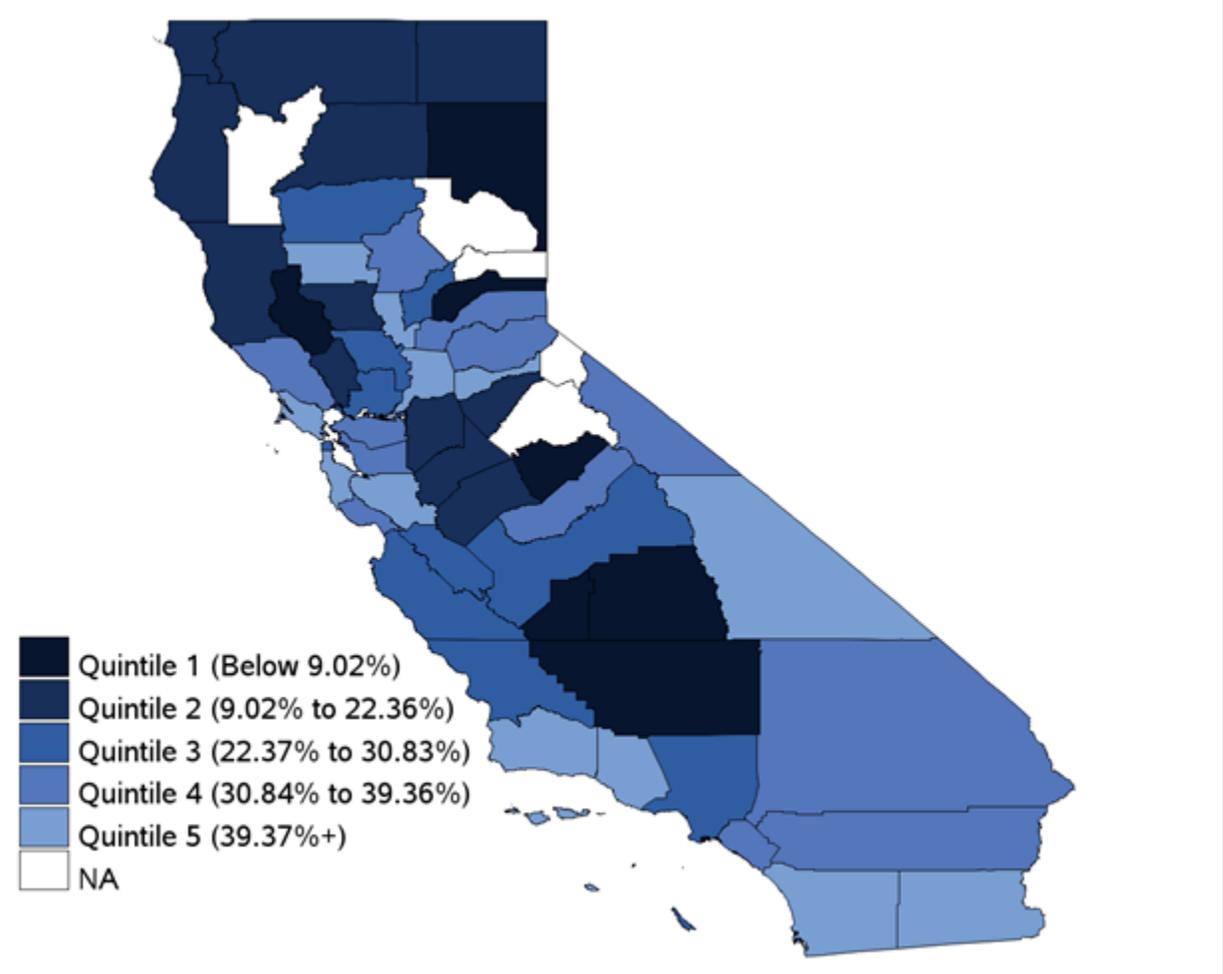


Figure A.8—Developmental Screening in the First Three Years of Life—Total (DEV)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Immunizations for Adolescents—Combination 2

The *Immunizations for Adolescents—Combination 2 (IMA-2)* indicator measures the percentage of adolescents 13 years of age who had one dose of meningococcal vaccine; one tetanus, diphtheria toxoids, and acellular pertussis vaccine; and have completed the human papillomavirus vaccine series by their 13th birthday. Figure A.9 through Figure A.15 display the *Immunizations for Adolescents—Combination 2 (IMA-2)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure A.9—Immunizations for Adolescents—Combination 2 (IMA-2)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 36.74 percent and 41.05 percent, respectively.

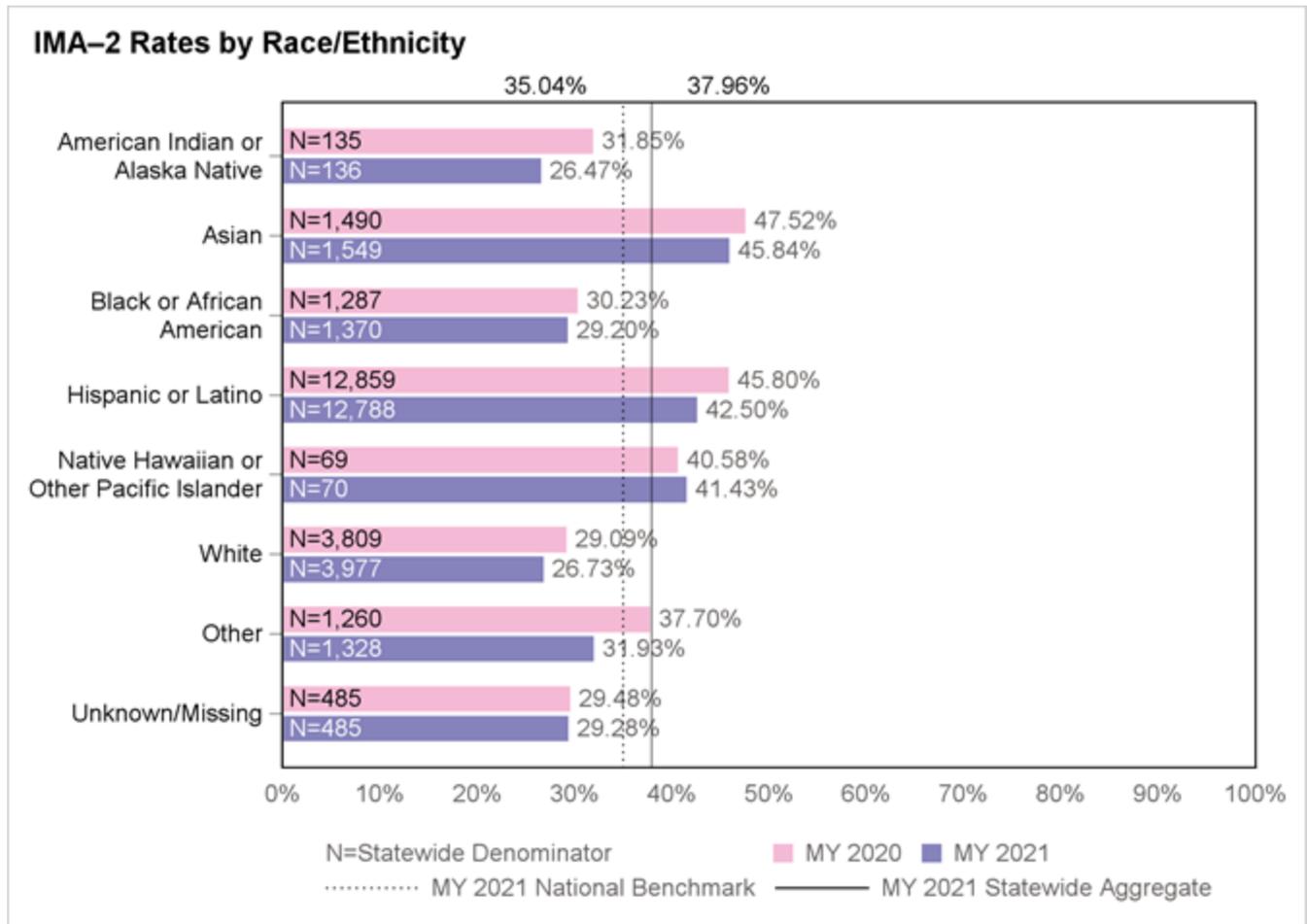


Figure A.10—Immunizations for Adolescents—Combination 2 (IMA–2)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

NA indicates the rate had a small denominator (i.e., less than 30).

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard.

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 36.74 percent and 41.05 percent, respectively.

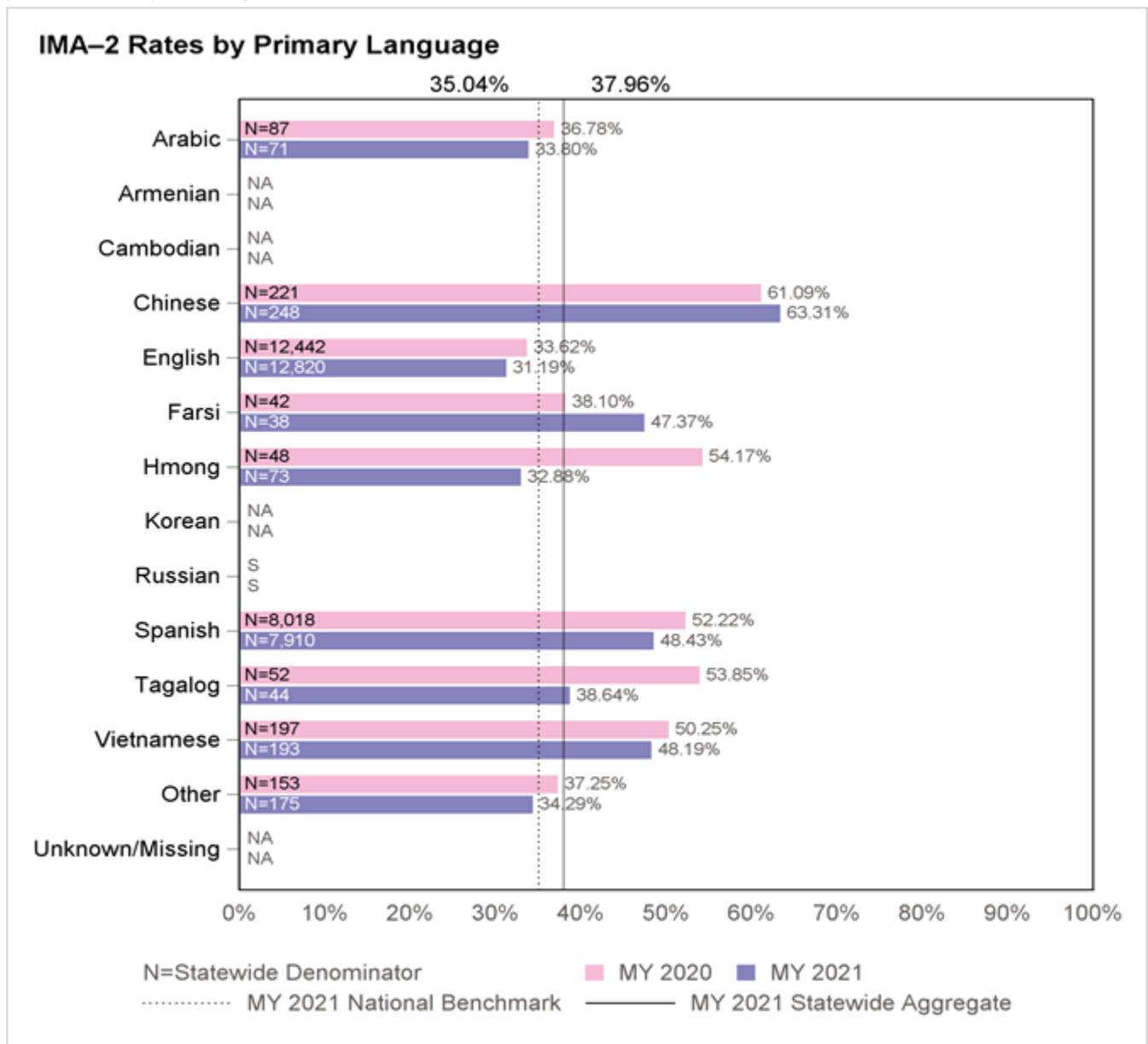


Figure A.11—Immunizations for Adolescents—Combination 2 (IMA-2)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 36.74 percent and 41.05 percent, respectively.

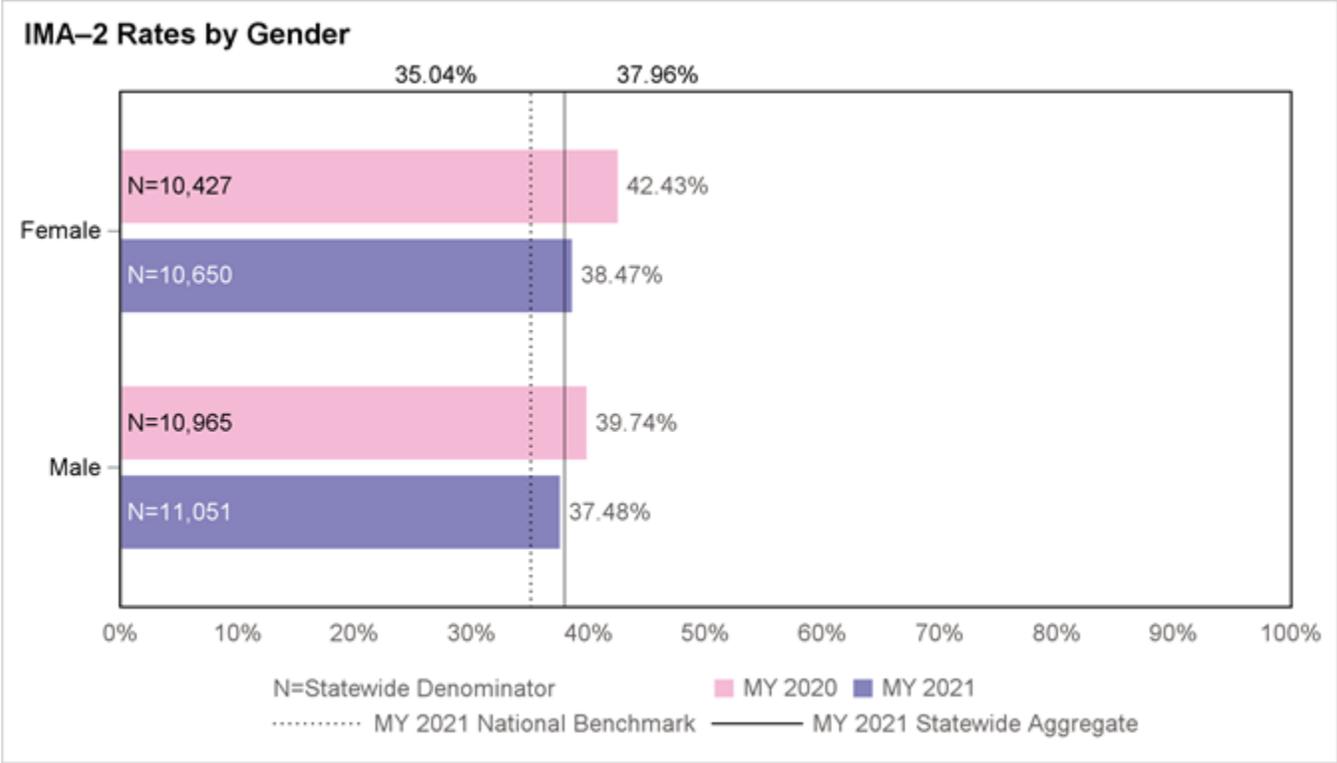


Figure A.12—Immunizations for Adolescents—Combination 2 (IMA-2)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 36.74 percent and 41.05 percent, respectively.

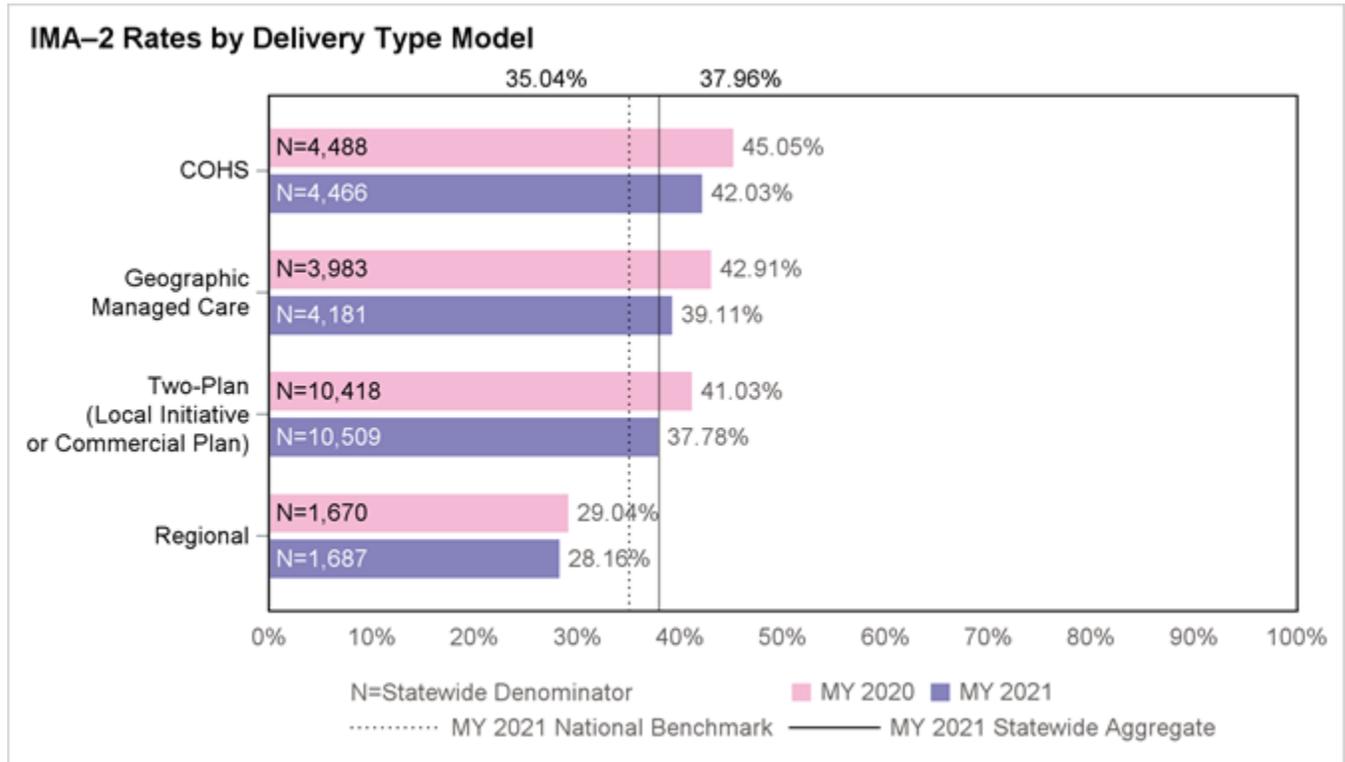


Figure A.13—Immunizations for Adolescents—Combination 2 (IMA-2)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 36.74 percent and 41.05 percent, respectively.

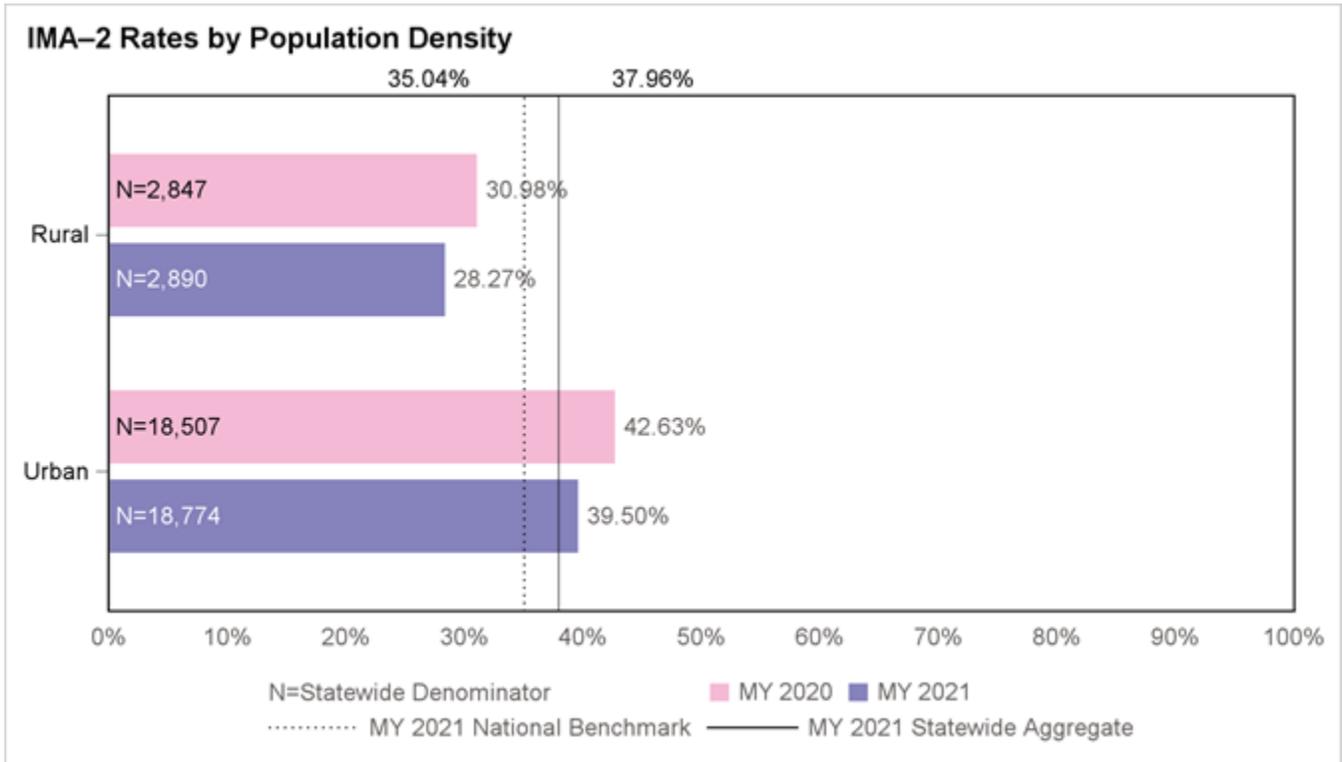


Figure A.14—Immunizations for Adolescents—Combination 2 (IMA-2)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 36.74 percent and 41.05 percent, respectively.

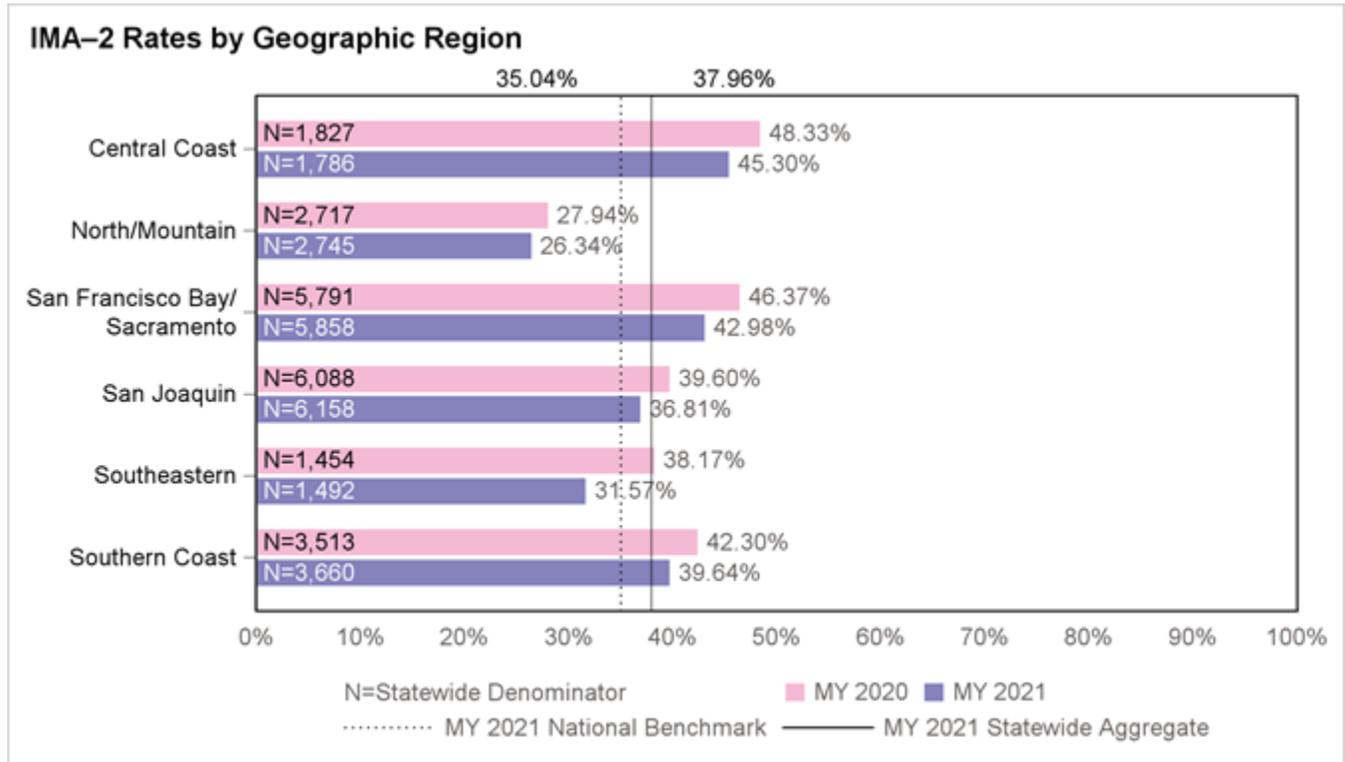
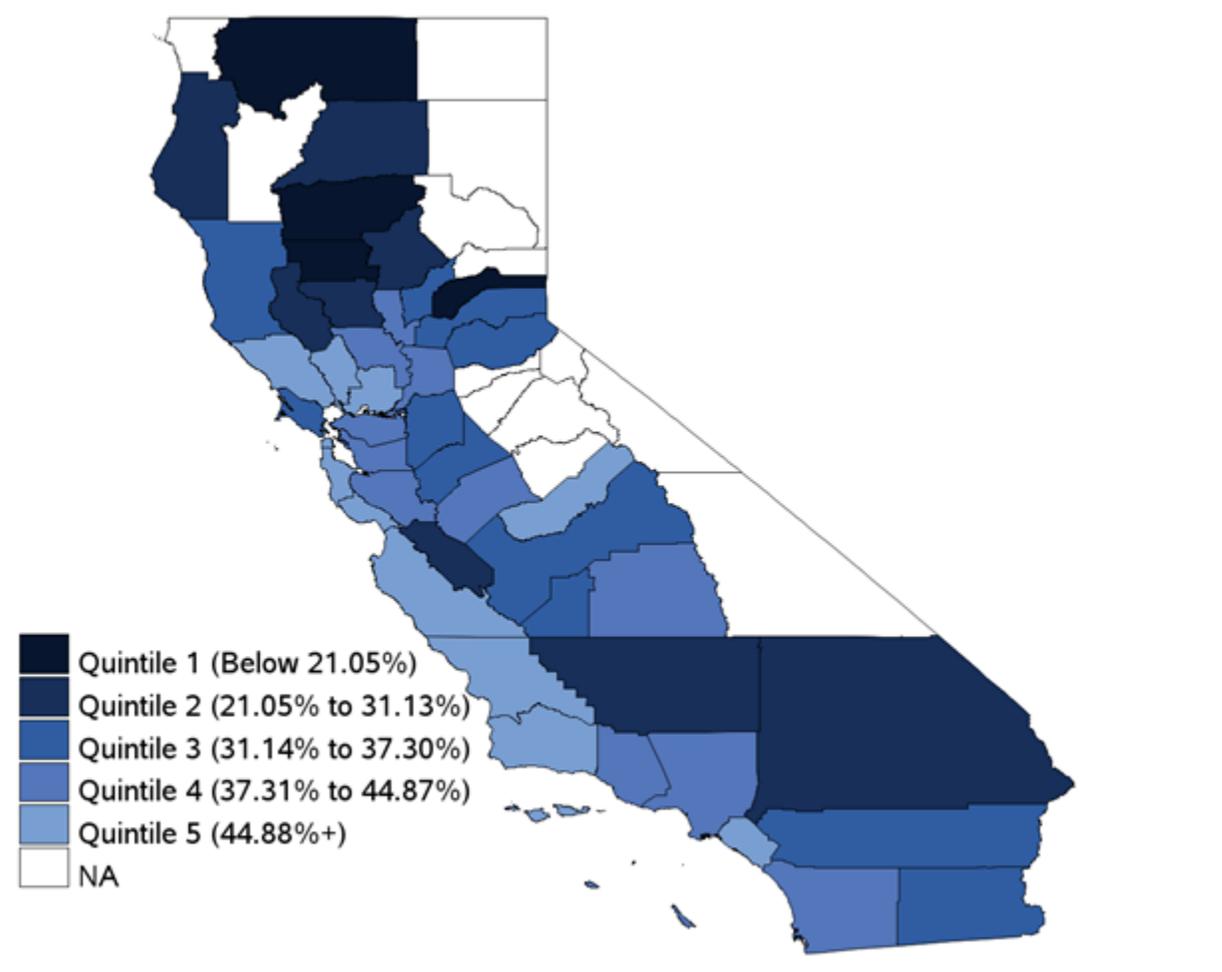


Figure A.15—Immunizations for Adolescents—Combination 2 (IMA-2)—County-Level

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Screening for Depression and Follow-Up Plan

The *Screening for Depression and Follow-Up Plan (CDF)* indicator measures the percentage of children ages 12 to 21 years who were screened for depression on the date of the encounter using an age-appropriate standardized depression screening tool, and if positive, a follow-up plan was documented on the date of the positive screen. Figure A.16 through Figure A.23 display the *Screening for Depression and Follow-Up Plan (CDF)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021. Due to inconsistent reporting of medical record data by MCPs, differences in rates may be indicative of data completeness rather than performance. Please note, national benchmarks are not available for this indicator.

Figure A.16—Screening for Depression and Follow-Up Plan (CDF)—Statewide Racial/Ethnic Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 16.52 percent.

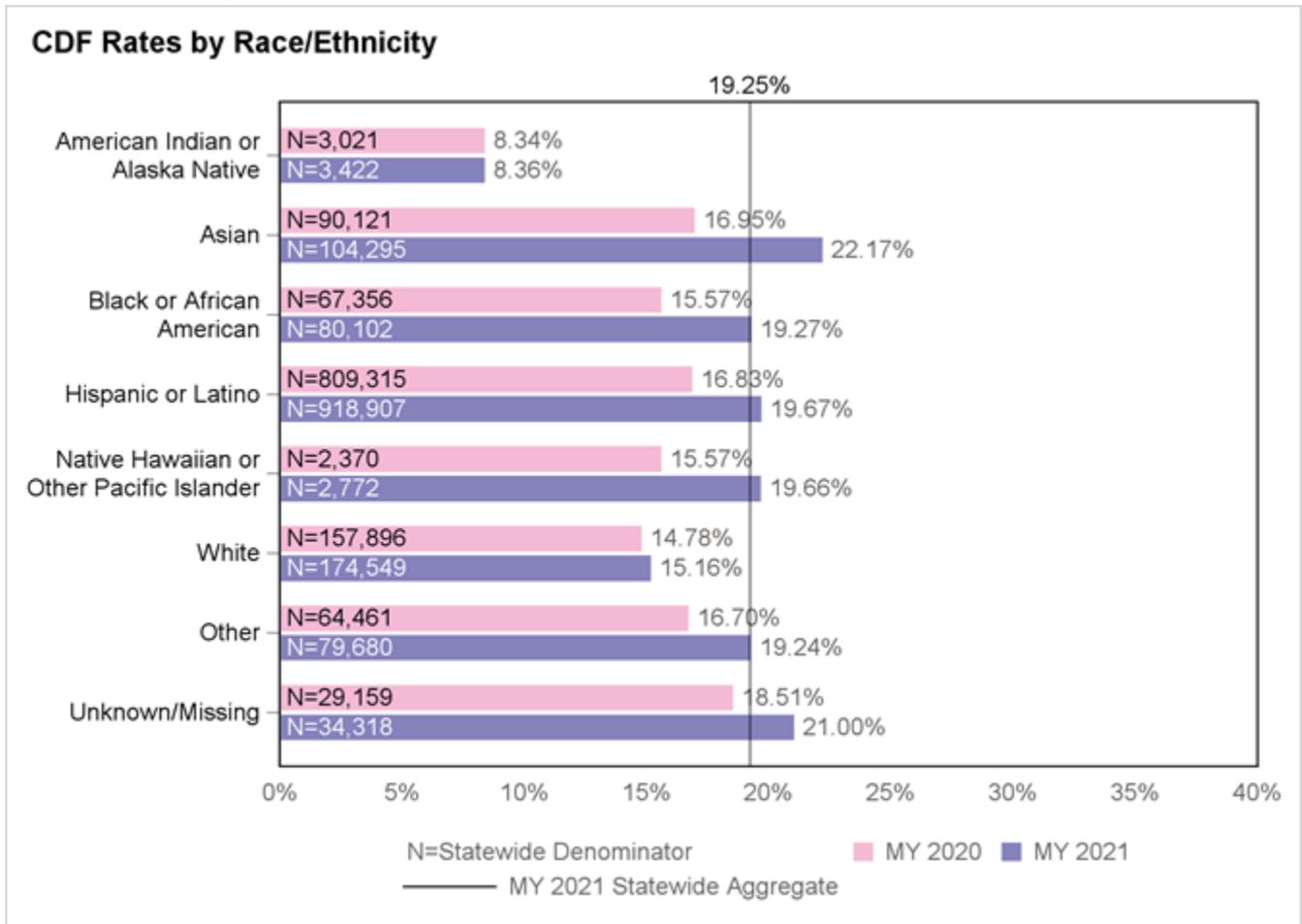


Figure A.17—Screening for Depression and Follow-Up Plan (CDF)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The measurement years 2020 and 2021 statewide denominators for the Armenian primary language group were 4,153 and 4,503, respectively.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 16.52 percent.

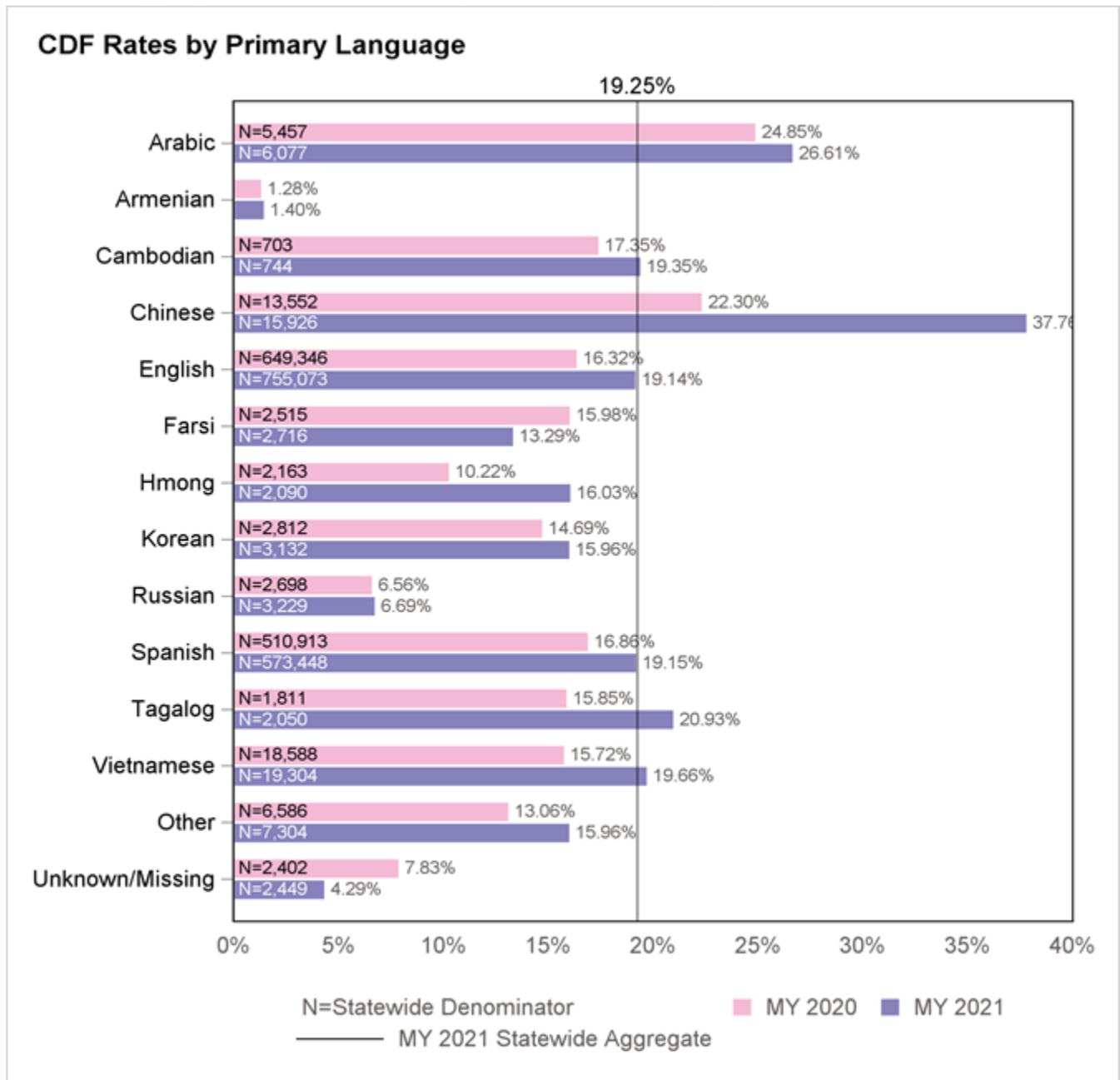


Figure A.18—Screening for Depression and Follow-Up Plan (CDF)—Statewide Gender Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 16.52 percent.

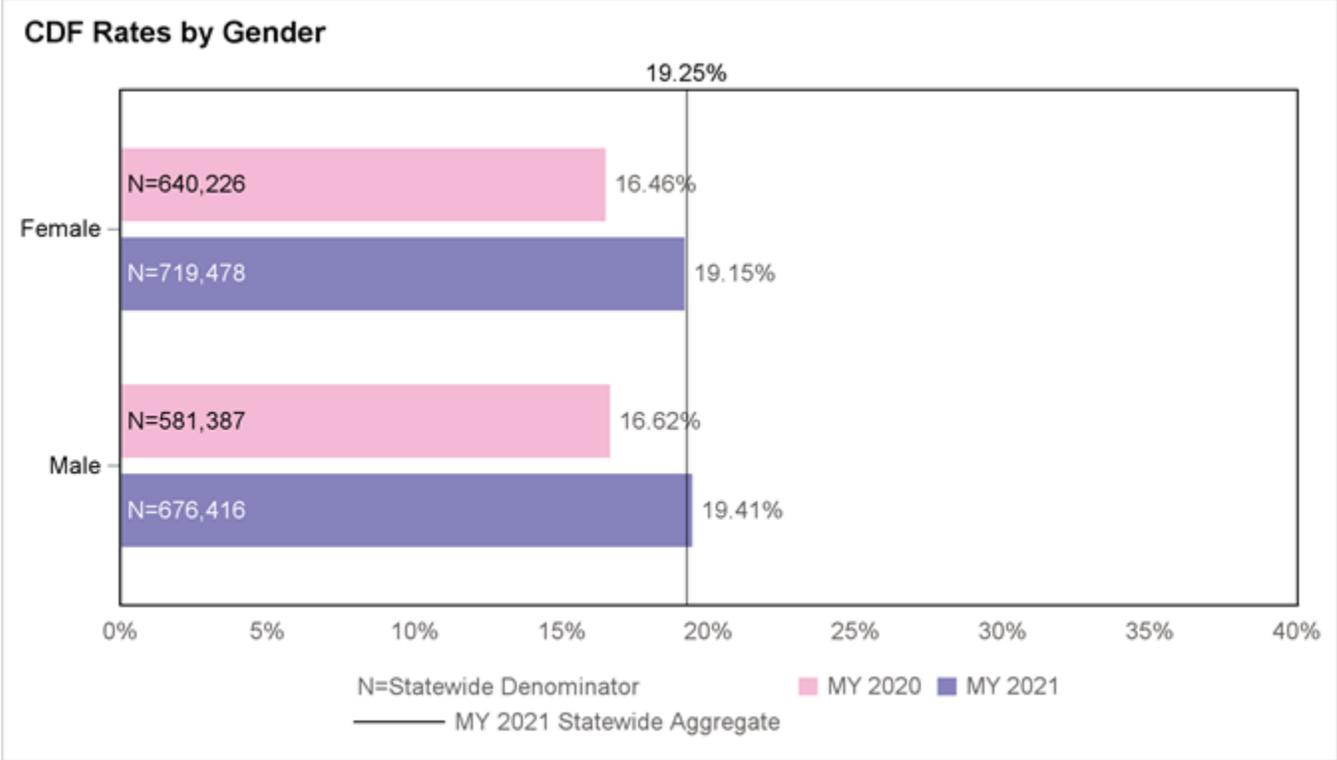


Figure A.19—Screening for Depression and Follow-Up Plan (CDF)—Statewide Age Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 16.52 percent.

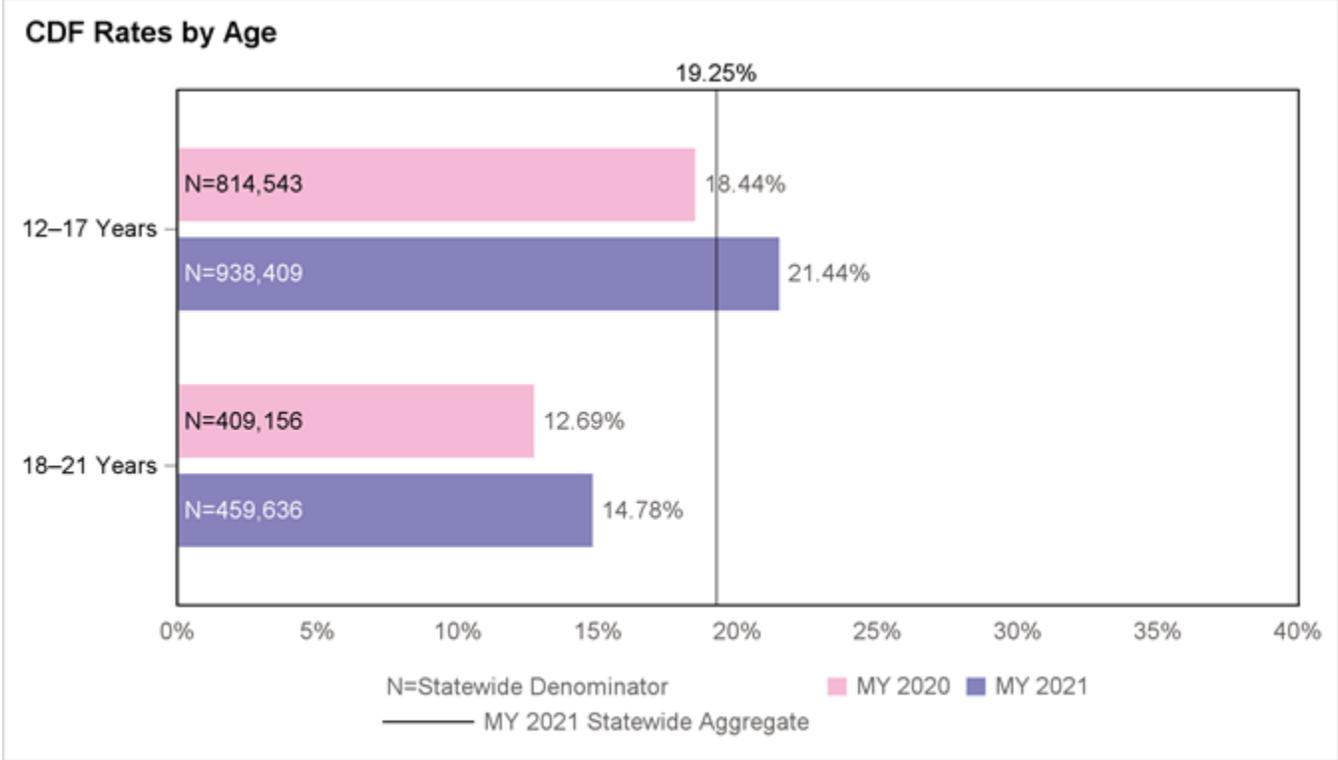


Figure A.20—Screening for Depression and Follow-Up Plan (CDF)—Regional-Level Delivery Type Model Results

The measurement years 2020 and 2021 statewide denominators for the Regional delivery type model group were 35,985 and 39,849, respectively.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 16.52 percent.

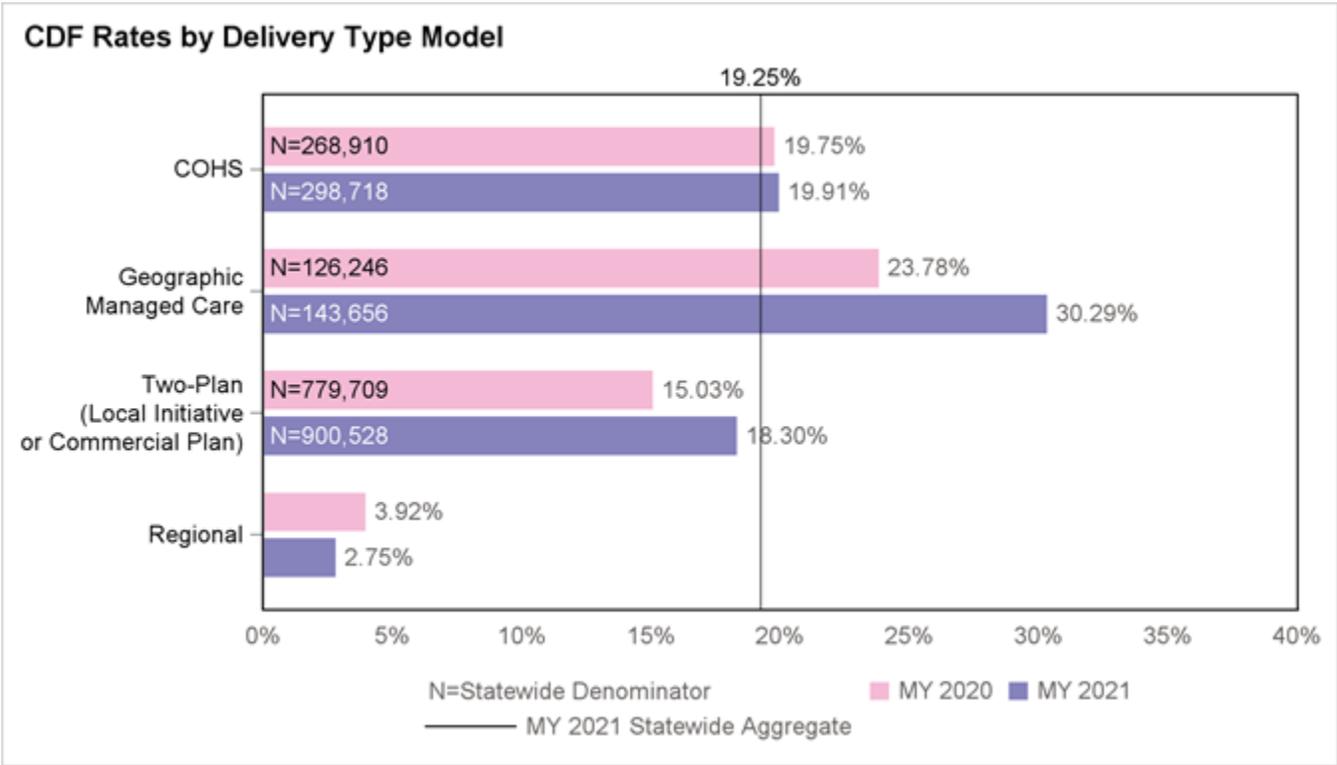


Figure A.21—Screening for Depression and Follow-Up Plan (CDF)—Regional-Level Population Density Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 16.52 percent.

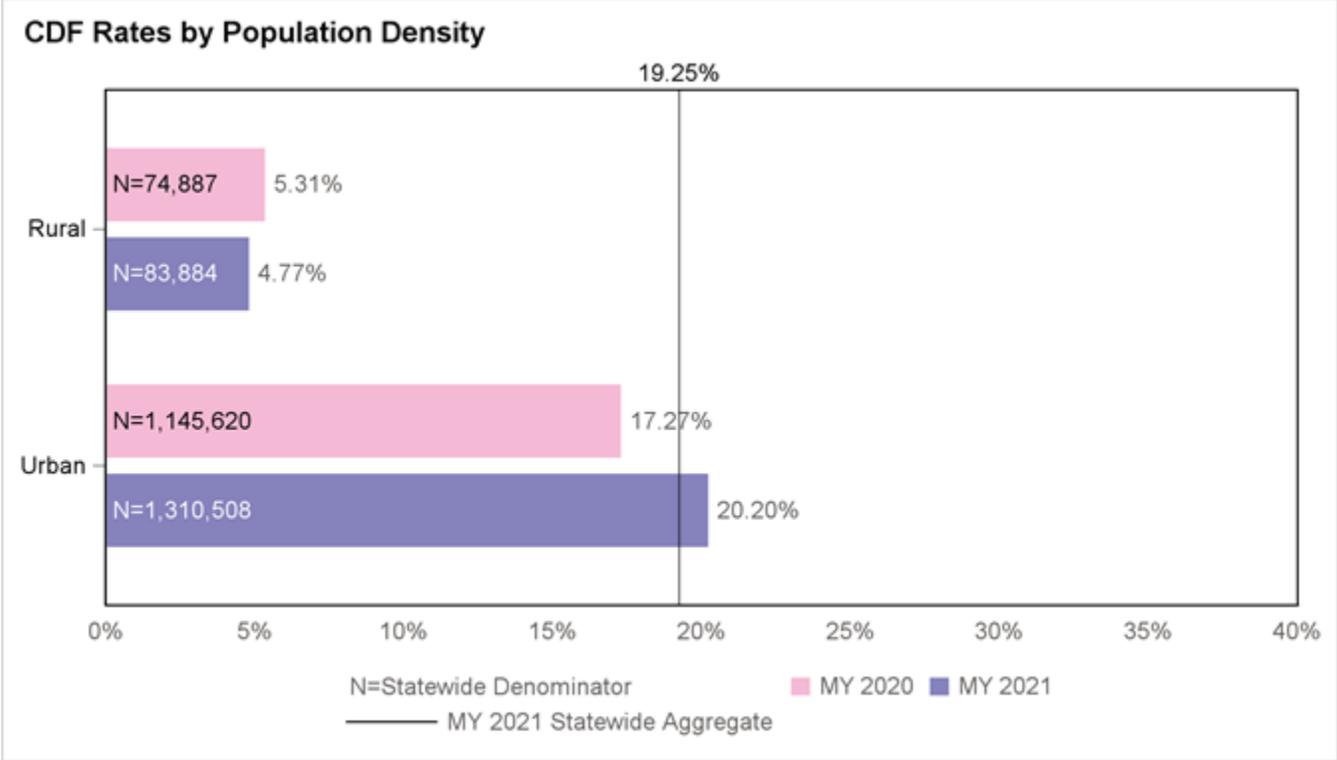


Figure A.22—Screening for Depression and Follow-Up Plan (CDF)—Regional-Level Geographic Region Results

The measurement years 2020 and 2021 statewide denominators for the North/Mountain geographic region were 59,857 and 67,849, respectively.

The measurement years 2020 and 2021 statewide denominators for the San Joaquin geographic region were 209,307 and 232,461, respectively.

The statewide aggregate for measurement year 2021 is shown in the figure below; and the statewide aggregate for measurement year 2020 was 16.52 percent.

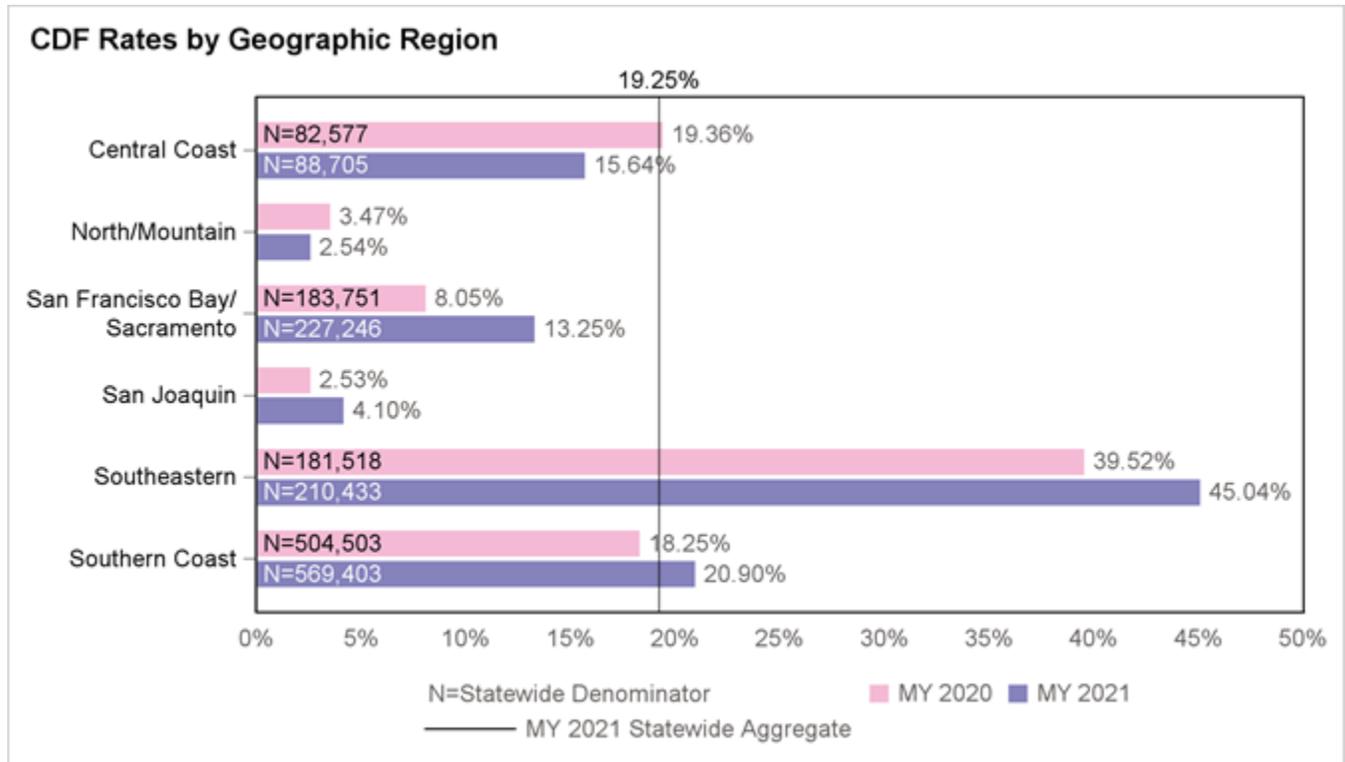
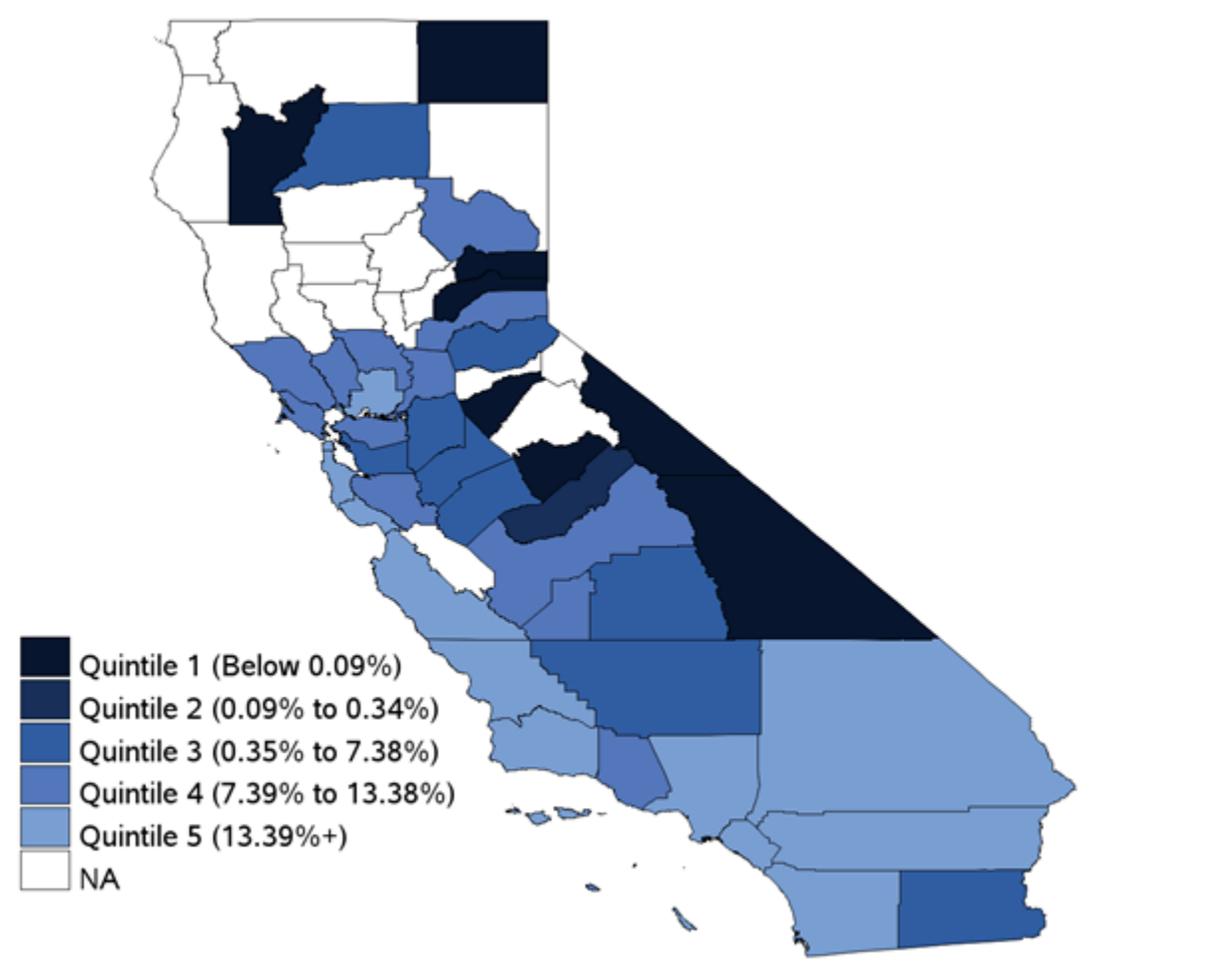


Figure A.23—Screening for Depression and Follow-Up Plan (CDF)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total

The *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)* indicator measures the percentage of members 3 to 17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence that their BMI percentile was documented. Figure A.24 through Figure A.31 display the *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure A.24—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 76.64 percent and 79.12 percent, respectively.

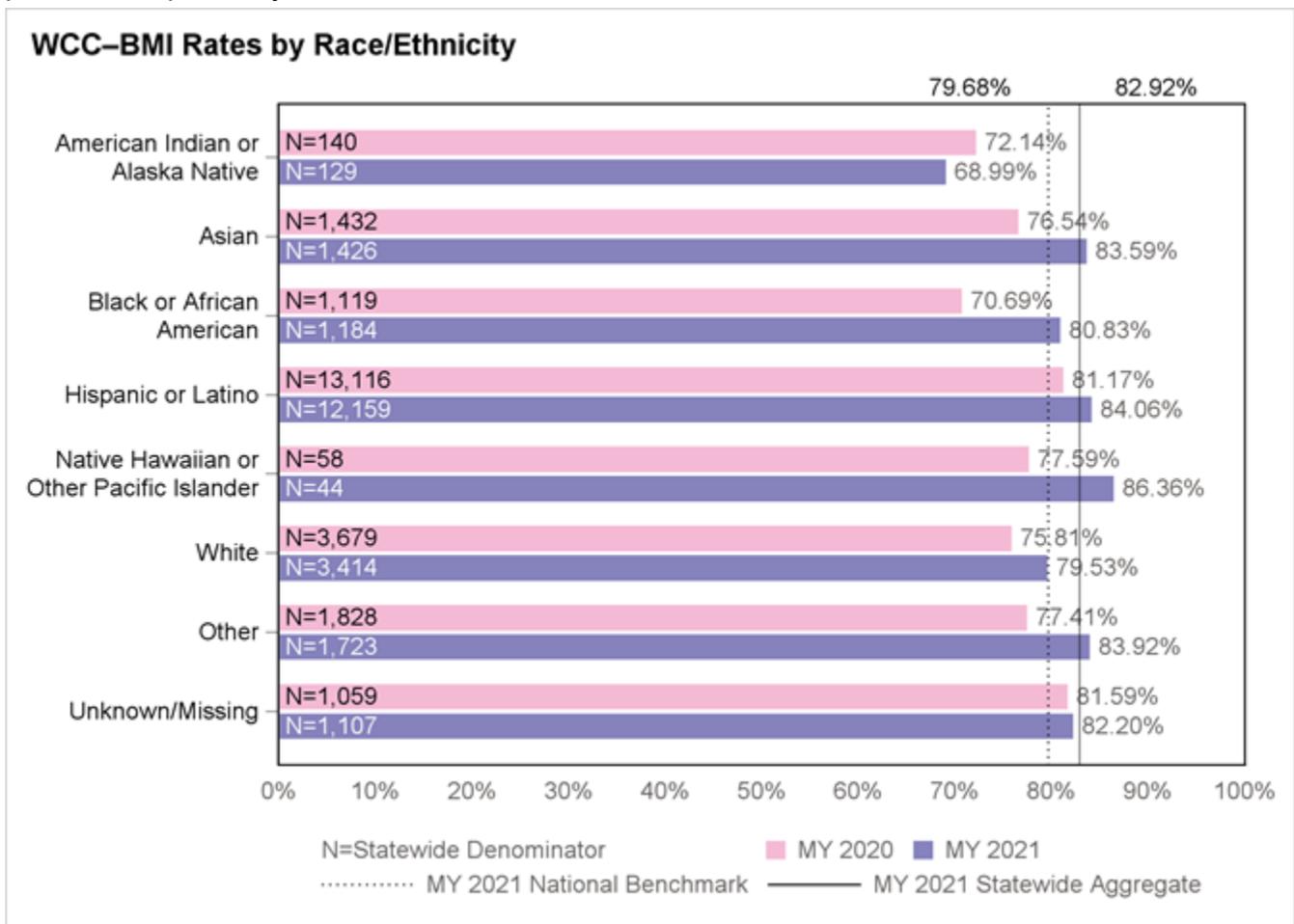


Figure A.25—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 76.64 percent and 79.12 percent, respectively.

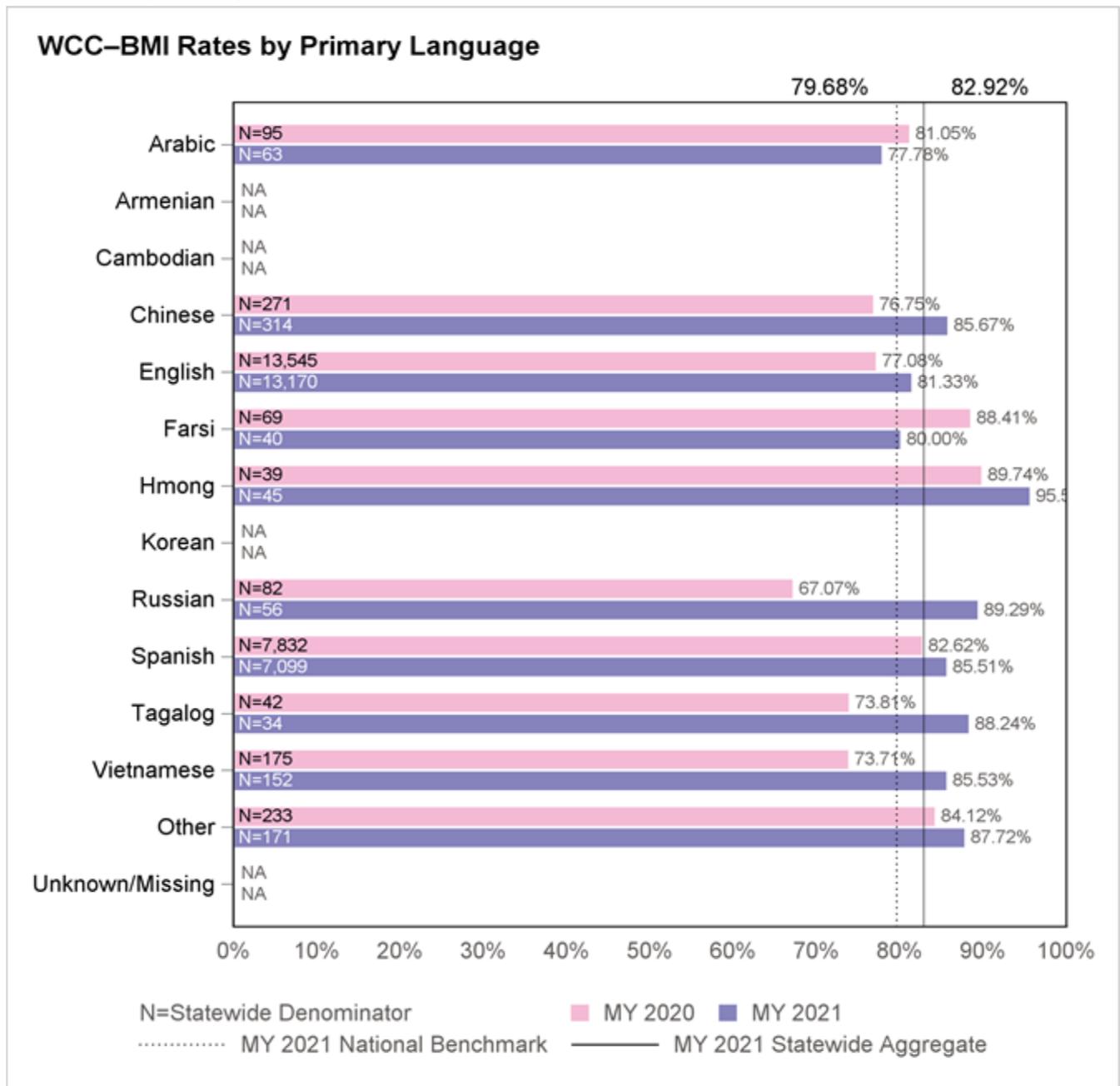


Figure A.26—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 76.64 percent and 79.12 percent, respectively.

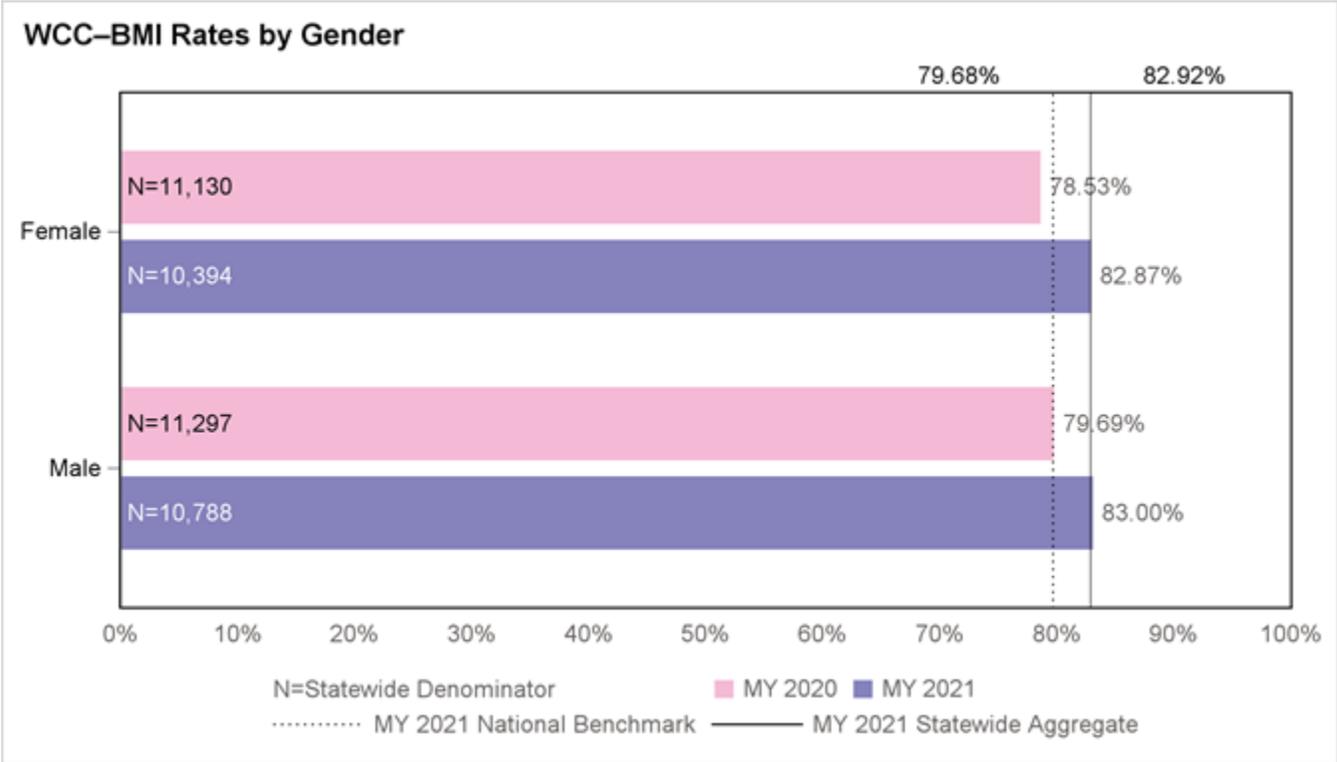


Figure A.27—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)—Statewide Age Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 76.64 percent and 79.12 percent, respectively.

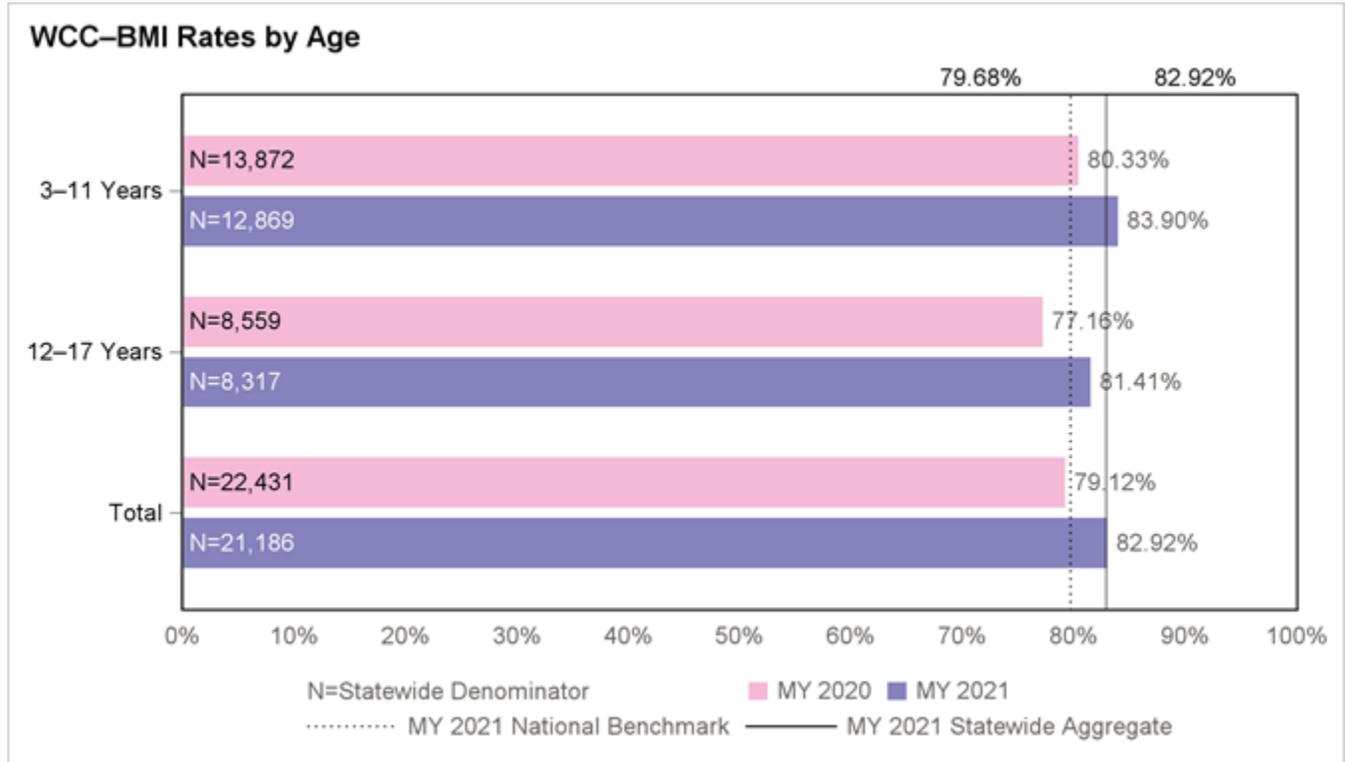


Figure A.28—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 76.64 percent and 79.12 percent, respectively.

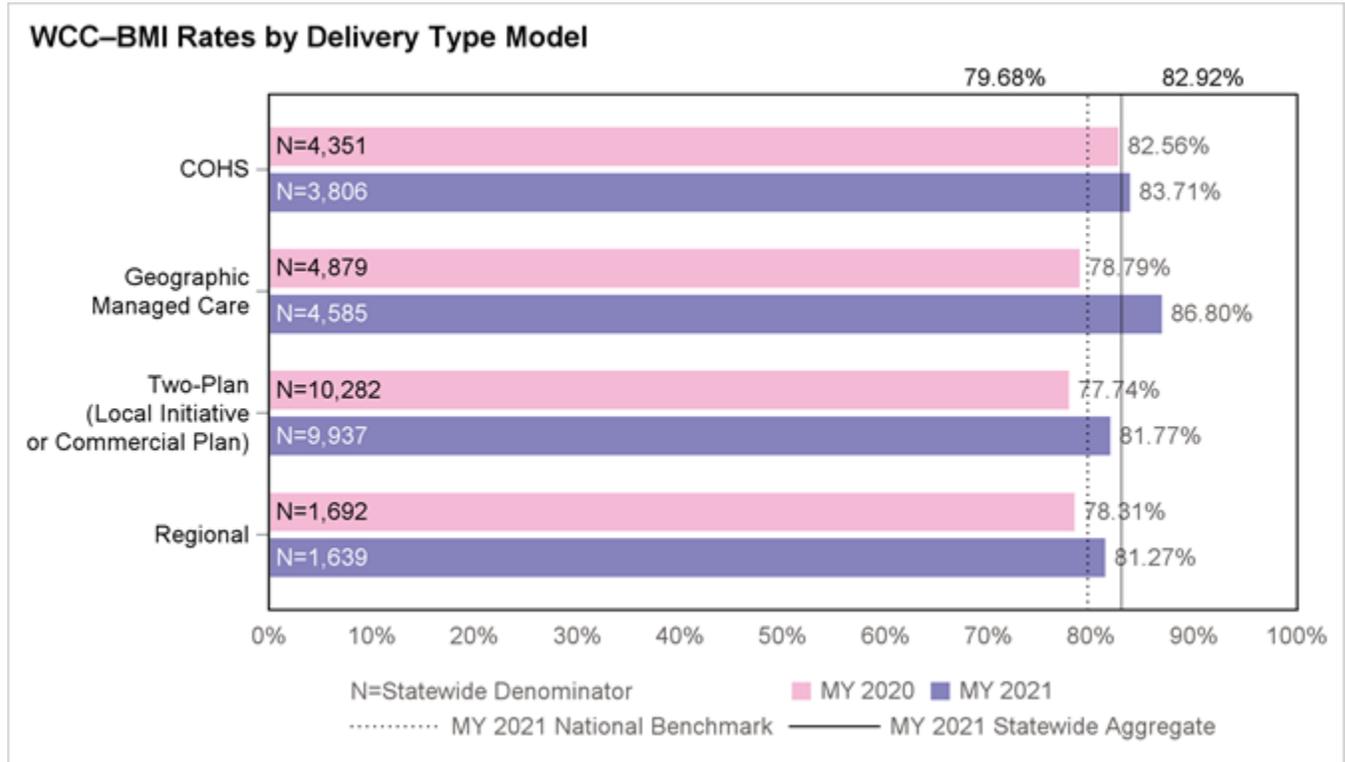


Figure A.29—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 76.64 percent and 79.12 percent, respectively.

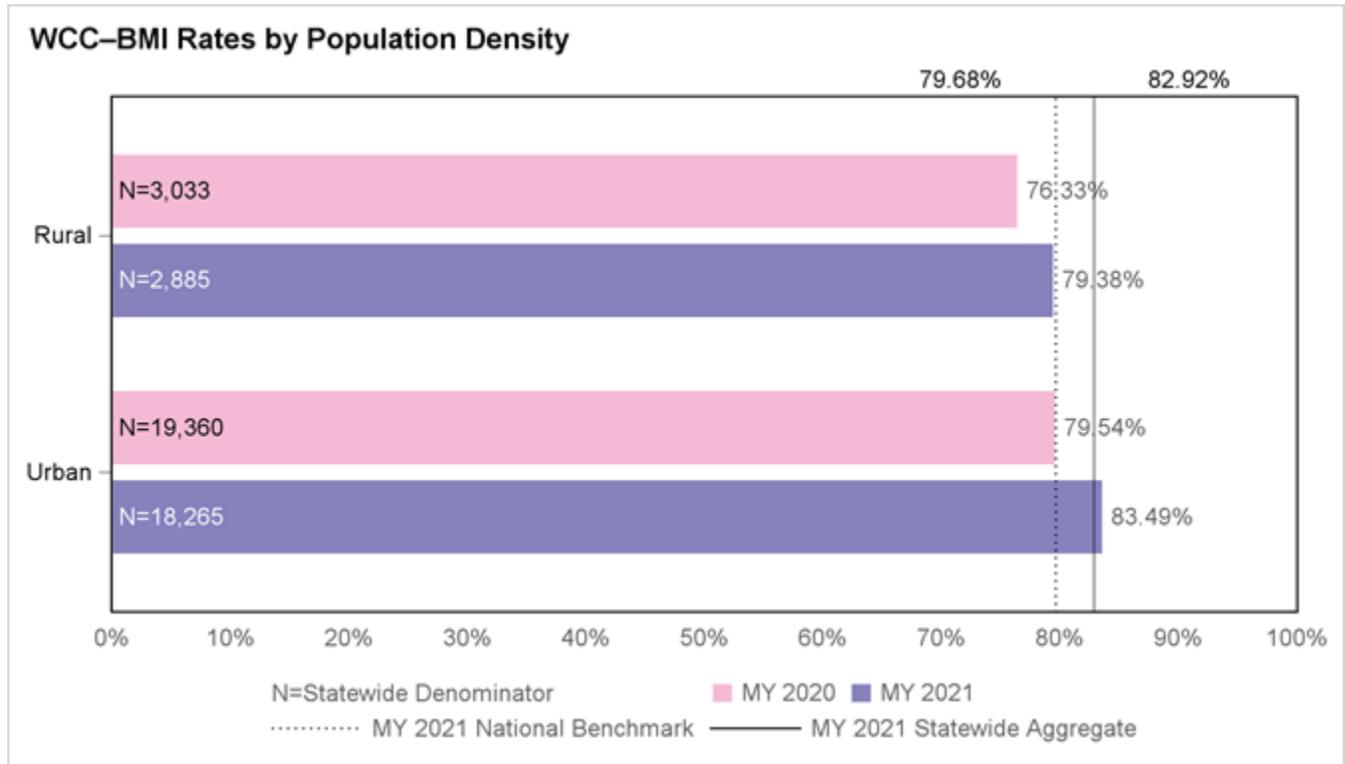


Figure A.30—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 76.64 percent and 79.12 percent, respectively.

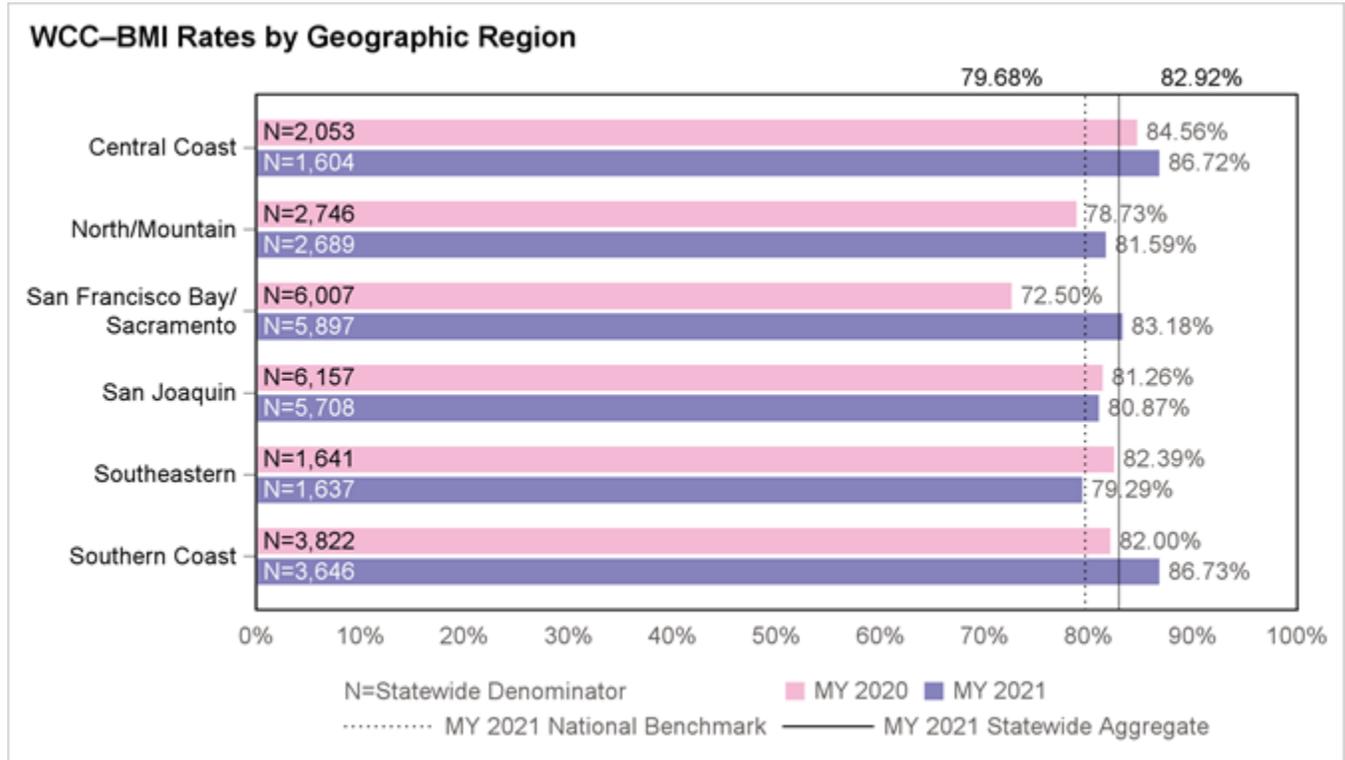
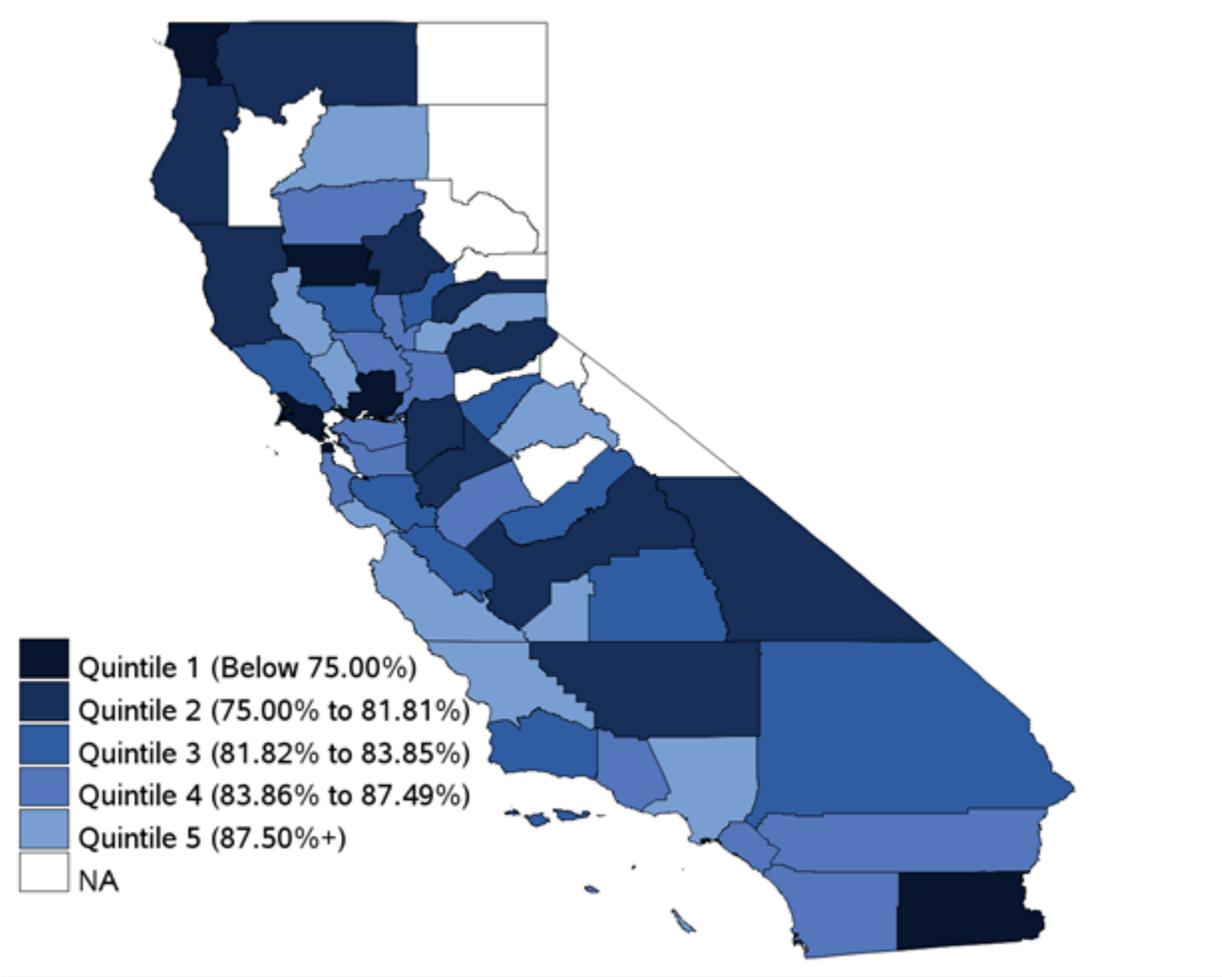


Figure A.31—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total (WCC–BMI)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total

The *Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents—Counseling for Nutrition—Total (WCC–N)* indicator measures the percentage of members 3 to 17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of counseling for nutrition. Figure A.32 through Figure A.39 display the *Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents—Counseling for Nutrition—Total (WCC–N)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure A.32—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC–N)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 70.11 percent and 71.29 percent, respectively.

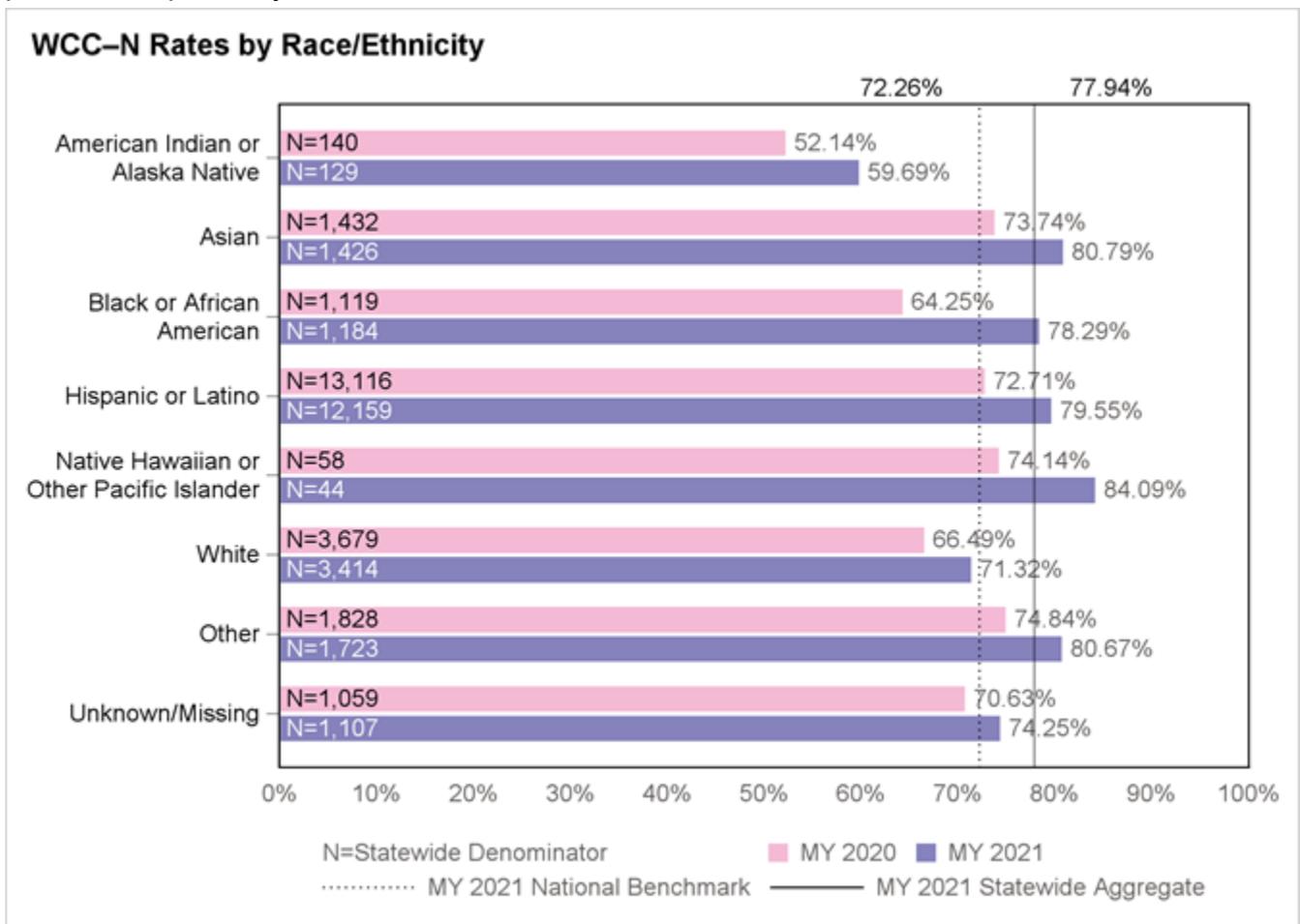


Figure A.33—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC–N)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

NA indicates the rate had a small denominator (i.e., less than 30).

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 70.11 percent and 71.29 percent, respectively.

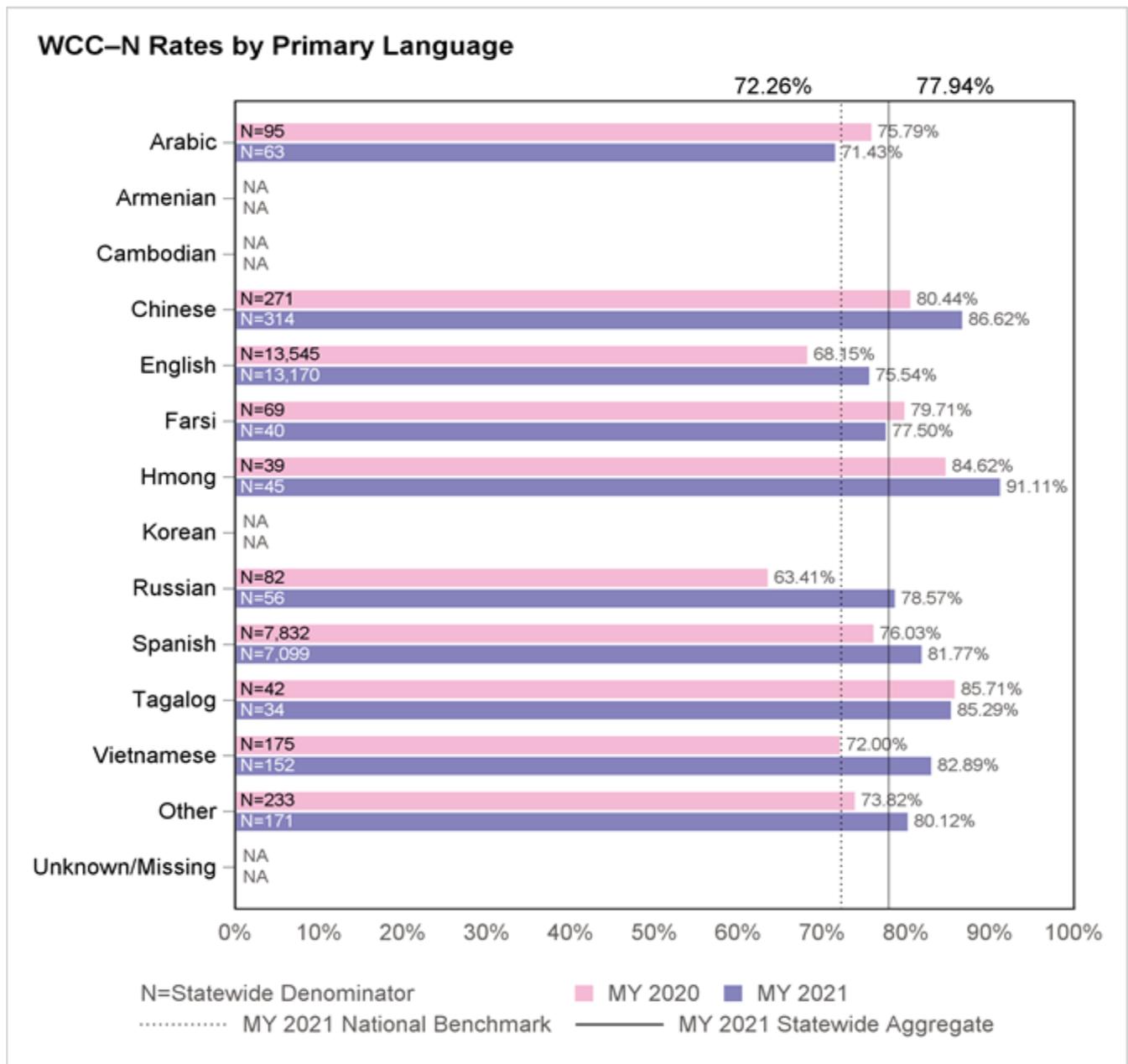


Figure A.34—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC–N)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 70.11 percent and 71.29 percent, respectively.

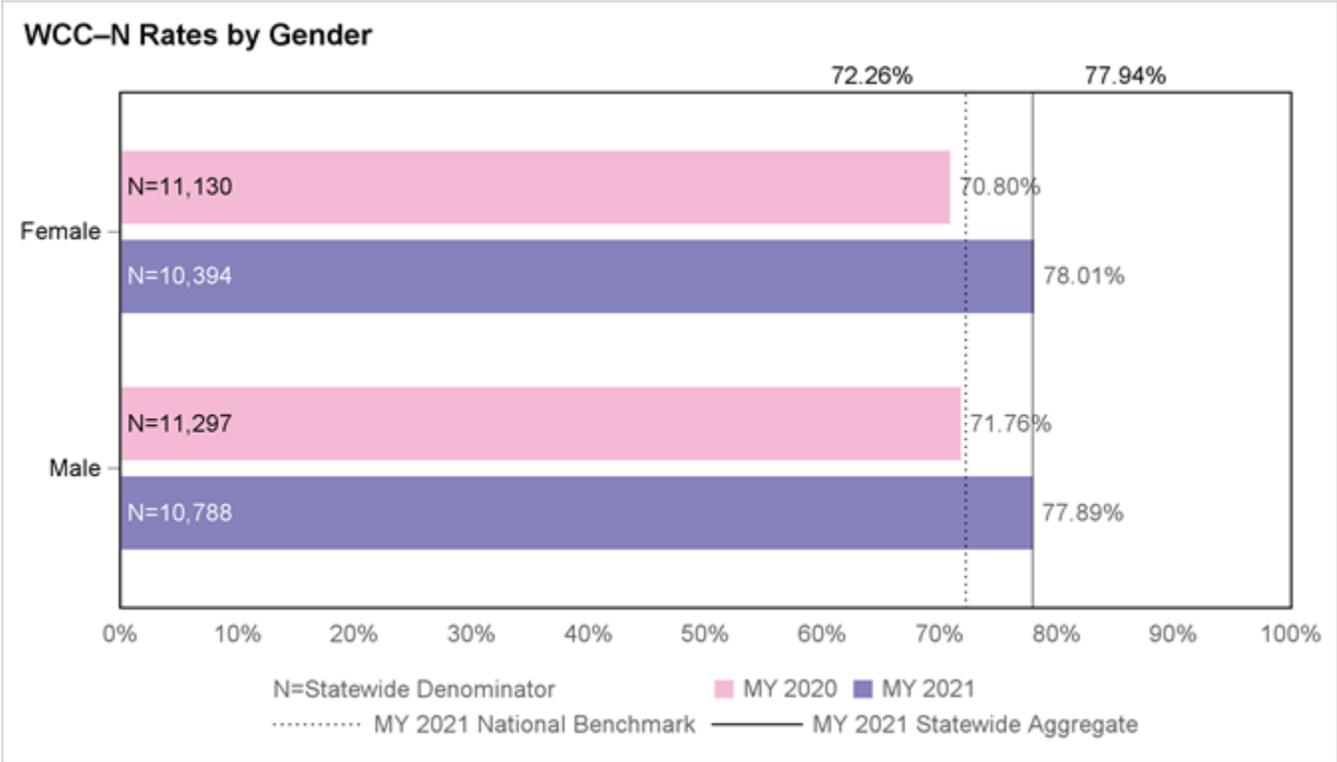


Figure A.35—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC–N)—Statewide Age Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 70.11 percent and 71.29 percent, respectively.

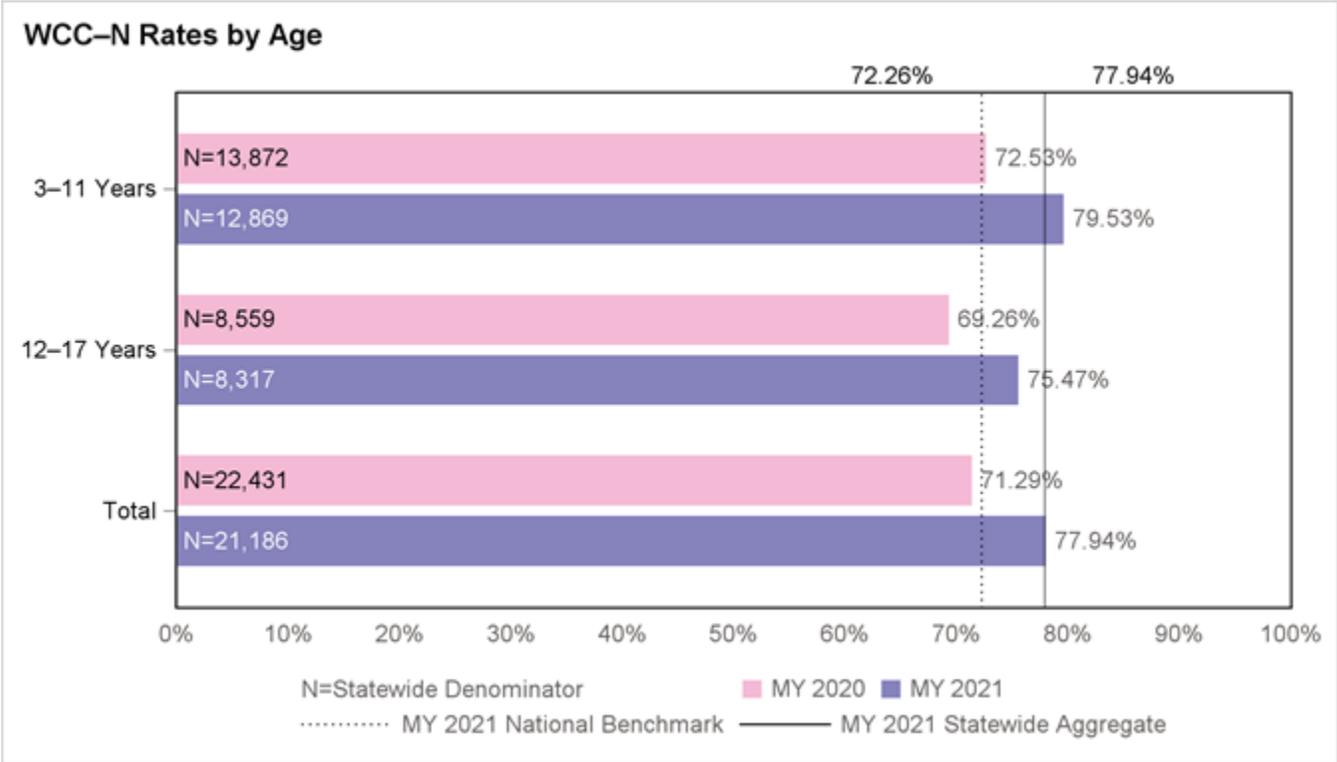


Figure A.36—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC–N)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 70.11 percent and 71.29 percent, respectively.

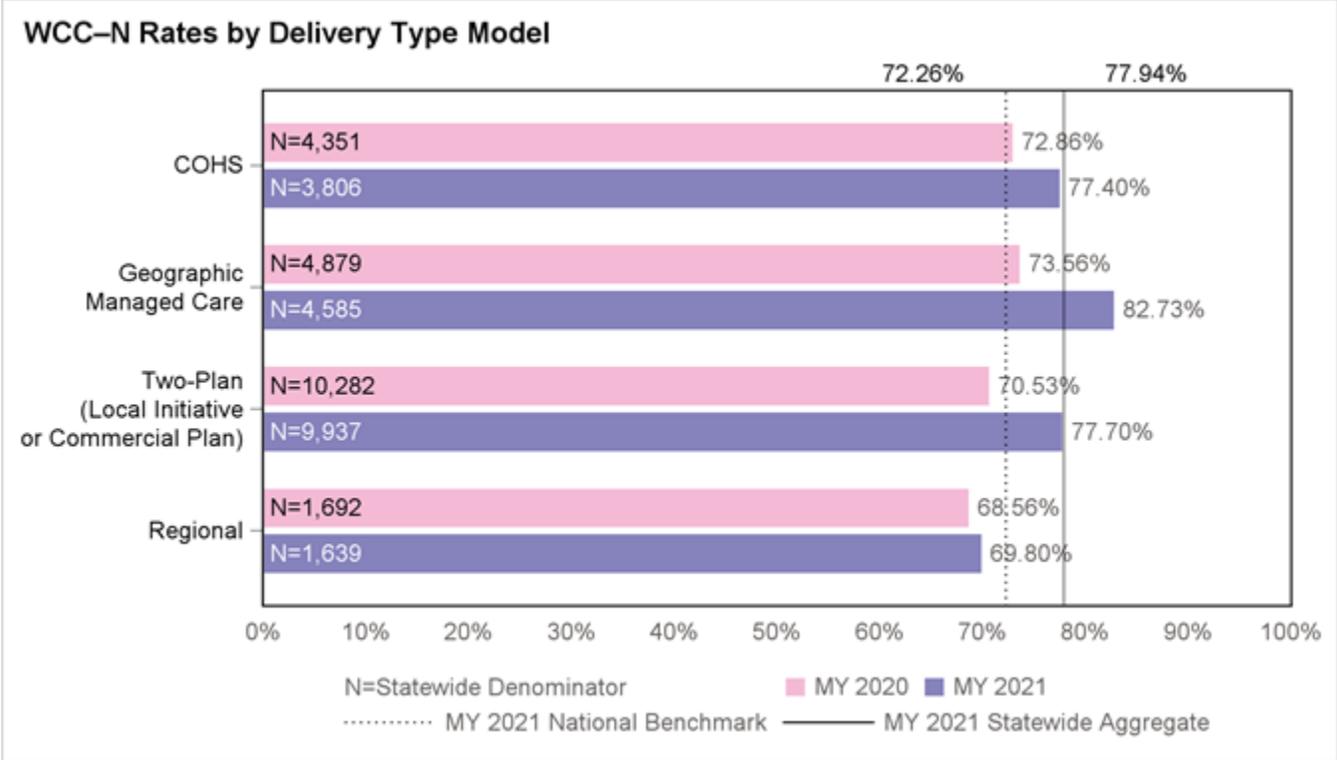


Figure A.37—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC–N)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 70.11 percent and 71.29 percent, respectively.

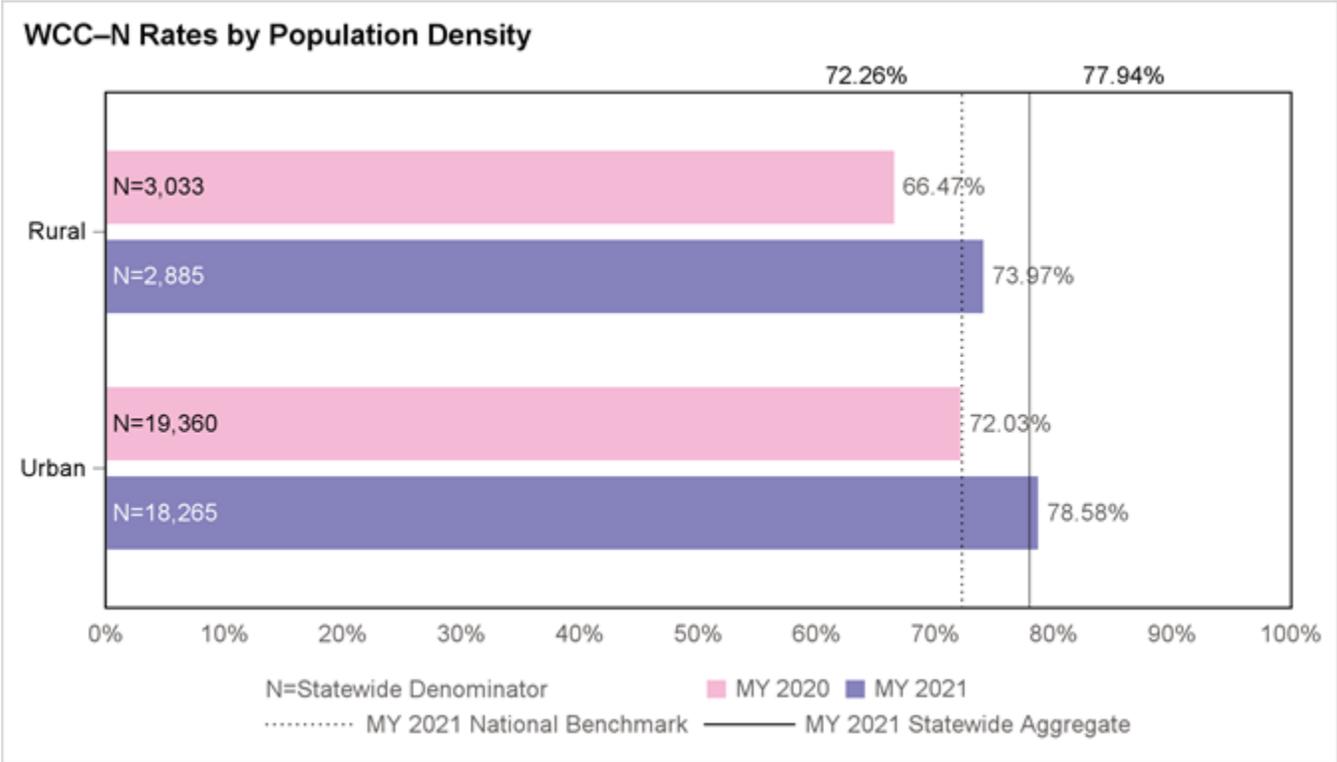


Figure A.38—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC–N)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 70.11 percent and 71.29 percent, respectively.

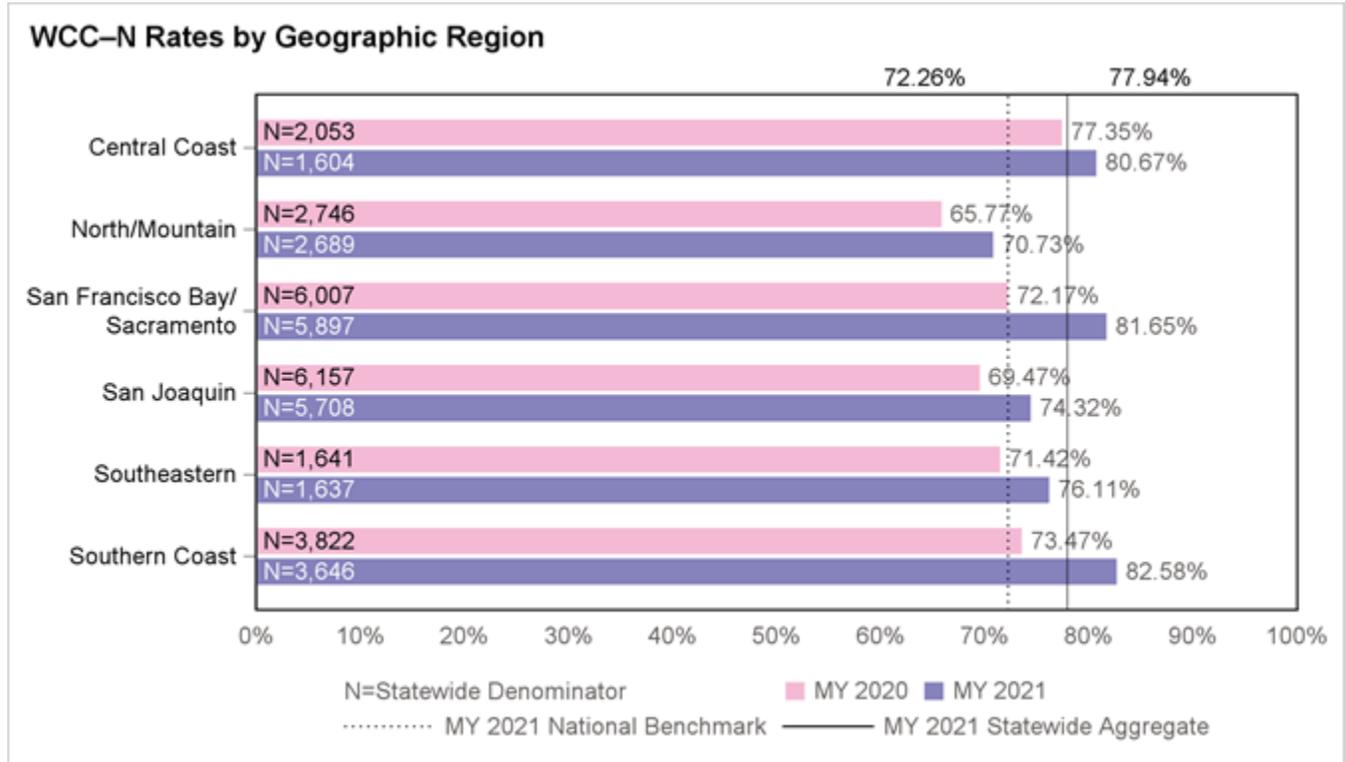
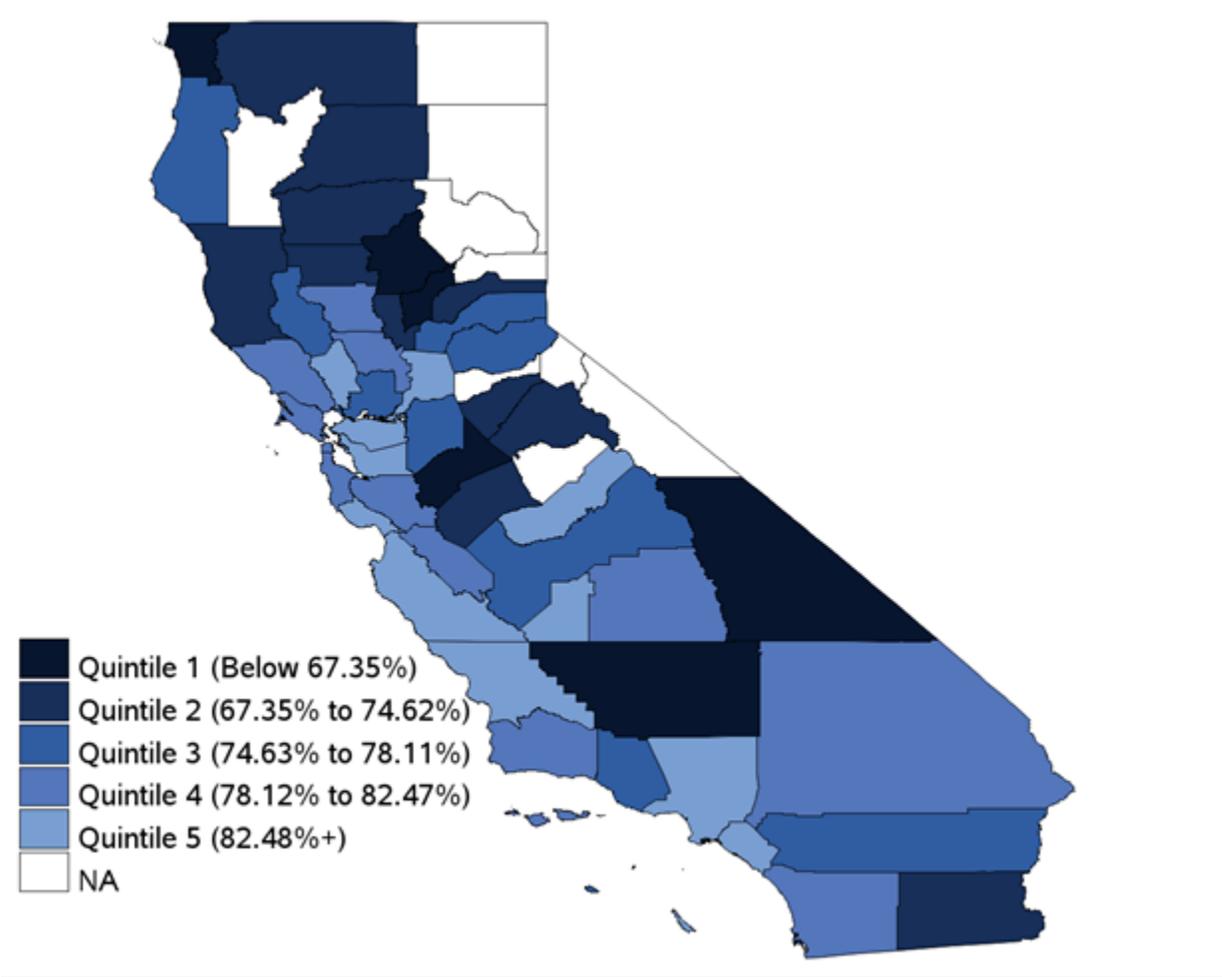


Figure A.39—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total (WCC-N)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total

The *Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents—Counseling for Physical Activity—Total (WCC-PA)* indicator measures the percentage of members 3 to 17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of counseling for physical activity. Figure A.40 through Figure A.47 display the *Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents—Counseling for Physical Activity—Total (WCC-PA)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure A.40—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total (WCC-PA)—Statewide Racial/Ethnic Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 66.18 percent and 68.71 percent, respectively.

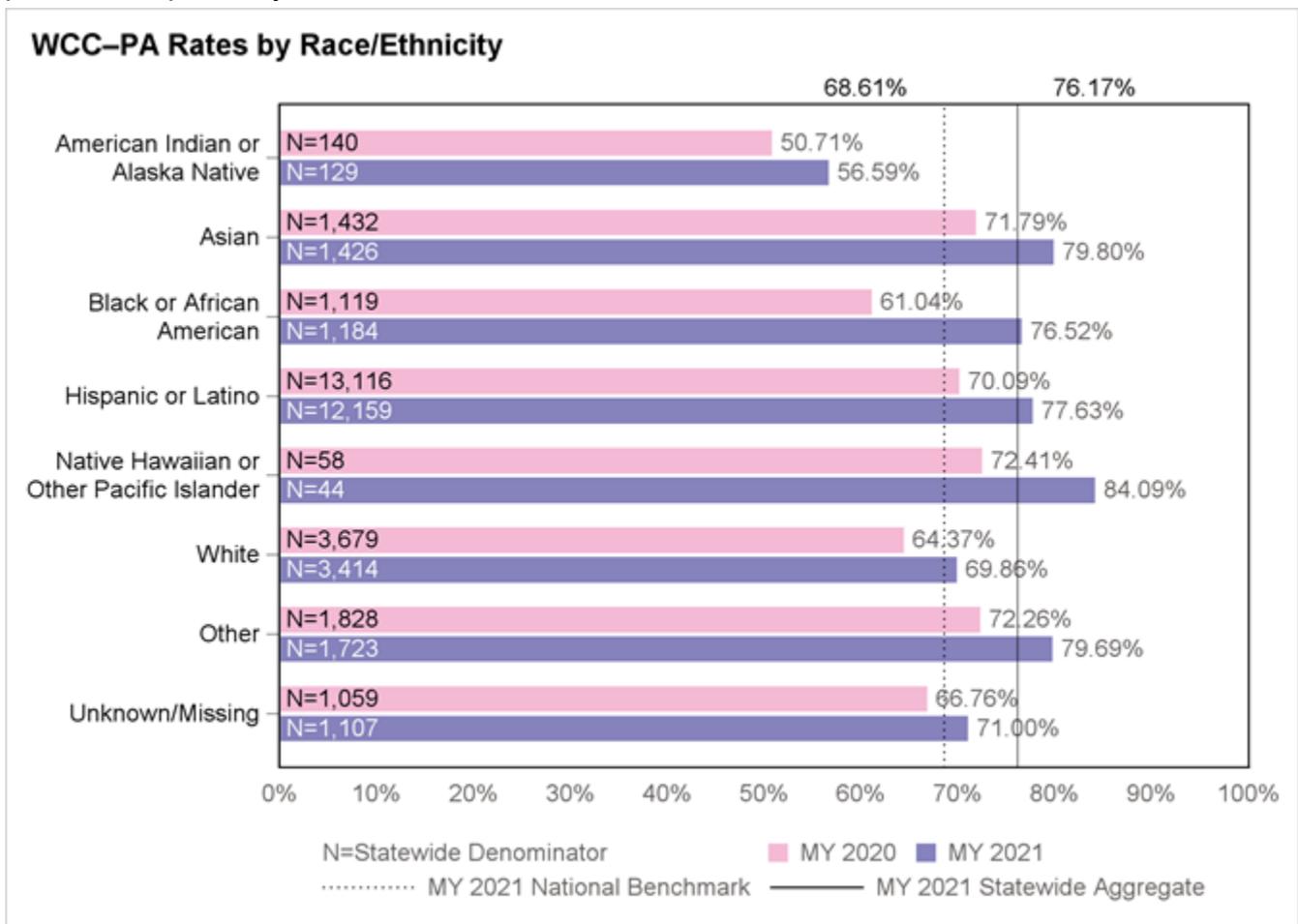


Figure A.41—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total (WCC-PA)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

NA indicates the rate had a small denominator (i.e., less than 30).

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 66.18 percent and 68.71 percent, respectively.

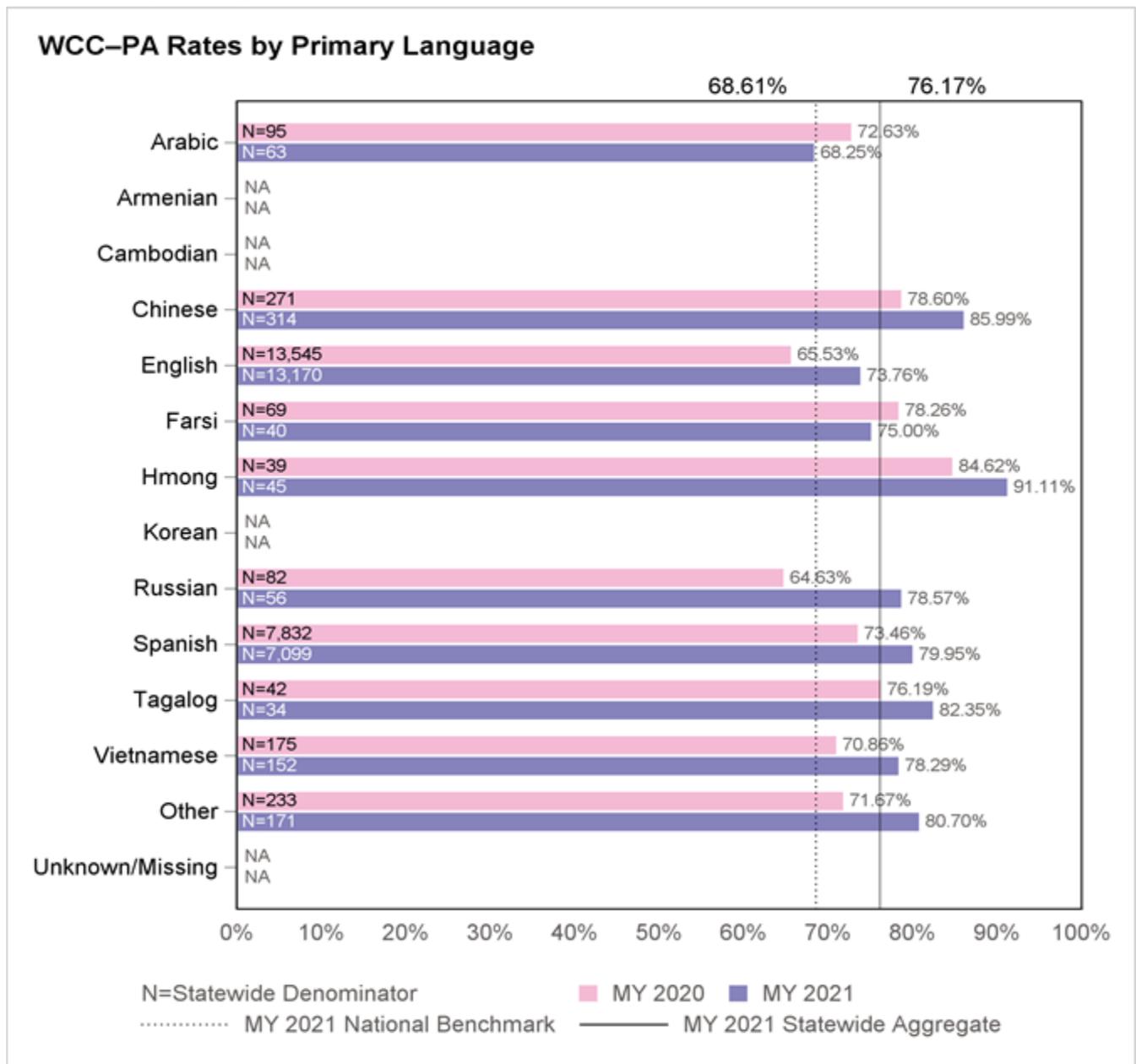


Figure A.42—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total (WCC–PA)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 66.18 percent and 68.71 percent, respectively.

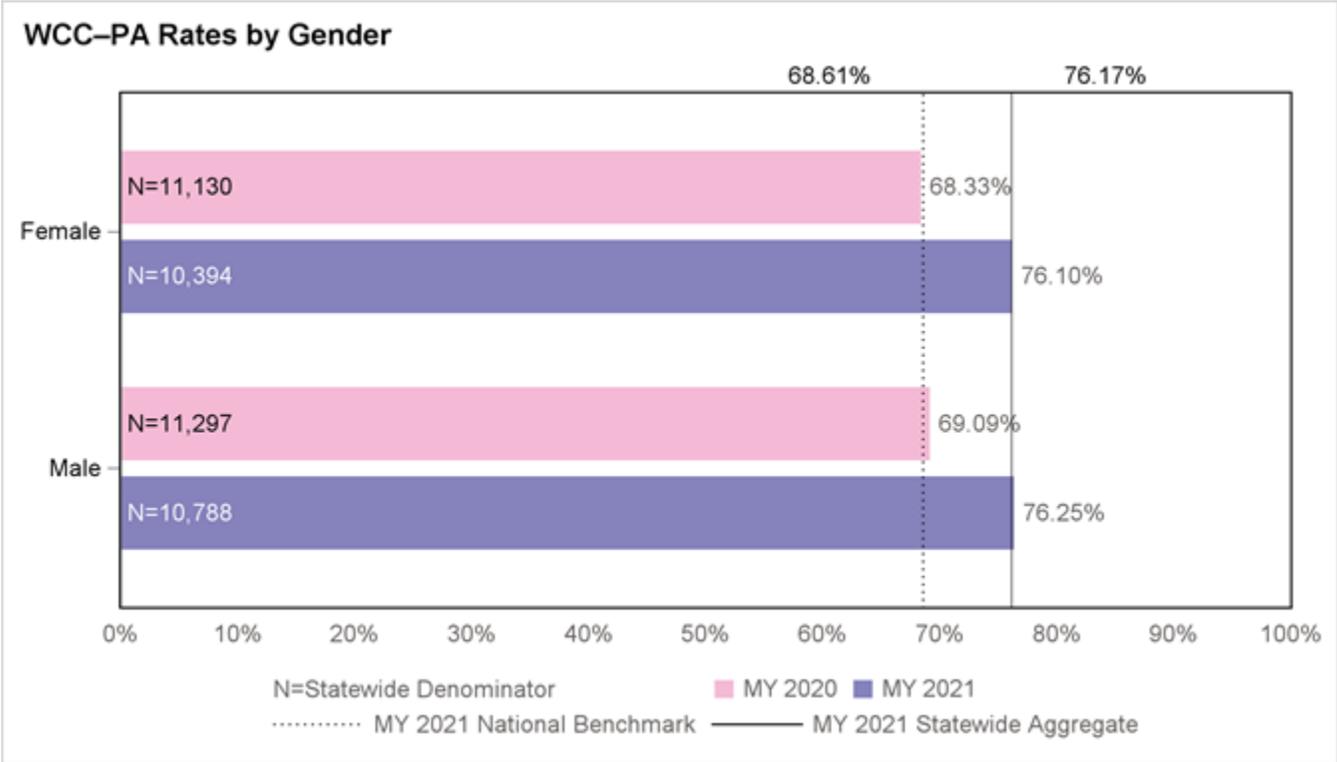


Figure A.43—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total (WCC-PA)—Statewide Age Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 66.18 percent and 68.71 percent, respectively.

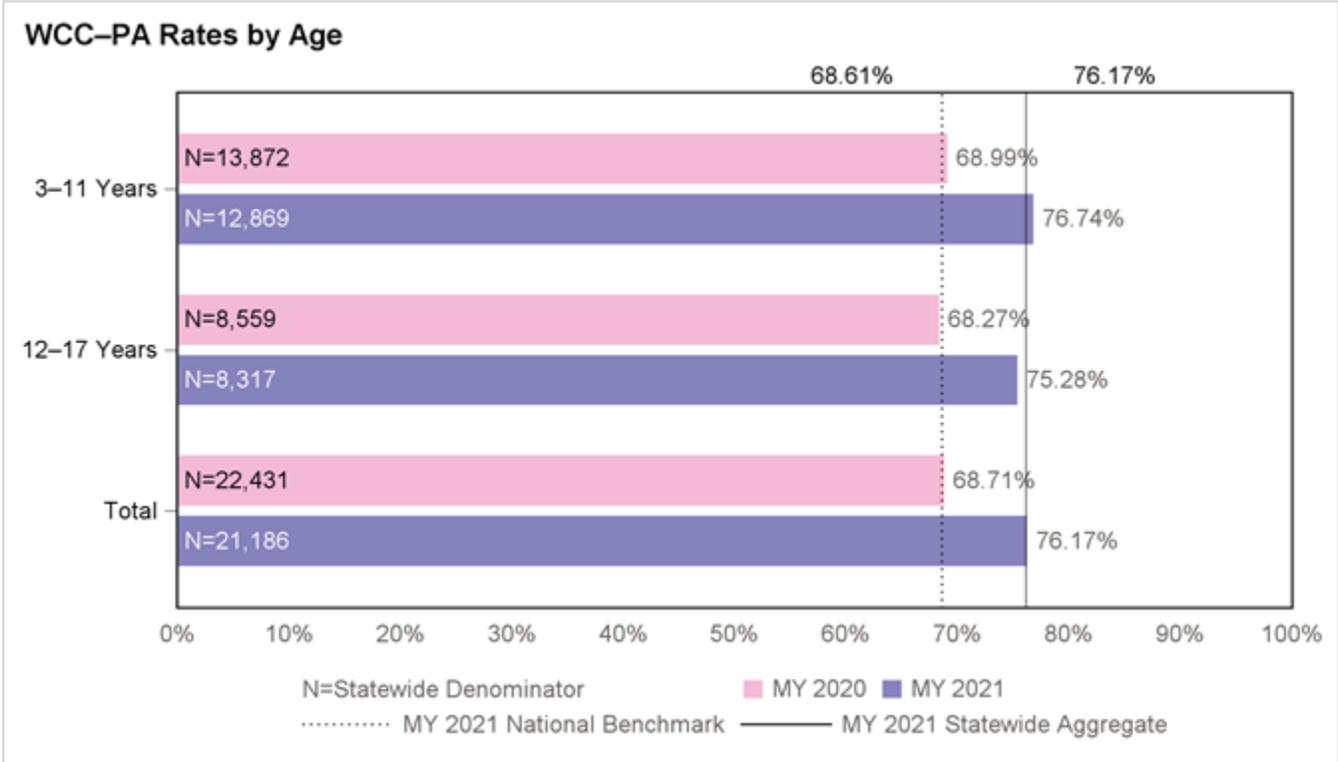


Figure A.44—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total (WCC-PA)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 66.18 percent and 68.71 percent, respectively.

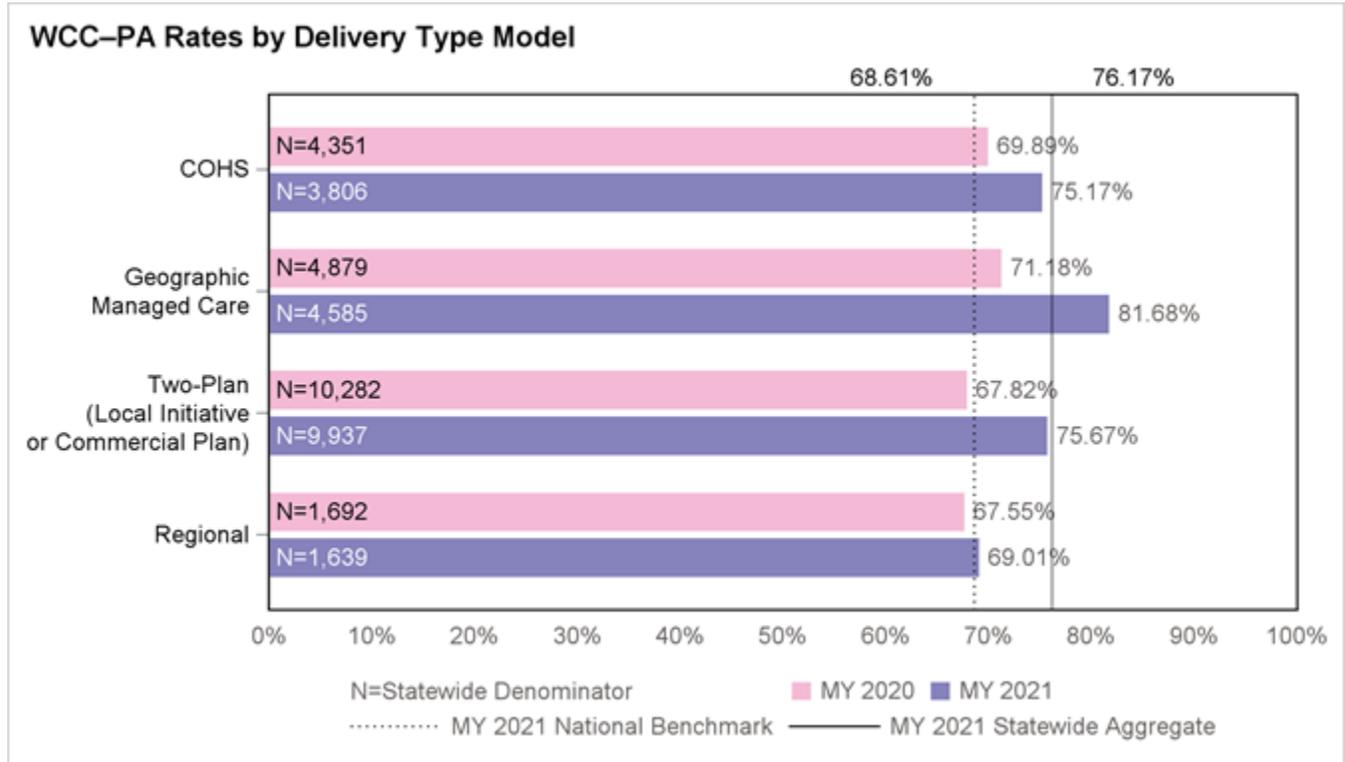


Figure A.45—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total (WCC–PA)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 66.18 percent and 68.71 percent, respectively.

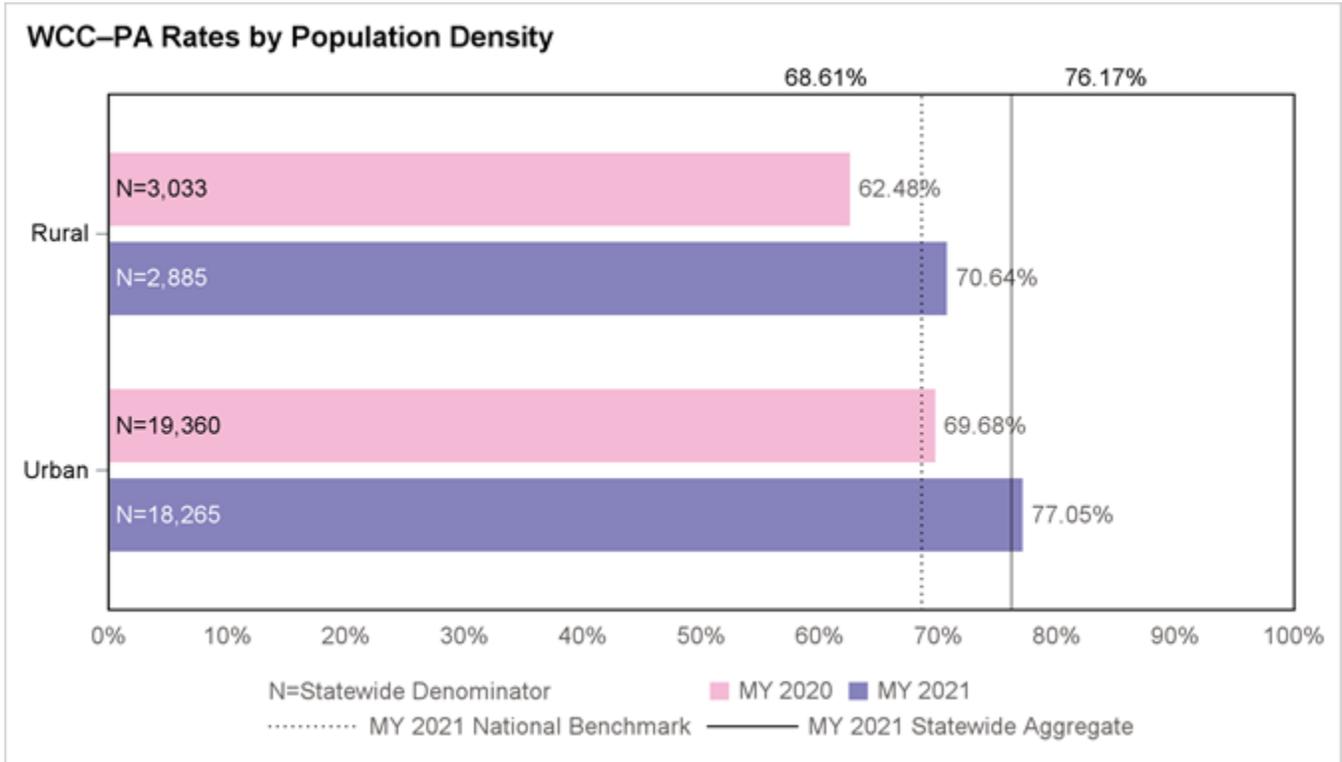


Figure A.46—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total (WCC-PA)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 66.18 percent and 68.71 percent, respectively.

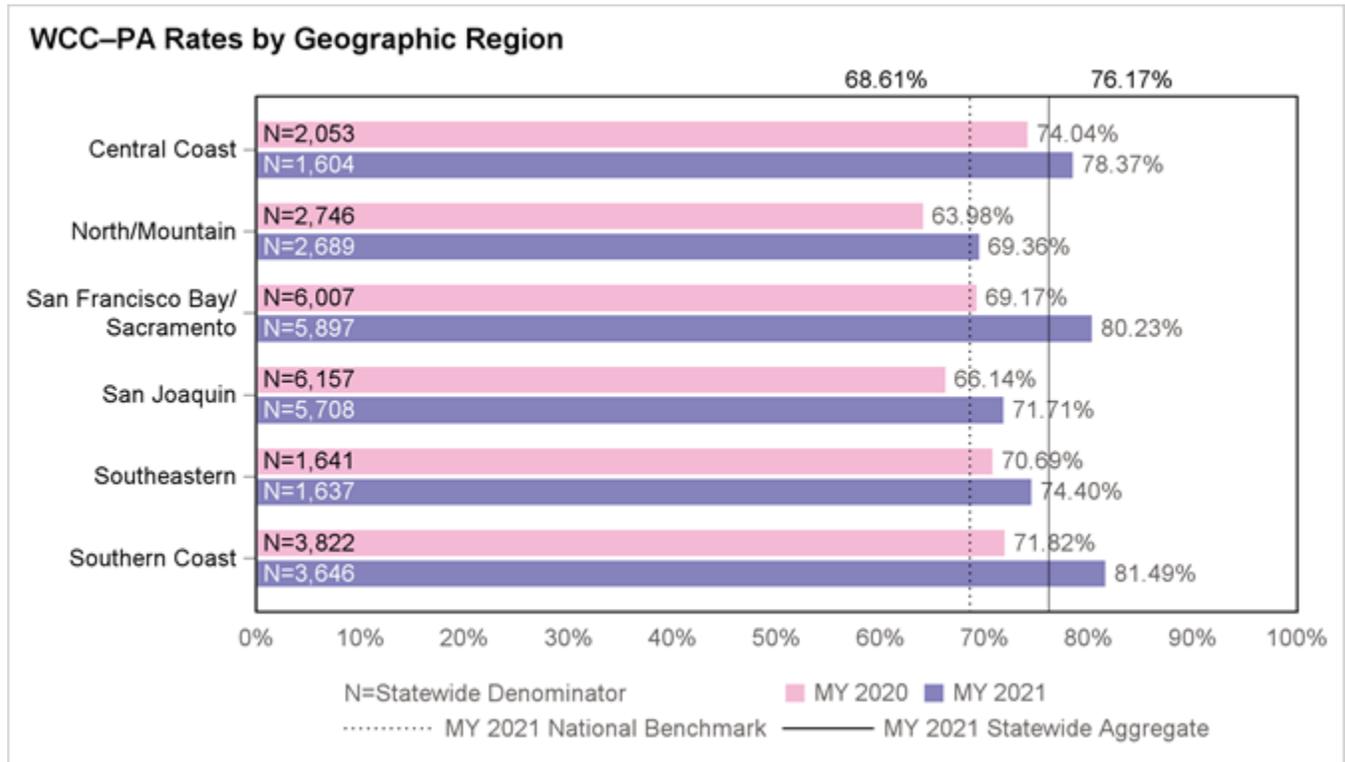
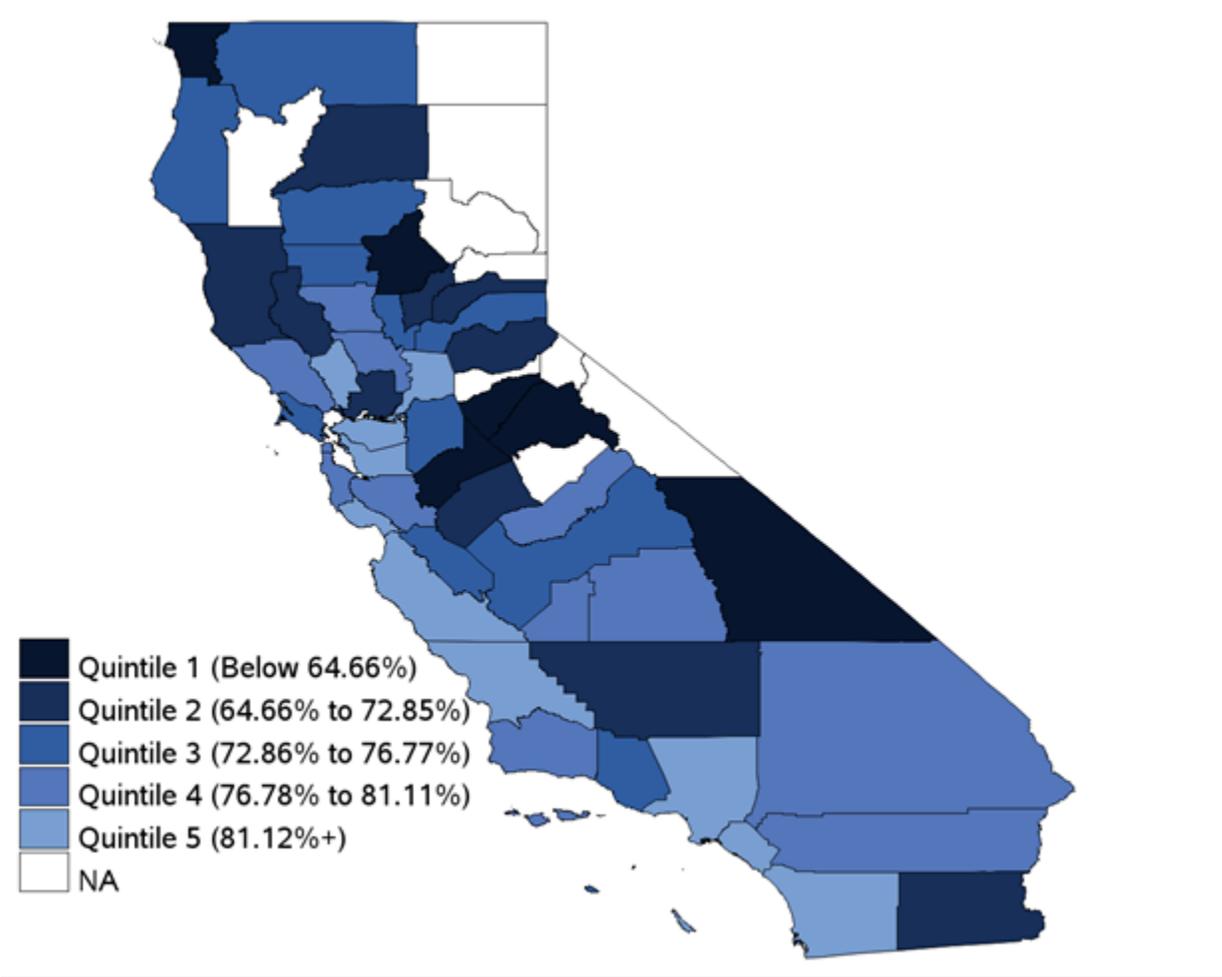


Figure A.47—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total (WCC-PA)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



HSAG-Calculated Indicators

Figure A.48 through Figure A.78 display the measurement years 2020 and 2021 statewide and regional results for the three HSAG-calculated indicators.

Alcohol Use Screening

The *Alcohol Use Screening (AUS)* indicator measures the percentage of children ages 11 to 21 years who had one or more screenings for alcohol use during the measurement year. Figure A.48 through Figure A.55 display the *Alcohol Use Screening (AUS)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021. Due to a lack of reporting within administrative data sources (i.e., medical record review [MRR] or EHR data could be necessary to capture this information), exercise caution when evaluating results as they may be more indicative of data completeness rather than performance. Please note, national benchmarks are not available for this indicator.

Figure A.48—Alcohol Use Screening (AUS)—Statewide Racial/Ethnic Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 1.83 percent.

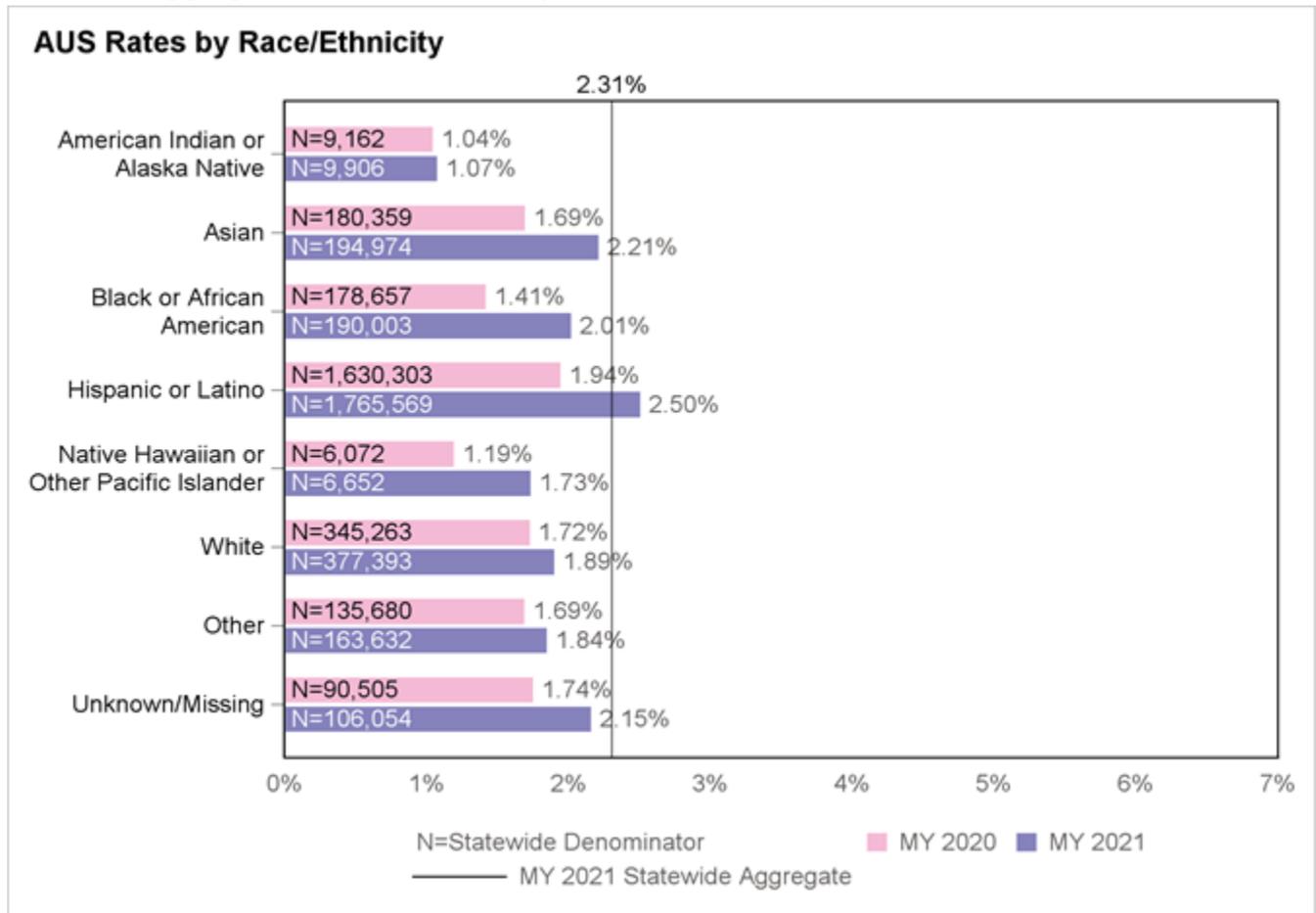


Figure A.49—Alcohol Use Screening (AUS)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The measurement year 2020 statewide denominators for the Armenian and Unknown/Missing primary language groups were 7,308 and 2,650, respectively.

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 1.83 percent.

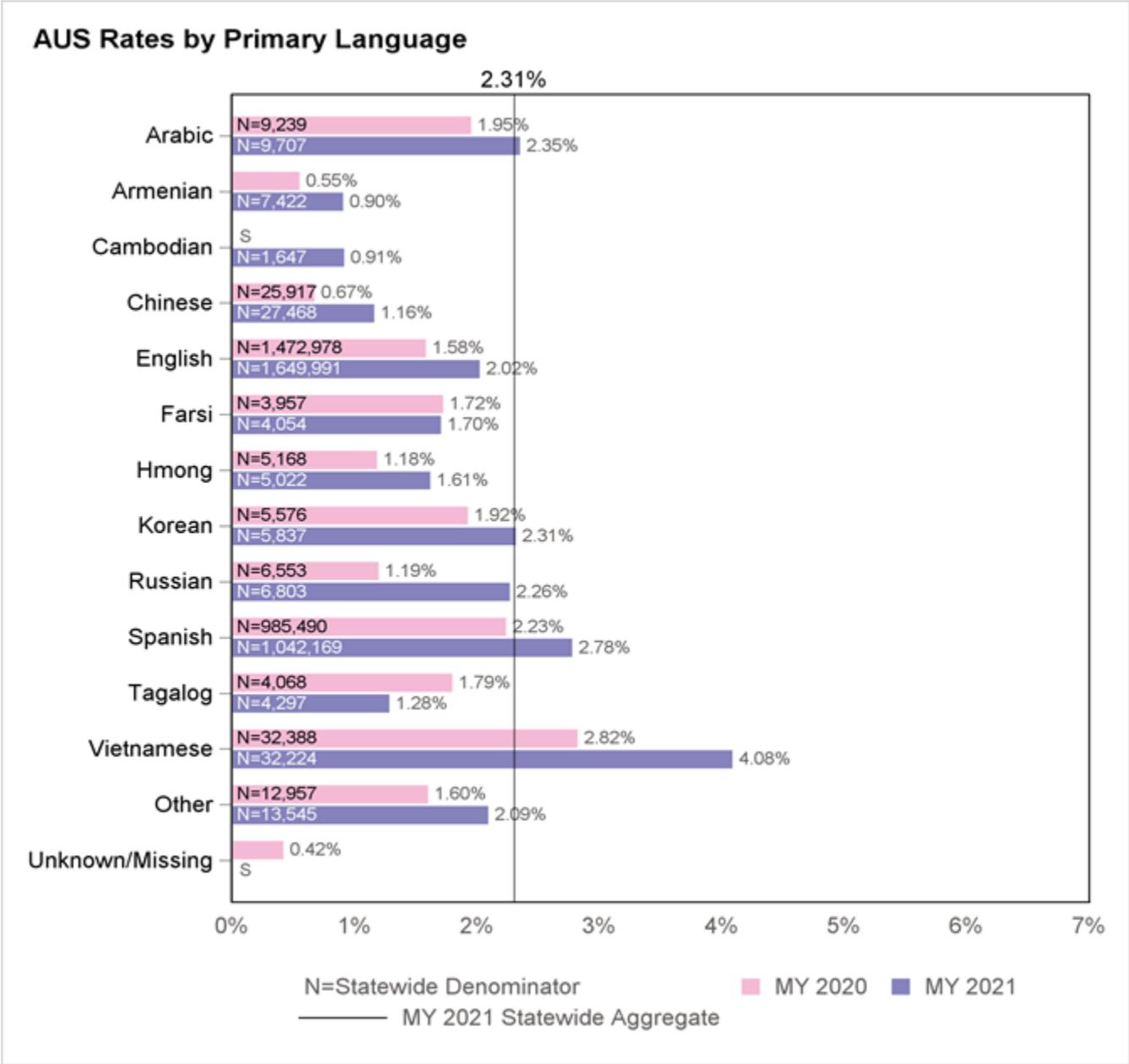


Figure A.50—Alcohol Use Screening (AUS)—Statewide Gender Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 1.83 percent.

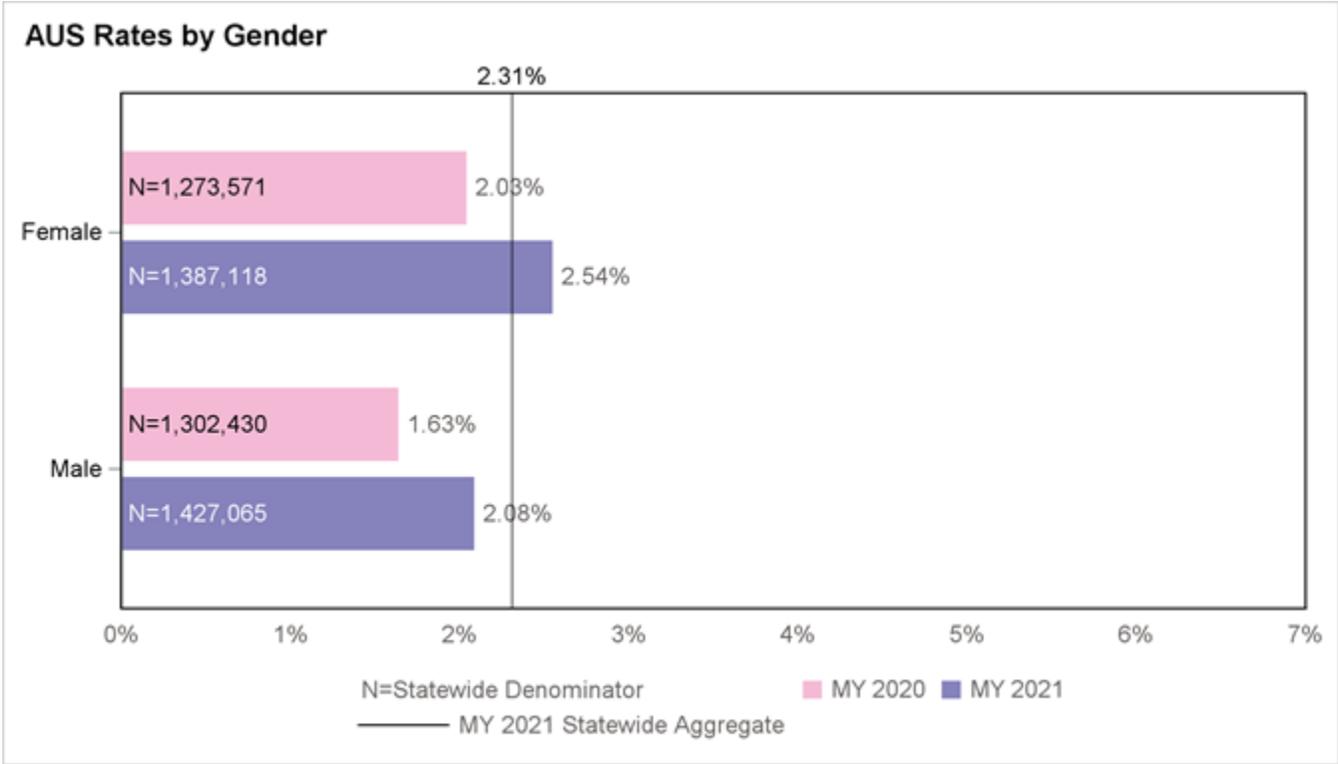


Figure A.51—Alcohol Use Screening (AUS)—Statewide Age Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 1.83 percent.

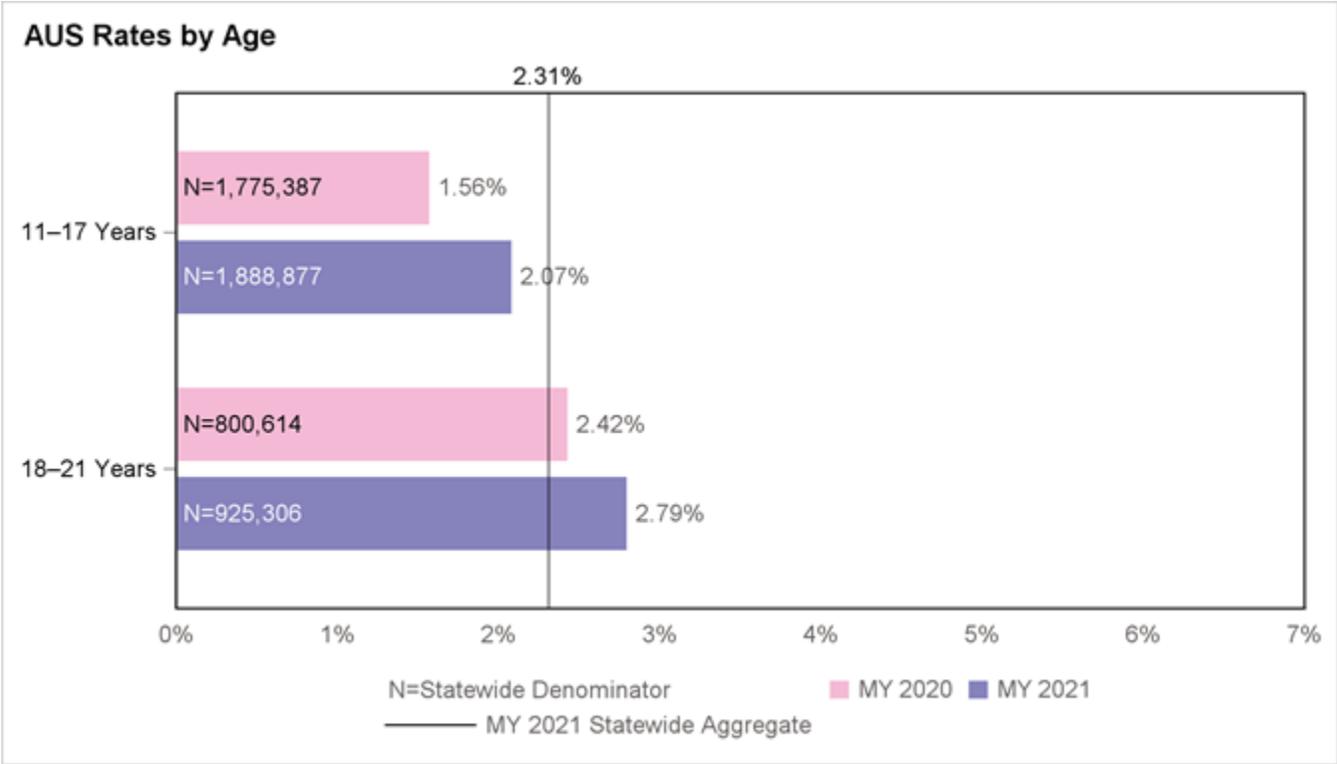


Figure A.52—Alcohol Use Screening (AUS)—Regional-Level Delivery Type Model Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 1.83 percent.

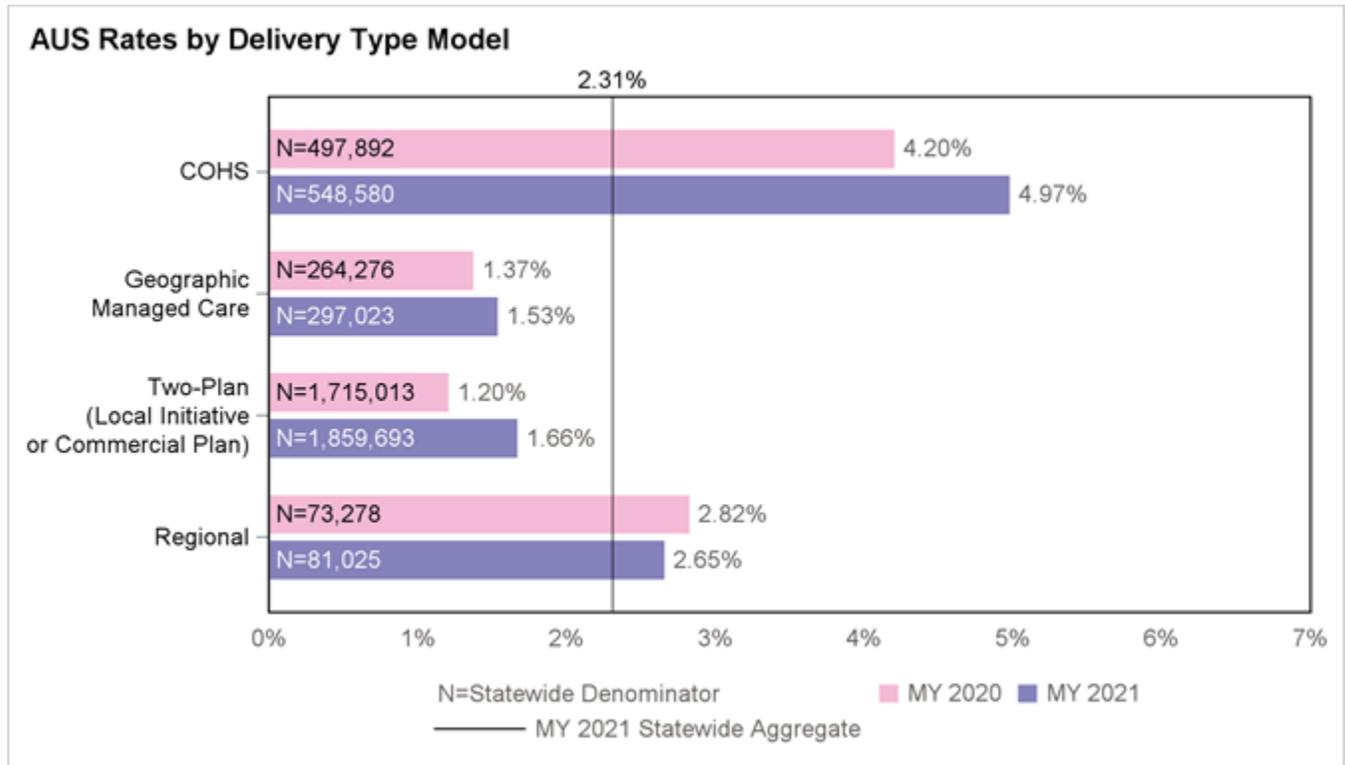


Figure A.53—Alcohol Use Screening (AUS)—Regional-Level Population Density Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 1.83 percent.

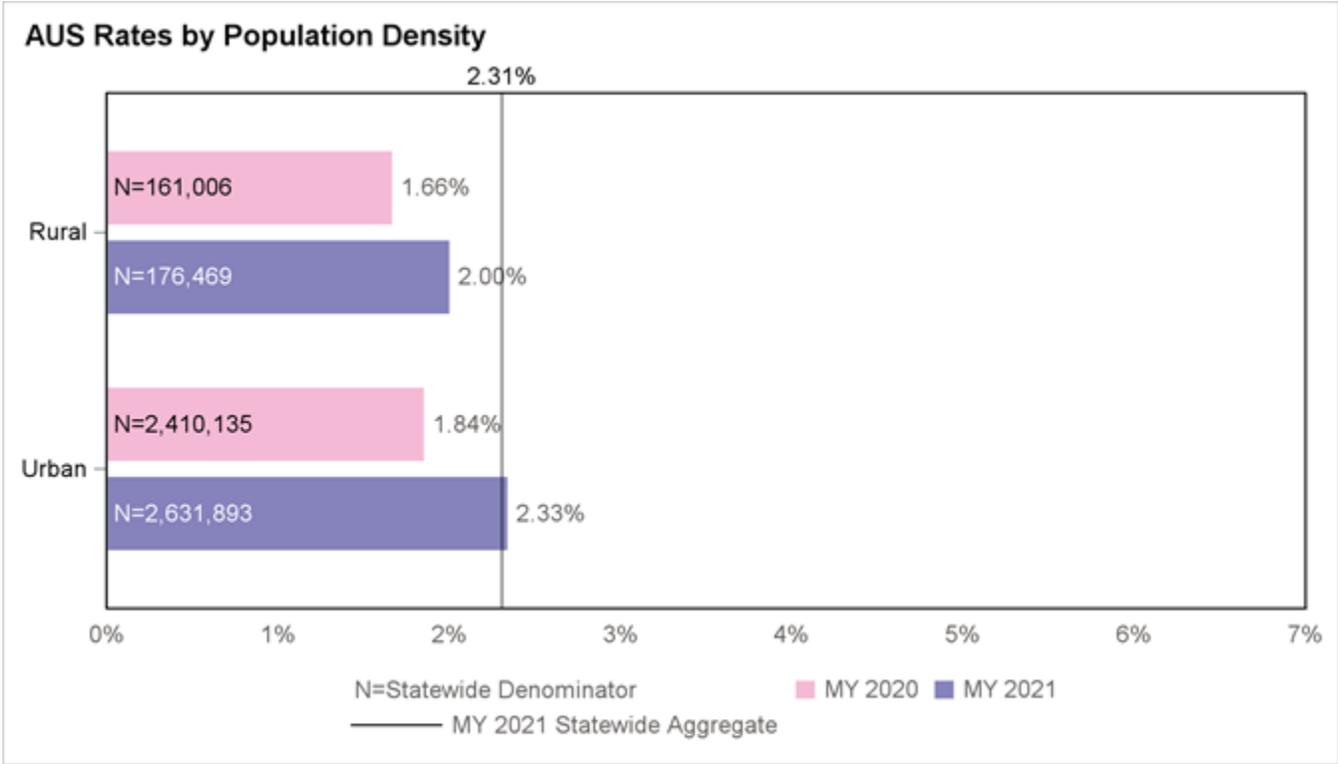


Figure A.54—Alcohol Use Screening (AUS)—Regional-Level Geographic Region Results

The measurement years 2020 and 2021 statewide denominators for the San Joaquin geographic region were 434,514 and 474,641, respectively.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 1.83 percent.

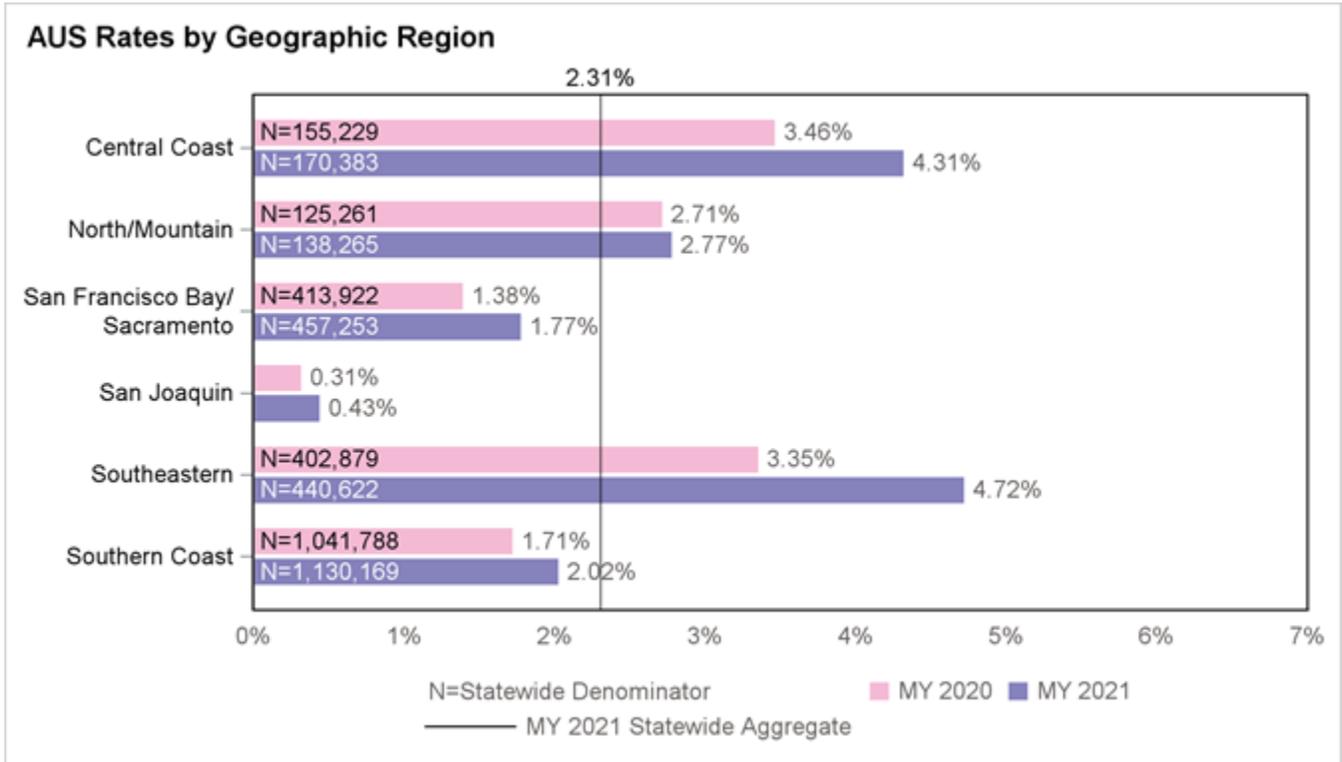
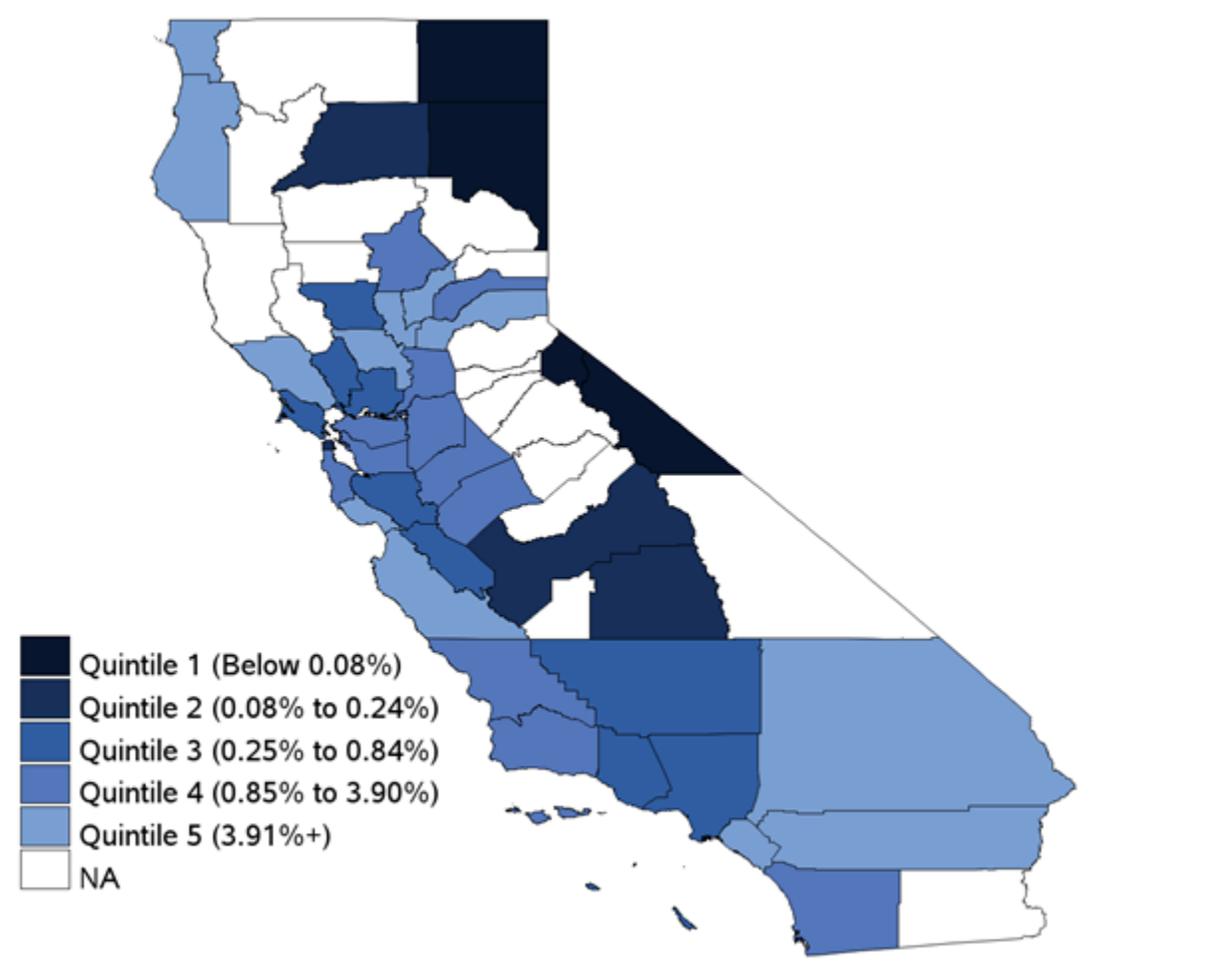


Figure A.55—Alcohol Use Screening (AUS)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Dental Fluoride Varnish

The *Dental Fluoride Varnish (DFV)* indicator measures the percentage of children 6 months of age as of January 1 of the measurement year to 5 years of age as of December 31 of the measurement year who had one or more applications of dental fluoride varnish administered by a medical provider during the measurement year. Figure A.56 presents the Dental Fluoride Varnish (DFV) indicator rates using three different methodologies: (1) using only the Current Procedural Terminology (CPT) code and excluding dental data, (2) using both CPT and Code on Dental Procedures and Nomenclature (CDT) codes and excluding dental data, and (3) using both CPT and CDT codes and including dental data. Figure A.56 through Figure A.63 display the *Dental Fluoride Varnish (DFV)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021, using methodology (3) above. Therefore, exercise caution when interpreting results given that only a small percentage of dental fluoride varnish applications occur in non-dental settings. Please note, national benchmarks are not available for this indicator.

Figure A.56—Dental Fluoride Varnish (DFV)—Statewide Results Using Different Methodologies

The statewide denominators for measurement years 2020 and 2021 were 1,043,987 and 1,061,357, respectively, for all three methodologies.

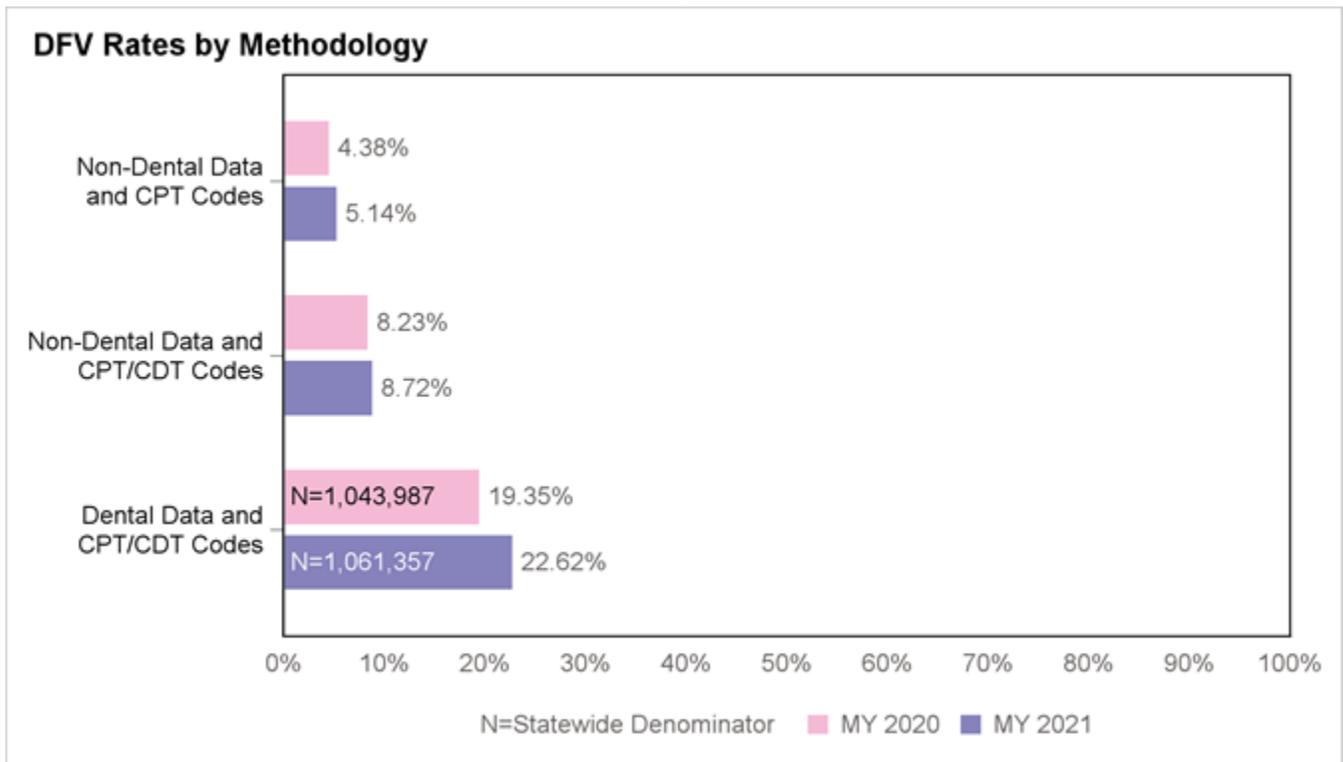


Figure A.57—Dental Fluoride Varnish (DFV)—Statewide Racial/Ethnic Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 19.35 percent.

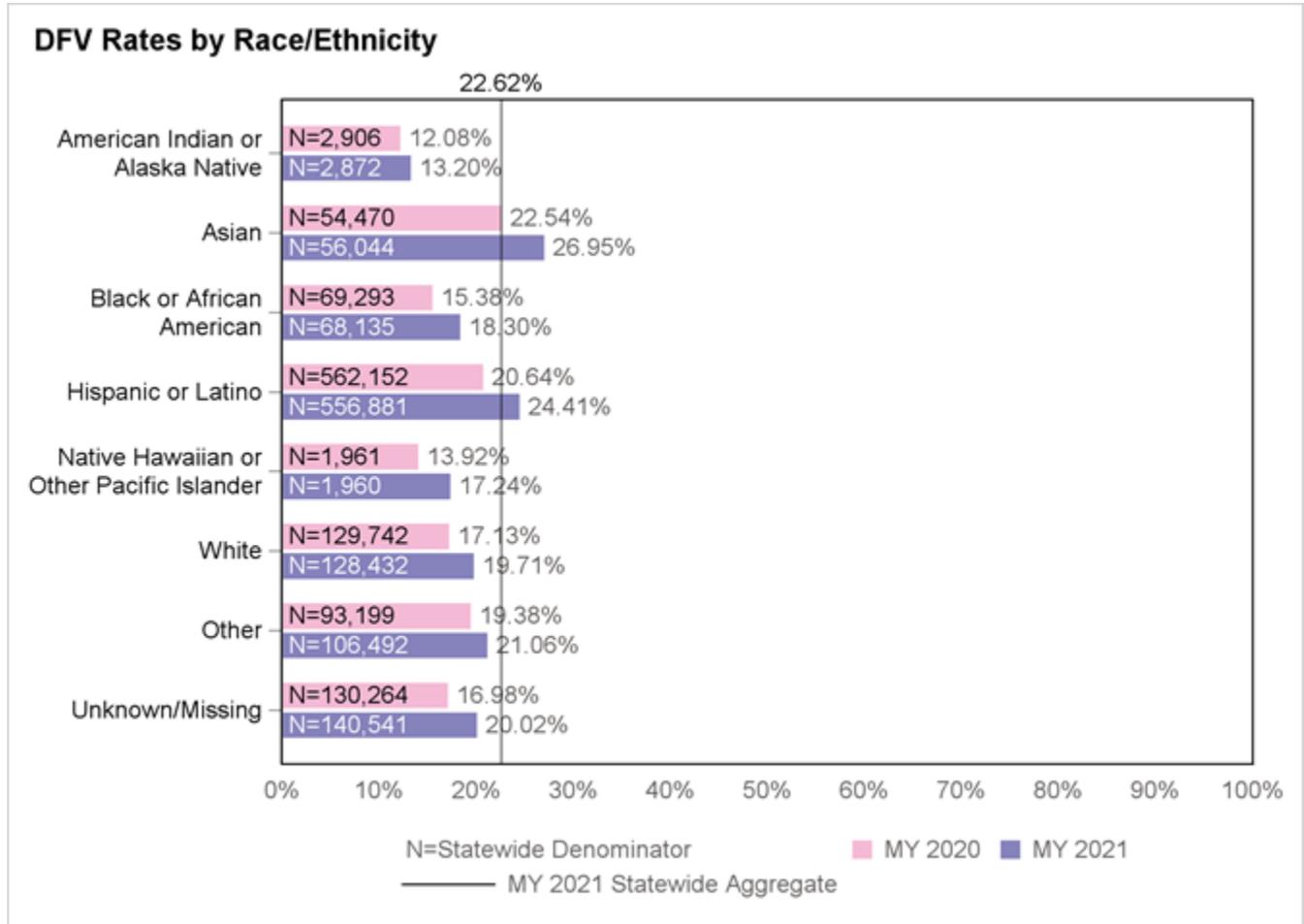


Figure A.58—Dental Fluoride Varnish (DFV)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The measurement year 2020 statewide denominator for the Unknown/Missing primary language group was 945.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 19.35 percent.

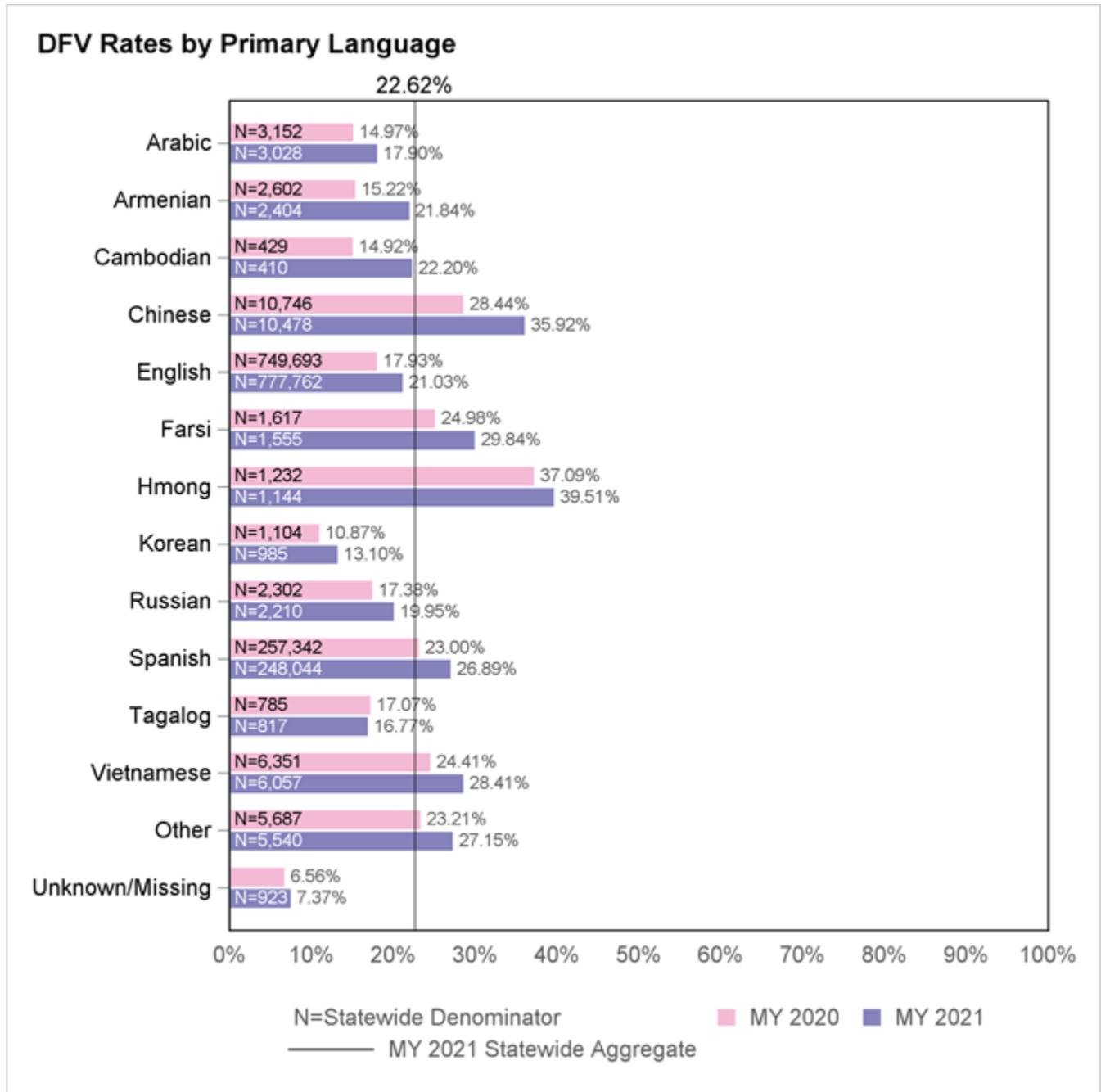


Figure A.59—Dental Fluoride Varnish (DFV)—Statewide Gender Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 19.35 percent.

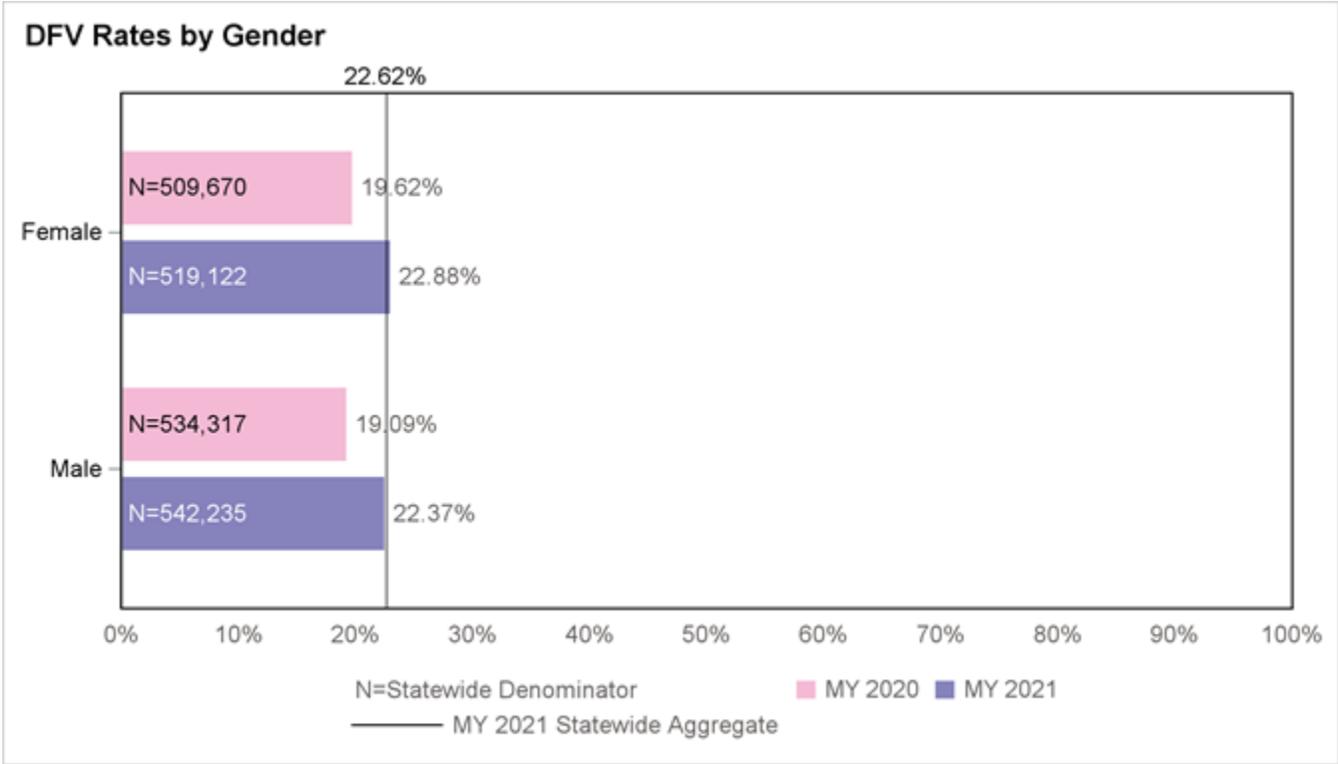


Figure A.60—Dental Fluoride Varnish (DFV)—Regional-Level Delivery Type Model Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 19.35 percent.

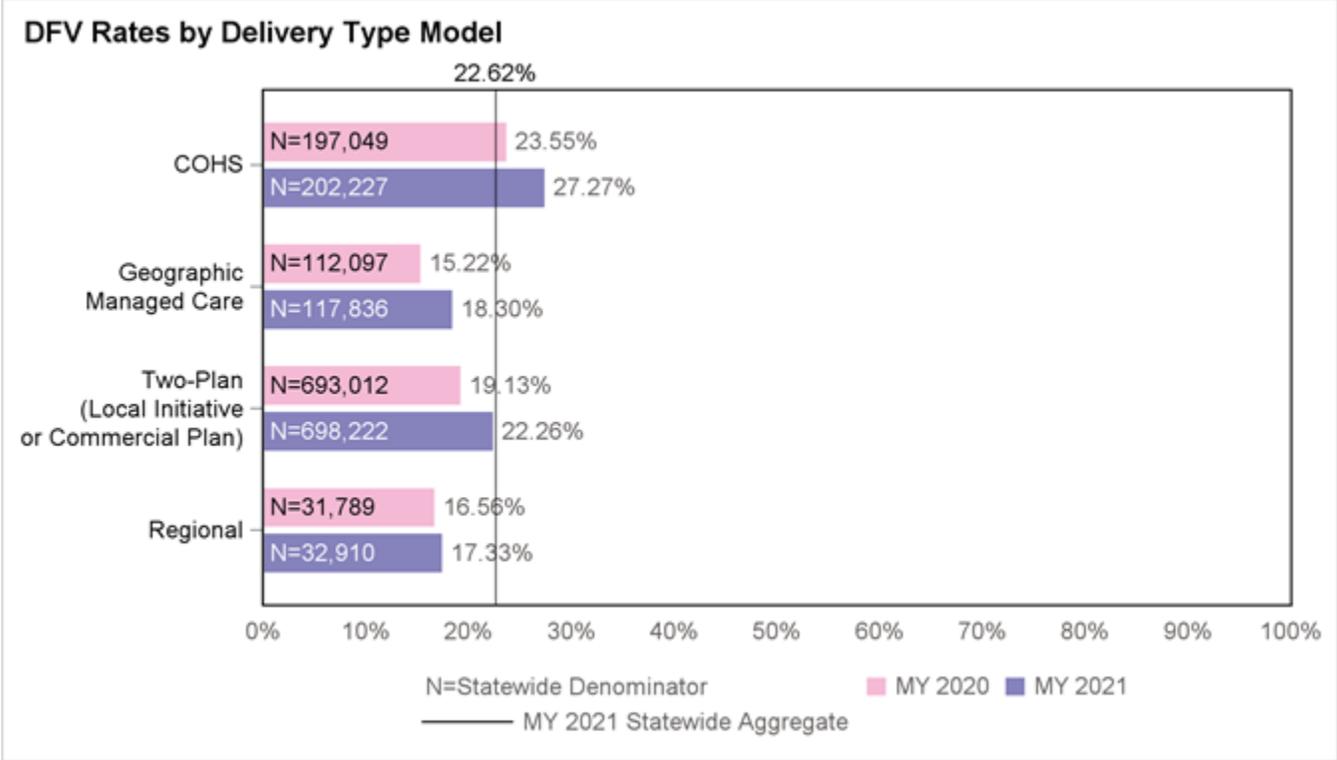


Figure A.61—Dental Fluoride Varnish (DFV)—Regional-Level Population Density Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 19.35 percent.

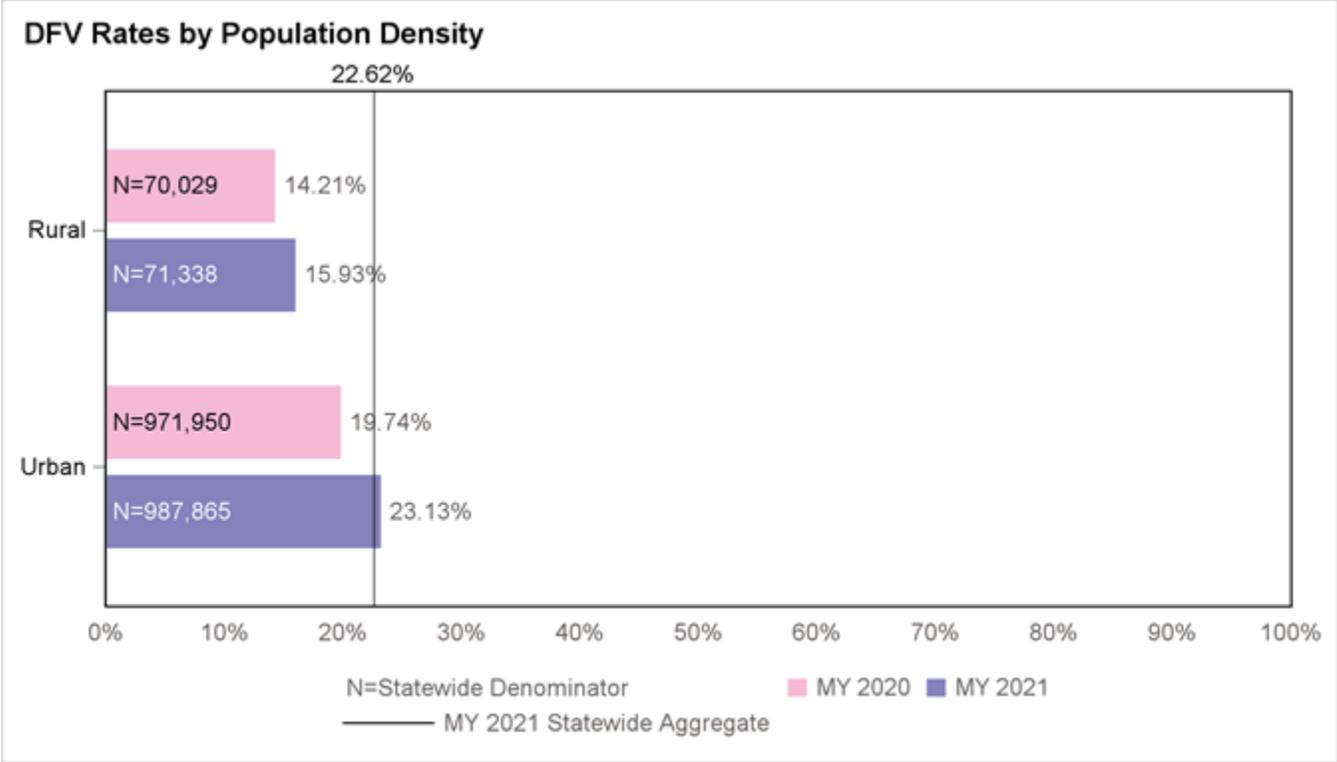


Figure A.62—Dental Fluoride Varnish (DFV)—Regional-Level Geographic Region Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 19.35 percent.

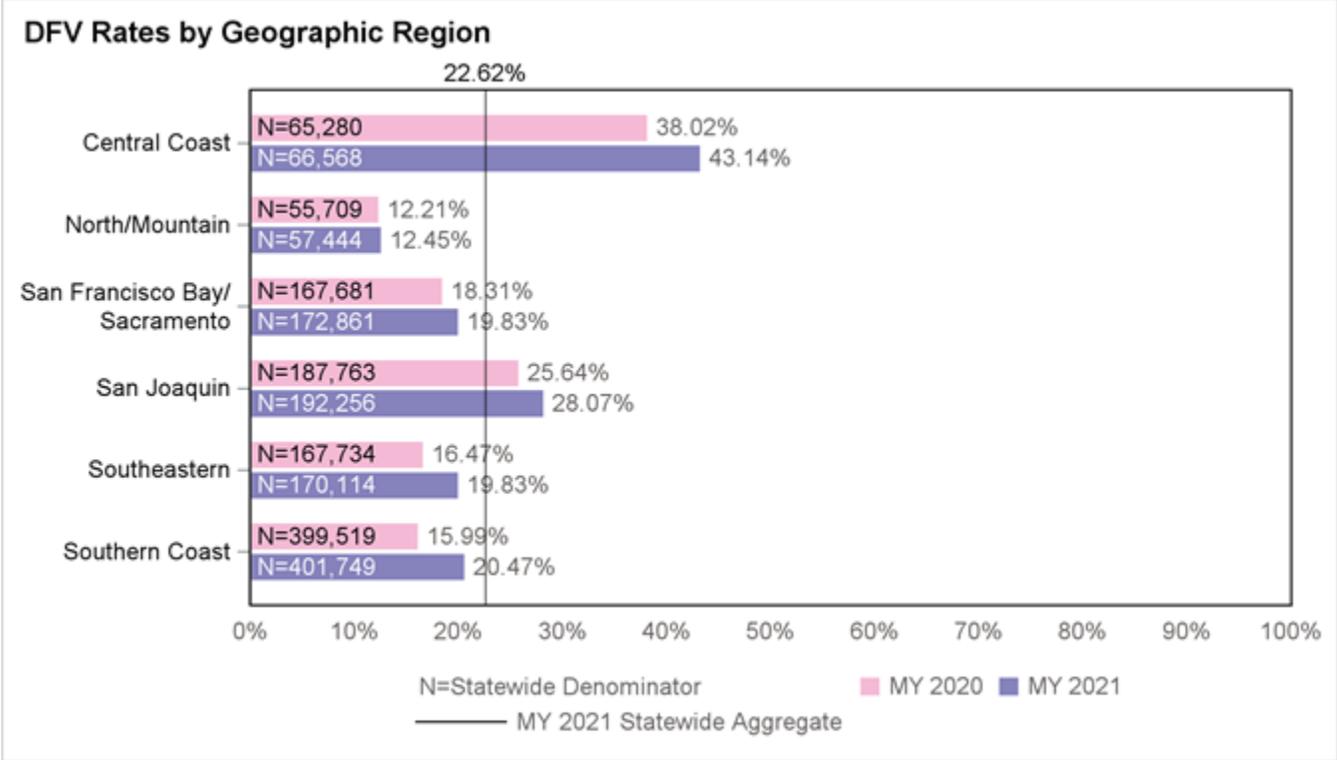
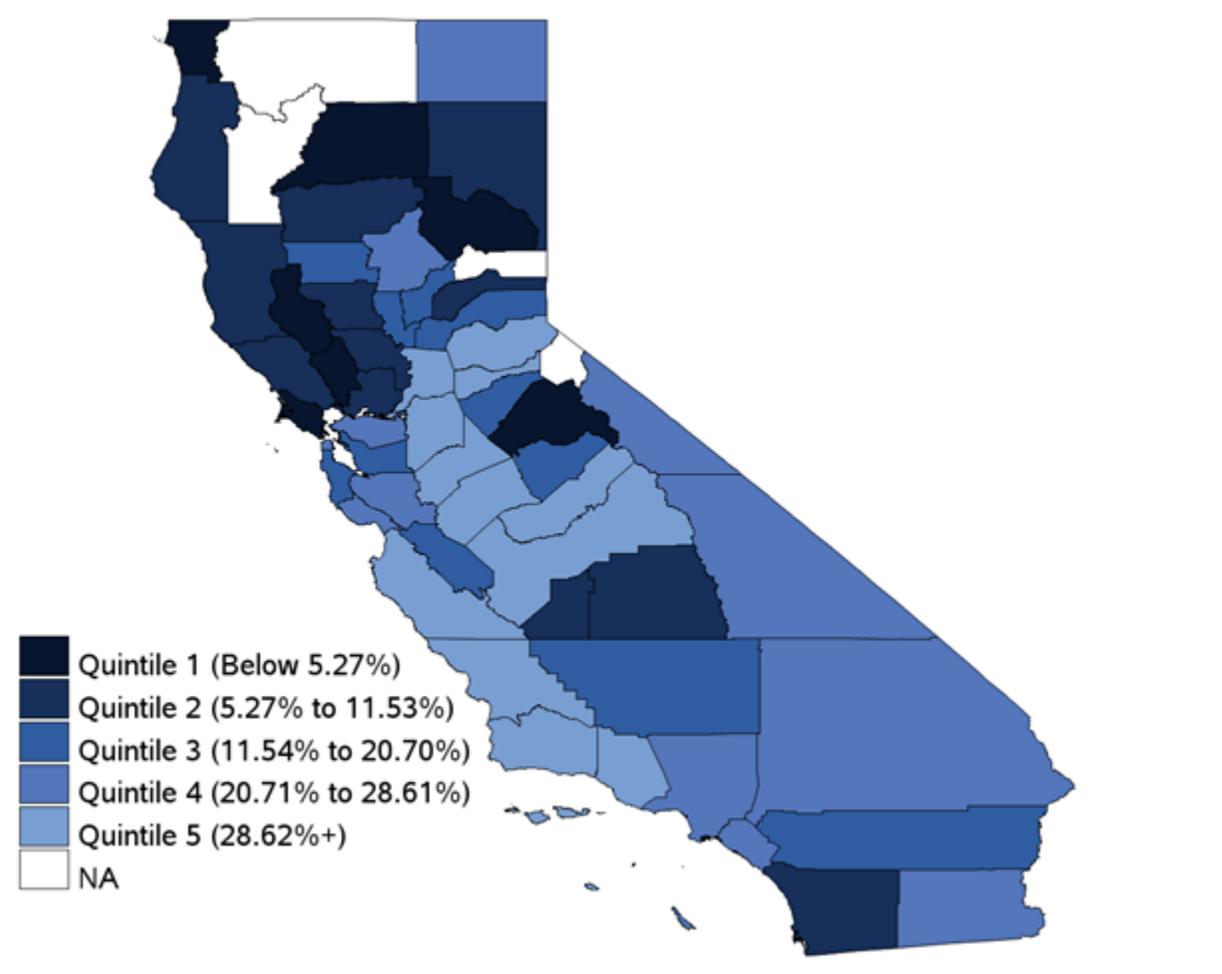


Figure A.63—Dental Fluoride Varnish (DFV)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years

The *Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)* indicator measures the percentage of discharges for children ages 6 to 17 who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health provider within seven days of discharge. Figure A.64 through Figure A.70 display the *Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021.

Figure A.64—Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)—Statewide Racial/Ethnic Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 49.80 percent and 59.60 percent, respectively.

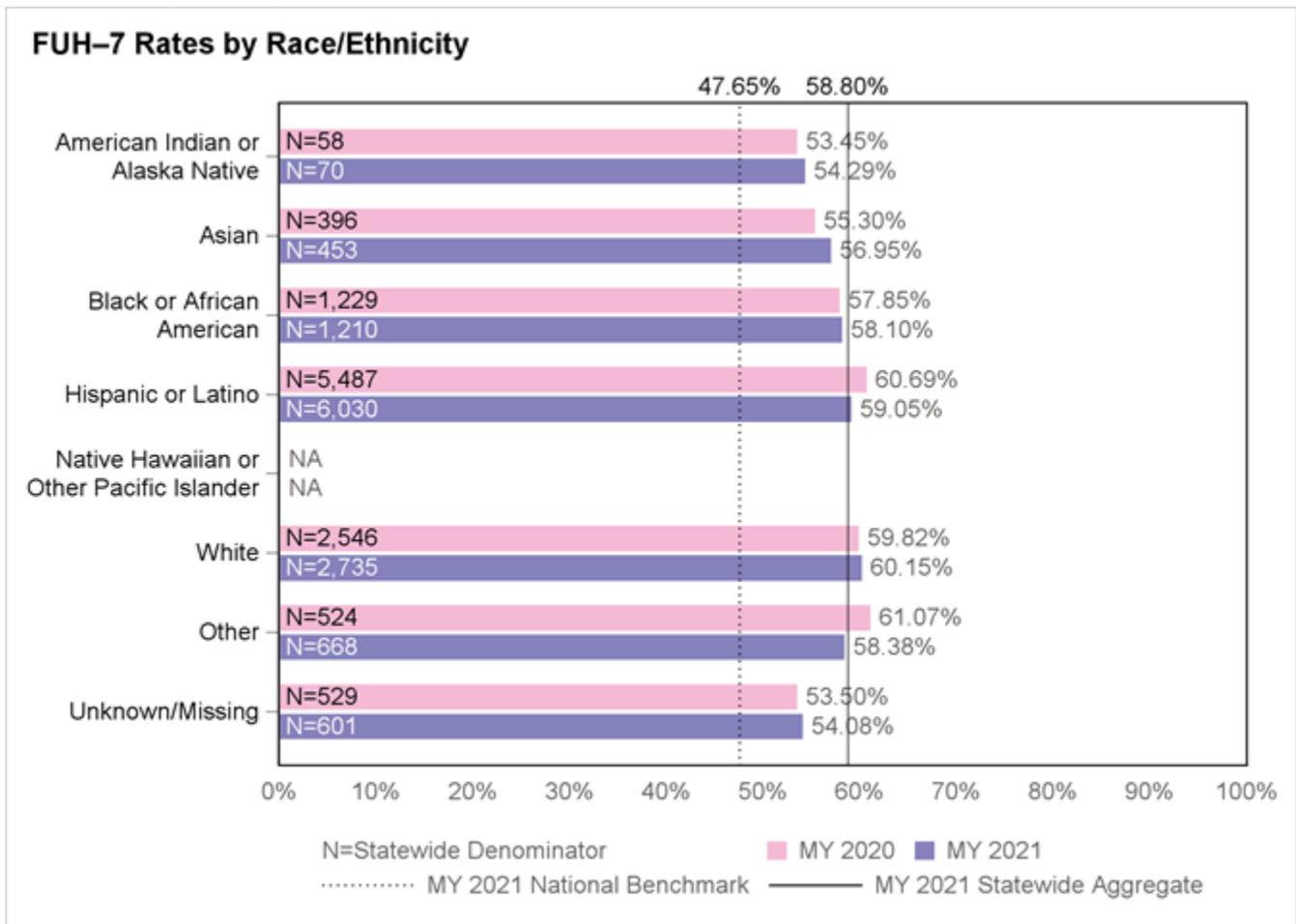


Figure A.65—Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 49.80 percent and 59.60 percent, respectively.

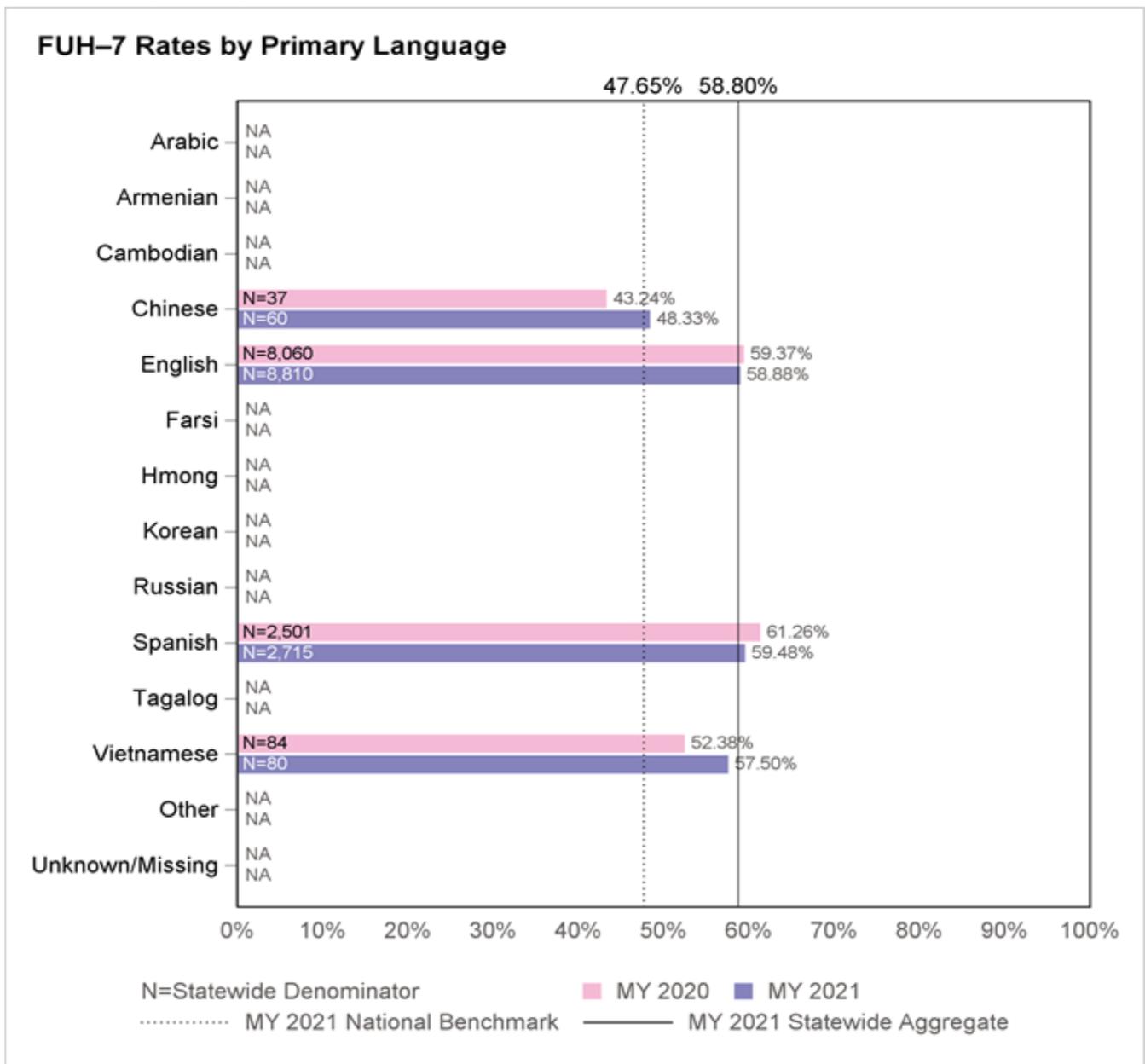


Figure A.66—Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)—Statewide Gender Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 49.80 percent and 59.60 percent, respectively.

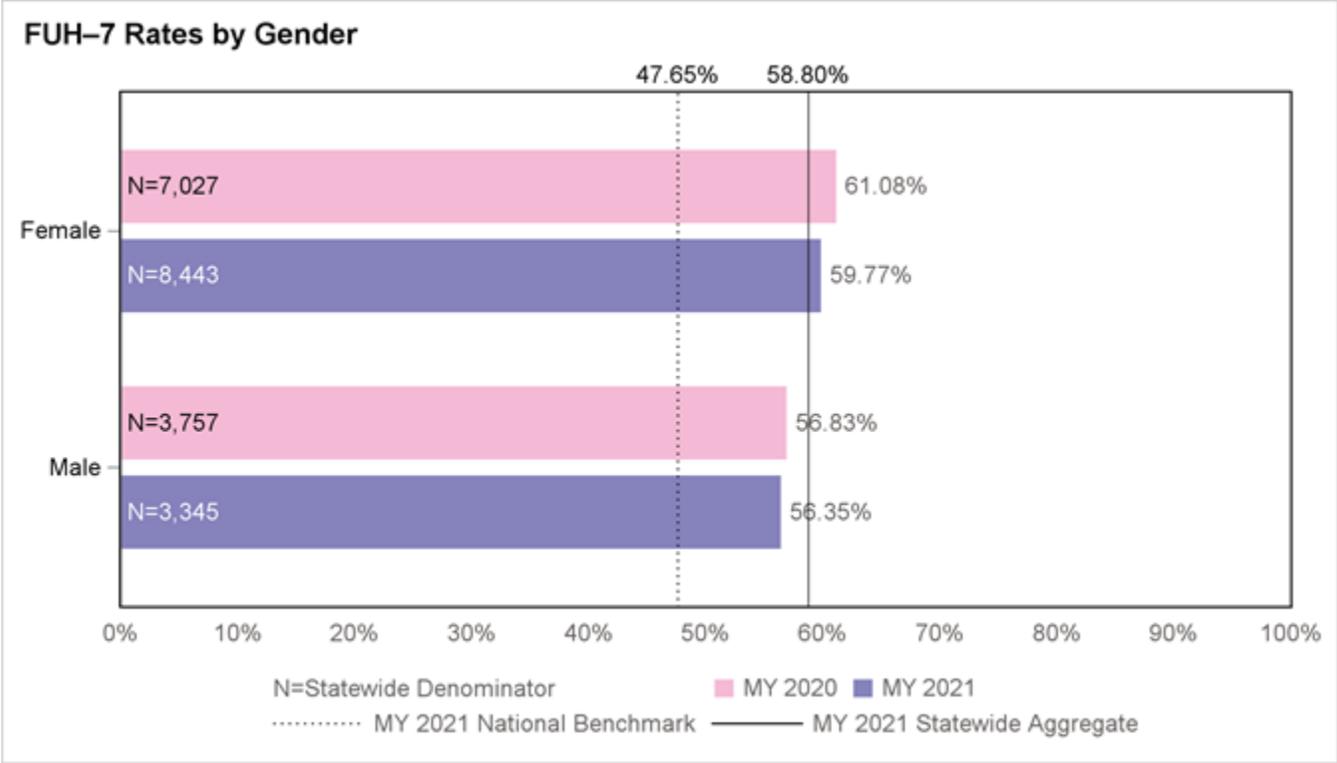


Figure A.67—Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)—Regional-Level Delivery Type Model Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 49.80 percent and 59.60 percent, respectively.

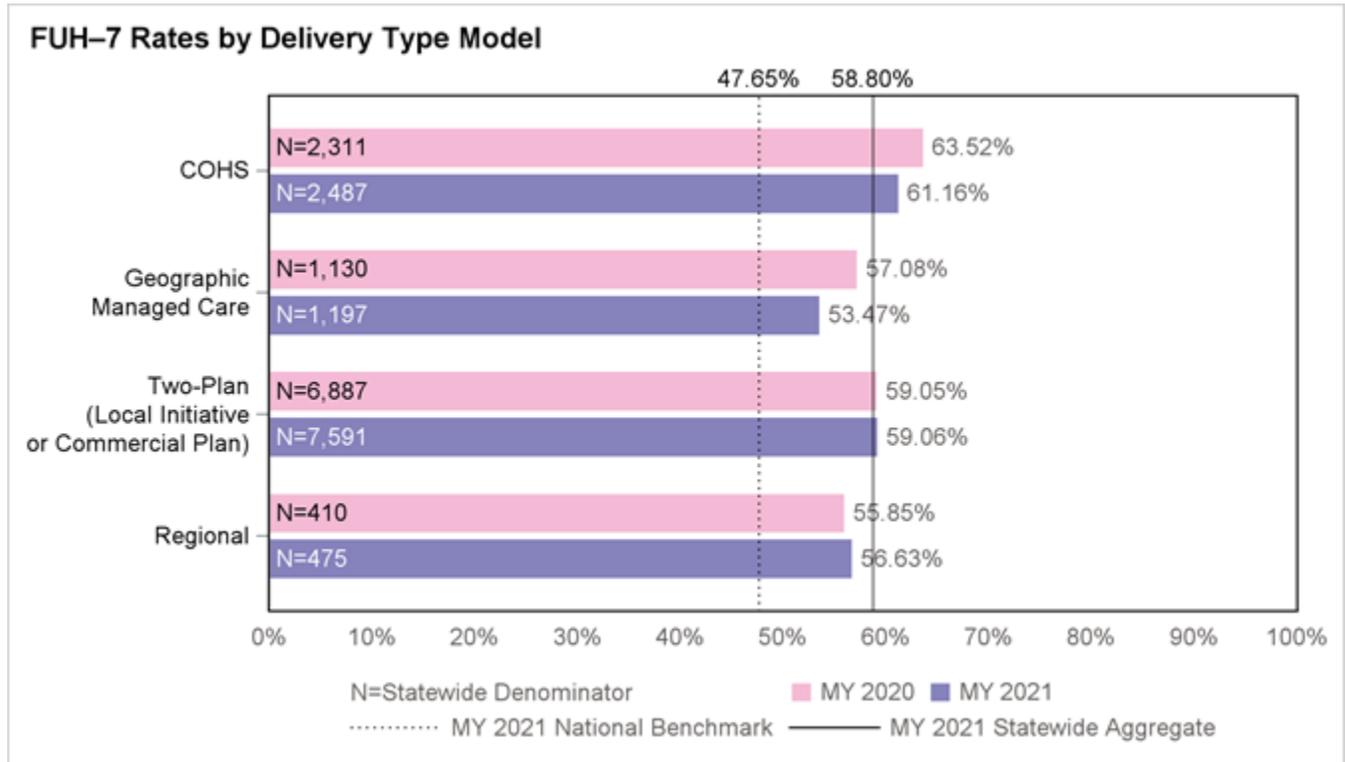


Figure A.68—Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)—Regional-Level Population Density Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 49.80 percent and 59.60 percent, respectively.

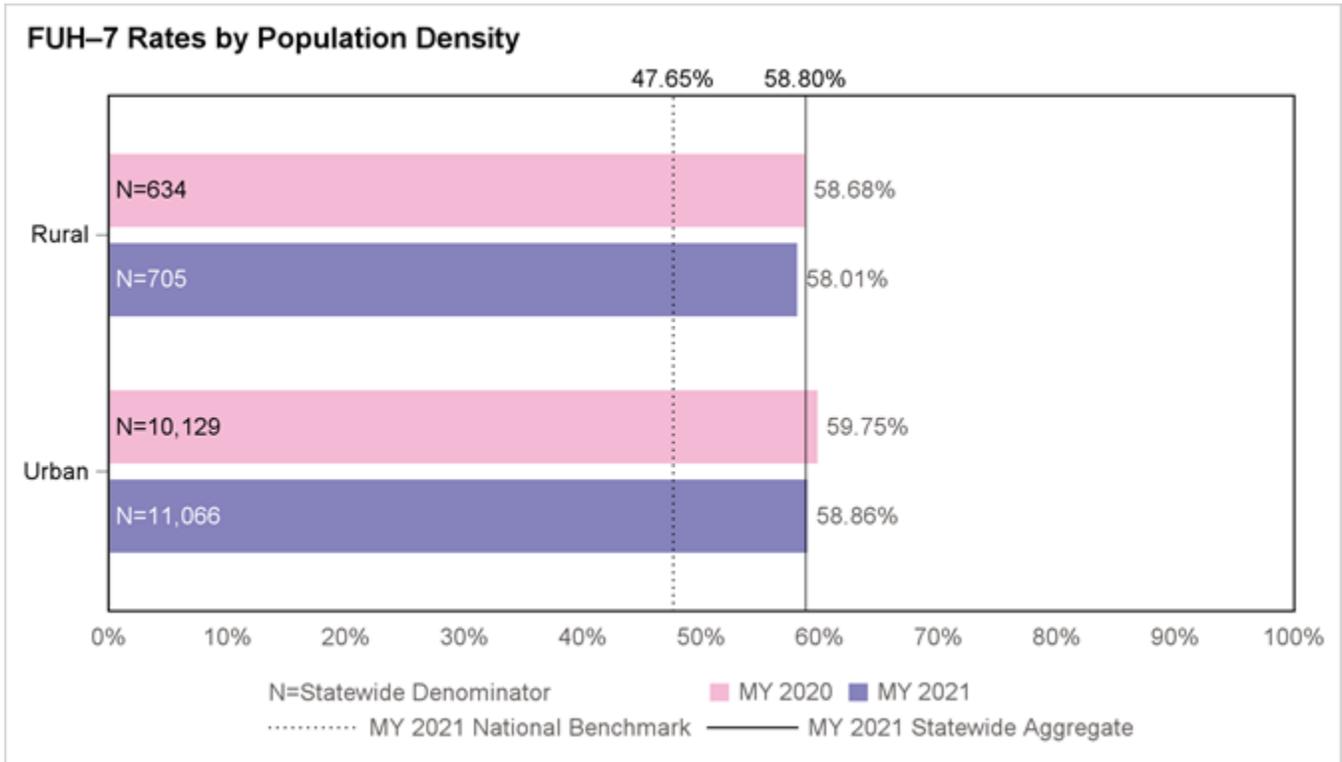


Figure A.69—Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)—Regional-Level Geographic Region Results

The national benchmark and statewide aggregate for measurement year 2021 are shown in the figure below, and the values for measurement year 2020 were 49.80 percent and 59.60 percent, respectively.

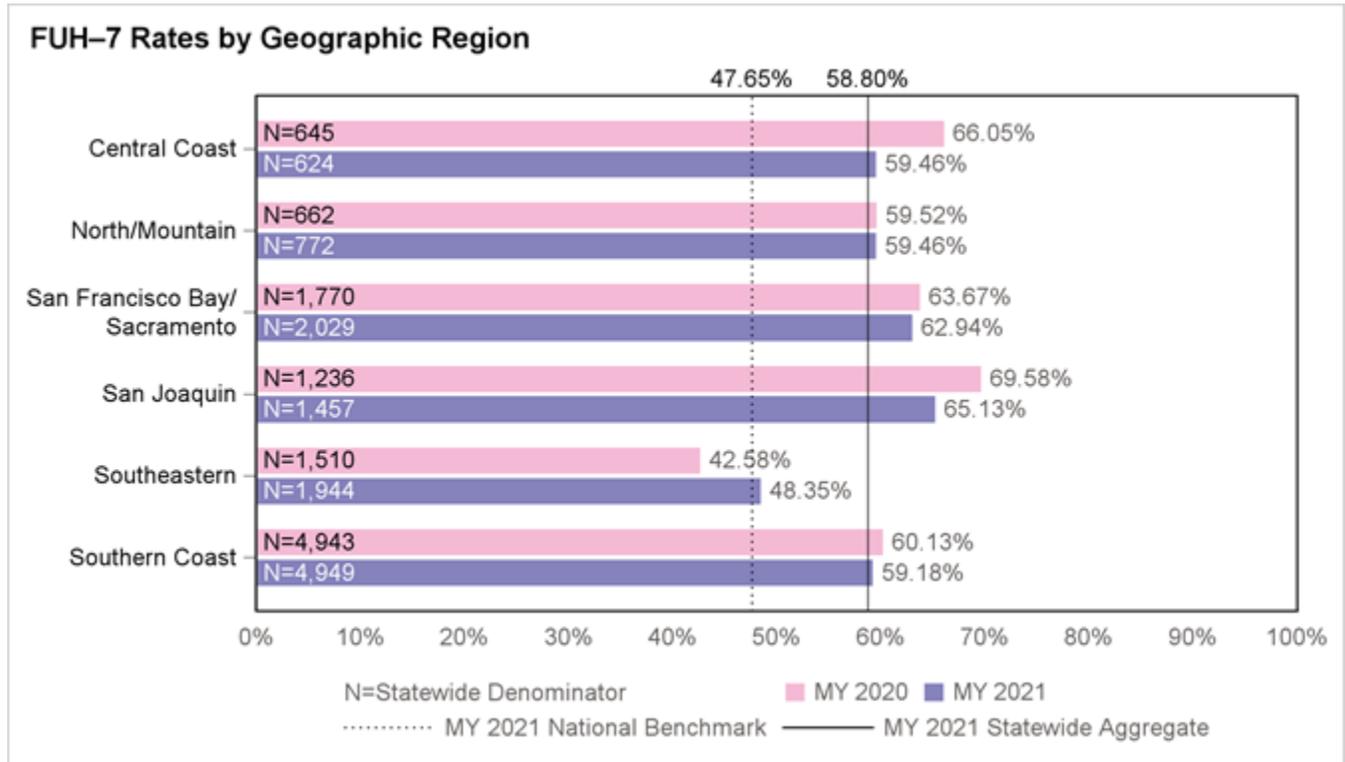
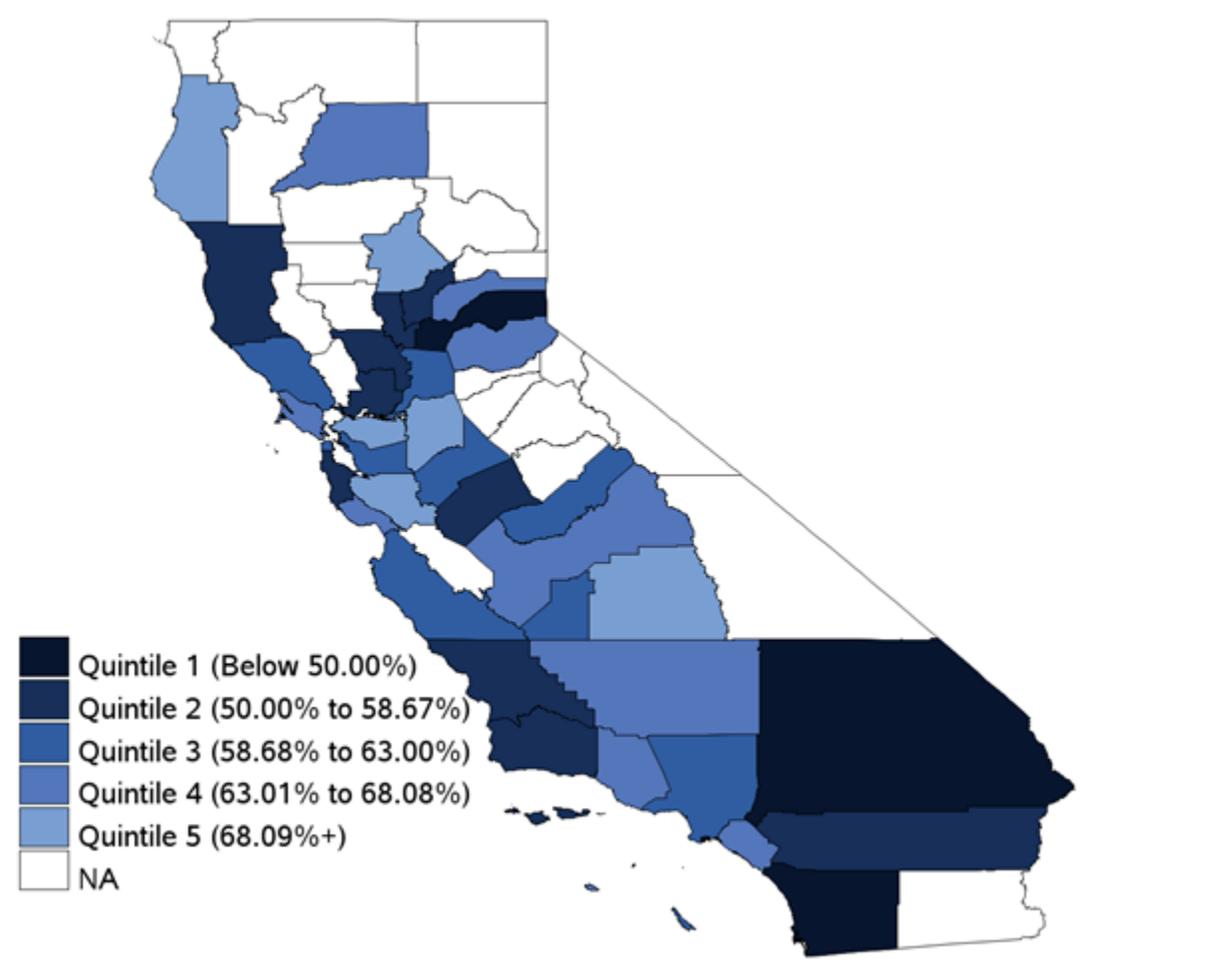


Figure A.70—Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Tobacco Use Screening

The *Tobacco Use Screening (TUS)* indicator measures the percentage of children ages 11 to 21 years who had one or more screenings for tobacco use during the measurement year. Figure A.71 through Figure A.78 display the *Tobacco Use Screening (TUS)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021. Please note, due to a lack of reporting within administrative data sources (i.e., MRR or EHR data could be necessary to capture this information), exercise caution when evaluating results as they may be more indicative of data completeness rather than performance. Please note, national benchmarks are not available for this indicator.

Figure A.71—Tobacco Use Screening (TUS)—Statewide Racial/Ethnic Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 2.54 percent.

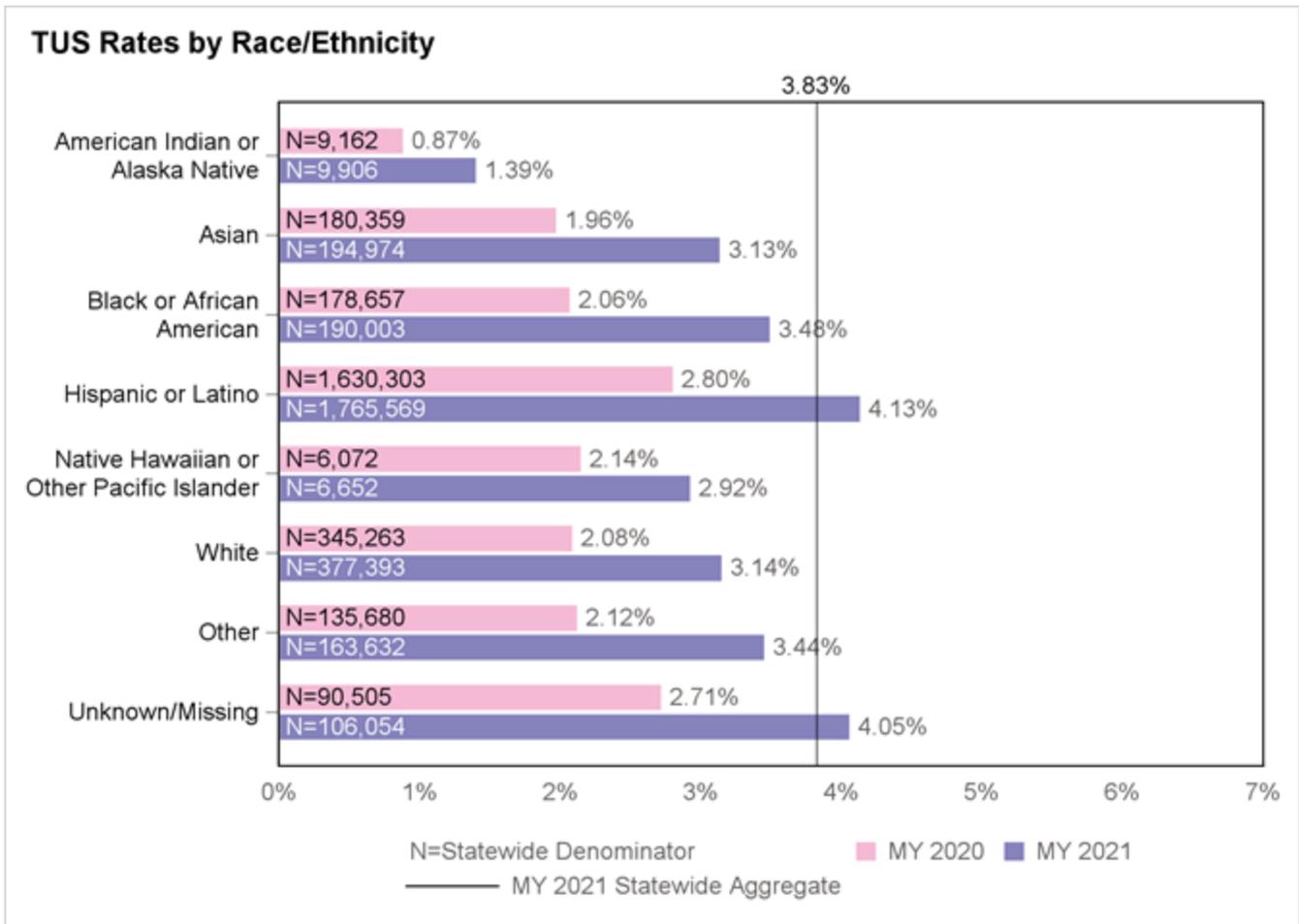


Figure A.72—Tobacco Use Screening (TUS)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard. The measurement year 2020 statewide denominator for the Armenian primary language group was 7,308.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 2.54 percent.

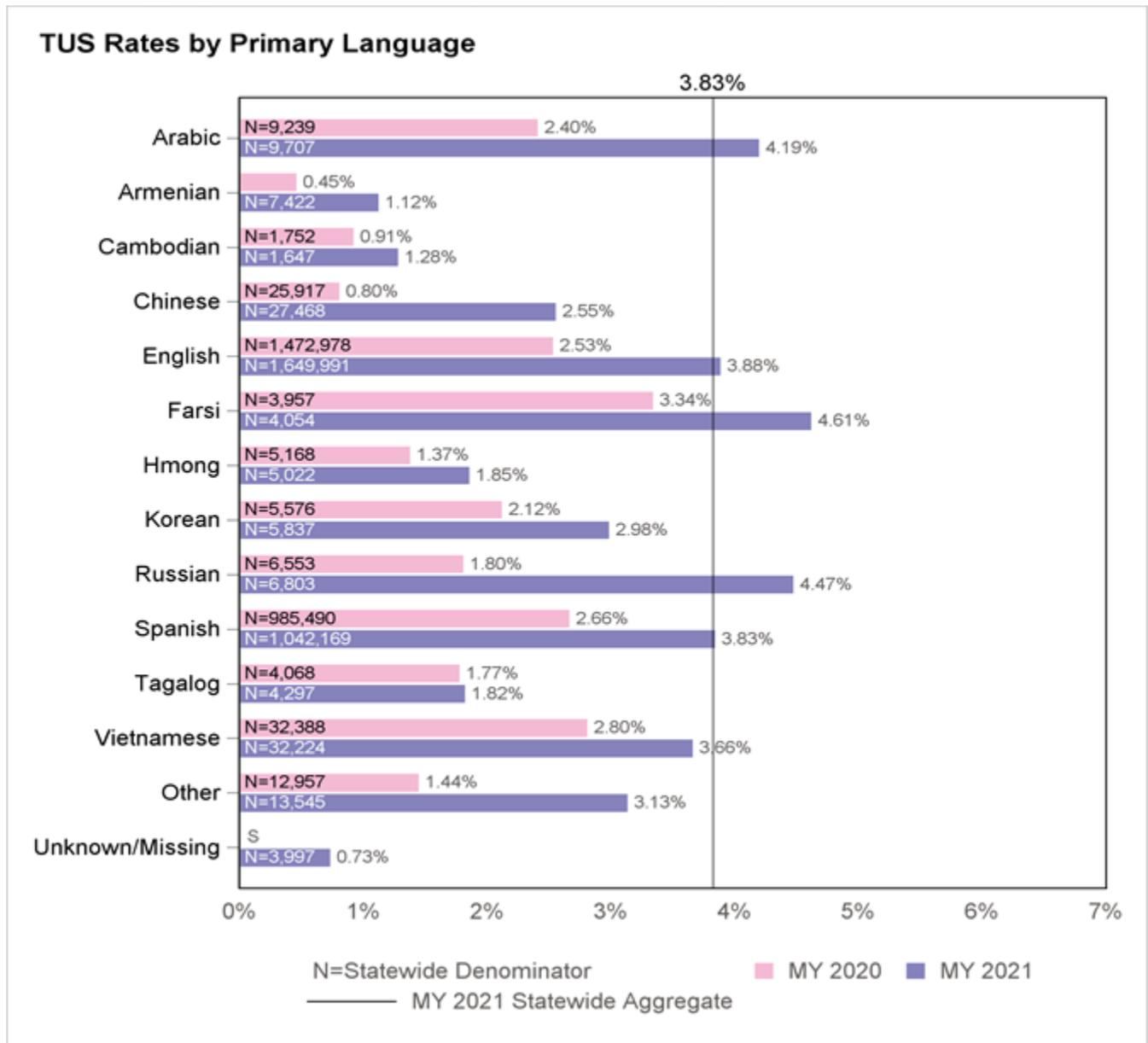


Figure A.73—Tobacco Use Screening (TUS)—Statewide Gender Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 2.54 percent.

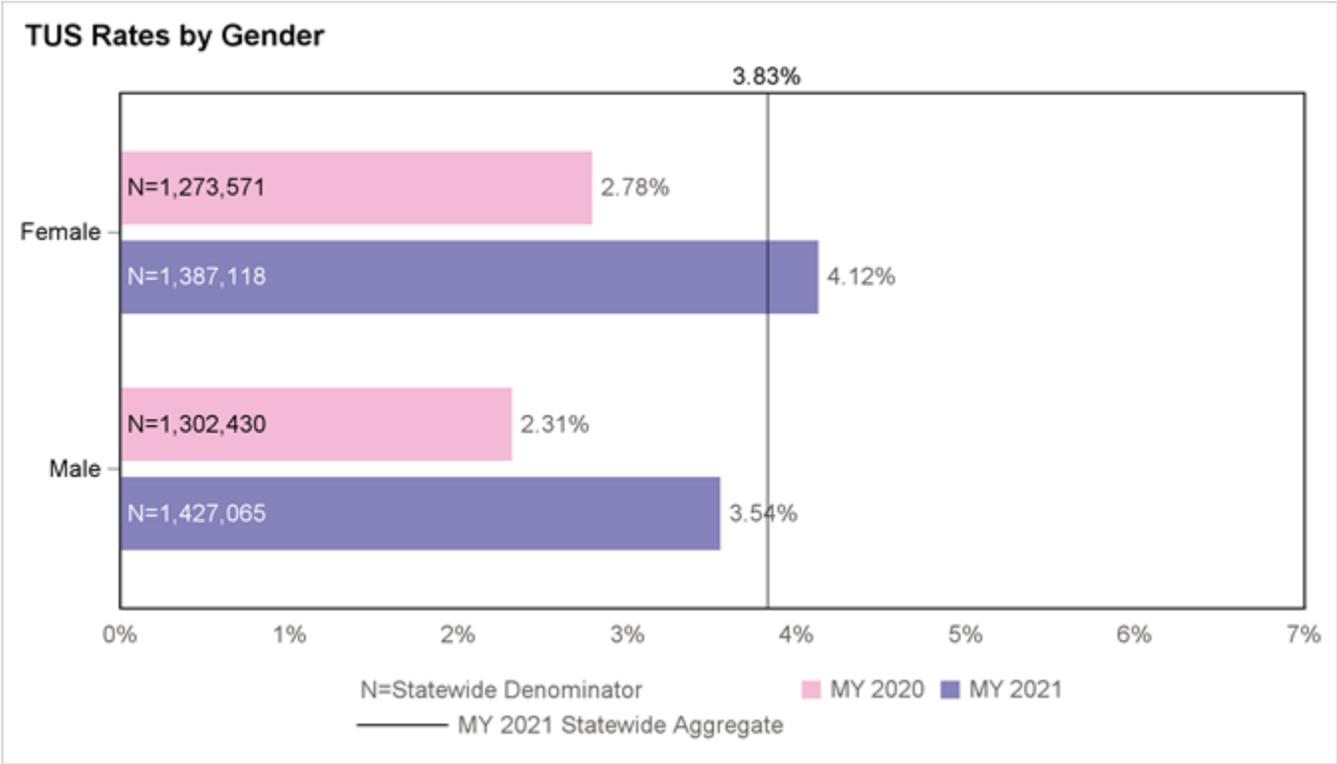


Figure A.74—Tobacco Use Screening (TUS)—Statewide Age Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 2.54 percent.

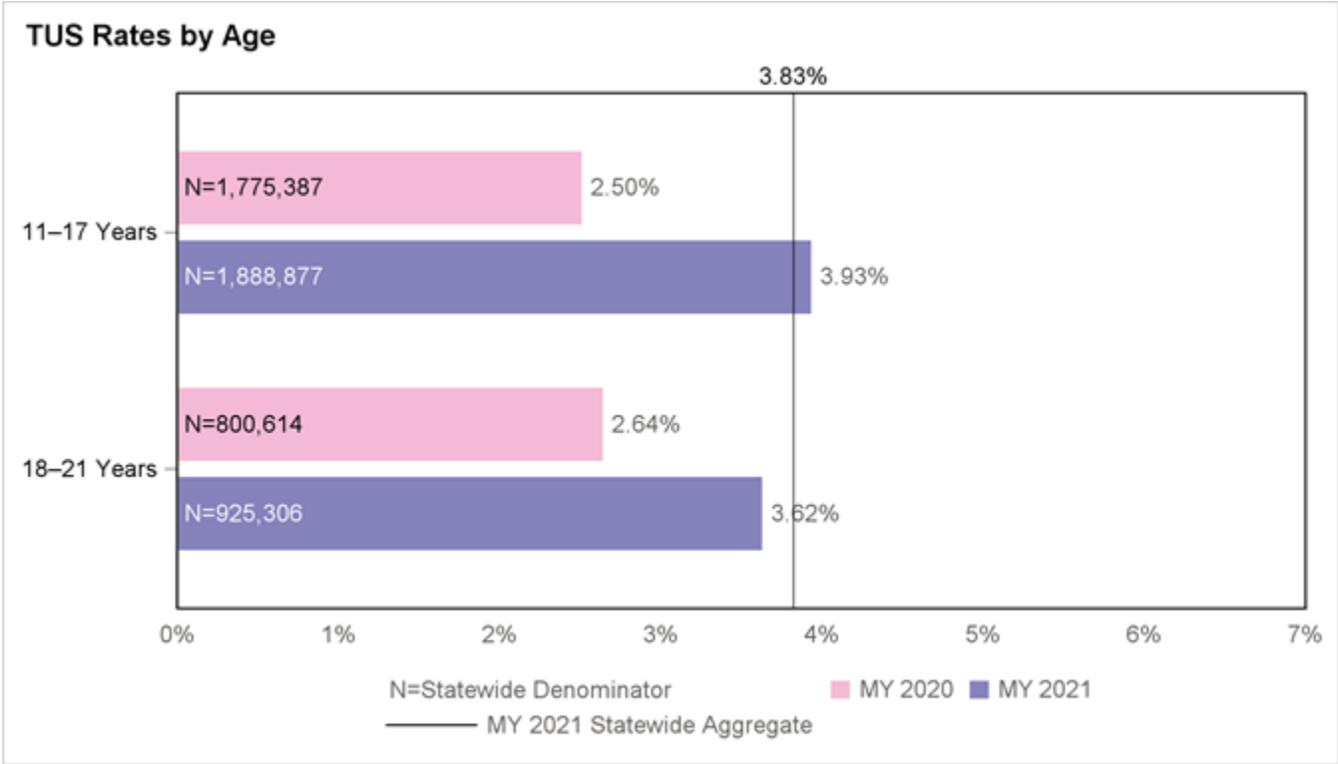


Figure A.75—Tobacco Use Screening (TUS)—Regional-Level Delivery Type Model Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 2.54 percent.

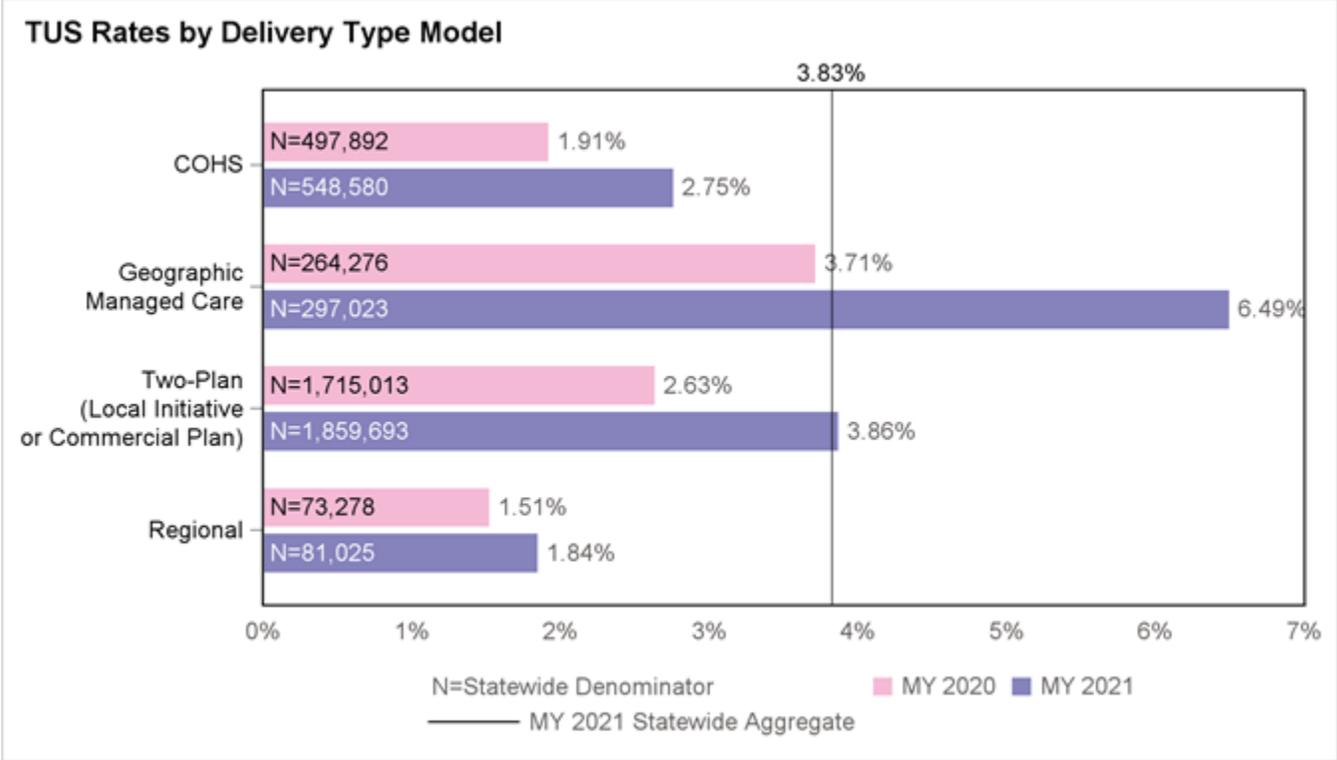


Figure A.76—Tobacco Use Screening (TUS)—Regional-Level Population Density Results

The measurement year 2020 denominator for the rural population density group was 161,006. The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 2.54 percent.

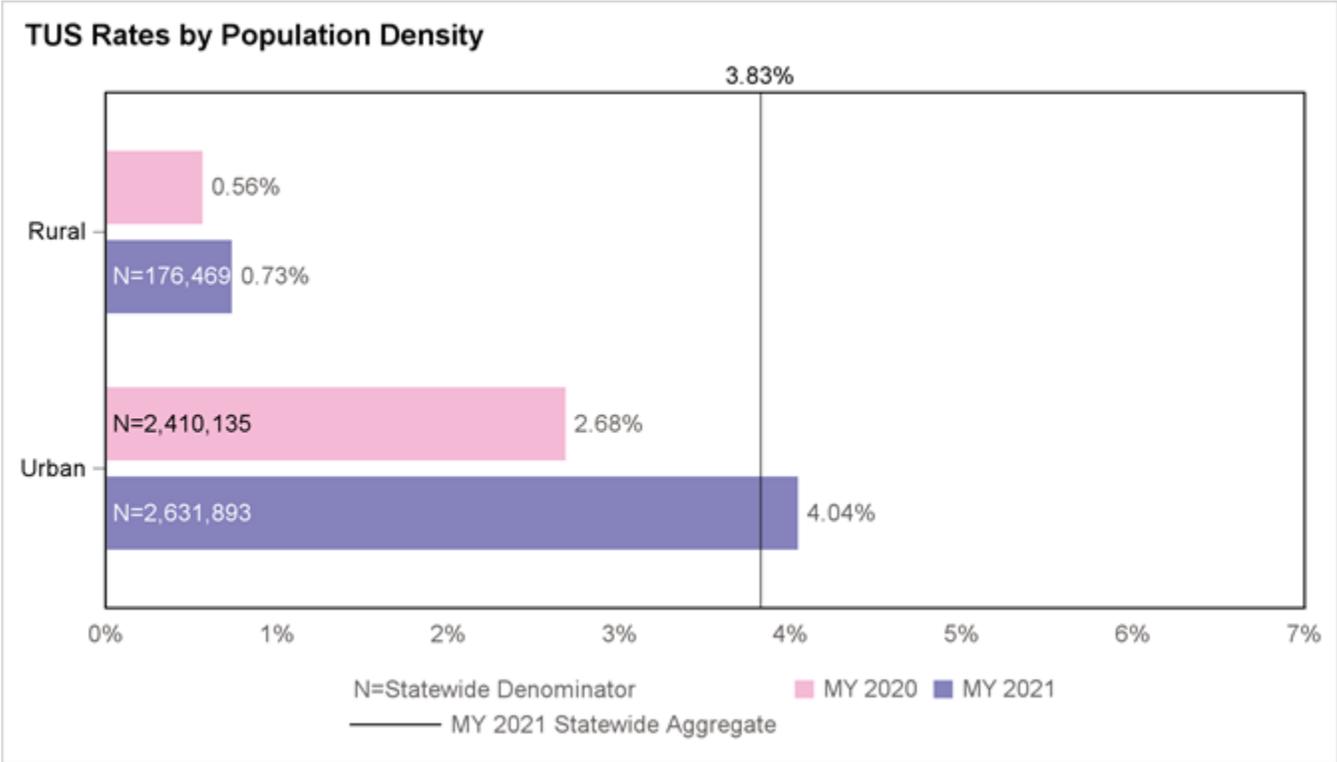


Figure A.77—Tobacco Use Screening (TUS)—Regional-Level Geographic Region Results

The measurement year 2020 denominator for the Central Coast geographic region was 155,229.

The measurement years 2020 and 2021 statewide denominators for the North/Mountain geographic region were 125,261 and 138,265, respectively.

The measurement years 2020 and 2021 statewide denominators for the San Francisco Bay/Sacramento geographic region were 413,922 and 457,253, respectively.

The measurement year 2020 denominator for the San Joaquin geographic region was 434,514.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 2.54 percent.

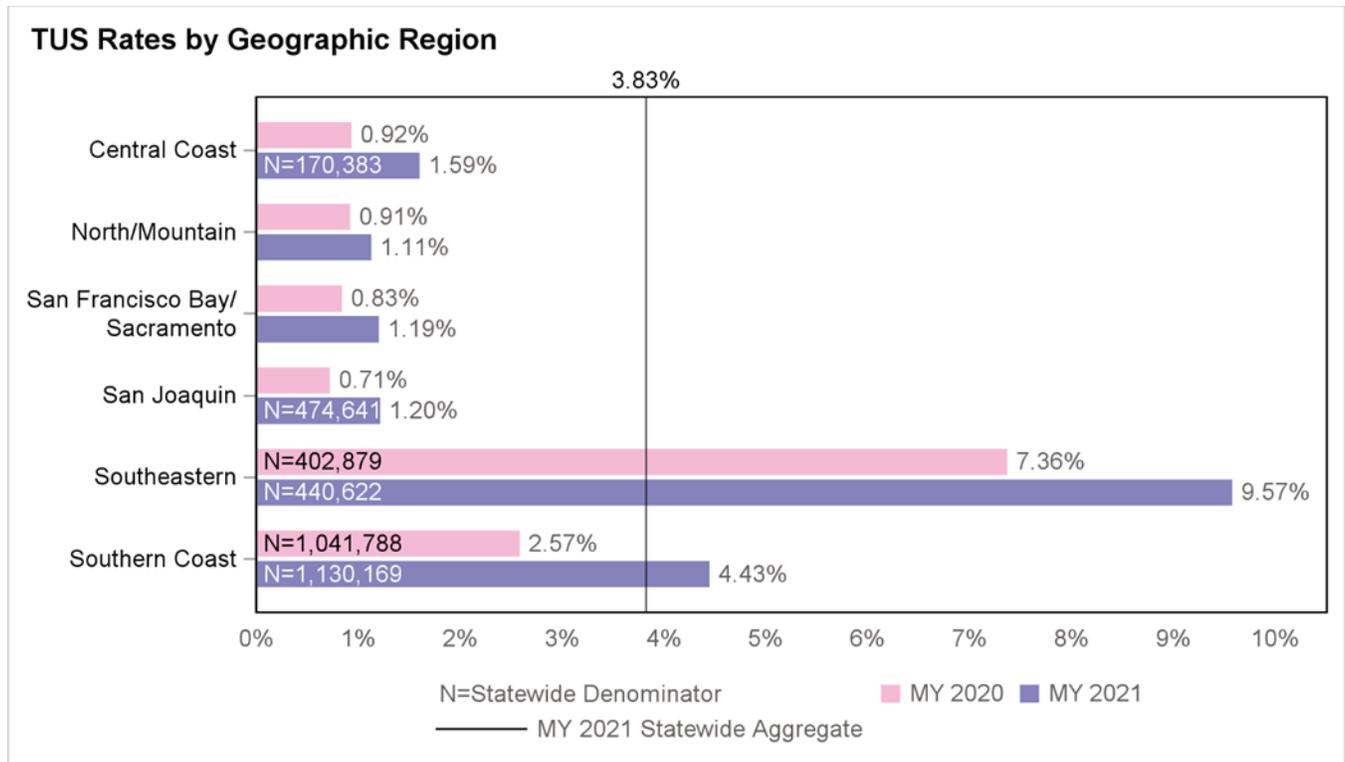
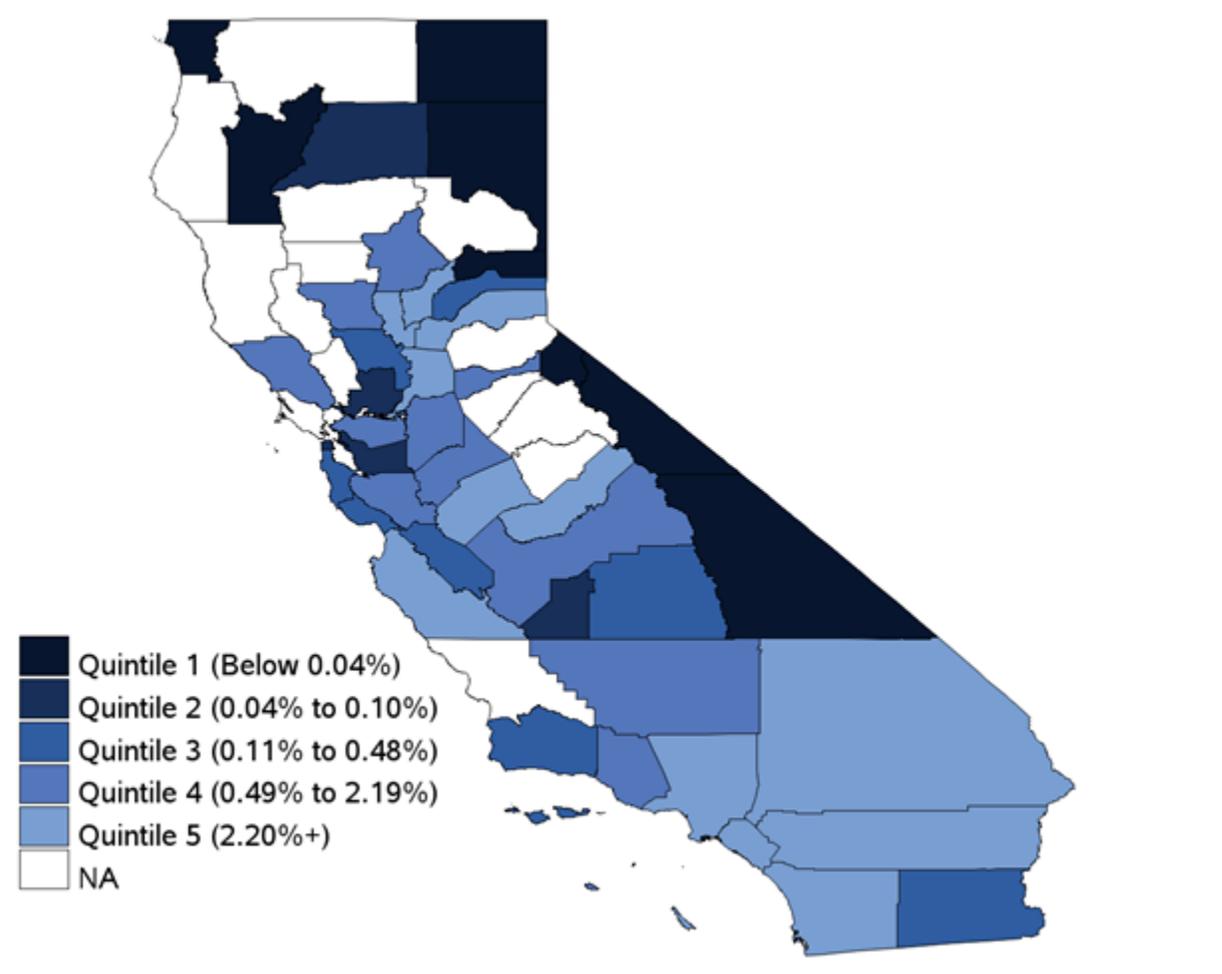


Figure A.78—Tobacco Use Screening (TUS)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



DHCS-Calculated Indicators

California Title 17 Indicators¹¹

Beginning with measurement year 2022, DHCS will require the *HEDIS Lead Screening in Children* measure as part of the MCAS; however, DHCS will continue to analyze and monitor lead screening performance in alignment with Title 17 age stratifications which include:

- ◆ *Blood Lead Screening—Test at 12 Months of Age (BLS–1)*
- ◆ *Blood Lead Screening—Test at 24 Months of Age (BLS–2)*
- ◆ *Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)*
- ◆ *Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS–316)*

Given HSAG’s findings from its 2021 Blood Lead Screening Benchmarking Analysis, performance on the *Lead Screening in Children* indicator and the Title 17 *Blood Lead Screening* indicators is highly correlated. As a result, DHCS will utilize MCP performance on the *Lead Screening in Children* indicator as a way of monitoring MCP performance on Title 17 indicators.

Figure A.79 through Figure A.106 display the measurement years 2020 and 2021 statewide and regional results for four DHCS-calculated indicators (i.e., Title 17 Blood Lead Screening indicators).

Blood Lead Screening—Test at 12 Months of Age

The *Blood Lead Screening—Test at 12 Months of Age (BLS–1)* indicator measures the percentage of children who turned 1 year old during the measurement year and had a screening within six months (before and after) their first birthday. Individuals must be continuously enrolled for 12 months (six months before and six months after first birthday) with no more than one gap in enrollment during the 12-month period wherein the gap is no longer than one month. This indicator is in alignment with Title 17 testing requirements. Figure A.79 through Figure A.85 display the *Blood Lead Screening—Test at 12 Months of Age (BLS–1)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021. Please note, national benchmarks are not available for this indicator.

¹¹ Title 17, California Code of Regulations Section 37100 (b)(2)

Figure A.79—Blood Lead Screening—Test at 12 Months of Age (BLS-1)—Statewide Racial/Ethnic Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 46.21 percent.

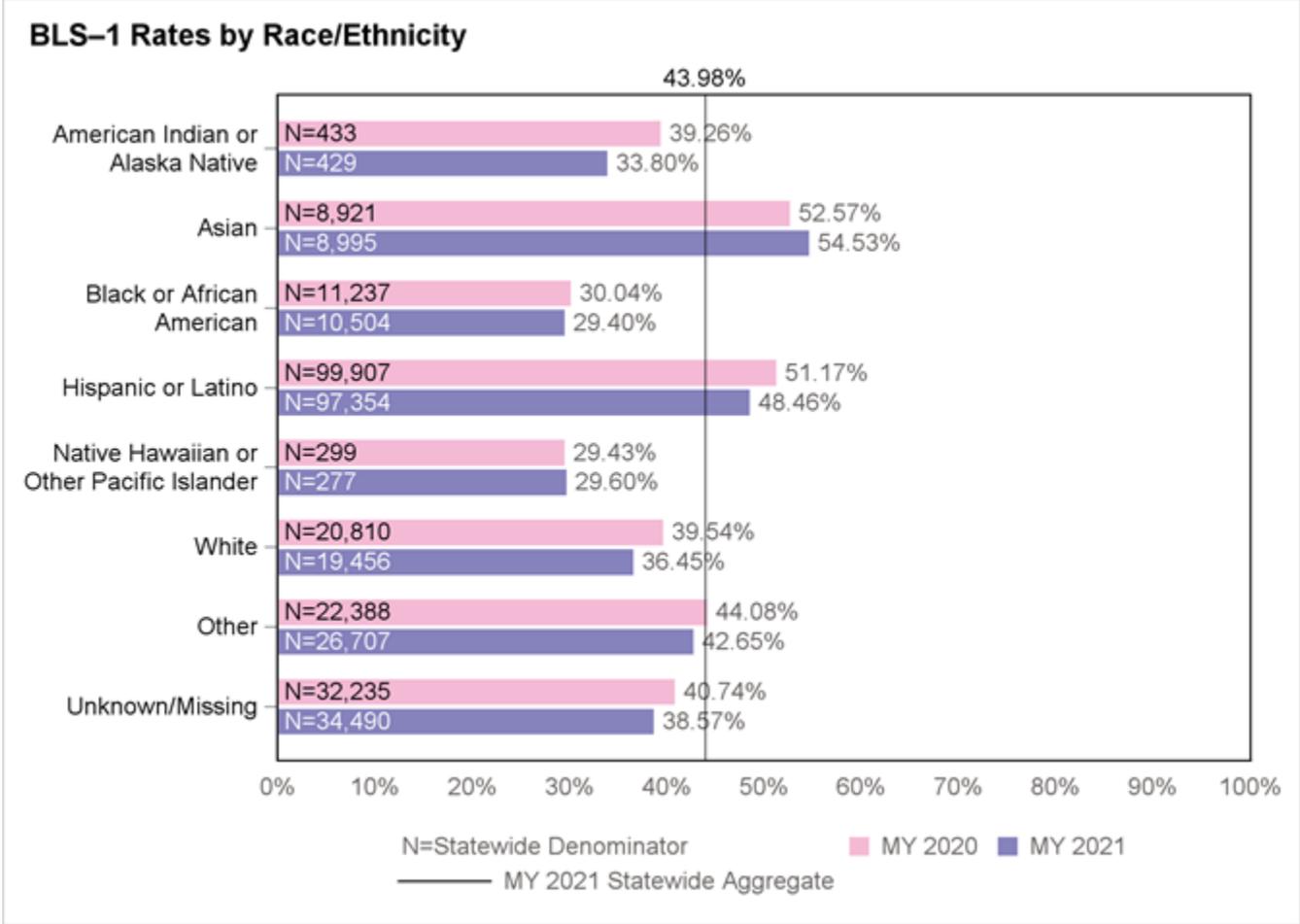


Figure A.80—Blood Lead Screening—Test at 12 Months of Age (BLS-1)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 46.21 percent.

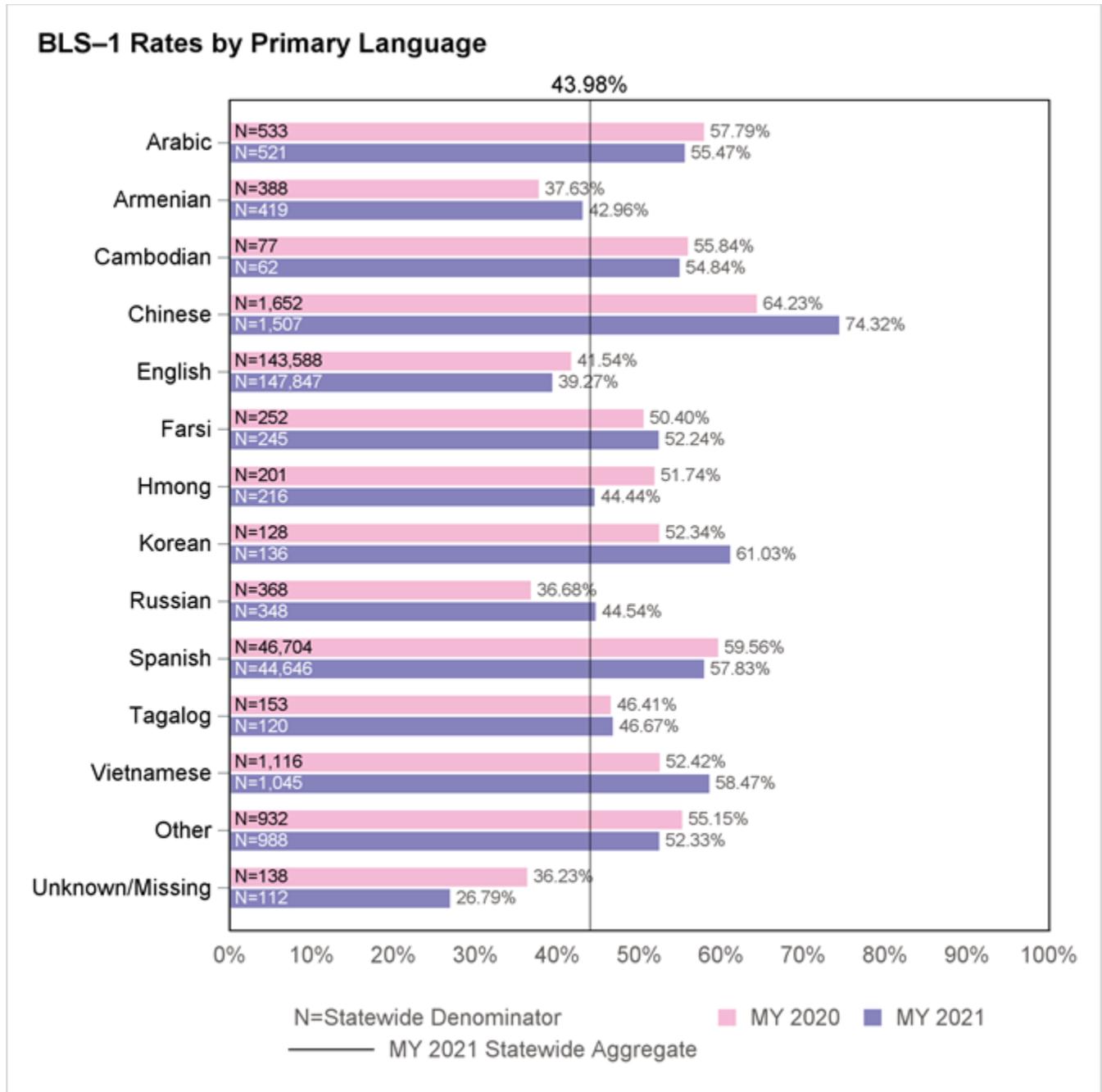


Figure A.81—Blood Lead Screening—Test at 12 Months of Age (BLS-1)—Statewide Gender Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 46.21 percent.

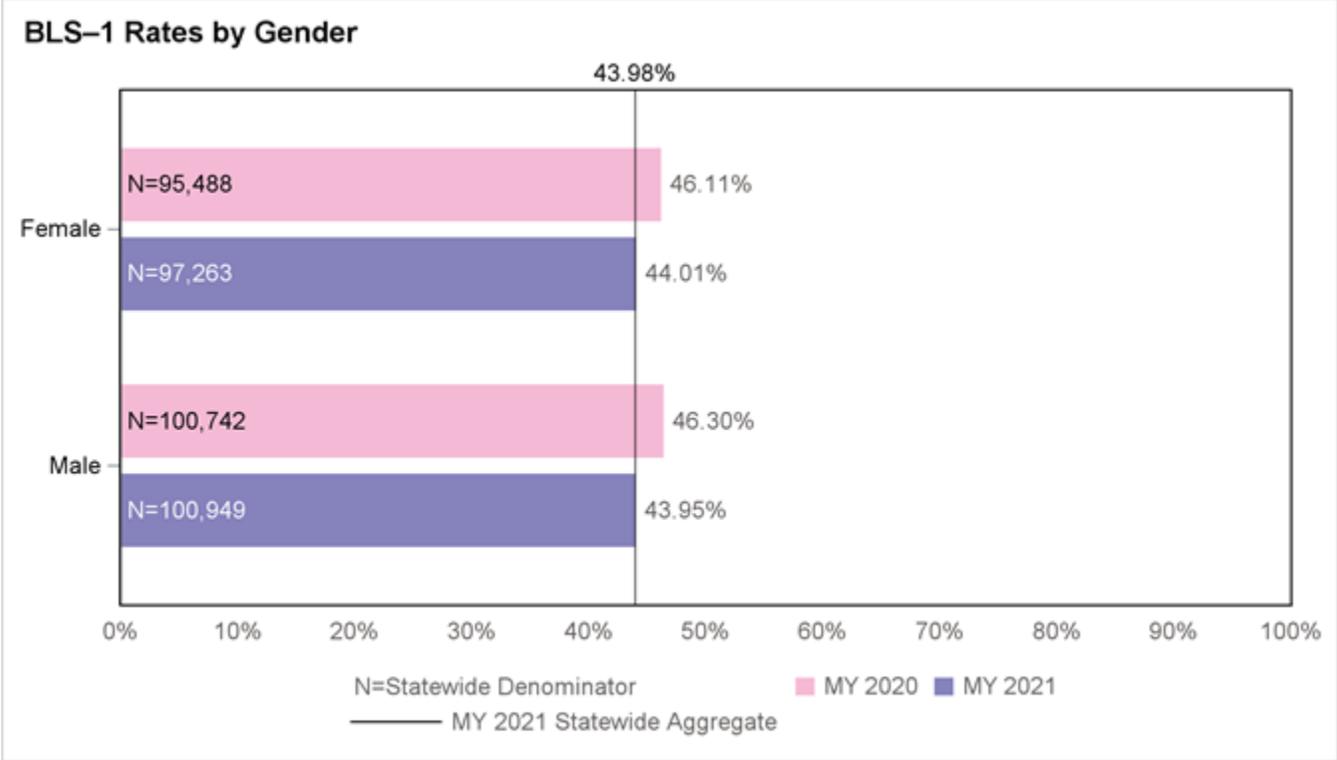
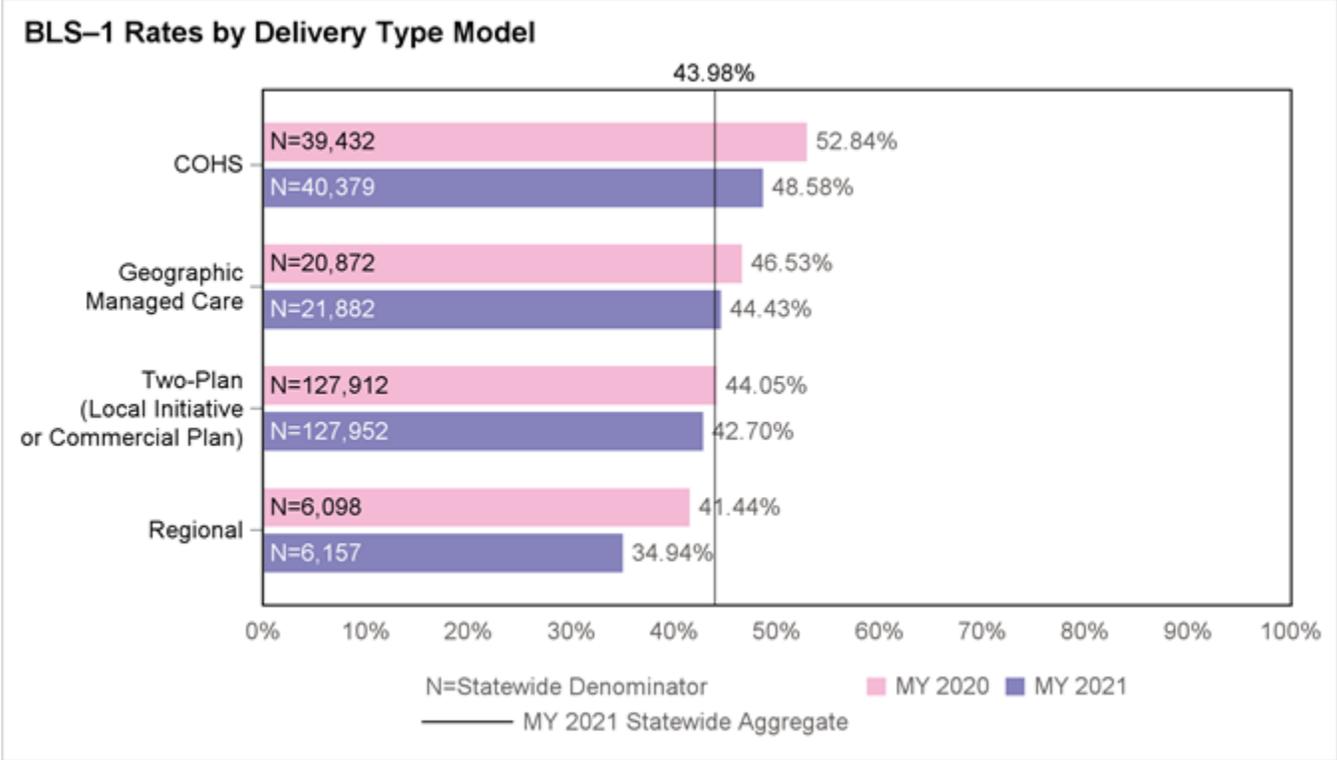


Figure A.82—Blood Lead Screening—Test at 12 Months of Age (BLS-1)—Regional-Level Delivery Type Model Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 46.21 percent.



**Figure A.83—Blood Lead Screening—Test at 12 Months of Age (BLS-1)—
Regional-Level Population Density Results**

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 46.21 percent.

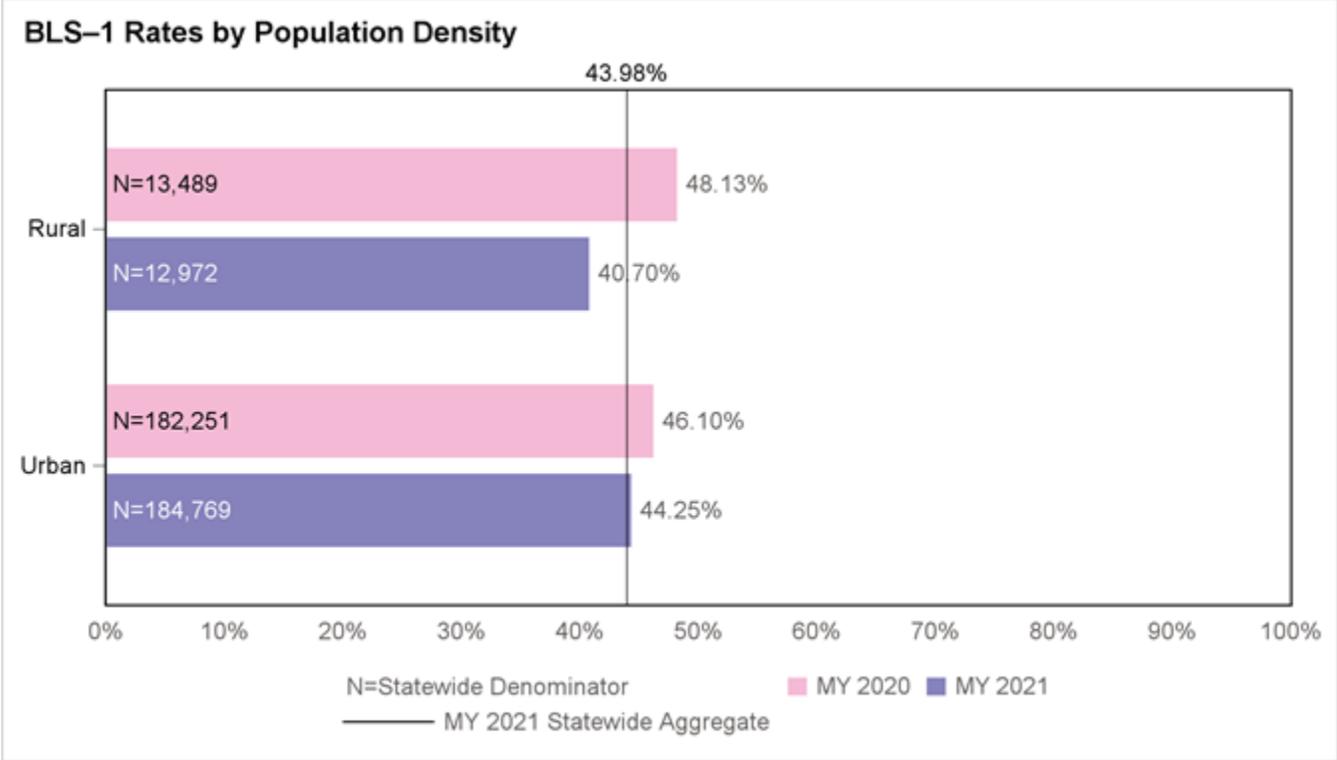


Figure A.84—Blood Lead Screening—Test at 12 Months of Age (BLS-1)—Regional-Level Geographic Region Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 46.21 percent.

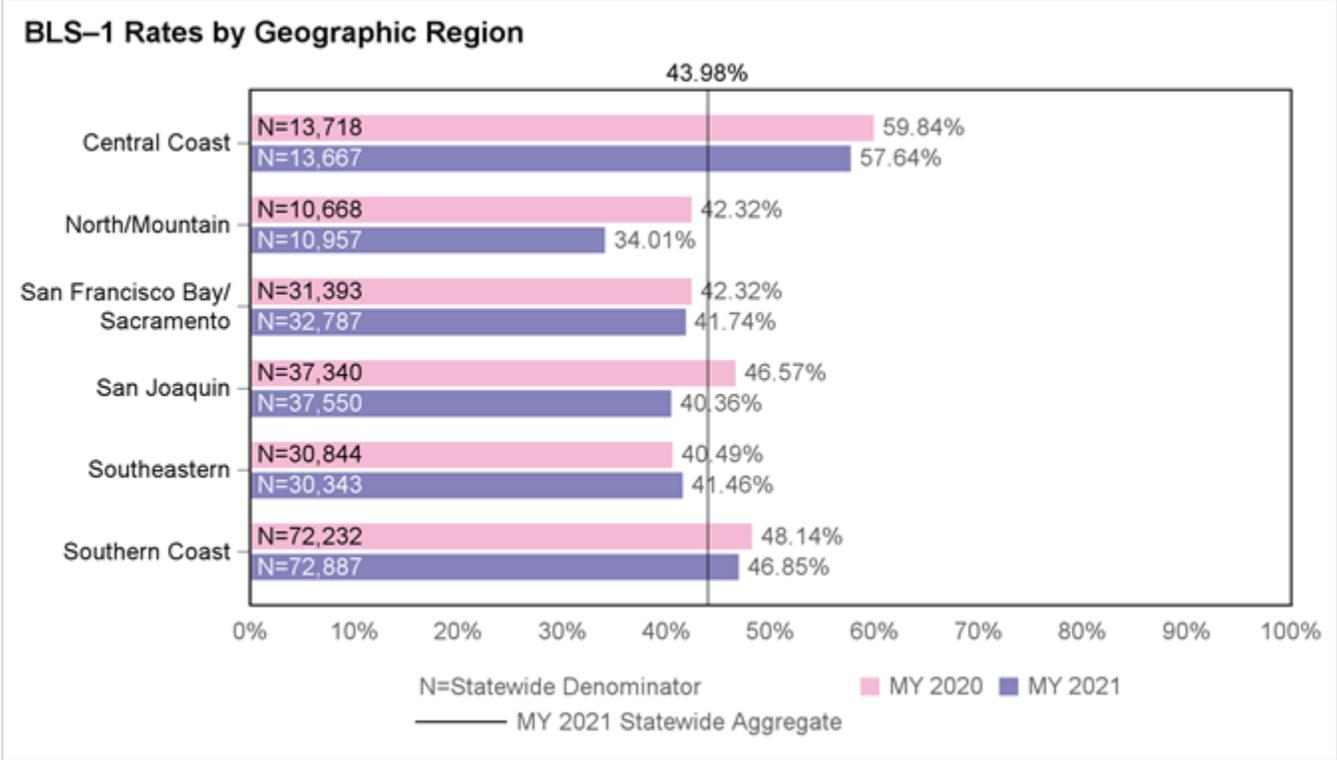
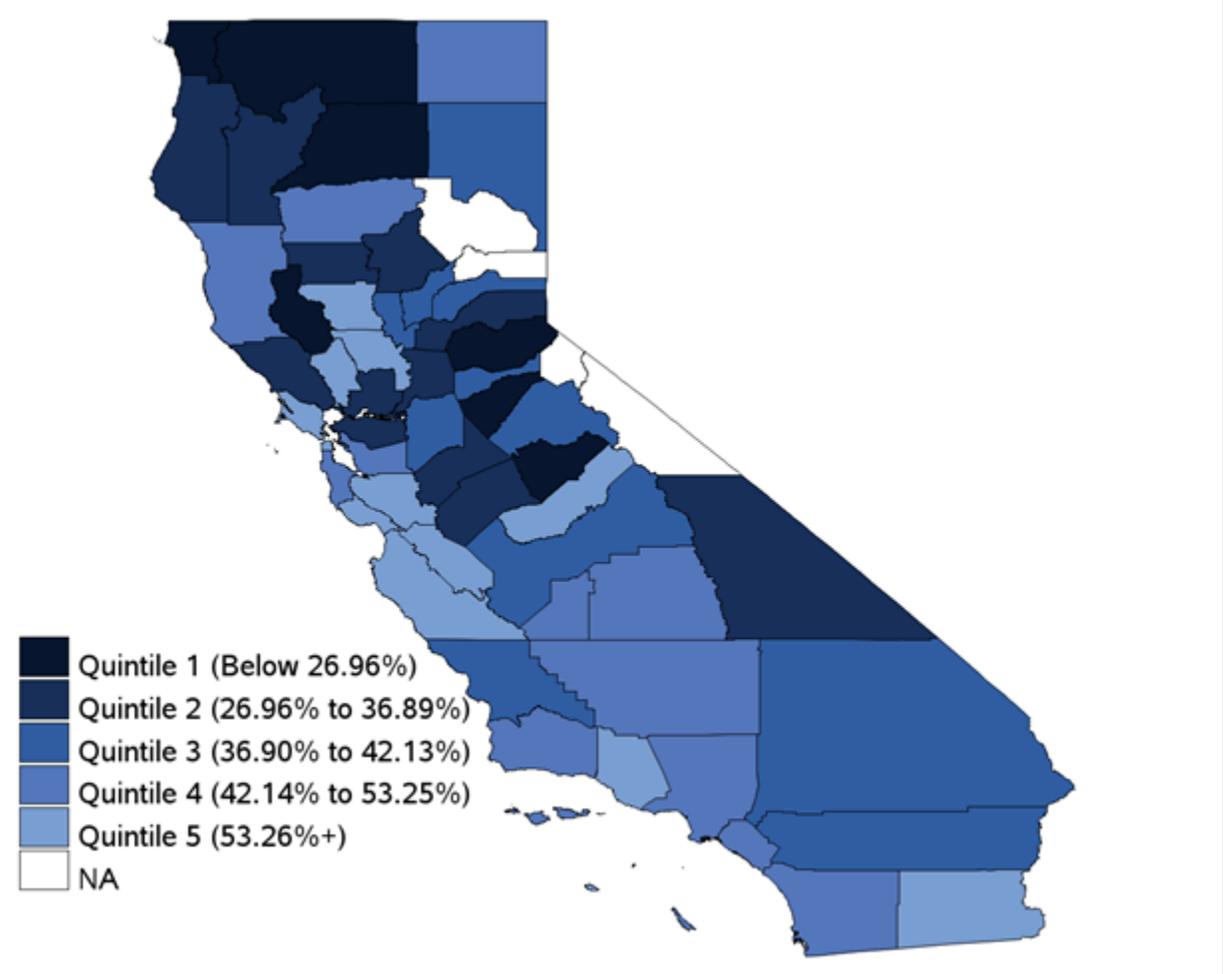


Figure A.85—Blood Lead Screening—Test at 12 Months of Age (BLS-1)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Blood Lead Screening—Test at 24 Months of Age

The *Blood Lead Screening—Test at 24 Months of Age (BLS–2)* indicator measures the percentage of children who turned 2 years old during the measurement year and had a screening within six months (before and after) their second birthday. Individuals must be continuously enrolled for 12 months (six months before and six months after the second birthday) with no more than one gap in enrollment during the 12-month period wherein the gap is no longer than one month. This indicator is in alignment with Title 17 testing requirements. Figure A.86 through Figure A.92 display the *Blood Lead Screening—Test at 24 Months of Age (BLS–2)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021. Please note, national benchmarks are not available for this indicator.

Figure A.86—Blood Lead Screening—Test at 24 Months of Age (BLS–2)—Statewide Racial/Ethnic Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.50 percent.

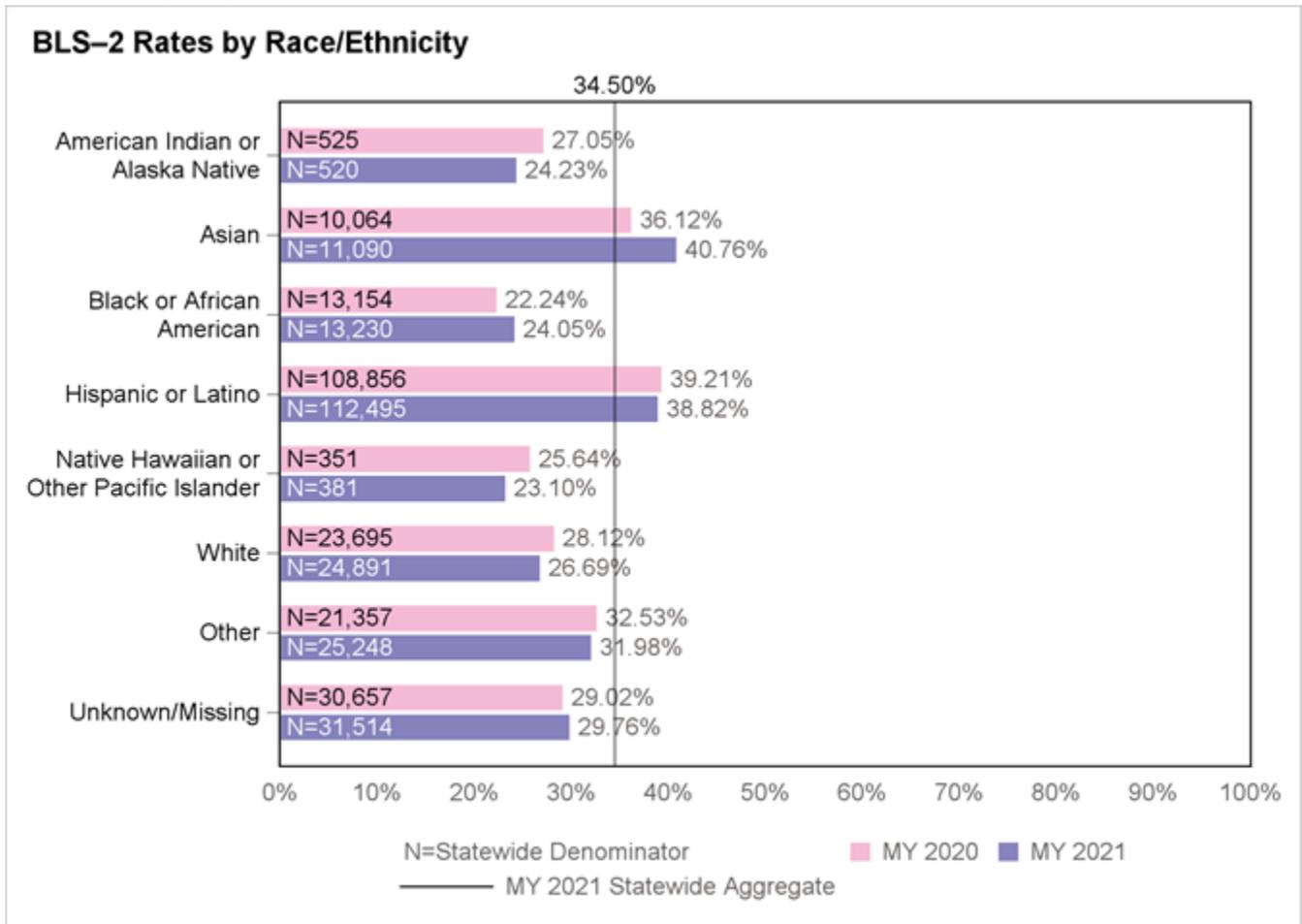


Figure A.87—Blood Lead Screening—Test at 24 Months of Age (BLS–2)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.50 percent.

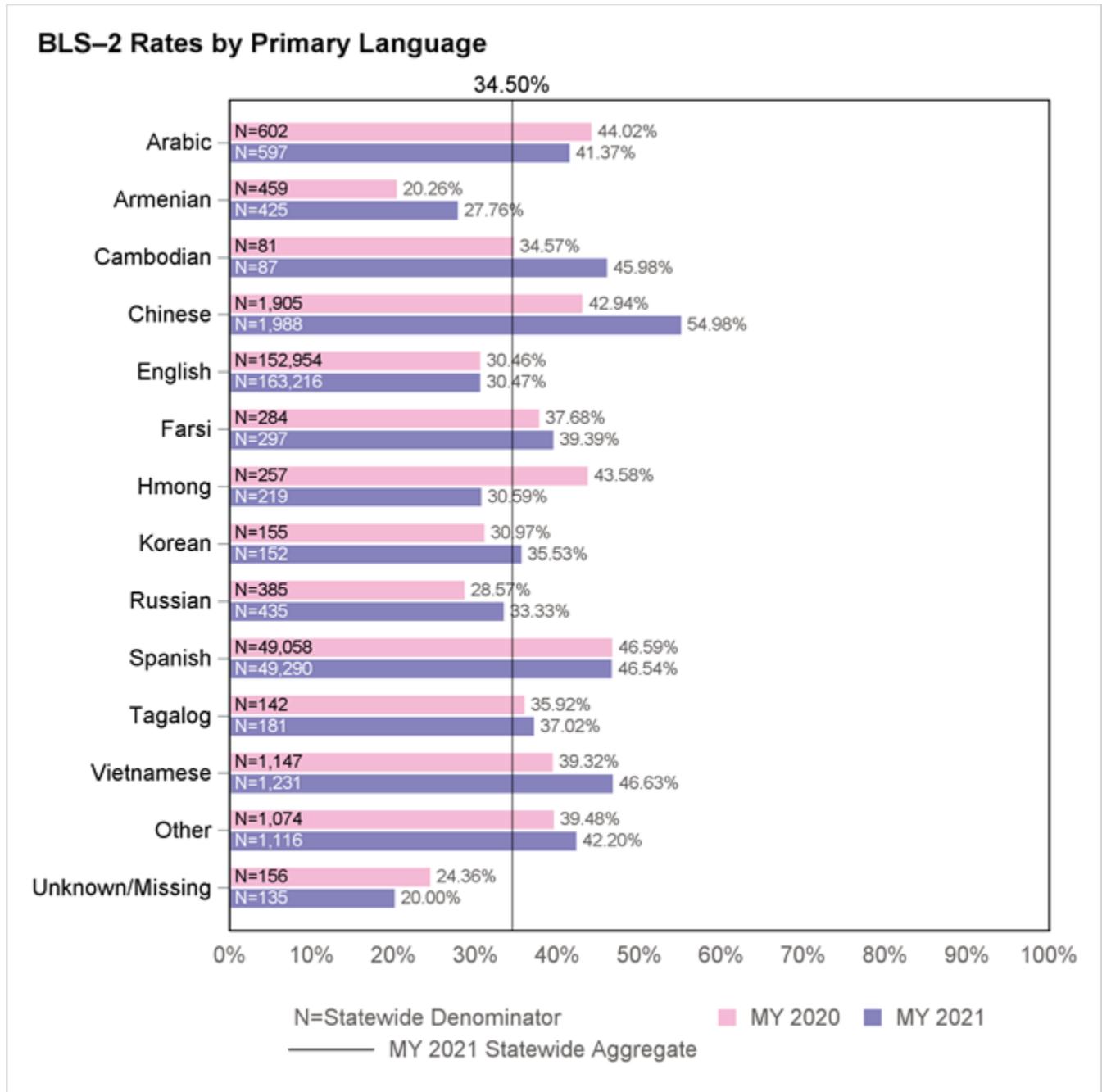


Figure A.88—Blood Lead Screening—Test at 24 Months of Age (BLS–2)—Statewide Gender Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.50 percent.

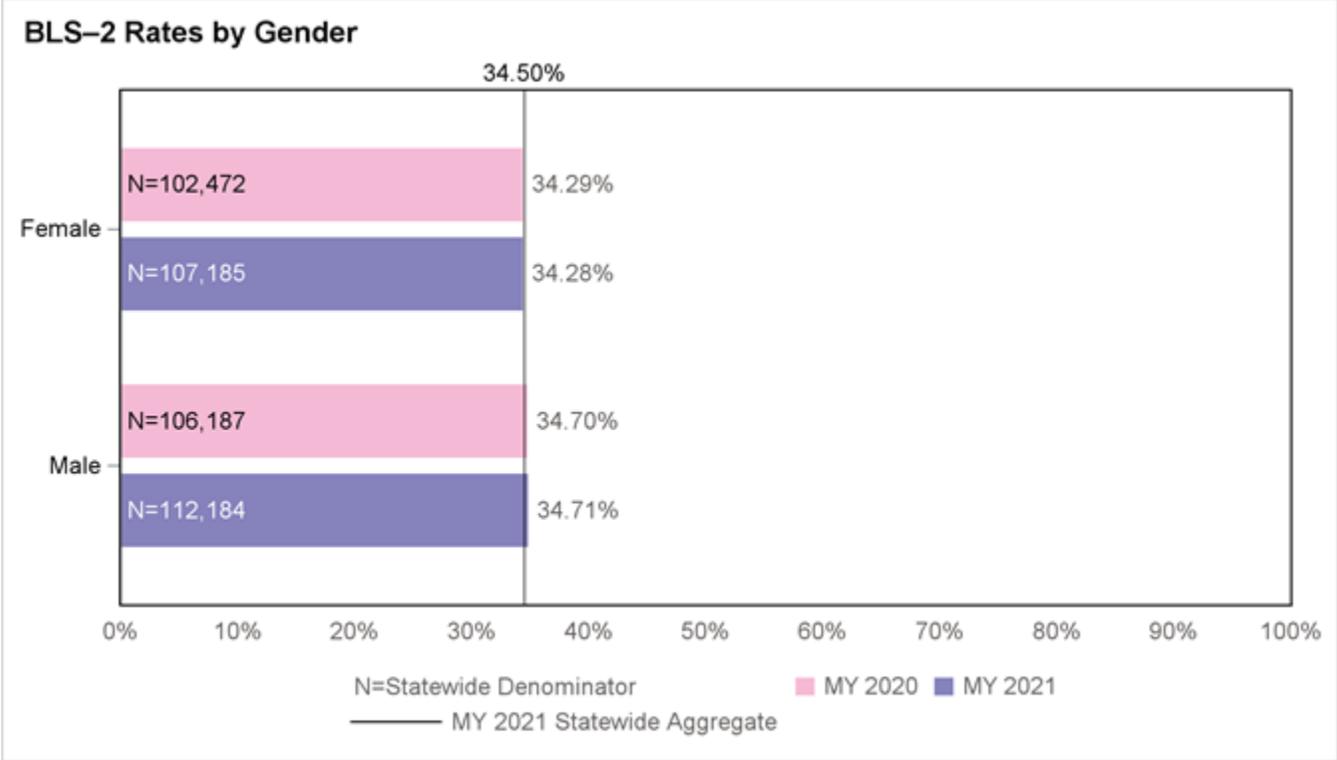


Figure A.89—Blood Lead Screening—Test at 24 Months of Age (BLS–2)—Regional-Level Delivery Type Model Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.50 percent.

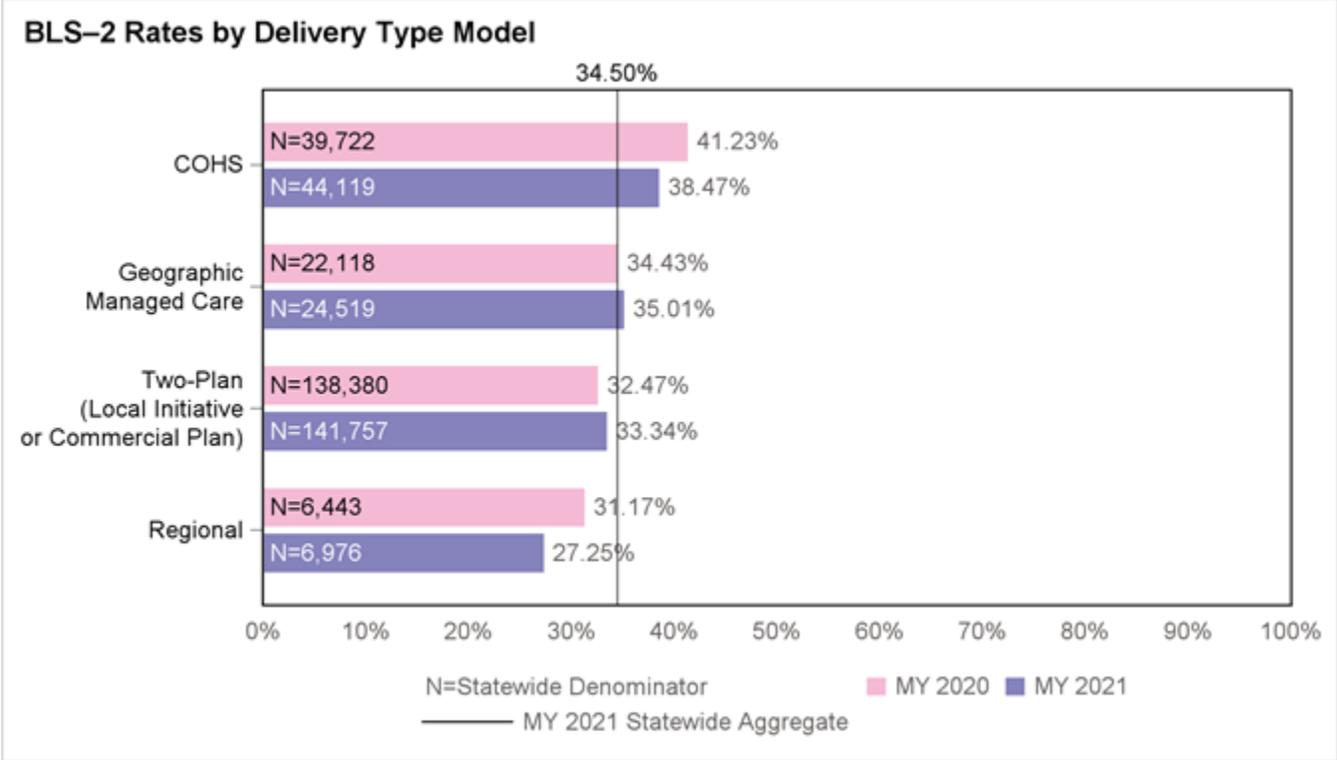


Figure A.90—Blood Lead Screening—Test at 24 Months of Age (BLS-2)—Regional-Level Population Density Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.50 percent.

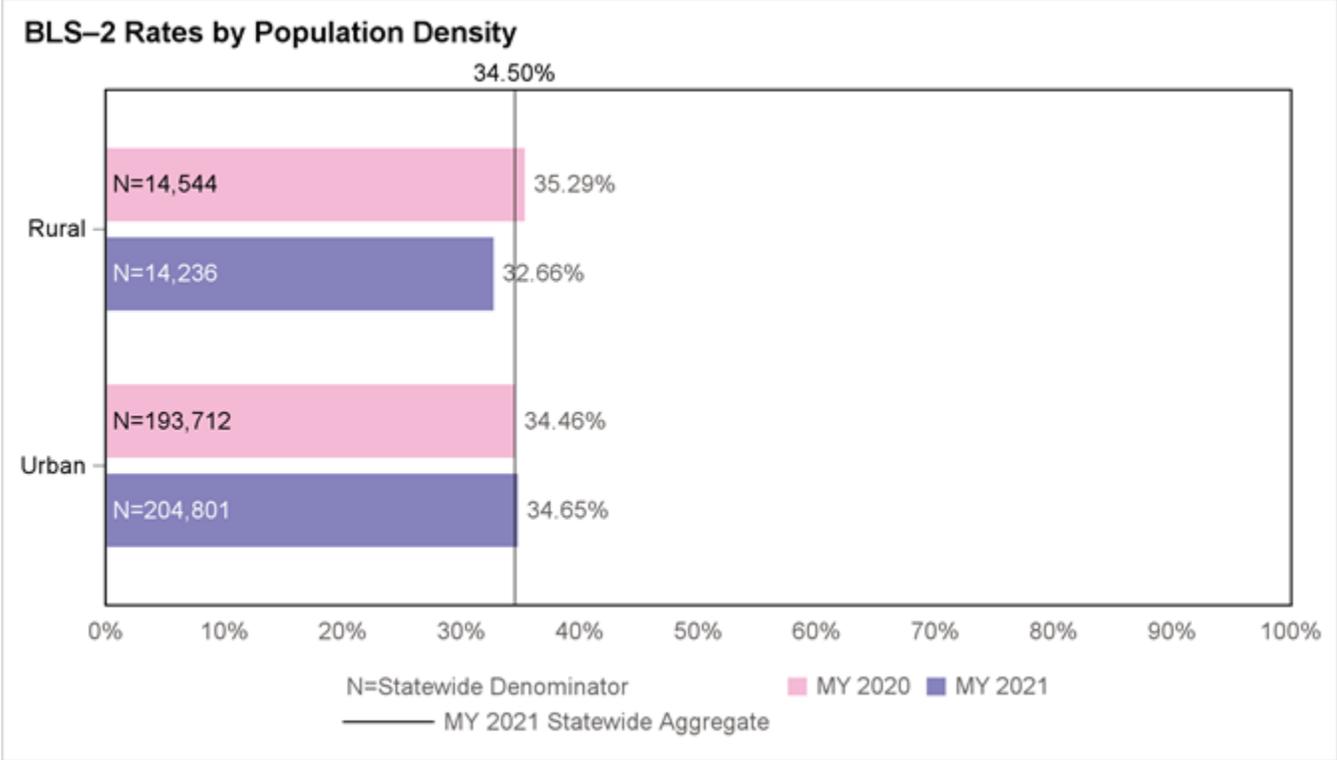


Figure A.91—Blood Lead Screening—Test at 24 Months of Age (BLS-2)—Regional-Level Geographic Region Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.50 percent.

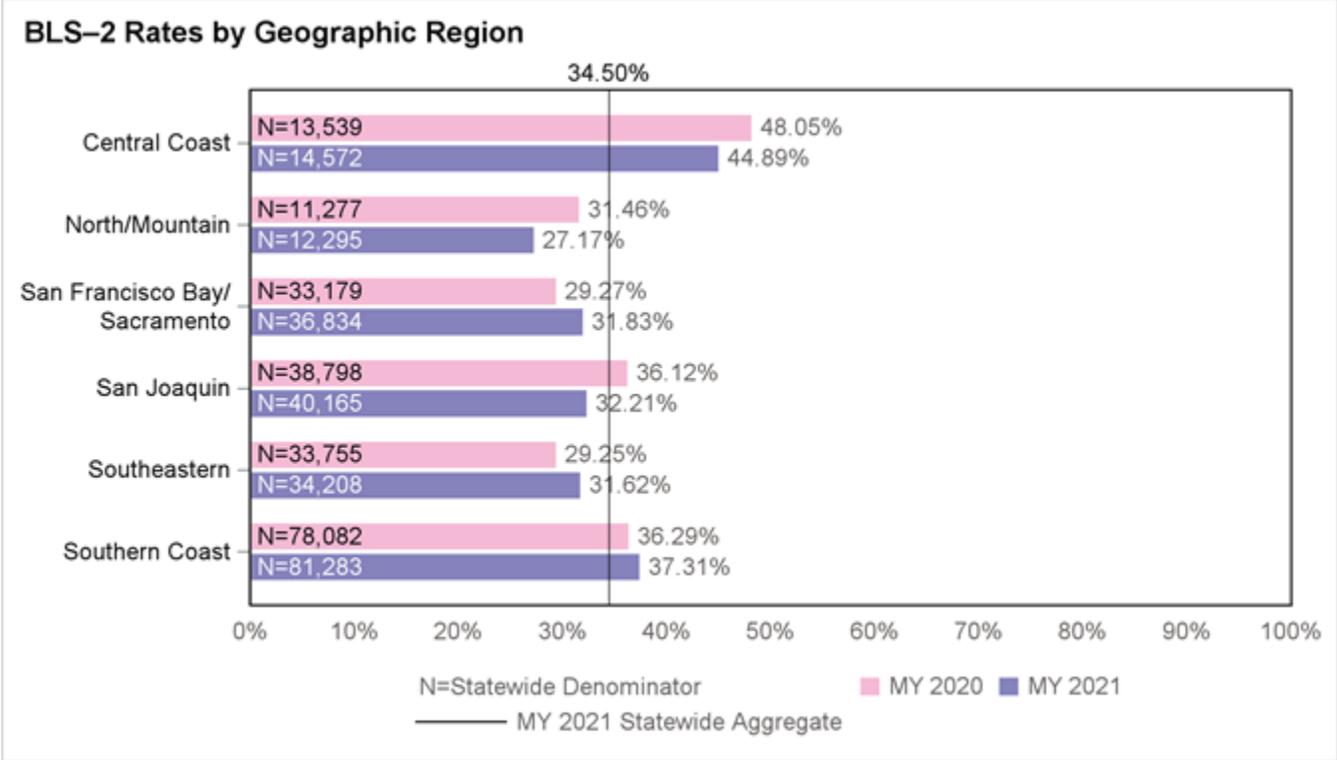
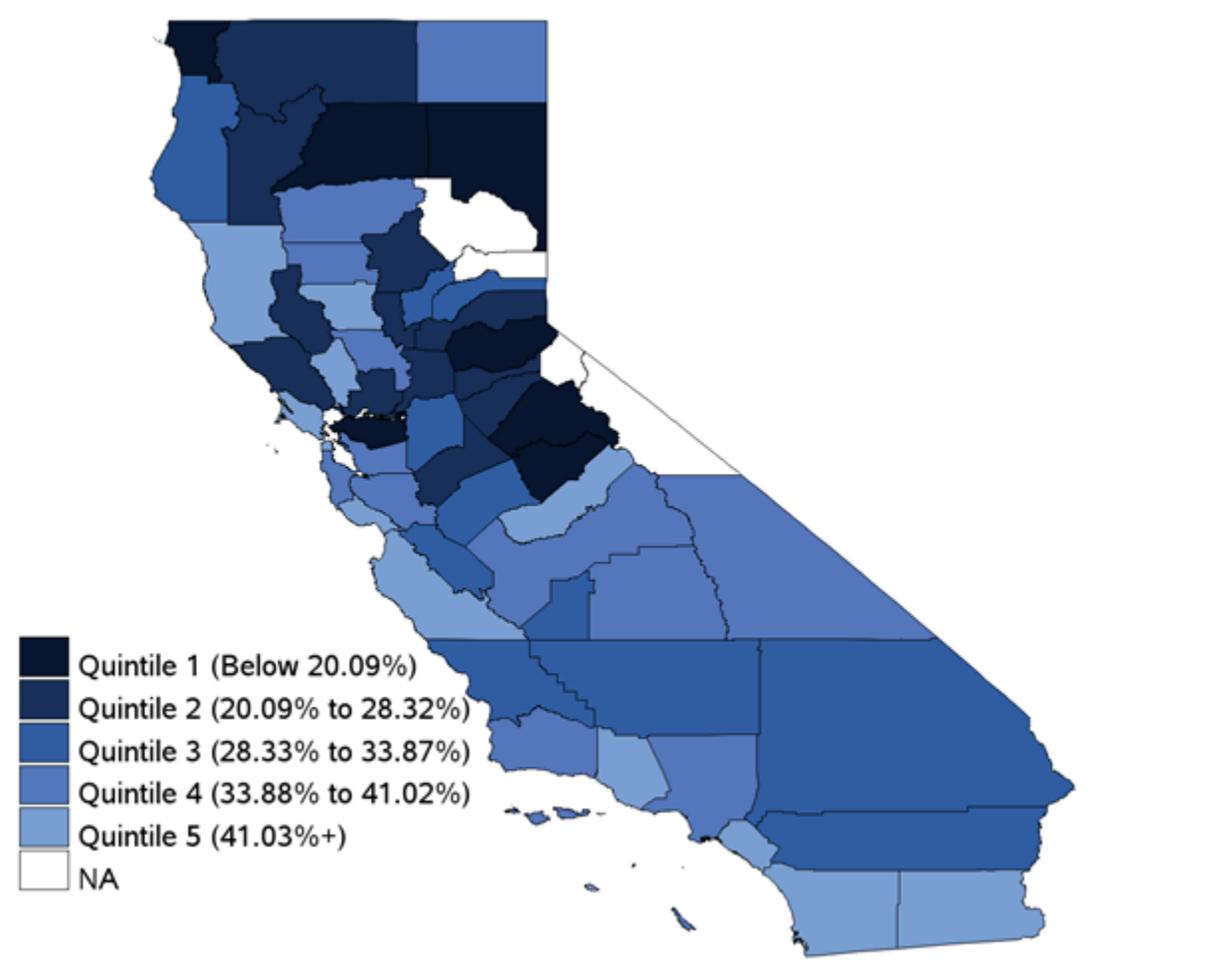


Figure A.92—Blood Lead Screening—Test at 24 Months of Age (BLS-2)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Blood Lead Screening—Two Tests by 24 Months of Age

The *Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)* indicator measures the percentage of children who turned 2 years old during the measurement year, had a screening within six months (before and after) their second birthday, and also had a screening within six months (before and after) their first birthday. Individuals must be continuously enrolled for 24 months (18 months before and six months after the second birthday) with no more than one gap in enrollment during the 24-month period wherein the gap is no longer than one month. This indicator is in alignment with Title 17 testing requirements. Figure A.93 through Figure A.99 display the *Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021. Please note, national benchmarks are not available for this indicator.

Figure A.93—Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)—Statewide Racial/Ethnic Results

The measurement years 2020 and 2021 denominators for the Black or African American racial/ethnic group were 11,387 and 11,575, respectively.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 24.15 percent.

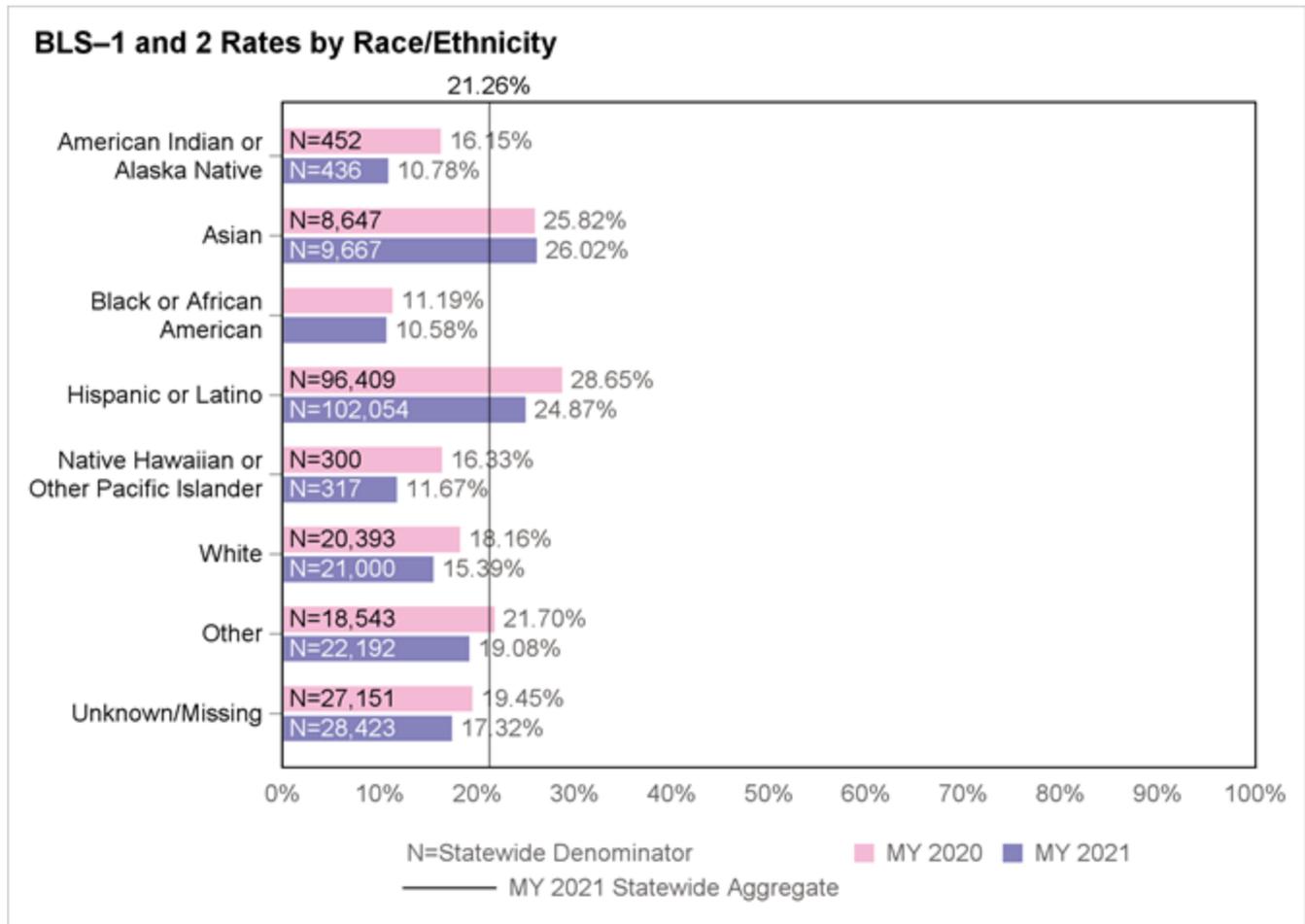


Figure A.94—Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard. The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 24.15 percent.

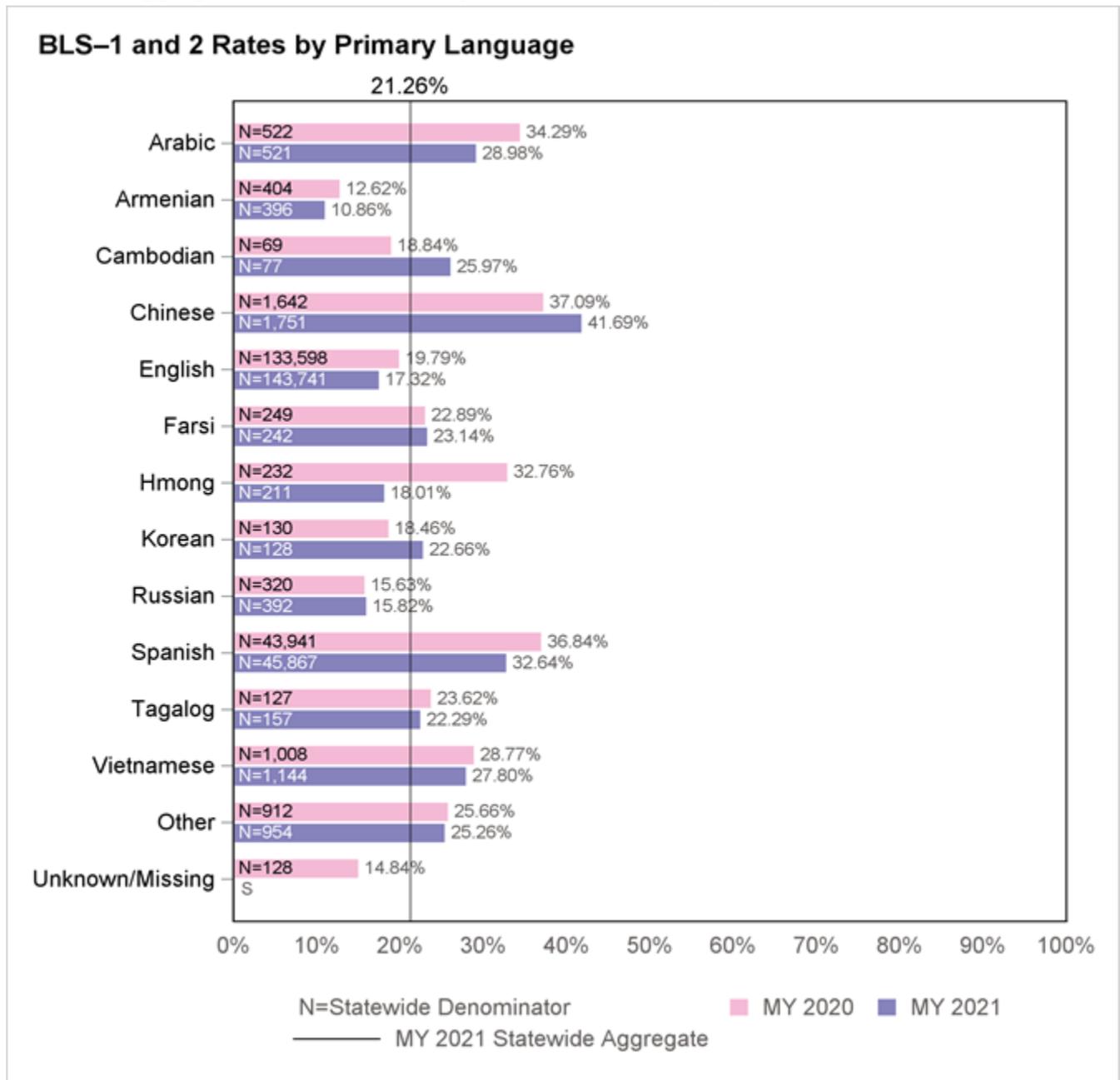


Figure A.95—Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)—Statewide Gender Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 24.15 percent.

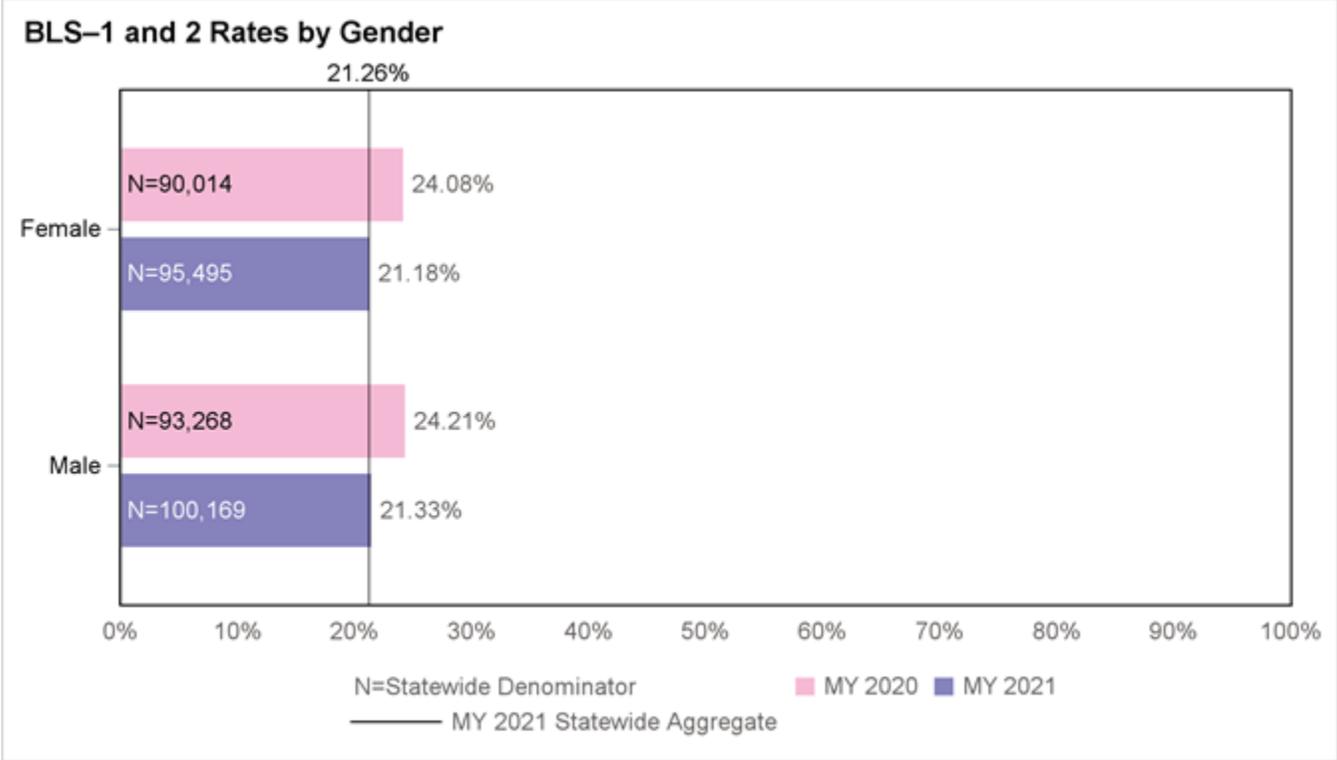


Figure A.96—Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)—Regional-Level Delivery Type Model Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 24.15 percent.

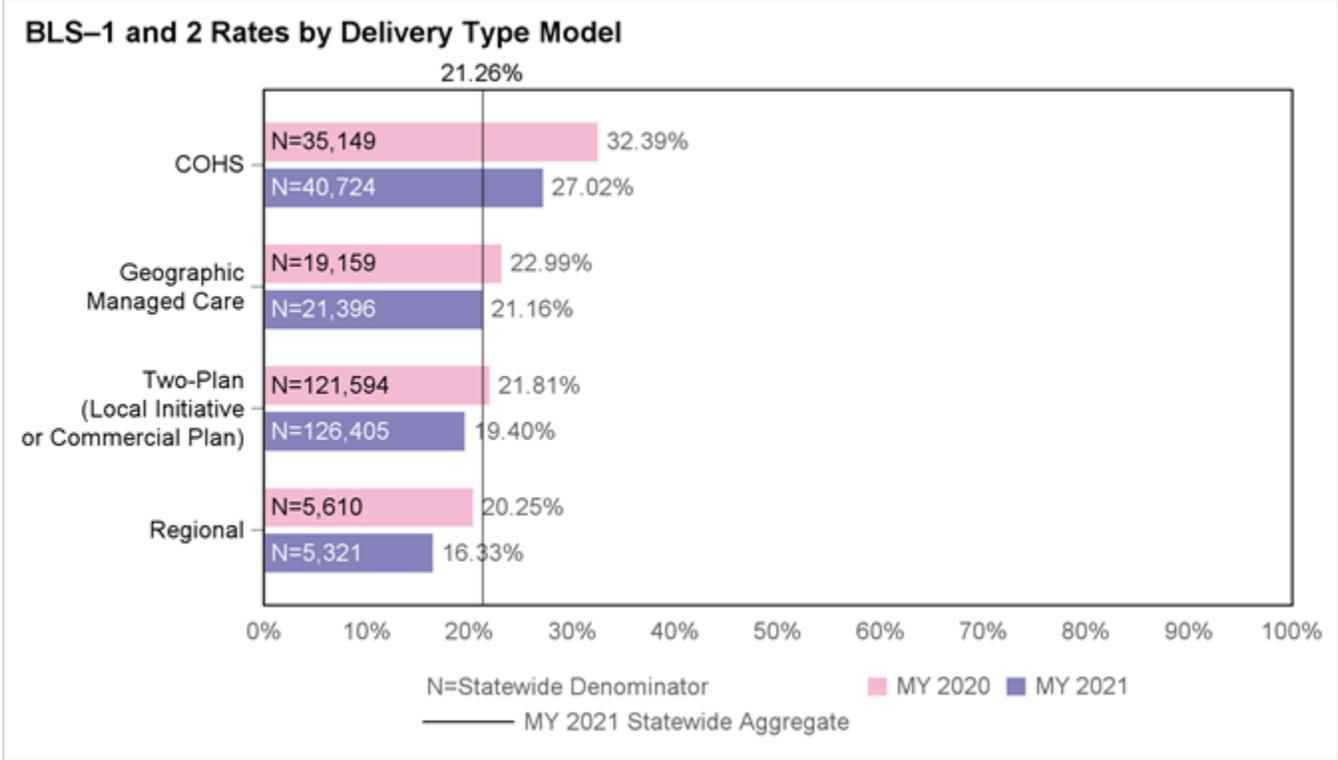


Figure A.97—Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)—Regional-Level Population Density Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 24.15 percent.

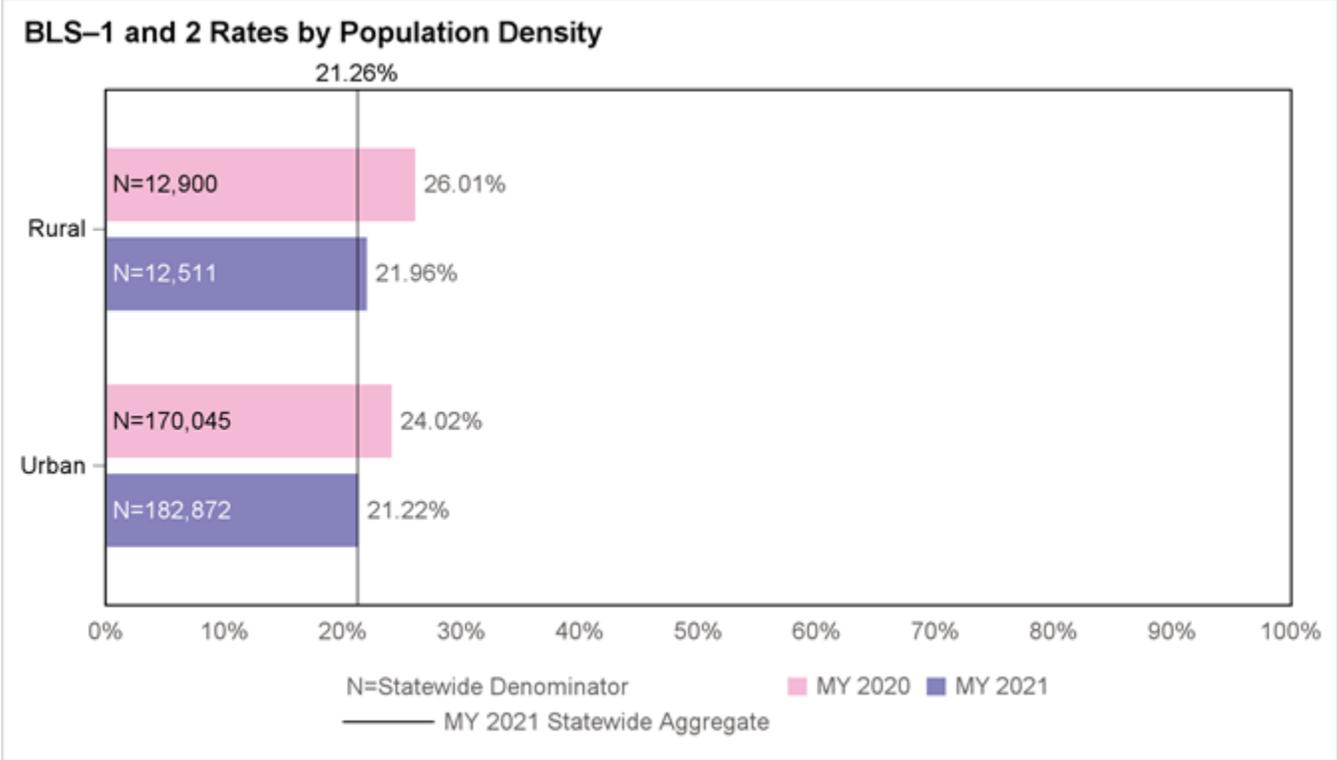


Figure A.98—Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)—Regional-Level Geographic Region Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 24.15 percent.

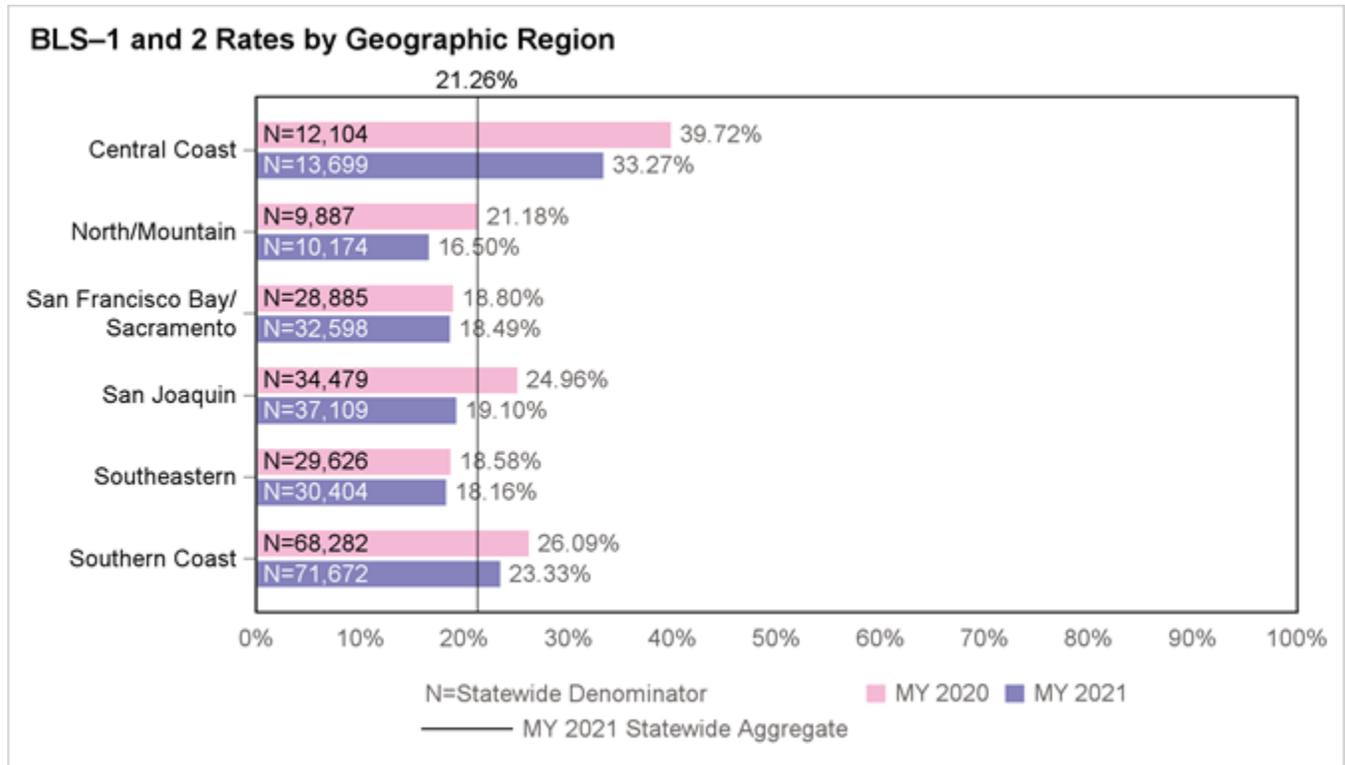
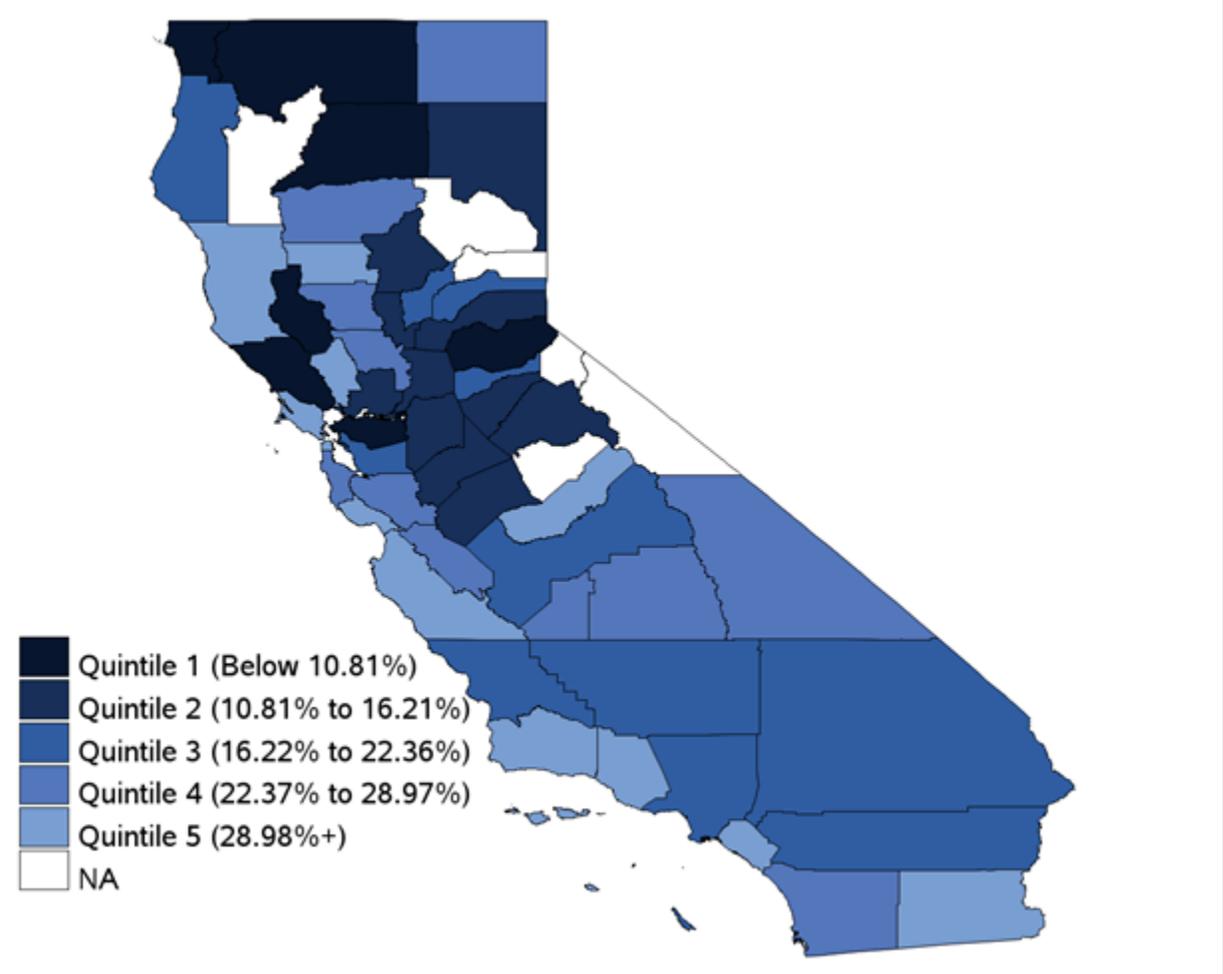


Figure A.99—Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Blood Lead Screening—Catch-Up Test by 6 Years of Age

The *Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS-316)* indicator measures the percentage of children who turned 6 years old during the measurement year who were not screened at 1 or 2 years of age, to determine if they were screened between 31 months old and their sixth birthday. Individuals must be continuously enrolled for 12 months prior to their sixth birthday with no more than one gap in enrollment during the 12-month period wherein the gap is no longer than one month. Individuals who had at least one blood lead test prior to 31 months of age were excluded. (Note: For this measure, DHCS assessed claims for CPT codes 83655 [blood lead test] and Z0334 [counseling and blood draw]; Z0334 was retired May 1, 2018). This indicator is in alignment with Title 17 testing requirements. Figure A.100 through Figure A.106 display the *Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS-316)* indicator rates at the statewide and regional levels for both measurement years 2020 and 2021. Please note, national benchmarks are not available for this indicator.

Figure A.100—Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS-316)—Statewide Racial/Ethnic Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.99 percent.

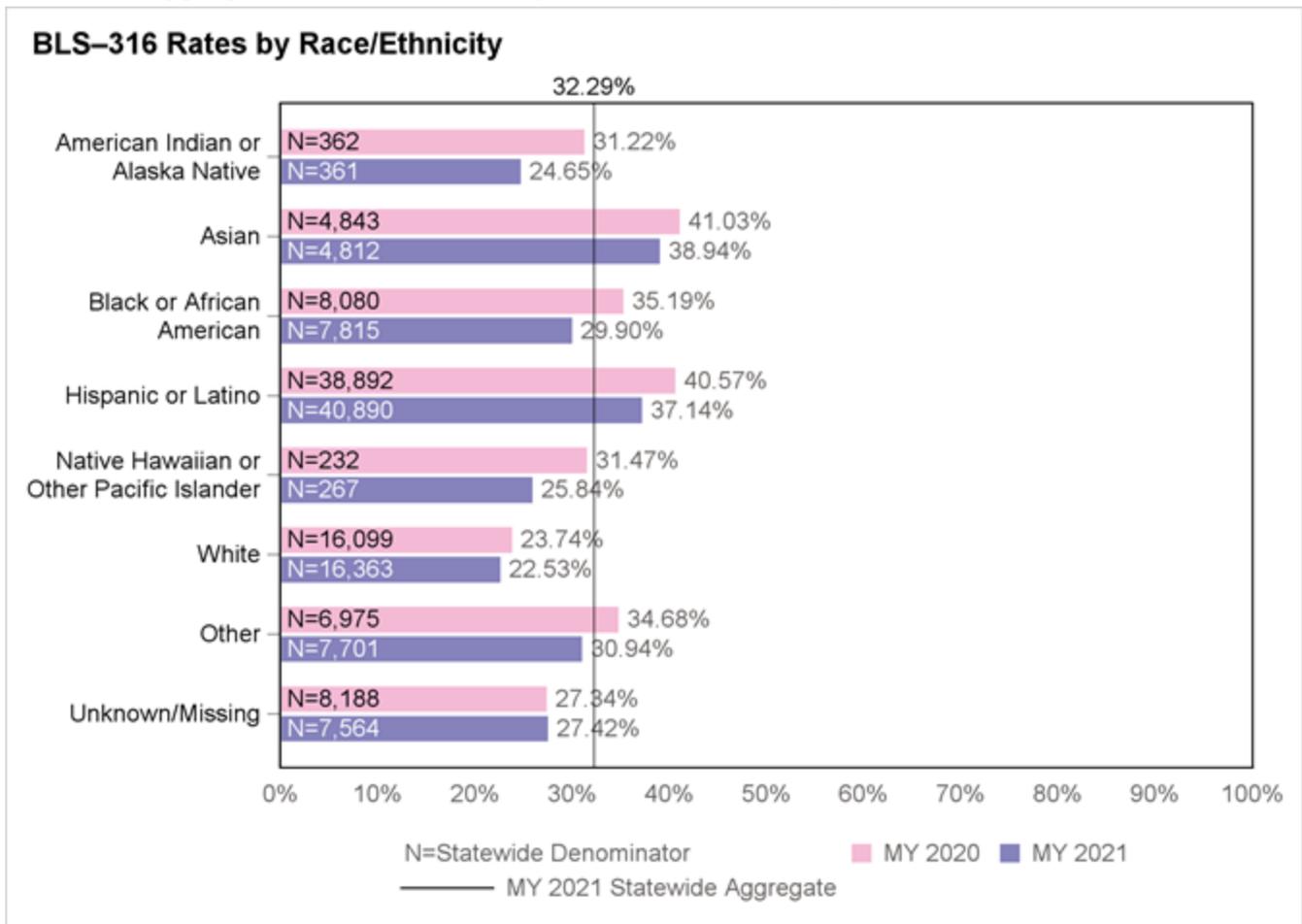


Figure A.101—Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS–316)—Statewide Primary Language Results

Note: Primary language stratifications were derived from the current threshold languages for MCMC counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.99 percent.

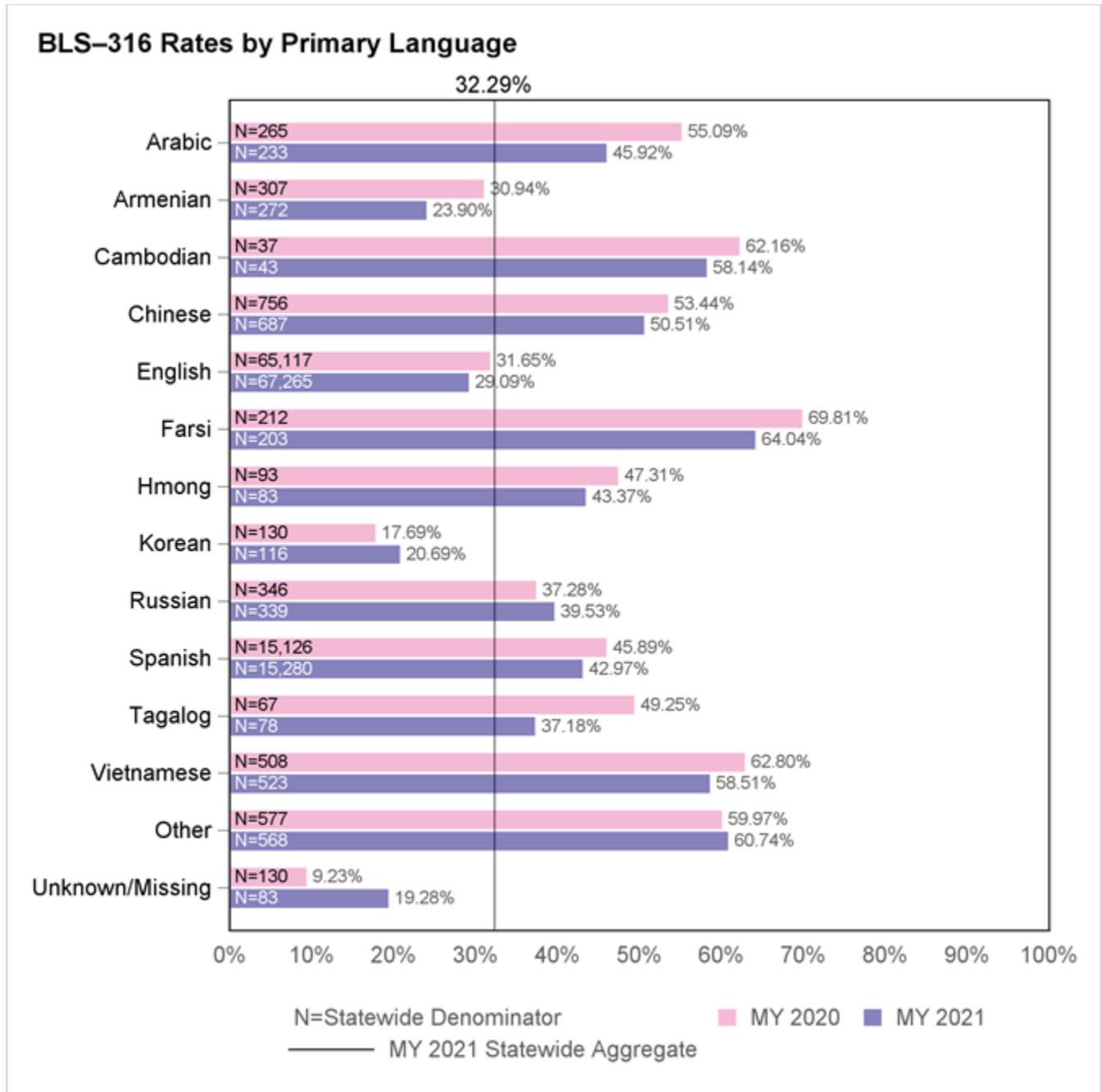


Figure A.102—Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS-316)—Statewide Gender Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.99 percent.

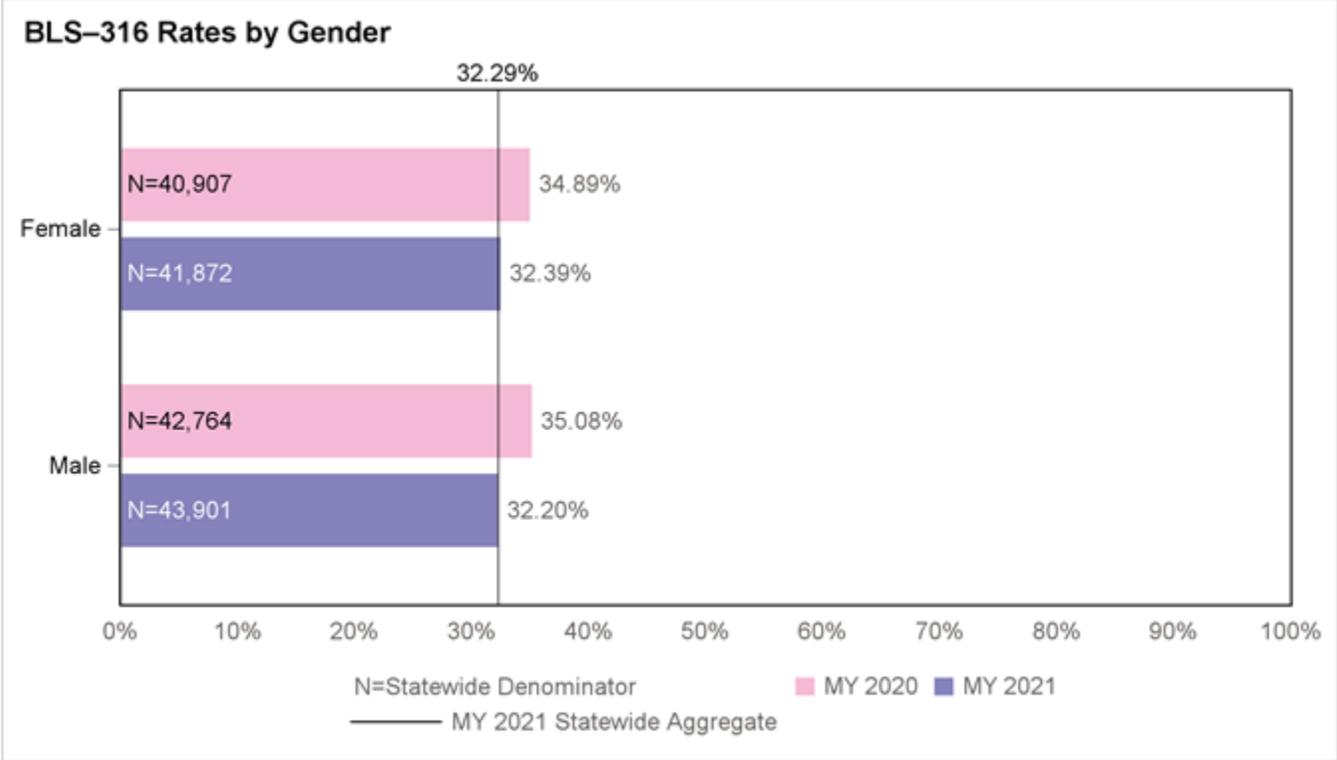


Figure A.103—Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS–316)—Regional-Level Delivery Type Model Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.99 percent.

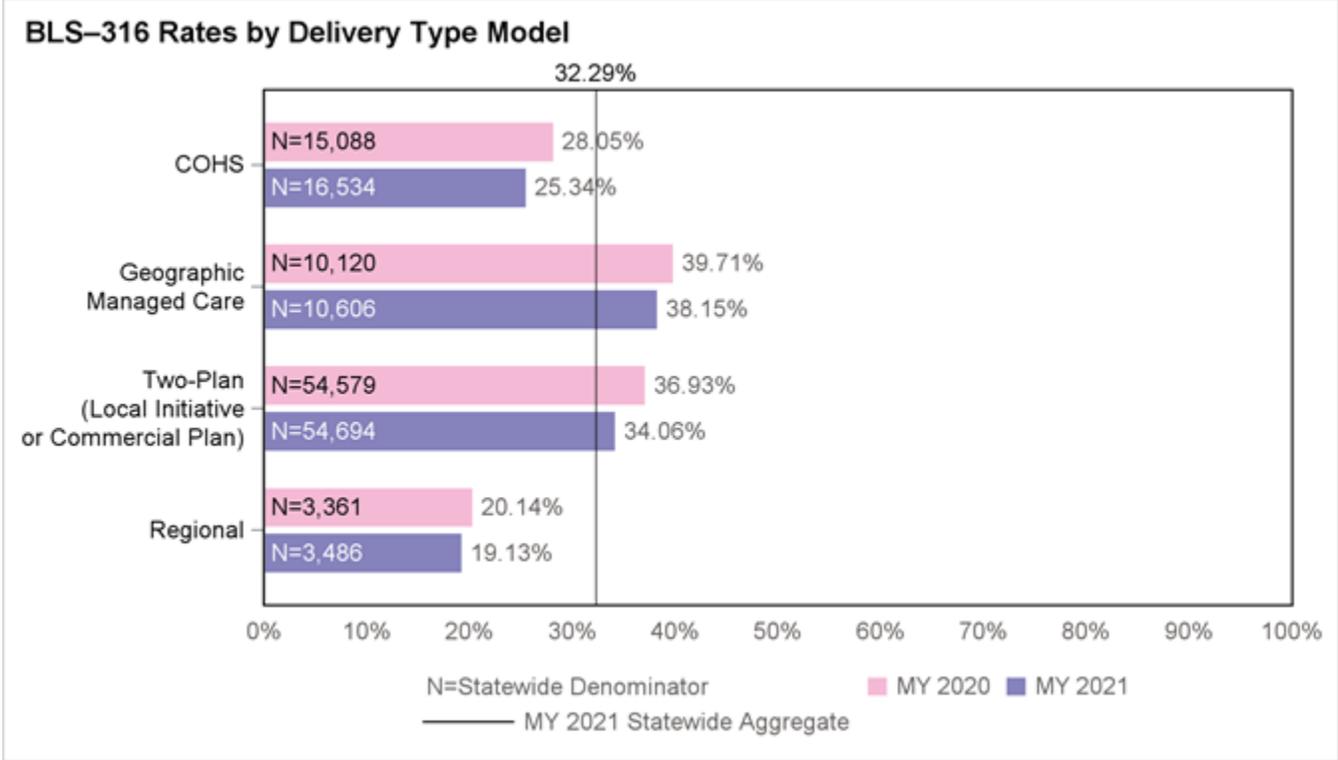


Figure A.104—Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS-316)—Regional-Level Population Density Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.99 percent.

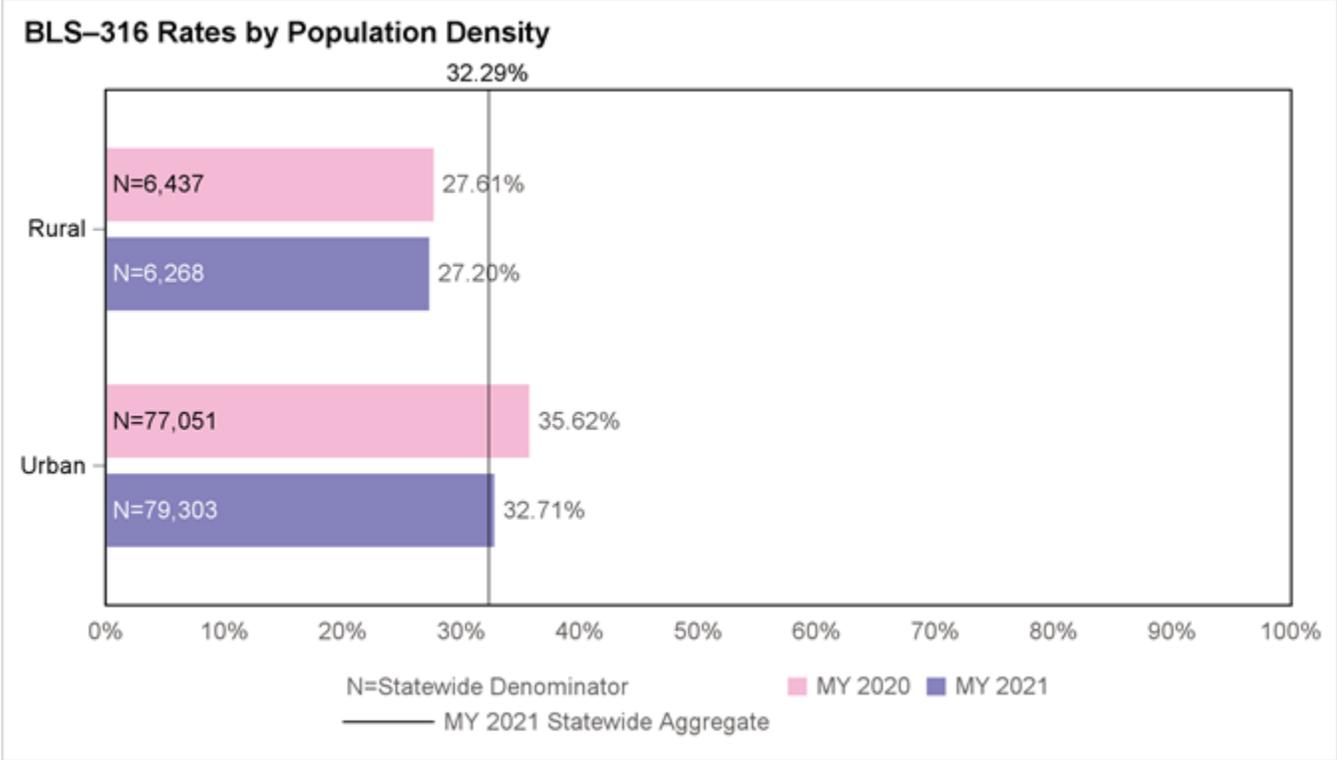


Figure A.105—Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS–316)—Regional-Level Geographic Region Results

The statewide aggregate for measurement year 2021 is shown in the figure below, and the statewide aggregate for measurement year 2020 was 34.99 percent.

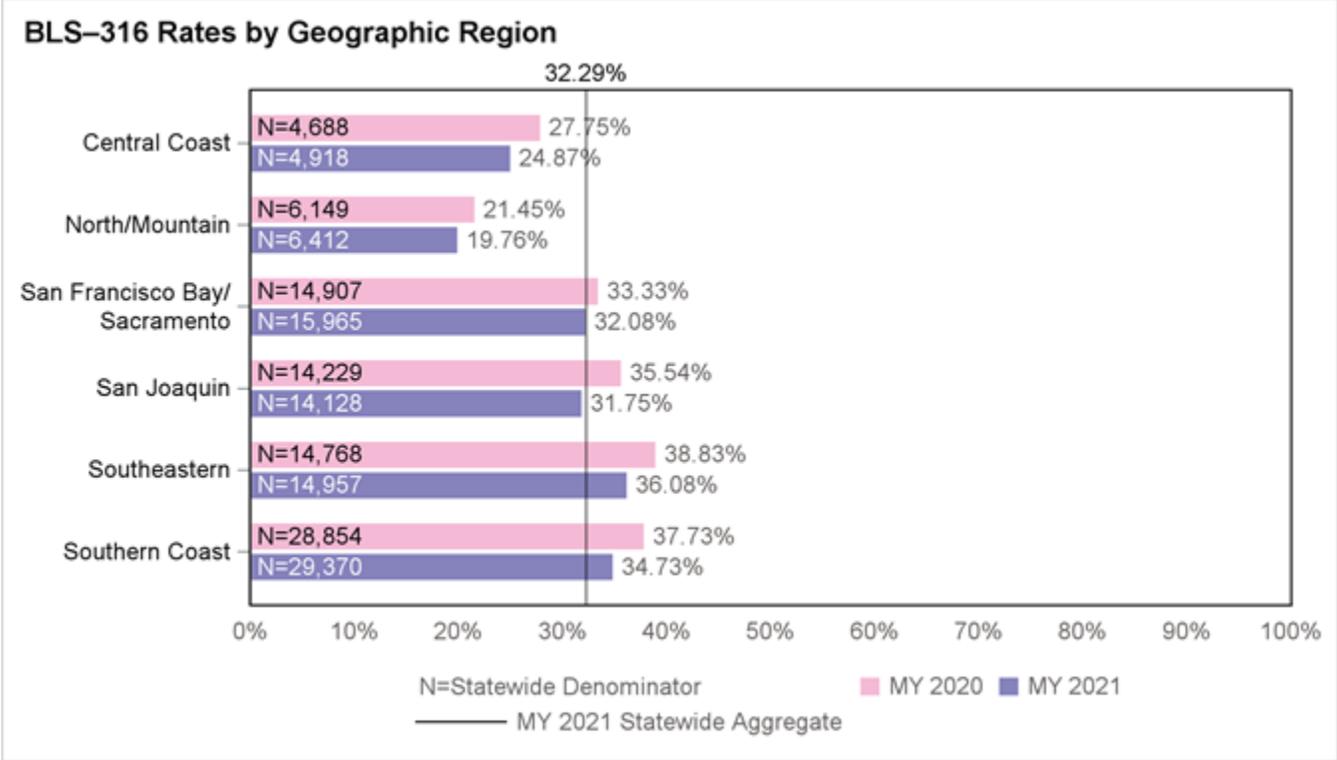
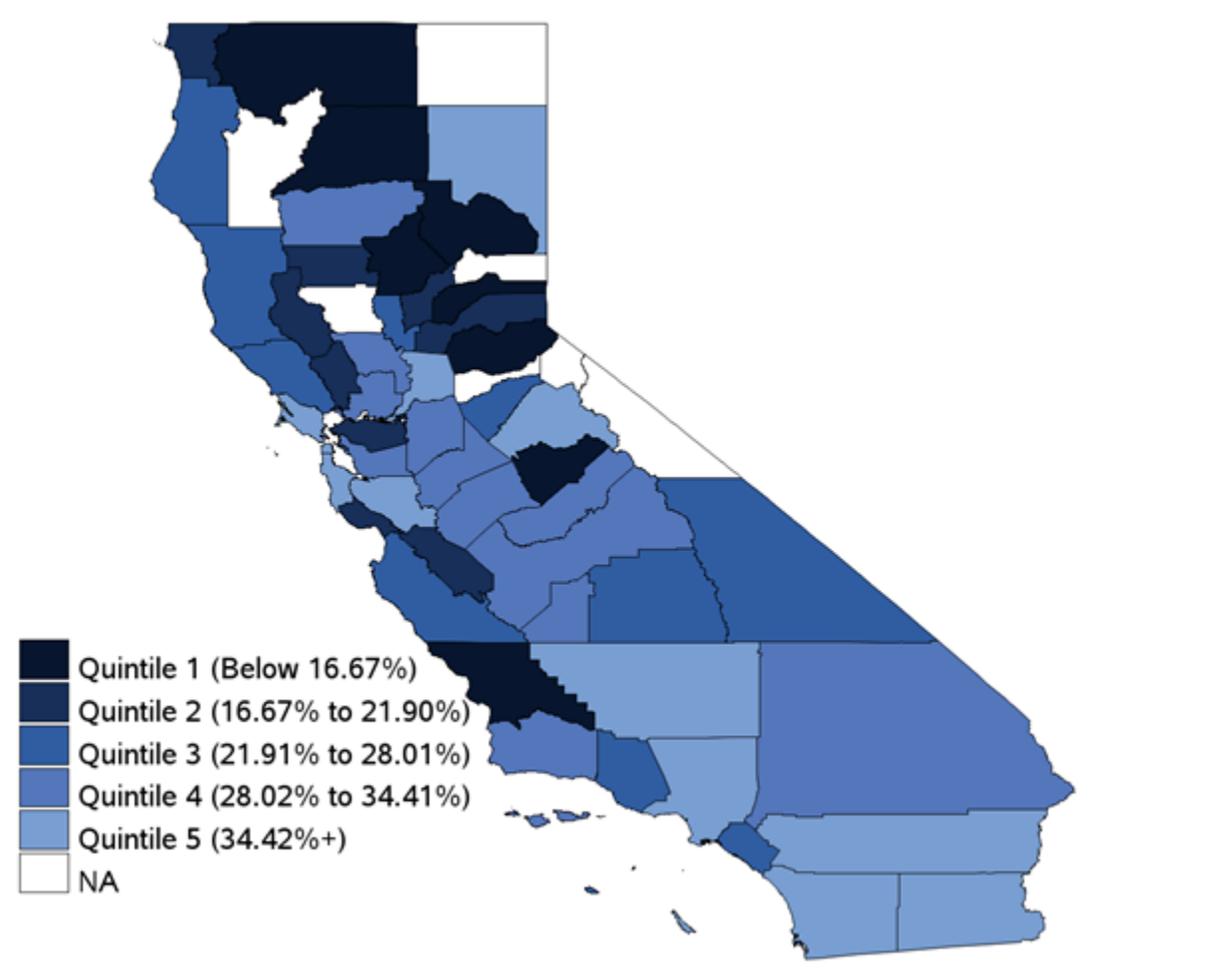


Figure A.106—Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS-316)—County-Level Results

NA indicates the rate had a small denominator (i.e., less than 30) or small numerator (i.e., less than 11).

Please refer to Table 2.3 in the Reader’s Guide for a list of MCPs operating in each county.



Appendix B. MCP Reporting Unit Findings

Appendix B presents the MCP reporting-unit level rates for the 12 MCP-calculated indicators, four HSAG-calculated indicators, and five DHCS-calculated indicators.

HSAG used the patient-level detail files reported by the MCPs to calculate the MCP reporting unit rates for the MCAS indicators presented in this report. However, HSAG did remove members from the indicator rates if they did not meet the age or gender requirements for the indicator. As a result, the MCP reporting unit rates presented in this report may not align with those presented in the EQR technical report, since the MCPs' reported rates were used as reported. Additionally, HSAG did not weight the statewide aggregate rates for hybrid indicators presented in this report. As a result, the statewide aggregate rates for hybrid indicators presented in this report will not match the rates reported in the EQR technical report, since the EQR technical report presents weighted statewide rates derived from MCPs' reported MCAS rates.

MCP-Calculated MCAS Indicator Results

Table B.1 through Table B.12 present the measurement years 2020 and 2021 MCP reporting unit-level rates for the MCP-calculated MCAS indicator results.

Table B.1—Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6)—MCP Reporting Unit-Level Results

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard. — indicates that the value is not available.

 indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

 indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were 54.92 percent and 55.72 percent, respectively.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	37.70%	40.23%	2.53
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	S	27.47%	—
Aetna Better Health of California—San Diego	25.64%	44.55%	18.91
Alameda Alliance for Health—Alameda	45.64%	44.08%	-1.56
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	32.45%	50.87%	18.42
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	35.29%	40.00%	4.71
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	33.20%	35.28%	2.08

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	38.40%	49.20%	10.80
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	30.98%	49.55%	18.57
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	41.55%	48.91%	7.36
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	37.76%	47.97%	10.21
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	26.86%	35.50%	8.64
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	44.83%	59.48%	14.65
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	34.04%	44.05%	10.01
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	44.95%	43.42%	-1.53
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	35.88%	41.79%	5.91
Blue Shield of California Promise Health Plan—San Diego	25.30%	40.57%	15.27
CalOptima—Orange	43.18%	49.31%	6.13
CalViva Health—Fresno	47.74%	48.80%	1.06
CalViva Health—Kings	50.11%	55.56%	5.45
CalViva Health—Madera	56.48%	65.06%	8.58

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
California Health & Wellness Plan—Imperial	49.20%	47.40%	-1.80
California Health & Wellness Plan—Region 1	42.80%	47.96%	5.16
California Health & Wellness Plan—Region 2	56.50%	60.09%	3.59
CenCal Health—San Luis Obispo	41.42%	54.84%	13.42
CenCal Health—Santa Barbara	48.22%	49.21%	0.99
Central California Alliance for Health—Merced	34.76%	31.06%	-3.70
Central California Alliance for Health—Monterey/Santa Cruz	44.21%	51.09%	6.88
Community Health Group Partnership Plan—San Diego	39.50%	53.71%	14.21
Contra Costa Health Plan—Contra Costa	56.69%	54.35%	-2.34
Gold Coast Health Plan—Ventura	21.28%	21.12%	-0.16
Health Net Community Solutions, Inc.—Kern	28.66%	38.39%	9.73
Health Net Community Solutions, Inc.—Los Angeles	40.41%	43.89%	3.48
Health Net Community Solutions, Inc.—Sacramento	41.92%	47.40%	5.48
Health Net Community Solutions, Inc.—San Diego	41.33%	46.48%	5.15
Health Net Community Solutions, Inc.—San Joaquin	29.77%	39.34%	9.57
Health Net Community Solutions, Inc.—Stanislaus	39.45%	33.97%	-5.48
Health Net Community Solutions, Inc.—Tulare	52.64%	56.92%	4.28
Health Plan of San Joaquin—San Joaquin	45.82%	44.63%	-1.19
Health Plan of San Joaquin—Stanislaus	39.93%	37.98%	-1.95
Health Plan of San Mateo—San Mateo	20.03%	25.73%	5.70

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Inland Empire Health Plan—Riverside/San Bernardino	28.87%	29.52%	0.65
Kaiser NorCal (KP Cal, LLC)—KP North	68.17%	67.83%	-0.34
Kaiser SoCal (KP Cal, LLC)—San Diego	74.12%	68.24%	-5.88
Kern Health Systems, DBA Kern Family Health Care—Kern	30.55%	28.05%	-2.50
L.A. Care Health Plan—Los Angeles	36.62%	33.36%	-3.26
Molina Healthcare of California—Imperial	31.43%	17.72%	-13.71
Molina Healthcare of California—Riverside/San Bernardino	14.45%	12.53%	-1.92
Molina Healthcare of California—Sacramento	27.45%	33.61%	6.16
Molina Healthcare of California—San Diego	21.33%	31.01%	9.68
Partnership HealthPlan of California—Northeast	29.48%	35.38%	5.90
Partnership HealthPlan of California—Northwest	29.60%	36.13%	6.53
Partnership HealthPlan of California—Southeast	28.30%	26.16%	-2.14
Partnership HealthPlan of California—Southwest	35.89%	39.88%	3.99
San Francisco Health Plan—San Francisco	46.87%	41.63%	-5.24
Santa Clara Family Health Plan—Santa Clara	33.89%	51.61%	17.72
UnitedHealthcare Community Plan—San Diego	17.39%	24.20%	6.81

- ◆ Reportable rates for 15 of 55 (27.27 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, reportable rates for 21 of 55 (38.18 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 18 of 56 (32.14 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.

- ◆ Reportable rates for 50 of 55 (90.91 percent) MCP reporting units fell below the national benchmark for measurement year 2020, while rates for 50 of 56 (89.29 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.2—Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30–2)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmark for measurement year 2020 was not available, and the national benchmark for measurement year 2021 was 65.83.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	66.40%	60.28%	-6.12
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	41.67%	51.92%	10.25
Aetna Better Health of California—San Diego	49.70%	53.09%	3.39
Alameda Alliance for Health—Alameda	69.34%	63.73%	-5.61
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	62.40%	58.28%	-4.12
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	69.55%	56.29%	-13.26
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	62.85%	57.02%	-5.83
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	57.37%	47.50%	-9.87
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	74.95%	72.06%	-2.89

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	75.17%	71.58%	-3.59
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	67.95%	60.77%	-7.18
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	66.03%	61.18%	-4.85
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	78.05%	63.59%	-14.46
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	66.42%	61.01%	-5.41
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	71.82%	65.51%	-6.31
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	67.84%	63.35%	-4.49
Blue Shield of California Promise Health Plan—San Diego	53.88%	56.68%	2.80
CalOptima—Orange	71.76%	67.29%	-4.47
CalViva Health—Fresno	66.97%	61.86%	-5.11
CalViva Health—Kings	59.97%	54.43%	-5.54
CalViva Health—Madera	82.10%	73.23%	-8.87
California Health & Wellness Plan—Imperial	73.57%	64.81%	-8.76
California Health & Wellness Plan—Region 1	68.49%	65.61%	-2.88
California Health & Wellness Plan—Region 2	61.89%	56.18%	-5.71
CenCal Health—San Luis Obispo	78.02%	72.86%	-5.16
CenCal Health—Santa Barbara	84.59%	80.05%	-4.54
Central California Alliance for Health—Merced	62.39%	55.14%	-7.25

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Central California Alliance for Health—Monterey/Santa Cruz	83.18%	72.90%	-10.28
Community Health Group Partnership Plan—San Diego	71.47%	63.95%	-7.52
Contra Costa Health Plan—Contra Costa	69.85%	64.58%	-5.27
Gold Coast Health Plan—Ventura	67.83%	60.40%	-7.43
Health Net Community Solutions, Inc.—Kern	51.01%	43.81%	-7.20
Health Net Community Solutions, Inc.—Los Angeles	64.77%	59.59%	-5.18
Health Net Community Solutions, Inc.—Sacramento	71.19%	62.86%	-8.33
Health Net Community Solutions, Inc.—San Diego	69.16%	61.46%	-7.70
Health Net Community Solutions, Inc.—San Joaquin	56.97%	44.93%	-12.04
Health Net Community Solutions, Inc.—Stanislaus	53.77%	43.33%	-10.44
Health Net Community Solutions, Inc.—Tulare	70.53%	62.01%	-8.52
Health Plan of San Joaquin—San Joaquin	65.96%	58.30%	-7.66
Health Plan of San Joaquin—Stanislaus	63.35%	54.30%	-9.05
Health Plan of San Mateo—San Mateo	76.94%	69.14%	-7.80
Inland Empire Health Plan—Riverside/San Bernardino	61.05%	54.93%	-6.12
Kaiser NorCal (KP Cal, LLC)—KP North	61.70%	54.35%	-7.35
Kaiser SoCal (KP Cal, LLC)—San Diego	70.74%	59.69%	-11.05
Kern Health Systems, DBA Kern Family Health Care—Kern	55.70%	51.01%	-4.69
L.A. Care Health Plan—Los Angeles	65.49%	59.47%	-6.02
Molina Healthcare of California—Imperial	63.18%	59.60%	-3.58
Molina Healthcare of California—Riverside/San Bernardino	54.34%	43.01%	-11.33
Molina Healthcare of California—Sacramento	66.55%	63.03%	-3.52

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Molina Healthcare of California—San Diego	70.72%	65.40%	-5.32
Partnership HealthPlan of California—Northeast	56.88%	55.47%	-1.41
Partnership HealthPlan of California—Northwest	61.08%	56.52%	-4.56
Partnership HealthPlan of California—Southeast	61.89%	52.93%	-8.96
Partnership HealthPlan of California—Southwest	66.77%	64.05%	-2.72
San Francisco Health Plan—San Francisco	76.09%	69.33%	-6.76
Santa Clara Family Health Plan—Santa Clara	76.73%	64.94%	-11.79
UnitedHealthcare Community Plan—San Diego	36.98%	50.62%	13.64

- ◆ Rates for 52 of 56 (92.86 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 11 of 56 (19.64 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 10 of 56 (17.86 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Rates for 47 of 56 (83.93 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.3—Child and Adolescent Well-Care Visits (WCV)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmark for measurement year 2020 was not available, and the national benchmark for measurement year 2021 was 48.93 percent.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	41.13%	47.51%	6.38
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	26.84%	36.76%	9.92
Aetna Better Health of California—San Diego	24.22%	34.44%	10.22
Alameda Alliance for Health—Alameda	39.47%	51.64%	12.17
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	33.74%	45.36%	11.62
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	37.78%	47.06%	9.28
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	38.40%	42.93%	4.53
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	34.63%	38.65%	4.02
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	54.01%	54.73%	0.72

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MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	40.29%	44.63%	4.34
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	38.46%	40.10%	1.64
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	47.48%	49.17%	1.69
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	42.09%	47.80%	5.71
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	39.28%	44.22%	4.94
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	38.17%	45.04%	6.87
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	40.71%	44.85%	4.14
Blue Shield of California Promise Health Plan—San Diego	35.37%	44.11%	8.74
CalOptima—Orange	50.58%	53.99%	3.41
CalViva Health—Fresno	42.67%	46.30%	3.63
CalViva Health—Kings	37.55%	38.80%	1.25
CalViva Health—Madera	52.75%	55.52%	2.77
California Health & Wellness Plan—Imperial	35.07%	44.38%	9.31
California Health & Wellness Plan—Region 1	40.28%	44.14%	3.86
California Health & Wellness Plan—Region 2	33.15%	34.11%	0.96
CenCal Health—San Luis Obispo	60.95%	57.44%	-3.51

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
CenCal Health—Santa Barbara	58.07%	57.85%	-0.22
Central California Alliance for Health—Merced	37.76%	41.19%	3.43
Central California Alliance for Health—Monterey/Santa Cruz	50.14%	56.29%	6.15
Community Health Group Partnership Plan—San Diego	43.61%	51.01%	7.40
Contra Costa Health Plan—Contra Costa	42.09%	55.05%	12.96
Gold Coast Health Plan—Ventura	30.89%	33.94%	3.05
Health Net Community Solutions, Inc.—Kern	32.93%	37.77%	4.84
Health Net Community Solutions, Inc.—Los Angeles	40.60%	47.94%	7.34
Health Net Community Solutions, Inc.—Sacramento	49.70%	49.88%	0.18
Health Net Community Solutions, Inc.—San Diego	43.98%	45.85%	1.87
Health Net Community Solutions, Inc.—San Joaquin	28.51%	30.67%	2.16
Health Net Community Solutions, Inc.—Stanislaus	28.44%	29.32%	0.88
Health Net Community Solutions, Inc.—Tulare	43.89%	46.49%	2.60
Health Plan of San Joaquin—San Joaquin	40.68%	46.26%	5.58
Health Plan of San Joaquin—Stanislaus	34.87%	37.71%	2.84
Health Plan of San Mateo—San Mateo	48.80%	56.92%	8.12
Inland Empire Health Plan—Riverside/San Bernardino	38.93%	47.90%	8.97
Kaiser NorCal (KP Cal, LLC)—KP North	33.82%	46.76%	12.94
Kaiser SoCal (KP Cal, LLC)—San Diego	38.00%	49.14%	11.14

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Kern Health Systems, DBA Kern Family Health Care—Kern	36.16%	37.96%	1.80
L.A. Care Health Plan—Los Angeles	40.61%	48.09%	7.48
Molina Healthcare of California—Imperial	32.64%	40.03%	7.39
Molina Healthcare of California—Riverside/San Bernardino	31.70%	39.20%	7.50
Molina Healthcare of California—Sacramento	44.33%	45.29%	0.96
Molina Healthcare of California—San Diego	46.72%	48.70%	1.98
Partnership HealthPlan of California—Northeast	34.58%	39.92%	5.34
Partnership HealthPlan of California—Northwest	32.49%	41.48%	8.99
Partnership HealthPlan of California—Southeast	34.33%	45.78%	11.45
Partnership HealthPlan of California—Southwest	34.08%	46.89%	12.81
San Francisco Health Plan—San Francisco	47.83%	56.36%	8.53
Santa Clara Family Health Plan—Santa Clara	43.92%	51.11%	7.19
UnitedHealthcare Community Plan—San Diego	22.94%	39.42%	16.48

- ◆ Rates for only one of 56 (1.79 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 21 of 56 (37.50 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 18 of 56 (32.14 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ The rates for 41 of 56 (73.21 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.4—Childhood Immunization Status—Combination 10 (CIS-10)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were 38.20 percent and 34.79 percent, respectively.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	39.84%	37.81%	-2.03
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	17.16%	25.32%	8.16
Aetna Better Health of California—San Diego	37.45%	34.63%	-2.82
Alameda Alliance for Health—Alameda	57.91%	47.15%	-10.76
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	44.77%	42.09%	-2.68
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	39.66%	37.23%	-2.43
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	32.60%	34.06%	1.46
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	31.14%	29.40%	-1.74
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	45.26%	44.77%	-0.49

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	38.20%	34.06%	-4.14
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	36.01%	29.20%	-6.81
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	30.90%	32.60%	1.70
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	28.82%	35.15%	6.33
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	46.36%	45.61%	-0.75
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	47.45%	45.74%	-1.71
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	39.42%	34.06%	-5.36
Blue Shield of California Promise Health Plan—San Diego	43.07%	41.78%	-1.29
CalOptima—Orange	45.50%	47.69%	2.19
CalViva Health—Fresno	32.36%	35.04%	2.68
CalViva Health—Kings	29.93%	31.87%	1.94
CalViva Health—Madera	51.58%	49.64%	-1.94
California Health & Wellness Plan—Imperial	41.36%	36.25%	-5.11
California Health & Wellness Plan—Region 1	36.50%	33.33%	-3.17
California Health & Wellness Plan—Region 2	26.52%	27.01%	0.49
CenCal Health—San Luis Obispo	50.36%	46.43%	-3.93

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
CenCal Health—Santa Barbara	51.58%	52.19%	0.61
Central California Alliance for Health—Merced	21.65%	18.25%	-3.40
Central California Alliance for Health—Monterey/Santa Cruz	53.66%	50.98%	-2.68
Community Health Group Partnership Plan—San Diego	48.42%	45.99%	-2.43
Contra Costa Health Plan—Contra Costa	51.34%	47.93%	-3.41
Gold Coast Health Plan—Ventura	39.66%	42.82%	3.16
Health Net Community Solutions, Inc.—Kern	27.01%	25.79%	-1.22
Health Net Community Solutions, Inc.—Los Angeles	34.31%	28.95%	-5.36
Health Net Community Solutions, Inc.—Sacramento	34.31%	30.90%	-3.41
Health Net Community Solutions, Inc.—San Diego	42.34%	44.28%	1.94
Health Net Community Solutions, Inc.—San Joaquin	35.21%	30.63%	-4.58
Health Net Community Solutions, Inc.—Stanislaus	27.25%	29.20%	1.95
Health Net Community Solutions, Inc.—Tulare	45.50%	36.98%	-8.52
Health Plan of San Joaquin—San Joaquin	36.01%	36.98%	0.97
Health Plan of San Joaquin—Stanislaus	32.60%	29.20%	-3.40
Health Plan of San Mateo—San Mateo	61.56%	54.85%	-6.71
Inland Empire Health Plan—Riverside/San Bernardino	29.20%	28.71%	-0.49
Kaiser NorCal (KP Cal, LLC)—KP North	60.10%	54.89%	-5.21
Kaiser SoCal (KP Cal, LLC)—San Diego	57.42%	55.32%	-2.10

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Kern Health Systems, DBA Kern Family Health Care—Kern	22.87%	27.49%	4.62
L.A. Care Health Plan—Los Angeles	35.77%	33.58%	-2.19
Molina Healthcare of California—Imperial	40.85%	37.67%	-3.18
Molina Healthcare of California—Riverside/San Bernardino	24.33%	20.92%	-3.41
Molina Healthcare of California—Sacramento	35.52%	27.01%	-8.51
Molina Healthcare of California—San Diego	46.47%	47.93%	1.46
Partnership HealthPlan of California—Northeast	19.22%	18.25%	-0.97
Partnership HealthPlan of California—Northwest	27.98%	32.60%	4.62
Partnership HealthPlan of California—Southeast	40.63%	40.63%	0.00
Partnership HealthPlan of California—Southwest	43.55%	41.61%	-1.94
San Francisco Health Plan—San Francisco	61.22%	59.95%	-1.27
Santa Clara Family Health Plan—Santa Clara	57.91%	49.88%	-8.03
UnitedHealthcare Community Plan—San Diego	40.27%	38.93%	-1.34

- ◆ Rates for 35 of 56 (62.50 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 22 of 56 (39.29 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 21 of 56 (37.50 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Rates for 26 of 56 (46.43 percent) MCP reporting units fell below the national benchmark for measurement year 2020, while rates for 25 of 56 (44.64 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.5—Chlamydia Screening in Women—16 to 20 Years (CHL-1620)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were 50.46 percent and 50.14 percent, respectively.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	57.94%	59.23%	1.29
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	60.71%	54.63%	-6.08
Aetna Better Health of California—San Diego	43.33%	45.63%	2.30
Alameda Alliance for Health—Alameda	57.54%	59.92%	2.38
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	58.17%	64.36%	6.19
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	61.61%	55.13%	-6.48
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	52.89%	51.76%	-1.13
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	52.57%	44.35%	-8.22
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	53.20%	54.17%	0.97
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	43.83%	40.15%	-3.68

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	43.50%	43.79%	0.29
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	62.78%	60.51%	-2.27
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	38.05%	38.93%	0.88
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	47.22%	47.76%	0.54
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	53.43%	53.56%	0.13
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	57.22%	60.30%	3.08
Blue Shield of California Promise Health Plan—San Diego	57.52%	60.92%	3.40
CalOptima—Orange	73.07%	73.09%	0.02
CalViva Health—Fresno	49.38%	51.36%	1.98
CalViva Health—Kings	49.46%	42.27%	-7.19
CalViva Health—Madera	49.37%	56.29%	6.92
California Health & Wellness Plan—Imperial	44.84%	40.06%	-4.78
California Health & Wellness Plan—Region 1	44.99%	45.61%	0.62
California Health & Wellness Plan—Region 2	39.42%	38.29%	-1.13
CenCal Health—San Luis Obispo	53.25%	50.15%	-3.10
CenCal Health—Santa Barbara	52.89%	53.07%	0.18
Central California Alliance for Health—Merced	44.26%	39.67%	-4.59
Central California Alliance for Health—Monterey/Santa Cruz	53.44%	56.89%	3.45

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	57.81%	59.12%	1.31
Contra Costa Health Plan—Contra Costa	57.55%	57.39%	-0.16
Gold Coast Health Plan—Ventura	46.90%	46.71%	-0.19
Health Net Community Solutions, Inc.—Kern	41.77%	66.83%	25.06
Health Net Community Solutions, Inc.—Los Angeles	65.52%	65.96%	0.44
Health Net Community Solutions, Inc.—Sacramento	67.11%	63.98%	-3.13
Health Net Community Solutions, Inc.—San Diego	49.07%	52.30%	3.23
Health Net Community Solutions, Inc.—San Joaquin	54.25%	51.33%	-2.92
Health Net Community Solutions, Inc.—Stanislaus	44.67%	41.65%	-3.02
Health Net Community Solutions, Inc.—Tulare	55.25%	60.72%	5.47
Health Plan of San Joaquin—San Joaquin	55.39%	53.30%	-2.09
Health Plan of San Joaquin—Stanislaus	47.90%	41.60%	-6.30
Health Plan of San Mateo—San Mateo	60.43%	67.62%	7.19
Inland Empire Health Plan—Riverside/San Bernardino	58.74%	60.38%	1.64
Kaiser NorCal (KP Cal, LLC)—KP North	56.30%	61.19%	4.89
Kaiser SoCal (KP Cal, LLC)—San Diego	53.15%	59.07%	5.92
Kern Health Systems, DBA Kern Family Health Care—Kern	45.90%	44.94%	-0.96
L.A. Care Health Plan—Los Angeles	61.56%	63.56%	2.00
Molina Healthcare of California—Imperial	47.46%	48.97%	1.51
Molina Healthcare of California—Riverside/San Bernardino	55.41%	58.64%	3.23
Molina Healthcare of California—Sacramento	65.67%	60.53%	-5.14
Molina Healthcare of California—San Diego	58.17%	60.51%	2.34

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	43.19%	40.67%	-2.52
Partnership HealthPlan of California—Northwest	44.83%	51.32%	6.49
Partnership HealthPlan of California—Southeast	59.53%	59.27%	-0.26
Partnership HealthPlan of California—Southwest	52.41%	54.03%	1.62
San Francisco Health Plan—San Francisco	60.93%	65.09%	4.16
Santa Clara Family Health Plan—Santa Clara	52.84%	56.73%	3.89
UnitedHealthcare Community Plan—San Diego	59.68%	68.79%	9.11

- ◆ Rates for 18 of 56 (32.14 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 21 of 56 (37.50 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 25 of 56 (44.64 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Rates for 21 of 56 (37.50 percent) MCP reporting units fell below the national benchmark for measurement year 2020, while rates for 17 of 56 (30.36 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.6—Developmental Screening in the First Three Years of Life (DEV)—MCP Reporting Unit-Level Results

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard.

— indicates that the value is not available.

 indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

 indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were both 35.60 percent.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	23.11%	28.83%	5.72
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	34.78%	34.14%	-0.64
Aetna Better Health of California—San Diego	33.33%	40.95%	7.62
Alameda Alliance for Health—Alameda	37.38%	39.51%	2.13
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	28.02%	32.06%	4.04
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	36.65%	39.30%	2.65
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	27.38%	30.96%	3.58
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	S	1.34%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	36.85%	51.77%	14.92
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	29.40%	29.50%	0.10

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	29.07%	29.87%	0.80
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	39.88%	38.23%	-1.65
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	45.84%	24.13%	-21.71
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	26.25%	23.16%	-3.09
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	26.88%	42.74%	15.86
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	3.51%	6.54%	3.03
Blue Shield of California Promise Health Plan—San Diego	37.10%	43.84%	6.74
CalOptima—Orange	24.84%	31.22%	6.38
CalViva Health—Fresno	20.00%	22.04%	2.04
CalViva Health—Kings	S	0.99%	—
CalViva Health—Madera	13.96%	30.86%	16.90
California Health & Wellness Plan—Imperial	30.47%	39.37%	8.90
California Health & Wellness Plan—Region 1	31.75%	37.56%	5.81
California Health & Wellness Plan—Region 2	13.59%	21.46%	7.87
CenCal Health—San Luis Obispo	14.60%	26.65%	12.05
CenCal Health—Santa Barbara	33.36%	45.65%	12.29
Central California Alliance for Health—Merced	15.66%	19.89%	4.23
Central California Alliance for Health—Monterey/Santa Cruz	24.39%	26.29%	1.90

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	43.47%	44.37%	0.90
Contra Costa Health Plan—Contra Costa	21.68%	37.45%	15.77
Gold Coast Health Plan—Ventura	36.03%	39.58%	3.55
Health Net Community Solutions, Inc.—Kern	12.34%	14.12%	1.78
Health Net Community Solutions, Inc.—Los Angeles	18.71%	24.80%	6.09
Health Net Community Solutions, Inc.—Sacramento	36.61%	34.99%	-1.62
Health Net Community Solutions, Inc.—San Diego	48.72%	46.28%	-2.44
Health Net Community Solutions, Inc.—San Joaquin	23.16%	10.15%	-13.01
Health Net Community Solutions, Inc.—Stanislaus	17.48%	9.22%	-8.26
Health Net Community Solutions, Inc.—Tulare	4.46%	6.50%	2.04
Health Plan of San Joaquin—San Joaquin	25.66%	20.57%	-5.09
Health Plan of San Joaquin—Stanislaus	25.25%	19.81%	-5.44
Health Plan of San Mateo—San Mateo	24.24%	43.02%	18.78
Inland Empire Health Plan—Riverside/San Bernardino	21.72%	33.67%	11.95
Kaiser NorCal (KP Cal, LLC)—KP North	11.97%	48.27%	36.30
Kaiser SoCal (KP Cal, LLC)—San Diego	S	1.16%	—
Kern Health Systems, DBA Kern Family Health Care—Kern	10.23%	4.46%	-5.77
L.A. Care Health Plan—Los Angeles	17.65%	23.76%	6.11
Molina Healthcare of California—Imperial	41.89%	38.68%	-3.21
Molina Healthcare of California—Riverside/San Bernardino	27.37%	31.63%	4.26
Molina Healthcare of California—Sacramento	36.27%	34.63%	-1.64
Molina Healthcare of California—San Diego	49.28%	52.11%	2.83

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	5.43%	9.52%	4.09
Partnership HealthPlan of California—Northwest	5.76%	17.12%	11.36
Partnership HealthPlan of California—Southeast	31.39%	24.66%	-6.73
Partnership HealthPlan of California—Southwest	34.28%	32.53%	-1.75
San Francisco Health Plan—San Francisco	18.97%	31.39%	12.42
Santa Clara Family Health Plan—Santa Clara	22.85%	49.85%	27.00
UnitedHealthcare Community Plan—San Diego	25.60%	37.71%	12.11

- ◆ Reportable rates for 14 of 53 (26.42 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, reportable rates for 16 of 53 (30.19 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 21 of 56 (37.50 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Reportable rates for 40 of 53 (75.47 percent) MCP reporting units fell below the national benchmark for measurement year 2020, while rates for 36 of 56 (64.29 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.7—Follow-Up After Emergency Department Visit for Mental Illness—30-Day Follow-Up—6 to 17 Years (FUM-30)—MCP Reporting Unit-Level Results

NA indicates the rate had a small denominator (i.e., less than 30).

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard.

 indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

 indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmark for measurement year 2021 was 67.79 percent

Stratification	Measurement Year 2021 Rate
Statewide Aggregate	
Statewide Aggregate	43.47%
MCP Reporting Unit	
Aetna Better Health of California—Sacramento	NA
Aetna Better Health of California—San Diego	NA
Alameda Alliance for Health—Alameda	76.88%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	36.36%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	S
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	22.08%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	NA
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	NA
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	42.22%

Stratification	Measurement Year 2021 Rate
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	32.89%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	32.42%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	NA
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	NA
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	S
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	31.58%
Blue Shield of California Promise Health Plan—San Diego	39.47%
CalOptima—Orange	51.96%
CalViva Health—Fresno	15.97%
CalViva Health—Kings	27.91%
CalViva Health—Madera	S
California Health & Wellness Plan—Imperial	0.00%
California Health & Wellness Plan—Region 1	34.94%
California Health & Wellness Plan—Region 2	33.03%
CenCal Health—San Luis Obispo	S
CenCal Health—Santa Barbara	33.64%
Central California Alliance for Health—Merced	15.46%
Central California Alliance for Health—Monterey/Santa Cruz	39.36%

Stratification	Measurement Year 2021 Rate
Community Health Group Partnership Plan—San Diego	47.75%
Contra Costa Health Plan—Contra Costa	39.42%
Gold Coast Health Plan—Ventura	32.14%
Health Net Community Solutions, Inc.—Kern	NA
Health Net Community Solutions, Inc.—Los Angeles	25.68%
Health Net Community Solutions, Inc.—Sacramento	28.72%
Health Net Community Solutions, Inc.—San Diego	S
Health Net Community Solutions, Inc.—San Joaquin	NA
Health Net Community Solutions, Inc.—Stanislaus	21.82%
Health Net Community Solutions, Inc.—Tulare	29.89%
Health Plan of San Joaquin—San Joaquin	68.10%
Health Plan of San Joaquin—Stanislaus	51.49%
Health Plan of San Mateo—San Mateo	39.44%
Inland Empire Health Plan—Riverside/San Bernardino	69.66%
Kaiser NorCal (KP Cal, LLC)—KP North	NA
Kaiser SoCal (KP Cal, LLC)—San Diego	67.44%
Kern Health Systems, DBA Kern Family Health Care—Kern	16.96%
L.A. Care Health Plan—Los Angeles	47.83%
Molina Healthcare of California—Imperial	NA
Molina Healthcare of California—Riverside/San Bernardino	20.29%
Molina Healthcare of California—Sacramento	S
Molina Healthcare of California—San Diego	33.02%

Stratification	Measurement Year 2021 Rate
Partnership HealthPlan of California—Northeast	40.43%
Partnership HealthPlan of California—Northwest	31.82%
Partnership HealthPlan of California—Southeast	33.33%
Partnership HealthPlan of California—Southwest	37.31%
San Francisco Health Plan—San Francisco	NA
Santa Clara Family Health Plan—Santa Clara	52.46%
UnitedHealthcare Community Plan—San Diego	NA

- ◆ Reportable rates for 23 of 38 (60.53 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Reportable rates for 35 of 38 (92.11 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.8—Immunizations for Adolescents—Combination 2 (IMA–2)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were 36.74 percent and 35.04 percent, respectively.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	41.05%	37.96%	-3.09
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	29.55%	27.27%	-2.28
Aetna Better Health of California—San Diego	20.47%	20.42%	-0.05
Alameda Alliance for Health—Alameda	50.61%	46.96%	-3.65
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	39.90%	34.79%	-5.11
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	35.52%	30.41%	-5.11
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	39.17%	36.98%	-2.19
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	36.74%	30.66%	-6.08
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	56.38%	55.80%	-0.58
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	29.93%	27.93%	-2.00

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MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	31.63%	28.95%	-2.68
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	39.66%	37.23%	-2.43
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	20.49%	23.40%	2.91
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	45.98%	42.86%	-3.12
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	44.53%	36.03%	-8.50
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	44.77%	40.63%	-4.14
Blue Shield of California Promise Health Plan—San Diego	36.74%	33.33%	-3.41
CalOptima—Orange	53.32%	50.73%	-2.59
CalViva Health—Fresno	43.55%	37.23%	-6.32
CalViva Health—Kings	29.44%	32.66%	3.22
CalViva Health—Madera	53.06%	50.49%	-2.57
California Health & Wellness Plan—Imperial	40.39%	37.23%	-3.16
California Health & Wellness Plan—Region 1	28.95%	26.45%	-2.50
California Health & Wellness Plan—Region 2	24.82%	27.25%	2.43
CenCal Health—San Luis Obispo	45.26%	44.88%	-0.38
CenCal Health—Santa Barbara	60.93%	51.32%	-9.61
Central California Alliance for Health—Merced	42.58%	37.71%	-4.87
Central California Alliance for Health—Monterey/Santa Cruz	59.49%	54.52%	-4.97

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MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	45.50%	38.24%	-7.26
Contra Costa Health Plan—Contra Costa	43.80%	44.28%	0.48
Gold Coast Health Plan—Ventura	41.85%	41.36%	-0.49
Health Net Community Solutions, Inc.—Kern	32.36%	28.90%	-3.46
Health Net Community Solutions, Inc.—Los Angeles	38.93%	36.67%	-2.26
Health Net Community Solutions, Inc.—Sacramento	41.61%	40.39%	-1.22
Health Net Community Solutions, Inc.—San Diego	33.82%	38.97%	5.15
Health Net Community Solutions, Inc.—San Joaquin	23.88%	28.47%	4.59
Health Net Community Solutions, Inc.—Stanislaus	34.31%	28.52%	-5.79
Health Net Community Solutions, Inc.—Tulare	44.28%	39.17%	-5.11
Health Plan of San Joaquin—San Joaquin	44.04%	39.17%	-4.87
Health Plan of San Joaquin—Stanislaus	35.52%	33.33%	-2.19
Health Plan of San Mateo—San Mateo	50.61%	51.58%	0.97
Inland Empire Health Plan—Riverside/San Bernardino	41.12%	30.41%	-10.71
Kaiser NorCal (KP Cal, LLC)—KP North	63.75%	61.43%	-2.32
Kaiser SoCal (KP Cal, LLC)—San Diego	57.66%	56.12%	-1.54
Kern Health Systems, DBA Kern Family Health Care—Kern	33.09%	30.90%	-2.19
L.A. Care Health Plan—Los Angeles	43.55%	40.88%	-2.67
Molina Healthcare of California—Imperial	37.73%	33.46%	-4.27
Molina Healthcare of California—Riverside/San Bernardino	33.33%	25.79%	-7.54
Molina Healthcare of California—Sacramento	41.85%	33.58%	-8.27
Molina Healthcare of California—San Diego	38.93%	39.17%	0.24

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	21.17%	19.22%	-1.95
Partnership HealthPlan of California—Northwest	27.74%	21.41%	-6.33
Partnership HealthPlan of California—Southeast	46.83%	47.20%	0.37
Partnership HealthPlan of California—Southwest	46.23%	44.53%	-1.70
San Francisco Health Plan—San Francisco	57.91%	56.58%	-1.33
Santa Clara Family Health Plan—Santa Clara	43.31%	41.36%	-1.95
UnitedHealthcare Community Plan—San Diego	28.85%	25.57%	-3.28

- ◆ Rates for 43 of 56 (76.79 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 21 of 56 (37.50 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 23 of 56 (41.07 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Rates for 19 of 56 (33.93 percent) MCP reporting units fell below the national benchmark for measurement year 2020, while rates for 24 of 56 (42.86 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.9—Screening for Depression and Follow-Up Plan (CDF)—MCP Reporting Unit-Level Results

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard.

— indicates that the value is not available.

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

National benchmarks are not available for this indicator.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	16.52%	19.25%	2.73
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	5.15%	3.29%	-1.86
Aetna Better Health of California—San Diego	23.60%	12.30%	-11.30
Alameda Alliance for Health—Alameda	0.68%	8.28%	7.60
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	9.18%	0.23%	-8.95
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	11.87%	0.28%	-11.59
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	7.76%	2.47%	-5.29
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	0.40%	0.00%	-0.40
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	6.56%	S	—

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	4.64%	0.40%	-4.24
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	7.77%	1.50%	-6.27
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	9.75%	1.89%	-7.86
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	8.23%	S	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	12.43%	16.60%	4.17
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	4.02%	4.73%	0.71
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	2.46%	0.53%	-1.93
Blue Shield of California Promise Health Plan—San Diego	31.60%	22.28%	-9.32
CalOptima—Orange	28.54%	29.62%	1.08
CalViva Health—Fresno	1.73%	9.67%	7.94
CalViva Health—Kings	3.65%	14.04%	10.39
CalViva Health—Madera	S	0.34%	—
California Health & Wellness Plan—Imperial	1.16%	0.93%	-0.23
California Health & Wellness Plan—Region 1	0.31%	0.25%	-0.06
California Health & Wellness Plan—Region 2	0.65%	0.88%	0.23
CenCal Health—San Luis Obispo	41.44%	40.89%	-0.55

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
CenCal Health—Santa Barbara	34.89%	17.18%	-17.71
Central California Alliance for Health—Merced	3.81%	4.17%	0.36
Central California Alliance for Health—Monterey/Santa Cruz	14.39%	15.83%	1.44
Community Health Group Partnership Plan—San Diego	35.94%	45.12%	9.18
Contra Costa Health Plan—Contra Costa	16.75%	8.75%	-8.00
Gold Coast Health Plan—Ventura	8.53%	8.48%	-0.05
Health Net Community Solutions, Inc.—Kern	0.31%	3.11%	2.80
Health Net Community Solutions, Inc.—Los Angeles	9.79%	12.88%	3.09
Health Net Community Solutions, Inc.—Sacramento	1.85%	3.67%	1.82
Health Net Community Solutions, Inc.—San Diego	32.07%	43.47%	11.40
Health Net Community Solutions, Inc.—San Joaquin	0.63%	1.61%	0.98
Health Net Community Solutions, Inc.—Stanislaus	0.84%	1.14%	0.30
Health Net Community Solutions, Inc.—Tulare	9.09%	12.68%	3.59
Health Plan of San Joaquin—San Joaquin	1.00%	1.32%	0.32
Health Plan of San Joaquin—Stanislaus	1.38%	2.06%	0.68
Health Plan of San Mateo—San Mateo	28.25%	42.66%	14.41
Inland Empire Health Plan—Riverside/San Bernardino	41.95%	47.82%	5.87
Kaiser NorCal (KP Cal, LLC)—KP North	5.65%	41.97%	36.32
Kaiser SoCal (KP Cal, LLC)—San Diego	40.49%	37.73%	-2.76

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Kern Health Systems, DBA Kern Family Health Care—Kern	S	0.44%	—
L.A. Care Health Plan—Los Angeles	11.50%	13.49%	1.99
Molina Healthcare of California—Imperial	3.64%	3.14%	-0.50
Molina Healthcare of California—Riverside/San Bernardino	38.67%	46.31%	7.64
Molina Healthcare of California—Sacramento	2.50%	3.66%	1.16
Molina Healthcare of California—San Diego	32.38%	41.57%	9.19
Partnership HealthPlan of California—Northeast	1.56%	0.23%	-1.33
Partnership HealthPlan of California—Northwest	0.30%	S	—
Partnership HealthPlan of California—Southeast	12.18%	11.77%	-0.41
Partnership HealthPlan of California—Southwest	5.72%	9.84%	4.12
San Francisco Health Plan—San Francisco	7.00%	28.45%	21.45
Santa Clara Family Health Plan—Santa Clara	1.30%	8.74%	7.44
UnitedHealthcare Community Plan—San Diego	12.21%	30.52%	18.31

- ◆ Reportable rates for 14 of 51 (27.45 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, reportable rates for 41 of 54 (75.93 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while reportable rates for 40 of 53 (75.47 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.

Table B.10—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation (WCC–BMI)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were 76.64 percent and 79.68 percent, respectively.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	79.12%	82.92%	3.80
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	55.47%	82.24%	26.77
Aetna Better Health of California—San Diego	42.09%	86.37%	44.28
Alameda Alliance for Health—Alameda	70.83%	86.61%	15.78
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	69.34%	83.94%	14.60
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	59.12%	81.51%	22.39
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	65.94%	77.13%	11.19
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	83.94%	91.00%	7.06
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	82.73%	86.37%	3.64
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	77.62%	81.27%	3.65

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	81.75%	84.91%	3.16
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	88.32%	91.97%	3.65
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	74.94%	83.21%	8.27
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	48.42%	71.78%	23.36
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	75.67%	80.78%	5.11
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	84.18%	84.43%	0.25
Blue Shield of California Promise Health Plan—San Diego	88.32%	86.27%	-2.05
CalOptima—Orange	92.08%	86.15%	-5.93
CalViva Health—Fresno	79.32%	78.96%	-0.36
CalViva Health—Kings	94.16%	87.13%	-7.03
CalViva Health—Madera	96.11%	79.86%	-16.25
California Health & Wellness Plan—Imperial	86.37%	79.65%	-6.72
California Health & Wellness Plan—Region 1	79.56%	78.69%	-0.87
California Health & Wellness Plan—Region 2	76.89%	78.89%	2.00
CenCal Health—San Luis Obispo	91.97%	93.24%	1.27
CenCal Health—Santa Barbara	80.54%	81.76%	1.22
Central California Alliance for Health—Merced	88.56%	83.91%	-4.65
Central California Alliance for Health—Monterey/Santa Cruz	87.10%	93.91%	6.81

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MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	85.40%	89.78%	4.38
Contra Costa Health Plan—Contra Costa	84.18%	89.78%	5.60
Gold Coast Health Plan—Ventura	88.32%	85.64%	-2.68
Health Net Community Solutions, Inc.—Kern	72.26%	76.64%	4.38
Health Net Community Solutions, Inc.—Los Angeles	82.73%	85.03%	2.30
Health Net Community Solutions, Inc.—Sacramento	85.64%	90.32%	4.68
Health Net Community Solutions, Inc.—San Diego	85.40%	87.16%	1.76
Health Net Community Solutions, Inc.—San Joaquin	81.27%	79.15%	-2.12
Health Net Community Solutions, Inc.—Stanislaus	82.48%	74.44%	-8.04
Health Net Community Solutions, Inc.—Tulare	89.54%	81.00%	-8.54
Health Plan of San Joaquin—San Joaquin	76.89%	81.27%	4.38
Health Plan of San Joaquin—Stanislaus	78.10%	76.89%	-1.21
Health Plan of San Mateo—San Mateo	75.18%	83.78%	8.60
Inland Empire Health Plan—Riverside/San Bernardino	81.02%	84.43%	3.41
Kaiser NorCal (KP Cal, LLC)—KP North	64.72%	84.80%	20.08
Kaiser SoCal (KP Cal, LLC)—San Diego	95.62%	97.60%	1.98
Kern Health Systems, DBA Kern Family Health Care—Kern	63.50%	75.18%	11.68
L.A. Care Health Plan—Los Angeles	82.64%	90.16%	7.52
Molina Healthcare of California—Imperial	81.02%	70.32%	-10.70
Molina Healthcare of California—Riverside/San Bernardino	81.27%	82.48%	1.21
Molina Healthcare of California—Sacramento	81.75%	85.16%	3.41
Molina Healthcare of California—San Diego	86.37%	80.78%	-5.59

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	84.91%	85.12%	0.21
Partnership HealthPlan of California—Northwest	76.16%	77.78%	1.62
Partnership HealthPlan of California—Southeast	70.32%	76.10%	5.78
Partnership HealthPlan of California—Southwest	77.37%	80.78%	3.41
San Francisco Health Plan—San Francisco	72.02%	78.81%	6.79
Santa Clara Family Health Plan—Santa Clara	80.54%	84.91%	4.37
UnitedHealthcare Community Plan—San Diego	83.21%	77.86%	-5.35

- ◆ Rates for 14 of 56 (25.00 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 10 of 56 (17.86 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for three of 56 (5.36 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Rates for 16 of 56 (28.57 percent) MCP reporting units fell below the national benchmark for both measurement years 2020 and 2021.

Table B.11—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition (WCC–N)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were 70.11 percent and 72.26 percent, respectively.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	71.29%	77.94%	6.65
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	55.47%	81.75%	26.28
Aetna Better Health of California—San Diego	41.12%	80.05%	38.93
Alameda Alliance for Health—Alameda	70.83%	84.70%	13.87
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	71.78%	82.24%	10.46
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	62.04%	79.81%	17.77
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	67.64%	75.67%	8.03
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	76.16%	84.67%	8.51
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	78.59%	84.91%	6.32

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	69.59%	70.80%	1.21
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	71.29%	74.70%	3.41
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	85.89%	90.02%	4.13
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	65.69%	78.10%	12.41
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	59.37%	79.08%	19.71
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	70.80%	78.83%	8.03
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	82.00%	82.00%	0.00
Blue Shield of California Promise Health Plan—San Diego	74.45%	82.39%	7.94
CalOptima—Orange	82.08%	84.23%	2.15
CalViva Health—Fresno	71.29%	76.50%	5.21
CalViva Health—Kings	76.16%	86.26%	10.10
CalViva Health—Madera	83.21%	83.68%	0.47
California Health & Wellness Plan—Imperial	63.02%	74.94%	11.92
California Health & Wellness Plan—Region 1	71.29%	67.21%	-4.08
California Health & Wellness Plan—Region 2	63.26%	64.57%	1.31
CenCal Health—San Luis Obispo	86.62%	85.99%	-0.63

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
CenCal Health—Santa Barbara	79.81%	79.39%	-0.42
Central California Alliance for Health—Merced	72.02%	67.53%	-4.49
Central California Alliance for Health—Monterey/Santa Cruz	82.48%	89.25%	6.77
Community Health Group Partnership Plan—San Diego	72.26%	82.97%	10.71
Contra Costa Health Plan—Contra Costa	75.91%	86.90%	10.99
Gold Coast Health Plan—Ventura	72.26%	75.43%	3.17
Health Net Community Solutions, Inc.—Kern	53.28%	67.40%	14.12
Health Net Community Solutions, Inc.—Los Angeles	74.70%	82.20%	7.50
Health Net Community Solutions, Inc.—Sacramento	85.64%	83.15%	-2.49
Health Net Community Solutions, Inc.—San Diego	74.45%	80.00%	5.55
Health Net Community Solutions, Inc.—San Joaquin	62.04%	73.12%	11.08
Health Net Community Solutions, Inc.—Stanislaus	64.48%	55.83%	-8.65
Health Net Community Solutions, Inc.—Tulare	81.27%	76.70%	-4.57
Health Plan of San Joaquin—San Joaquin	65.21%	75.91%	10.70
Health Plan of San Joaquin—Stanislaus	56.20%	61.56%	5.36
Health Plan of San Mateo—San Mateo	74.70%	78.46%	3.76
Inland Empire Health Plan—Riverside/San Bernardino	77.37%	81.51%	4.14
Kaiser NorCal (KP Cal, LLC)—KP North	70.56%	79.71%	9.15
Kaiser SoCal (KP Cal, LLC)—San Diego	89.29%	89.14%	-0.15

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Kern Health Systems, DBA Kern Family Health Care—Kern	52.80%	66.42%	13.62
L.A. Care Health Plan—Los Angeles	77.78%	85.90%	8.12
Molina Healthcare of California—Imperial	71.78%	70.56%	-1.22
Molina Healthcare of California—Riverside/San Bernardino	73.72%	77.86%	4.14
Molina Healthcare of California—Sacramento	77.86%	81.02%	3.16
Molina Healthcare of California—San Diego	80.54%	76.89%	-3.65
Partnership HealthPlan of California—Northeast	60.58%	68.78%	8.20
Partnership HealthPlan of California—Northwest	64.72%	72.59%	7.87
Partnership HealthPlan of California—Southeast	63.02%	79.51%	16.49
Partnership HealthPlan of California—Southwest	67.40%	79.32%	11.92
San Francisco Health Plan—San Francisco	77.62%	77.01%	-0.61
Santa Clara Family Health Plan—Santa Clara	74.21%	81.51%	7.30
UnitedHealthcare Community Plan—San Diego	72.51%	82.73%	10.22

- ◆ Rates for seven of 56 (12.50 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 12 of 56 (21.43 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for eight of 56 (14.29 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Rates for 19 of 56 (33.93 percent) MCP reporting units fell below the national benchmark for measurement year 2020, while rates for 10 of 56 (17.86 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.12—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity (WCC-PA)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were 66.18 percent and 68.61 percent, respectively.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	68.71%	76.17%	7.46
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	48.91%	81.27%	32.36
Aetna Better Health of California—San Diego	34.55%	80.54%	45.99
Alameda Alliance for Health—Alameda	67.50%	83.61%	16.11
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	70.32%	81.51%	11.19
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	59.12%	77.86%	18.74
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	65.69%	72.26%	6.57
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	68.86%	81.75%	12.89
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	73.48%	82.73%	9.25
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	69.83%	71.53%	1.70

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	69.59%	74.45%	4.86
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	82.24%	88.32%	6.08
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	57.91%	74.70%	16.79
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	56.93%	79.08%	22.15
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	67.40%	76.16%	8.76
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	79.56%	79.32%	-0.24
Blue Shield of California Promise Health Plan—San Diego	72.51%	81.49%	8.98
CalOptima—Orange	81.67%	83.46%	1.79
CalViva Health—Fresno	68.13%	73.77%	5.64
CalViva Health—Kings	73.48%	79.53%	6.05
CalViva Health—Madera	78.83%	75.69%	-3.14
California Health & Wellness Plan—Imperial	61.31%	72.46%	11.15
California Health & Wellness Plan—Region 1	69.34%	64.21%	-5.13
California Health & Wellness Plan—Region 2	62.53%	63.57%	1.04
CenCal Health—San Luis Obispo	86.37%	85.02%	-1.35
CenCal Health—Santa Barbara	77.13%	79.05%	1.92
Central California Alliance for Health—Merced	70.56%	64.37%	-6.19
Central California Alliance for Health—Monterey/Santa Cruz	79.81%	86.02%	6.21

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MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	70.80%	80.29%	9.49
Contra Costa Health Plan—Contra Costa	76.64%	86.26%	9.62
Gold Coast Health Plan—Ventura	69.10%	72.75%	3.65
Health Net Community Solutions, Inc.—Kern	50.36%	64.23%	13.87
Health Net Community Solutions, Inc.—Los Angeles	72.51%	80.51%	8.00
Health Net Community Solutions, Inc.—Sacramento	82.00%	81.00%	-1.00
Health Net Community Solutions, Inc.—San Diego	73.97%	79.10%	5.13
Health Net Community Solutions, Inc.—San Joaquin	62.29%	74.37%	12.08
Health Net Community Solutions, Inc.—Stanislaus	59.12%	54.59%	-4.53
Health Net Community Solutions, Inc.—Tulare	81.02%	73.12%	-7.90
Health Plan of San Joaquin—San Joaquin	62.77%	75.91%	13.14
Health Plan of San Joaquin—Stanislaus	47.20%	56.69%	9.49
Health Plan of San Mateo—San Mateo	65.94%	76.60%	10.66
Inland Empire Health Plan—Riverside/San Bernardino	76.40%	80.29%	3.89
Kaiser NorCal (KP Cal, LLC)—KP North	70.56%	79.59%	9.03
Kaiser SoCal (KP Cal, LLC)—San Diego	89.54%	90.03%	0.49
Kern Health Systems, DBA Kern Family Health Care—Kern	51.09%	68.13%	17.04
L.A. Care Health Plan—Los Angeles	76.39%	84.26%	7.87
Molina Healthcare of California—Imperial	72.26%	70.07%	-2.19
Molina Healthcare of California—Riverside/San Bernardino	72.99%	75.18%	2.19
Molina Healthcare of California—Sacramento	75.43%	79.81%	4.38
Molina Healthcare of California—San Diego	79.56%	75.18%	-4.38

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	56.45%	66.83%	10.38
Partnership HealthPlan of California—Northwest	63.99%	70.62%	6.63
Partnership HealthPlan of California—Southeast	60.10%	76.34%	16.24
Partnership HealthPlan of California—Southwest	63.26%	76.16%	12.90
San Francisco Health Plan—San Francisco	75.43%	76.72%	1.29
Santa Clara Family Health Plan—Santa Clara	72.26%	79.32%	7.06
UnitedHealthcare Community Plan—San Diego	71.78%	80.29%	8.51

- ◆ Rates for nine of 56 (16.07 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 12 of 56 (21.43 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for eight of 56 (14.29 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Rates for 19 of 56 (33.93 percent) MCP reporting units fell below the national benchmark for measurement year 2020, while rates for eight of 56 (14.29 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

HSAG-Calculated Indicator Results

Table B.13 through Table B.16 present the measurement years 2020 and 2021 MCP reporting unit-level rates for the HSAG-calculated indicator results

Table B.13—Alcohol Use Screening (AUS)—MCP Reporting Unit-Level Results

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard.

— indicates that the value is not available.

 indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

 indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

National benchmarks are not available for this indicator.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	1.83%	2.31%	0.48
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	2.89%	3.71%	0.82
Aetna Better Health of California—San Diego	S	0.60%	—
Alameda Alliance for Health—Alameda	1.91%	2.11%	0.20
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	2.50%	4.46%	1.96
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	1.54%	2.68%	1.14
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	0.06%	0.10%	0.04
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	0.00%	0.00%	0.00

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	0.00%	S	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	2.44%	2.51%	0.07
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	5.62%	4.15%	-1.47
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	3.14%	3.56%	0.42
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	S	S	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	S	S	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	S	0.62%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	0.12%	0.10%	-0.02
Blue Shield of California Promise Health Plan—San Diego	1.44%	1.23%	-0.21
CalOptima—Orange	7.34%	8.28%	0.94
CalViva Health—Fresno	0.07%	0.10%	0.03
CalViva Health—Kings	S	S	—
CalViva Health—Madera	0.00%	0.00%	0.00
California Health & Wellness Plan—Imperial	S	S	—
California Health & Wellness Plan—Region 1	2.22%	2.56%	0.34
California Health & Wellness Plan—Region 2	2.07%	2.36%	0.29
CenCal Health—San Luis Obispo	1.73%	1.25%	-0.48

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
CenCal Health—Santa Barbara	4.48%	2.57%	-1.91
Central California Alliance for Health—Merced	0.45%	1.06%	0.61
Central California Alliance for Health—Monterey/Santa Cruz	5.75%	9.82%	4.07
Community Health Group Partnership Plan—San Diego	0.91%	1.01%	0.10
Contra Costa Health Plan—Contra Costa	0.36%	0.47%	0.11
Gold Coast Health Plan—Ventura	0.81%	0.38%	-0.43
Health Net Community Solutions, Inc.—Kern	S	S	—
Health Net Community Solutions, Inc.—Los Angeles	0.59%	0.92%	0.33
Health Net Community Solutions, Inc.—Sacramento	3.45%	3.53%	0.08
Health Net Community Solutions, Inc.—San Diego	0.50%	0.61%	0.11
Health Net Community Solutions, Inc.—San Joaquin	0.62%	S	—
Health Net Community Solutions, Inc.—Stanislaus	0.48%	0.34%	-0.14
Health Net Community Solutions, Inc.—Tulare	0.08%	0.09%	0.01
Health Plan of San Joaquin—San Joaquin	0.82%	0.97%	0.15
Health Plan of San Joaquin—Stanislaus	0.84%	1.24%	0.40
Health Plan of San Mateo—San Mateo	2.14%	3.60%	1.46
Inland Empire Health Plan—Riverside/San Bernardino	3.86%	5.38%	1.52
Kaiser NorCal (KP Cal, LLC)—KP North	0.00%	0.00%	0.00
Kaiser SoCal (KP Cal, LLC)—San Diego	0.00%	S	—
Kern Health Systems, DBA Kern Family Health Care—Kern	0.21%	0.42%	0.21
L.A. Care Health Plan—Los Angeles	0.58%	0.64%	0.06
Molina Healthcare of California—Imperial	S	S	—

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Molina Healthcare of California—Riverside/San Bernardino	2.75%	4.67%	1.92
Molina Healthcare of California—Sacramento	2.00%	2.83%	0.83
Molina Healthcare of California—San Diego	0.90%	1.14%	0.24
Partnership HealthPlan of California—Northeast	0.57%	0.16%	-0.41
Partnership HealthPlan of California—Northwest	9.32%	9.07%	-0.25
Partnership HealthPlan of California—Southeast	0.80%	1.69%	0.89
Partnership HealthPlan of California—Southwest	2.10%	2.15%	0.05
San Francisco Health Plan—San Francisco	0.14%	0.15%	0.01
Santa Clara Family Health Plan—Santa Clara	0.12%	0.44%	0.32
UnitedHealthcare Community Plan—San Diego	0.87%	1.07%	0.20

- ◆ Reportable rates for two of 45 (4.44 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, reportable rates for 29 of 48 (60.42 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 28 of 47 (59.57 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.

Table B.14—Dental Fluoride Varnish (DFV)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

National benchmarks are not available for this indicator.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	19.35%	22.62%	3.27
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	28.25%	32.09%	3.84
Aetna Better Health of California—San Diego	5.47%	9.27%	3.80
Alameda Alliance for Health—Alameda	13.30%	14.64%	1.34
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	11.06%	10.52%	-0.54
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	20.98%	19.45%	-1.53
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	31.47%	34.09%	2.62
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	5.15%	5.70%	0.55
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	35.39%	37.79%	2.40
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	14.84%	15.36%	0.52
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	17.51%	19.17%	1.66

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	25.20%	32.83%	7.63
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	8.79%	9.91%	1.12
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	11.60%	11.47%	-0.13
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	21.92%	21.38%	-0.54
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	15.05%	10.01%	-5.04
Blue Shield of California Promise Health Plan—San Diego	7.14%	10.46%	3.32
CalOptima—Orange	22.62%	28.18%	5.56
CalViva Health—Fresno	31.54%	35.16%	3.62
CalViva Health—Kings	5.58%	5.77%	0.19
CalViva Health—Madera	36.21%	41.20%	4.99
California Health & Wellness Plan—Imperial	5.92%	25.17%	19.25
California Health & Wellness Plan—Region 1	19.14%	18.40%	-0.74
California Health & Wellness Plan—Region 2	16.06%	17.76%	1.70
CenCal Health—San Luis Obispo	49.14%	47.75%	-1.39
CenCal Health—Santa Barbara	50.12%	56.24%	6.12
Central California Alliance for Health—Merced	23.11%	30.40%	7.29
Central California Alliance for Health—Monterey/Santa Cruz	39.90%	44.88%	4.98
Community Health Group Partnership Plan—San Diego	9.16%	11.21%	2.05
Contra Costa Health Plan—Contra Costa	22.22%	24.27%	2.05

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Gold Coast Health Plan—Ventura	27.38%	33.72%	6.34
Health Net Community Solutions, Inc.—Kern	13.50%	17.08%	3.58
Health Net Community Solutions, Inc.—Los Angeles	16.53%	21.47%	4.94
Health Net Community Solutions, Inc.—Sacramento	30.02%	35.31%	5.29
Health Net Community Solutions, Inc.—San Diego	10.69%	11.93%	1.24
Health Net Community Solutions, Inc.—San Joaquin	38.18%	42.70%	4.52
Health Net Community Solutions, Inc.—Stanislaus	27.68%	30.34%	2.66
Health Net Community Solutions, Inc.—Tulare	16.06%	9.90%	-6.16
Health Plan of San Joaquin—San Joaquin	45.53%	48.45%	2.92
Health Plan of San Joaquin—Stanislaus	34.20%	36.99%	2.79
Health Plan of San Mateo—San Mateo	19.15%	20.07%	0.92
Inland Empire Health Plan—Riverside/San Bernardino	18.31%	20.78%	2.47
Kaiser NorCal (KP Cal, LLC)—KP North	17.91%	18.63%	0.72
Kaiser SoCal (KP Cal, LLC)—San Diego	12.40%	14.80%	2.40
Kern Health Systems, DBA Kern Family Health Care—Kern	13.65%	17.21%	3.56
L.A. Care Health Plan—Los Angeles	17.40%	22.25%	4.85
Molina Healthcare of California—Imperial	5.37%	27.23%	21.86
Molina Healthcare of California—Riverside/San Bernardino	12.43%	13.96%	1.53
Molina Healthcare of California—Sacramento	29.51%	32.09%	2.58
Molina Healthcare of California—San Diego	8.37%	10.38%	2.01
Partnership HealthPlan of California—Northeast	5.32%	4.11%	-1.21
Partnership HealthPlan of California—Northwest	5.31%	4.97%	-0.34

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Southeast	6.83%	6.32%	-0.51
Partnership HealthPlan of California—Southwest	7.05%	6.12%	-0.93
San Francisco Health Plan—San Francisco	21.70%	22.34%	0.64
Santa Clara Family Health Plan—Santa Clara	23.20%	21.11%	-2.09
UnitedHealthcare Community Plan—San Diego	6.86%	8.75%	1.89

- ◆ Rates for six of 56 (10.71 percent) MCP reporting units decreased by at least one percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 28 of 56 (50.00 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 29 of 56 (51.79 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.

Table B.15—Follow-Up After Hospitalization for Mental Illness—7-Day Follow-Up—6 to 17 Years (FUH-7)—MCP Reporting Unit-Level Results

NA indicates the rate had a small denominator (i.e., less than 30).

— indicates that the value is not available.

 indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

 indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were 49.80 percent and 47.65 percent, respectively.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	59.60%	58.80%	-0.80
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	NA	NA	—
Aetna Better Health of California—San Diego	NA	NA	—
Alameda Alliance for Health—Alameda	59.78%	60.90%	1.12
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	65.63%	69.77%	4.14
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	80.65%	84.78%	4.13
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	40.00%	59.72%	19.72
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	NA	NA	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	NA	NA	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	66.04%	55.74%	-10.30

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	49.12%	53.73%	4.61
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	61.50%	62.56%	1.06
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	NA	NA	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	NA	NA	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	68.42%	71.67%	3.25
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	75.56%	70.97%	-4.59
Blue Shield of California Promise Health Plan—San Diego	48.57%	54.05%	5.48
CalOptima—Orange	62.65%	65.23%	2.58
CalViva Health—Fresno	55.34%	64.13%	8.79
CalViva Health—Kings	NA	NA	—
CalViva Health—Madera	NA	NA	—
California Health & Wellness Plan—Imperial	NA	NA	—
California Health & Wellness Plan—Region 1	47.06%	63.64%	16.58
California Health & Wellness Plan—Region 2	62.16%	61.25%	-0.91
CenCal Health—San Luis Obispo	55.26%	54.76%	-0.50
CenCal Health—Santa Barbara	67.14%	52.17%	-14.97
Central California Alliance for Health—Merced	68.00%	52.98%	-15.02
Central California Alliance for Health—Monterey/Santa Cruz	67.26%	59.68%	-7.58

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	53.54%	50.27%	-3.27
Contra Costa Health Plan—Contra Costa	69.05%	73.65%	4.60
Gold Coast Health Plan—Ventura	74.89%	66.80%	-8.09
Health Net Community Solutions, Inc.—Kern	75.00%	59.57%	-15.43
Health Net Community Solutions, Inc.—Los Angeles	59.70%	55.77%	-3.93
Health Net Community Solutions, Inc.—Sacramento	57.83%	65.79%	7.96
Health Net Community Solutions, Inc.—San Diego	51.56%	53.70%	2.14
Health Net Community Solutions, Inc.—San Joaquin	NA	NA	—
Health Net Community Solutions, Inc.—Stanislaus	72.58%	50.72%	-21.86
Health Net Community Solutions, Inc.—Tulare	76.92%	87.50%	10.58
Health Plan of San Joaquin—San Joaquin	70.97%	76.61%	5.64
Health Plan of San Joaquin—Stanislaus	68.38%	62.50%	-5.88
Health Plan of San Mateo—San Mateo	64.54%	54.55%	-9.99
Inland Empire Health Plan—Riverside/San Bernardino	44.33%	49.26%	4.93
Kaiser NorCal (KP Cal, LLC)—KP North	57.00%	54.35%	-2.65
Kaiser SoCal (KP Cal, LLC)—San Diego	66.67%	46.67%	-20.00
Kern Health Systems, DBA Kern Family Health Care—Kern	76.30%	66.67%	-9.63
L.A. Care Health Plan—Los Angeles	59.08%	59.11%	0.03
Molina Healthcare of California—Imperial	NA	—	—
Molina Healthcare of California—Riverside/San Bernardino	31.25%	41.12%	9.87
Molina Healthcare of California—Sacramento	79.07%	60.87%	-18.20
Molina Healthcare of California—San Diego	47.54%	42.76%	-4.78

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	63.04%	64.71%	1.67
Partnership HealthPlan of California—Northwest	75.00%	69.64%	-5.36
Partnership HealthPlan of California—Southeast	64.52%	58.38%	-6.14
Partnership HealthPlan of California—Southwest	60.07%	62.37%	2.30
San Francisco Health Plan—San Francisco	53.57%	54.69%	1.12
Santa Clara Family Health Plan—Santa Clara	72.25%	67.32%	-4.93
UnitedHealthcare Community Plan—San Diego	NA	NA	—

- ◆ Reportable rates for 20 of 44 (45.45 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, reportable rates for 10 of 44 (22.73 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while reportable rates for seven of 44 (15.91 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Reportable rates for seven of 44 (15.91 percent) MCP reporting units fell below the national benchmark for measurement year 2020, while rates for three of 44 (6.82 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Table B.16—Tobacco Use Screening (TUS)—MCP Reporting Unit-Level Results

S indicates fewer than 11 cases exist in the numerator; therefore, HSAG suppresses displaying the rate in this report to satisfy the HIPAA Privacy Rule’s de-identification standard. — indicates that the value is not available.

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

National benchmarks are not available for this indicator.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	2.54%	3.83%	1.29
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	3.04%	4.68%	1.64
Aetna Better Health of California—San Diego	3.52%	2.23%	-1.29
Alameda Alliance for Health—Alameda	0.03%	0.03%	-0.00
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	S	0.13%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	S	S	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	0.33%	0.36%	0.03
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	S	S	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	4.92%	6.01%	1.09

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	1.88%	2.08%	0.20
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	1.51%	2.27%	0.76
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	2.62%	4.75%	2.13
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	S	S	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	S	0.00%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	0.30%	1.14%	0.84
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	0.14%	0.13%	-0.01
Blue Shield of California Promise Health Plan—San Diego	3.11%	4.98%	1.87
CalOptima—Orange	4.22%	5.42%	1.20
CalViva Health—Fresno	0.49%	0.66%	0.17
CalViva Health—Kings	S	S	—
CalViva Health—Madera	5.30%	3.02%	-2.28
California Health & Wellness Plan—Imperial	S	0.09%	—
California Health & Wellness Plan—Region 1	1.83%	2.03%	0.20
California Health & Wellness Plan—Region 2	1.62%	1.45%	-0.17
CenCal Health—San Luis Obispo	S	S	—

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
CenCal Health—Santa Barbara	0.08%	0.18%	0.10
Central California Alliance for Health—Merced	1.47%	5.28%	3.81
Central California Alliance for Health—Monterey/Santa Cruz	2.15%	3.86%	1.71
Community Health Group Partnership Plan—San Diego	0.97%	7.66%	6.69
Contra Costa Health Plan—Contra Costa	1.68%	1.55%	-0.13
Gold Coast Health Plan—Ventura	0.32%	0.46%	0.14
Health Net Community Solutions, Inc.—Kern	0.15%	1.05%	0.90
Health Net Community Solutions, Inc.—Los Angeles	2.08%	3.41%	1.33
Health Net Community Solutions, Inc.—Sacramento	2.44%	3.98%	1.54
Health Net Community Solutions, Inc.—San Diego	17.16%	19.49%	2.33
Health Net Community Solutions, Inc.—San Joaquin	S	S	—
Health Net Community Solutions, Inc.—Stanislaus	0.08%	0.47%	0.39
Health Net Community Solutions, Inc.—Tulare	0.14%	0.15%	0.01
Health Plan of San Joaquin—San Joaquin	1.00%	1.13%	0.13
Health Plan of San Joaquin—Stanislaus	0.16%	1.61%	1.45
Health Plan of San Mateo—San Mateo	0.74%	0.11%	-0.63
Inland Empire Health Plan—Riverside/San Bernardino	8.61%	11.11%	2.50
Kaiser NorCal (KP Cal, LLC)—KP North	S	S	—
Kaiser SoCal (KP Cal, LLC)—San Diego	0.17%	8.83%	8.66

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Kern Health Systems, DBA Kern Family Health Care—Kern	0.81%	1.05%	0.24
L.A. Care Health Plan—Los Angeles	1.57%	3.30%	1.73
Molina Healthcare of California—Imperial	S	S	—
Molina Healthcare of California—Riverside/San Bernardino	6.25%	8.57%	2.32
Molina Healthcare of California—Sacramento	3.54%	6.15%	2.61
Molina Healthcare of California—San Diego	8.91%	8.72%	-0.19
Partnership HealthPlan of California—Northeast	S	0.07%	—
Partnership HealthPlan of California—Northwest	S	S	—
Partnership HealthPlan of California—Southeast	0.05%	0.05%	0.00
Partnership HealthPlan of California—Southwest	0.41%	0.46%	0.05
San Francisco Health Plan—San Francisco	0.07%	0.09%	0.02
Santa Clara Family Health Plan—Santa Clara	0.34%	0.43%	0.09
UnitedHealthcare Community Plan—San Diego	2.36%	1.92%	-0.44

- ◆ Reportable rates for two of 43 (4.65 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, reportable rates for 29 of 43 (67.44 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 32 of 47 (68.09 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.

DHCS-Calculated Indicator Results

Table B.17 through Table B.21 present the measurement years 2020 and 2021 MCP reporting unit-level rates for the DHCS-calculated indicator results. Additionally, Table B.17 through Table B.20 represent MCP performance in alignment with Title 17 age stratifications.

Table B.17—Blood Lead Screening—Test at 12 Months of Age (BLS-1)—MCP Reporting Unit-Level Results

NA indicates the rate had a small denominator (i.e., less than 30).

— indicates that the value is not available.

 indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

 indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

National benchmarks are not available for this indicator.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	46.21%	43.98%	-2.23
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	NA	28.90%	—
Aetna Better Health of California—San Diego	NA	43.44%	—
Alameda Alliance for Health—Alameda	48.08%	49.13%	1.05
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	NA	44.03%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	NA	26.33%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	44.44%	38.87%	-5.57

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	NA	42.52%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	NA	51.30%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	41.27%	41.41%	0.14
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	34.94%	35.55%	0.61
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	33.24%	35.54%	2.30
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	NA	57.46%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	NA	58.65%	—
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	52.31%	54.90%	2.59
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	55.56%	43.94%	-11.62
Blue Shield of California Promise Health Plan—San Diego	59.32%	54.20%	-5.12
CalOptima—Orange	58.37%	52.65%	-5.72
CalViva Health—Fresno	47.99%	43.18%	-4.81
CalViva Health—Kings	72.34%	46.52%	-25.82

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
CalViva Health—Madera	76.00%	56.94%	-19.06
California Health & Wellness Plan—Imperial	74.55%	60.37%	-14.18
California Health & Wellness Plan—Region 1	56.03%	39.61%	-16.42
California Health & Wellness Plan—Region 2	44.59%	25.80%	-18.79
CenCal Health—San Luis Obispo	50.77%	37.59%	-13.18
CenCal Health—Santa Barbara	66.01%	53.17%	-12.84
Central California Alliance for Health—Merced	44.38%	37.32%	-7.06
Central California Alliance for Health—Monterey/Santa Cruz	70.05%	67.86%	-2.19
Community Health Group Partnership Plan—San Diego	60.48%	53.94%	-6.54
Contra Costa Health Plan—Contra Costa	36.88%	27.45%	-9.43
Gold Coast Health Plan—Ventura	64.41%	56.86%	-7.55
Health Net Community Solutions, Inc.—Kern	43.86%	42.99%	-0.87
Health Net Community Solutions, Inc.—Los Angeles	45.54%	43.57%	-1.97
Health Net Community Solutions, Inc.—Sacramento	35.57%	37.34%	1.77
Health Net Community Solutions, Inc.—San Diego	NA	50.41%	—
Health Net Community Solutions, Inc.—San Joaquin	NA	34.62%	—
Health Net Community Solutions, Inc.—Stanislaus	25.00%	29.23%	4.23
Health Net Community Solutions, Inc.—Tulare	62.50%	47.00%	-15.50
Health Plan of San Joaquin—San Joaquin	40.75%	38.38%	-2.37
Health Plan of San Joaquin—Stanislaus	30.88%	31.41%	0.53

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Health Plan of San Mateo—San Mateo	64.78%	52.80%	-11.98
Inland Empire Health Plan—Riverside/San Bernardino	40.94%	42.30%	1.36
Kaiser NorCal (KP Cal, LLC)—KP North	26.09%	31.63%	5.54
Kaiser SoCal (KP Cal, LLC)—San Diego	34.29%	40.19%	5.90
Kern Health Systems, DBA Kern Family Health Care—Kern	45.16%	43.00%	-2.16
L.A. Care Health Plan—Los Angeles	44.21%	46.23%	2.02
Molina Healthcare of California—Imperial	NA	54.91%	—
Molina Healthcare of California—Riverside/San Bernardino	22.00%	37.01%	15.01
Molina Healthcare of California—Sacramento	36.00%	35.27%	-0.73
Molina Healthcare of California—San Diego	63.68%	57.24%	-6.44
Partnership HealthPlan of California—Northeast	19.86%	21.89%	2.03
Partnership HealthPlan of California—Northwest	65.99%	32.91%	-33.08
Partnership HealthPlan of California—Southeast	55.16%	43.83%	-11.33
Partnership HealthPlan of California—Southwest	49.11%	37.15%	-11.96
San Francisco Health Plan—San Francisco	65.28%	66.09%	0.81
Santa Clara Family Health Plan—Santa Clara	49.17%	57.08%	7.91
UnitedHealthcare Community Plan—San Diego	NA	47.02%	—

- ◆ Reportable rates for 26 of 44 (59.09 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, reportable rates for 14 of 44 (31.82 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while

rates for 20 of 56 (35.71 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.

Table B.18—Blood Lead Screening—Test at 24 Months of Age (BLS–2)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

National benchmarks are not available for this indicator.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	34.50%	34.50%	0.00
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	17.37%	22.89%	5.52
Aetna Better Health of California—San Diego	30.30%	28.38%	-1.92
Alameda Alliance for Health—Alameda	31.08%	36.49%	5.41
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	27.85%	33.10%	5.25
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	26.02%	20.00%	-6.02
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	37.38%	35.05%	-2.33
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	35.42%	33.10%	-2.32
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	58.77%	42.76%	-16.01
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	34.11%	32.89%	-1.22

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	26.38%	26.02%	-0.36
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	25.91%	26.77%	0.86
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	31.00%	33.87%	2.87
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	31.29%	32.10%	0.81
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	30.89%	39.85%	8.96
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	48.91%	33.13%	-15.78
Blue Shield of California Promise Health Plan—San Diego	41.96%	40.65%	-1.31
CalOptima—Orange	44.51%	42.17%	-2.34
CalViva Health—Fresno	40.42%	36.94%	-3.48
CalViva Health—Kings	43.11%	32.81%	-10.30
CalViva Health—Madera	59.08%	44.31%	-14.77
California Health & Wellness Plan—Imperial	59.76%	53.02%	-6.74
California Health & Wellness Plan—Region 1	44.35%	31.59%	-12.76
California Health & Wellness Plan—Region 2	22.16%	22.34%	0.18
CenCal Health—San Luis Obispo	36.70%	29.90%	-6.80
CenCal Health—Santa Barbara	50.49%	38.58%	-11.91
Central California Alliance for Health—Merced	30.26%	28.56%	-1.70
Central California Alliance for Health—Monterey/Santa Cruz	53.32%	54.29%	0.97

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	45.02%	42.88%	-2.14
Contra Costa Health Plan—Contra Costa	17.53%	19.16%	1.63
Gold Coast Health Plan—Ventura	44.44%	43.79%	-0.65
Health Net Community Solutions, Inc.—Kern	32.68%	27.52%	-5.16
Health Net Community Solutions, Inc.—Los Angeles	32.71%	33.71%	1.00
Health Net Community Solutions, Inc.—Sacramento	24.29%	28.94%	4.65
Health Net Community Solutions, Inc.—San Diego	37.77%	35.59%	-2.18
Health Net Community Solutions, Inc.—San Joaquin	22.96%	27.38%	4.42
Health Net Community Solutions, Inc.—Stanislaus	20.13%	20.99%	0.86
Health Net Community Solutions, Inc.—Tulare	47.54%	33.84%	-13.70
Health Plan of San Joaquin—San Joaquin	29.19%	29.52%	0.33
Health Plan of San Joaquin—Stanislaus	20.98%	24.01%	3.03
Health Plan of San Mateo—San Mateo	45.78%	38.80%	-6.98
Inland Empire Health Plan—Riverside/San Bernardino	28.69%	30.99%	2.30
Kaiser NorCal (KP Cal, LLC)—KP North	22.23%	25.18%	2.95
Kaiser SoCal (KP Cal, LLC)—San Diego	26.82%	32.34%	5.52
Kern Health Systems, DBA Kern Family Health Care—Kern	38.04%	33.31%	-4.73
L.A. Care Health Plan—Los Angeles	34.38%	36.02%	1.64
Molina Healthcare of California—Imperial	57.01%	44.40%	-12.61
Molina Healthcare of California—Riverside/San Bernardino	25.00%	25.97%	0.97
Molina Healthcare of California—Sacramento	22.07%	26.24%	4.17
Molina Healthcare of California—San Diego	45.92%	45.58%	-0.34

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	14.91%	17.23%	2.32
Partnership HealthPlan of California—Northwest	44.48%	28.17%	-16.31
Partnership HealthPlan of California—Southeast	33.72%	31.23%	-2.49
Partnership HealthPlan of California—Southwest	29.93%	31.54%	1.61
San Francisco Health Plan—San Francisco	46.12%	49.95%	3.83
Santa Clara Family Health Plan—Santa Clara	37.46%	40.86%	3.40
UnitedHealthcare Community Plan—San Diego	36.84%	33.62%	-3.22

- ◆ Rates for 27 of 56 (48.21 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 23 of 56 (41.07 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 21 of 56 (37.50 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.

Table B.19—Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

National benchmarks are not available for this indicator.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	24.15%	21.26%	-2.89
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	11.35%	13.88%	2.53
Aetna Better Health of California—San Diego	21.94%	16.96%	-4.98
Alameda Alliance for Health—Alameda	19.99%	21.47%	1.48
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	19.07%	21.21%	2.14
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	18.37%	12.06%	-6.31
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	22.20%	20.13%	-2.07
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	25.81%	20.45%	-5.36
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	47.41%	37.95%	-9.46
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	21.72%	21.38%	-0.34

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	15.16%	17.40%	2.24
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	12.92%	13.65%	0.73
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	26.19%	25.00%	-1.19
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	18.90%	23.97%	5.07
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	20.79%	26.03%	5.24
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	36.64%	23.16%	-13.48
Blue Shield of California Promise Health Plan—San Diego	32.14%	29.14%	-3.00
CalOptima—Orange	36.37%	31.51%	-4.86
CalViva Health—Fresno	26.97%	21.22%	-5.75
CalViva Health—Kings	33.22%	24.25%	-8.97
CalViva Health—Madera	51.63%	35.27%	-16.36
California Health & Wellness Plan—Imperial	52.04%	41.59%	-10.45
California Health & Wellness Plan—Region 1	34.30%	20.10%	-14.20
California Health & Wellness Plan—Region 2	12.04%	13.69%	1.65
CenCal Health—San Luis Obispo	24.22%	18.34%	-5.88
CenCal Health—Santa Barbara	40.91%	29.10%	-11.81
Central California Alliance for Health—Merced	20.89%	15.80%	-5.09
Central California Alliance for Health—Monterey/Santa Cruz	47.77%	42.46%	-5.31

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	35.30%	30.05%	-5.25
Contra Costa Health Plan—Contra Costa	10.28%	8.04%	-2.24
Gold Coast Health Plan—Ventura	34.48%	31.42%	-3.06
Health Net Community Solutions, Inc.—Kern	22.46%	16.06%	-6.40
Health Net Community Solutions, Inc.—Los Angeles	22.48%	20.57%	-1.91
Health Net Community Solutions, Inc.—Sacramento	12.42%	13.20%	0.78
Health Net Community Solutions, Inc.—San Diego	26.73%	27.00%	0.27
Health Net Community Solutions, Inc.—San Joaquin	10.09%	13.62%	3.53
Health Net Community Solutions, Inc.—Stanislaus	10.33%	9.82%	-0.51
Health Net Community Solutions, Inc.—Tulare	35.77%	24.50%	-11.27
Health Plan of San Joaquin—San Joaquin	17.37%	15.66%	-1.71
Health Plan of San Joaquin—Stanislaus	11.91%	13.03%	1.12
Health Plan of San Mateo—San Mateo	38.02%	29.53%	-8.49
Inland Empire Health Plan—Riverside/San Bernardino	17.84%	17.72%	-0.12
Kaiser NorCal (KP Cal, LLC)—KP North	8.30%	7.44%	-0.86
Kaiser SoCal (KP Cal, LLC)—San Diego	16.75%	14.47%	-2.28
Kern Health Systems, DBA Kern Family Health Care—Kern	29.48%	20.95%	-8.53
L.A. Care Health Plan—Los Angeles	23.88%	21.15%	-2.73
Molina Healthcare of California—Imperial	51.53%	31.55%	-19.98
Molina Healthcare of California—Riverside/San Bernardino	16.12%	16.53%	0.41
Molina Healthcare of California—Sacramento	8.93%	12.71%	3.78
Molina Healthcare of California—San Diego	35.94%	33.99%	-1.95

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	6.11%	7.10%	0.99
Partnership HealthPlan of California—Northwest	36.54%	20.13%	-16.41
Partnership HealthPlan of California—Southeast	20.78%	19.47%	-1.31
Partnership HealthPlan of California—Southwest	21.48%	19.43%	-2.05
San Francisco Health Plan—San Francisco	38.45%	39.43%	0.98
Santa Clara Family Health Plan—Santa Clara	27.61%	26.67%	-0.94
UnitedHealthcare Community Plan—San Diego	23.55%	19.83%	-3.72

- ◆ Rates for 35 of 56 (62.50 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 25 of 56 (44.64 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 21 of 56 (37.50 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.

Table B.20—Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS–316)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

National benchmarks are not available for this indicator.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	34.99%	32.29%	-2.70
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	25.93%	33.83%	7.90
Aetna Better Health of California—San Diego	38.82%	42.86%	4.04
Alameda Alliance for Health—Alameda	32.71%	30.97%	-1.74
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	30.81%	33.57%	2.76
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	21.25%	16.61%	-4.64
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	31.35%	23.95%	-7.40
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	27.91%	24.60%	-3.31
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	39.00%	33.70%	-5.30
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	23.89%	20.59%	-3.30

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	21.70%	18.76%	-2.94
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	36.94%	36.38%	-0.56
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	16.90%	18.82%	1.92
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	28.30%	33.85%	5.55
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	44.18%	39.85%	-4.33
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	26.14%	20.99%	-5.15
Blue Shield of California Promise Health Plan—San Diego	50.50%	39.32%	-11.18
CalOptima—Orange	29.11%	24.96%	-4.15
CalViva Health—Fresno	36.18%	30.47%	-5.71
CalViva Health—Kings	37.40%	38.01%	0.61
CalViva Health—Madera	40.35%	33.72%	-6.63
California Health & Wellness Plan—Imperial	53.61%	45.15%	-8.46
California Health & Wellness Plan—Region 1	20.57%	20.04%	-0.53
California Health & Wellness Plan—Region 2	17.49%	19.17%	1.68
CenCal Health—San Luis Obispo	12.58%	9.43%	-3.15
CenCal Health—Santa Barbara	29.91%	31.16%	1.25
Central California Alliance for Health—Merced	29.84%	27.97%	-1.87
Central California Alliance for Health—Monterey/Santa Cruz	25.69%	24.68%	-1.01

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	47.64%	43.73%	-3.91
Contra Costa Health Plan—Contra Costa	25.26%	21.17%	-4.09
Gold Coast Health Plan—Ventura	33.20%	26.76%	-6.44
Health Net Community Solutions, Inc.—Kern	41.02%	35.90%	-5.12
Health Net Community Solutions, Inc.—Los Angeles	39.48%	33.85%	-5.63
Health Net Community Solutions, Inc.—Sacramento	41.78%	38.72%	-3.06
Health Net Community Solutions, Inc.—San Diego	36.18%	34.19%	-1.99
Health Net Community Solutions, Inc.—San Joaquin	33.18%	28.87%	-4.31
Health Net Community Solutions, Inc.—Stanislaus	29.04%	25.90%	-3.14
Health Net Community Solutions, Inc.—Tulare	25.40%	24.35%	-1.05
Health Plan of San Joaquin—San Joaquin	38.65%	34.44%	-4.21
Health Plan of San Joaquin—Stanislaus	32.75%	30.08%	-2.67
Health Plan of San Mateo—San Mateo	34.41%	35.29%	0.88
Inland Empire Health Plan—Riverside/San Bernardino	39.95%	36.68%	-3.27
Kaiser NorCal (KP Cal, LLC)—KP North	23.85%	27.77%	3.92
Kaiser SoCal (KP Cal, LLC)—San Diego	36.04%	38.24%	2.20
Kern Health Systems, DBA Kern Family Health Care—Kern	51.59%	45.70%	-5.89
L.A. Care Health Plan—Los Angeles	39.33%	35.50%	-3.83
Molina Healthcare of California—Imperial	36.67%	40.35%	3.68
Molina Healthcare of California—Riverside/San Bernardino	39.41%	32.70%	-6.71
Molina Healthcare of California—Sacramento	45.56%	35.11%	-10.45
Molina Healthcare of California—San Diego	51.14%	47.05%	-4.09

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	15.14%	14.75%	-0.39
Partnership HealthPlan of California—Northwest	26.32%	25.28%	-1.04
Partnership HealthPlan of California—Southeast	30.12%	29.24%	-0.88
Partnership HealthPlan of California—Southwest	29.93%	24.86%	-5.07
San Francisco Health Plan—San Francisco	38.17%	34.40%	-3.77
Santa Clara Family Health Plan—Santa Clara	43.41%	42.59%	-0.82
UnitedHealthcare Community Plan—San Diego	47.76%	44.53%	-3.23

- ◆ Rates for 39 of 56 (69.64 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 25 of 56 (44.64 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020, while rates for 22 of 56 (39.29 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.

Table B.21—Lead Screening in Children (LSC)—MCP Reporting Unit-Level Results

■ indicates that the indicator rate was below the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

■ indicates that the indicator rate was above the statewide aggregate by at least a 10 percent relative difference for its respective measurement year.

The national benchmarks for measurement years 2020 and 2021 were 71.53 percent and 63.99 percent, respectively.

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Statewide Aggregate			
Statewide Aggregate	58.21%	52.06%	-6.15
MCP Reporting Unit			
Aetna Better Health of California—Sacramento	39.88%	37.18%	-2.70
Aetna Better Health of California—San Diego	55.88%	48.77%	-7.11
Alameda Alliance for Health—Alameda	58.40%	55.33%	-3.07
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	53.13%	47.70%	-5.42
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	53.96%	37.99%	-15.97
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	53.44%	50.22%	-3.22
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	67.23%	57.61%	-9.62
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	73.54%	68.75%	-4.79
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	52.56%	48.28%	-4.28

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	43.58%	40.99%	-2.59
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	44.31%	38.29%	-6.02
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	71.00%	59.41%	-11.59
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	68.21%	56.80%	-11.41
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	59.72%	52.70%	-7.02
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	68.84%	65.64%	-3.20
Blue Shield of California Promise Health Plan—San Diego	71.14%	60.48%	-10.66
CalOptima—Orange	66.10%	58.80%	-7.30
CalViva Health—Fresno	59.37%	54.31%	-5.06
CalViva Health—Kings	72.12%	69.71%	-2.41
CalViva Health—Madera	79.10%	75.89%	-3.21
California Health & Wellness Plan—Imperial	81.33%	72.99%	-8.34
California Health & Wellness Plan—Region 1	61.69%	54.93%	-6.76
California Health & Wellness Plan—Region 2	35.30%	39.32%	4.02
CenCal Health—San Luis Obispo	49.60%	49.95%	0.35
CenCal Health—Santa Barbara	67.41%	60.65%	-6.76
Central California Alliance for Health—Merced	53.61%	49.46%	-4.15
Central California Alliance for Health—Monterey/Santa Cruz	80.55%	73.13%	-7.42

APPENDIX B. MCP REPORTING UNIT FINDINGS

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Community Health Group Partnership Plan—San Diego	73.62%	66.71%	-6.91
Contra Costa Health Plan—Contra Costa	50.12%	37.21%	-12.91
Gold Coast Health Plan—Ventura	68.57%	61.68%	-6.89
Health Net Community Solutions, Inc.—Kern	62.31%	47.61%	-14.70
Health Net Community Solutions, Inc.—Los Angeles	59.18%	49.74%	-9.44
Health Net Community Solutions, Inc.—Sacramento	47.13%	40.34%	-6.79
Health Net Community Solutions, Inc.—San Diego	58.55%	55.03%	-3.52
Health Net Community Solutions, Inc.—San Joaquin	40.82%	39.05%	-1.77
Health Net Community Solutions, Inc.—Stanislaus	40.90%	35.44%	-5.46
Health Net Community Solutions, Inc.—Tulare	70.42%	68.76%	-1.66
Health Plan of San Joaquin—San Joaquin	51.58%	45.98%	-5.60
Health Plan of San Joaquin—Stanislaus	43.33%	37.47%	-5.86
Health Plan of San Mateo—San Mateo	73.38%	63.53%	-9.85
Inland Empire Health Plan—Riverside/San Bernardino	53.26%	47.04%	-6.22
Kaiser NorCal (KP Cal, LLC)—KP North	46.00%	43.01%	-2.99
Kaiser SoCal (KP Cal, LLC)—San Diego	60.89%	47.26%	-13.63
Kern Health Systems, DBA Kern Family Health Care—Kern	65.51%	53.14%	-12.37
L.A. Care Health Plan—Los Angeles	61.76%	52.57%	-9.19
Molina Healthcare of California—Imperial	79.56%	65.49%	-14.07
Molina Healthcare of California—Riverside/San Bernardino	47.02%	38.34%	-8.68
Molina Healthcare of California—Sacramento	43.82%	41.21%	-2.61
Molina Healthcare of California—San Diego	70.47%	67.62%	-2.85

MCP Reporting Unit	Measurement Year 2020 Rate	Measurement Year 2021 Rate	Percentage Point Difference
Partnership HealthPlan of California—Northeast	24.26%	27.53%	3.27
Partnership HealthPlan of California—Northwest	72.44%	64.13%	-8.31
Partnership HealthPlan of California—Southeast	58.04%	55.20%	-2.84
Partnership HealthPlan of California—Southwest	50.57%	46.09%	-4.48
San Francisco Health Plan—San Francisco	76.26%	70.22%	-6.04
Santa Clara Family Health Plan—Santa Clara	62.94%	57.09%	-5.85
UnitedHealthcare Community Plan—San Diego	59.06%	55.61%	-3.45

- ◆ Rates for 53 of 56 (94.64 percent) MCP reporting units decreased by at least 1 percentage point from measurement year 2020 to measurement year 2021. Additionally, rates for 16 of 56 (28.57 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2020; similarly, rates for 16 of 56 (28.57 percent) MCP reporting units were below the statewide aggregate by more than a 10 percent relative difference for measurement year 2021.
- ◆ Rates for 46 of 56 (82.14 percent) MCP reporting units fell below the national benchmark for measurement year 2020, while rates for 44 of 56 (78.57 percent) MCP reporting units fell below the national benchmark for measurement year 2021.

Appendix C. Additional Population Characteristics

Appendix C presents tables containing additional characteristics of the target population. The tables display the counts and percentages of the target population stratified by county and MCP reporting unit for measurement years 2020 and 2021.

Table C.1—County-Level Population

*The percentage for the statewide pediatric population (i.e., 21 years of age and younger as of the corresponding measurement year) is based on all MCMC members enrolled during the respective measurement year.

County	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Statewide Pediatric Population*	6,491,660	39.44%	6,296,488	38.87%
Alameda	182,951	2.83%	172,739	2.76%
Alpine	134	0.00%	128	0.00%
Amador	3,994	0.06%	3,997	0.06%
Butte	34,394	0.53%	33,215	0.53%
Calaveras	5,728	0.09%	5,713	0.09%
Colusa	5,896	0.09%	5,767	0.09%
Contra Costa	132,184	2.05%	128,422	2.05%
Del Norte	5,453	0.08%	5,359	0.09%
El Dorado	18,298	0.28%	17,827	0.28%
Fresno	259,315	4.02%	255,033	4.07%
Glenn	6,974	0.11%	6,993	0.11%
Humboldt	23,184	0.36%	22,717	0.36%
Imperial	48,400	0.75%	47,285	0.76%
Inyo	2,810	0.04%	2,809	0.04%
Kern	241,516	3.74%	240,097	3.83%
Kings	34,432	0.53%	33,902	0.54%
Lake	14,465	0.22%	14,291	0.23%
Lassen	4,038	0.06%	3,838	0.06%
Los Angeles	1,733,409	26.86%	1,670,995	26.68%

APPENDIX C. ADDITIONAL POPULATION CHARACTERISTICS

County	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Madera	41,610	0.64%	41,768	0.67%
Marin	21,140	0.33%	21,002	0.34%
Mariposa	2,176	0.03%	2,286	0.04%
Mendocino	18,680	0.29%	17,847	0.28%
Merced	77,801	1.21%	77,396	1.24%
Modoc	1,511	0.02%	1,571	0.03%
Mono	1,813	0.03%	1,738	0.03%
Monterey	103,999	1.61%	101,583	1.62%
Napa	16,800	0.26%	16,564	0.26%
Nevada	11,376	0.18%	10,939	0.17%
Orange	430,153	6.67%	411,334	6.57%
Placer	33,086	0.51%	32,651	0.52%
Plumas	2,783	0.04%	2,726	0.04%
Riverside	477,408	7.40%	471,472	7.53%
Sacramento	266,845	4.13%	261,444	4.17%
San Benito	10,511	0.16%	10,269	0.16%
San Bernardino	475,385	7.37%	462,062	7.38%
San Diego	438,182	6.79%	418,712	6.69%
San Francisco	64,732	1.00%	62,786	1.00%
San Joaquin	162,252	2.51%	158,086	2.52%
San Luis Obispo	30,503	0.47%	30,199	0.48%
San Mateo	65,075	1.01%	62,204	0.99%
Santa Barbara	84,892	1.32%	83,454	1.33%
Santa Clara	182,282	2.82%	174,337	2.78%
Santa Cruz	35,282	0.55%	33,688	0.54%
Shasta	31,000	0.48%	30,422	0.49%
Sierra	319	0.00%	308	0.00%
Siskiyou	8,209	0.13%	7,963	0.13%

County	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Solano	59,969	0.93%	58,469	0.93%
Sonoma	60,165	0.93%	58,319	0.93%
Stanislaus	125,052	1.94%	122,307	1.95%
Sutter	21,381	0.33%	20,773	0.33%
Tehama	14,455	0.22%	14,294	0.23%
Trinity	1,947	0.03%	1,980	0.03%
Tulare	141,179	2.19%	138,582	2.21%
Tuolumne	6,173	0.10%	5,924	0.09%
Ventura	124,275	1.93%	119,777	1.91%
Yolo	28,126	0.44%	26,802	0.43%
Yuba	17,375	0.27%	17,519	0.28%

Table C.2—Reporting Unit-Level Population

The counts displayed in the table are based on the MCP with which each member was most recently enrolled while 21 years of age or younger. The statewide pediatric population count will not align with those displayed in other tables of the report due to this methodology.

*The percentage for the statewide pediatric population (i.e., 21 years of age and younger as of the corresponding measurement year) is based on all MCMC members enrolled during the respective measurement year.

MCP Reporting Unit	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Statewide Pediatric Population*	5,903,567	35.87%	6,044,238	37.31%
Aetna Better Health of California—Sacramento	5,149	0.09%	6,567	0.11%
Aetna Better Health of California—San Diego	6,672	0.11%	8,267	0.14%
Alameda Alliance for Health—Alameda	113,987	1.93%	117,597	1.95%

APPENDIX C. ADDITIONAL POPULATION CHARACTERISTICS

MCP Reporting Unit	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Alameda	26,444	0.45%	27,542	0.46%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Contra Costa	15,998	0.27%	16,797	0.28%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Fresno	59,389	1.01%	61,931	1.02%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Kings	11,401	0.19%	11,608	0.19%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Madera	12,311	0.21%	12,972	0.21%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 1	32,152	0.54%	32,067	0.53%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Region 2	44,919	0.76%	47,292	0.78%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Sacramento	89,875	1.52%	90,655	1.50%

APPENDIX C. ADDITIONAL POPULATION CHARACTERISTICS

MCP Reporting Unit	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Benito	5,177	0.09%	5,493	0.09%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—San Francisco	5,596	0.09%	5,448	0.09%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Santa Clara	27,614	0.47%	28,960	0.48%
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan—Tulare	56,555	0.96%	59,008	0.98%
Blue Shield of California Promise Health Plan (prior to January 1, 2019, known as Care1st Health Plan)—San Diego	29,536	0.50%	33,318	0.55%
CalOptima—Orange	363,503	6.16%	372,616	6.16%
CalViva Health—Fresno	162,298	2.75%	164,406	2.72%
CalViva Health—Kings	17,126	0.29%	17,365	0.29%
CalViva Health—Madera	23,756	0.40%	24,113	0.40%
California Health & Wellness Plan—Imperial	33,843	0.57%	34,407	0.57%
California Health & Wellness Plan—Region 1	38,794	0.66%	40,727	0.67%
California Health & Wellness Plan—Region 2	27,573	0.47%	28,274	0.47%
CenCal Health—San Luis Obispo	26,369	0.45%	27,688	0.46%

APPENDIX C. ADDITIONAL POPULATION CHARACTERISTICS

MCP Reporting Unit	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
CenCal Health—Santa Barbara	74,747	1.27%	77,601	1.28%
Central California Alliance for Health—Merced	70,310	1.19%	72,535	1.20%
Central California Alliance for Health—Monterey/Santa Cruz	123,692	2.10%	125,084	2.07%
Community Health Group Partnership Plan—San Diego	134,994	2.29%	140,784	2.33%
Contra Costa Health Plan—Contra Costa	88,016	1.49%	92,700	1.53%
Gold Coast Health Plan—Ventura	107,041	1.81%	109,753	1.82%
Health Net Community Solutions, Inc.—Kern	34,832	0.59%	35,529	0.59%
Health Net Community Solutions, Inc.—Los Angeles	424,556	7.19%	420,606	6.96%
Health Net Community Solutions, Inc.—Sacramento	54,202	0.92%	57,480	0.95%
Health Net Community Solutions, Inc.—San Diego	34,322	0.58%	35,520	0.59%
Health Net Community Solutions, Inc.—San Joaquin	10,100	0.17%	10,450	0.17%
Health Net Community Solutions, Inc.—Stanislaus	32,335	0.55%	31,707	0.52%
Health Net Community Solutions, Inc.—Tulare	63,334	1.07%	64,201	1.06%
Health Plan of San Joaquin—San Joaquin	122,263	2.07%	125,993	2.08%

APPENDIX C. ADDITIONAL POPULATION CHARACTERISTICS

MCP Reporting Unit	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
Health Plan of San Joaquin—Stanislaus	73,078	1.24%	75,689	1.25%
Health Plan of San Mateo—San Mateo	55,830	0.95%	57,420	0.95%
Inland Empire Health Plan—Riverside/San Bernardino	688,673	11.67%	708,108	11.72%
Kaiser NorCal (KP Cal, LLC)—KP North	58,646	0.99%	62,282	1.03%
Kaiser SoCal (KP Cal, LLC)—San Diego	25,137	0.43%	26,738	0.44%
Kern Health Systems, DBA Kern Family Health Care—Kern	160,204	2.71%	166,104	2.75%
L.A. Care Health Plan—Los Angeles	957,740	16.22%	971,003	16.06%
Molina Healthcare of California—Imperial	6,507	0.11%	6,771	0.11%
Molina Healthcare of California—Riverside/San Bernardino	78,332	1.33%	80,793	1.34%
Molina Healthcare of California—Sacramento	21,736	0.37%	21,867	0.36%
Molina Healthcare of California—San Diego	102,484	1.74%	103,974	1.72%
Partnership HealthPlan of California—Northeast	39,932	0.68%	41,342	0.68%
Partnership HealthPlan of California—Northwest	25,771	0.44%	26,044	0.43%
Partnership HealthPlan of California—Southeast	91,148	1.54%	94,871	1.57%
Partnership HealthPlan of California—Southwest	98,896	1.68%	102,050	1.69%

APPENDIX C. ADDITIONAL POPULATION CHARACTERISTICS

MCP Reporting Unit	Measurement Year 2020 Count	Measurement Year 2020 Percentage	Measurement Year 2021 Count	Measurement Year 2021 Percentage
San Francisco Health Plan—San Francisco	47,256	0.80%	49,497	0.82%
Santa Clara Family Health Plan—Santa Clara	118,819	2.01%	122,007	2.02%
UnitedHealthcare Community Plan—San Diego	6,925	0.12%	8,851	0.15%

Overview

At the request of the Joint Legislative Audit Committee, the California State Auditor published an audit report in March 2019 regarding the California Department of Health Care Services' (DHCS') oversight of the delivery of preventive services to children enrolled in the California Medi-Cal Managed Care program (MCMC). The audit report recommended DHCS expand the performance measures it collects and reports on to ensure all age groups receive preventive services from the managed care health plans (MCPs).¹² In response to this recommendation, DHCS requested that Health Services Advisory Group, Inc. (HSAG), start producing an annual Preventive Services Utilization Report in 2020. For the 2022 Preventive Services Report, HSAG will continue to analyze child and adolescent performance measures either calculated by HSAG or DHCS, or reported by the 25 full-scope MCPs for measurement year 2021 from the Managed Care Accountability Set (MCAS). MCAS measures reflect clinical quality, timeliness, and access to care provided by MCPs to their members, and each MCP is required to report audited MCAS results to DHCS annually. DHCS can leverage the findings in the Preventive Services Report to address the clinical focus area of children's preventive care identified in its 2022 Comprehensive Quality Strategy¹³ and monitor appropriate utilization of preventive services for MCMC children.

For the 2021–22 contract year, HSAG evaluated measure data collected for Healthcare Effectiveness Data and Information Set (HEDIS®) measurement year 2021, which consists of data collected during calendar year 2021.¹⁴ The indicator set for this analysis included a total of 12 MCP-calculated indicators, four HSAG-calculated indicators (i.e., administrative indicators calculated by HSAG for DHCS), and five DHCS-calculated indicators. For each MCP-calculated indicator, MCPs used numerator and denominator criteria and minimum enrollment requirements defined either by the HEDIS specification for the Medicaid population or by the Centers for Medicare & Medicaid Services (CMS') Core Set of Children's Health Care Quality Measures for Medicaid and the Children's Health Insurance Program (CHIP) (Child Core Set). For the HSAG-calculated indicators, HSAG developed specifications for three indicators and used the CMS Child Core Set specifications for the remaining indicator. For the DHCS-calculated indicators, DHCS developed specifications for four of the indicators and used the HEDIS specification for the remaining indicator. Please note, in an effort to focus the Preventive Services Report on more actionable results for stakeholders, HSAG and DHCS will

¹² California State Auditor. Department of Health Care Services: Millions of Children in Medi-Cal Are Not Receiving Preventive Health Services, March 2019. Available at: <https://www.auditor.ca.gov/pdfs/reports/2018-111.pdf>. Accessed on: Feb 14, 2023.

¹³ State of California Department of Health Care Services. Comprehensive Quality Strategy. February 2022. Available at: <https://www.dhcs.ca.gov/services/Documents/Formatted-Combined-CQS-2-4-22.pdf>. Accessed on: Feb 14, 2023.

¹⁴HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

develop criteria to determine which results to include in the body of the report, and all other results will be presented in appendices.

Preventive Services Utilization Indicators and Data Sources

MCP-Calculated Indicators and Data Sources

Table D.1 displays the MCP-calculated indicators included in the Preventive Services Utilization analysis, the reporting methodology for each indicator (“H” indicates hybrid and “A” indicates administrative), the age groups for each indicator, and the benchmark source used for comparisons for each applicable indicator.

Table D.1—MCP-Calculated Indicators, Methodology, Age Groups, and Benchmarks

“National Committee for Quality Assurance (NCQA) Quality Compass” refers to NCQA’s Quality Compass national Medicaid Health Maintenance Organization (HMO) 50th percentiles¹⁵ for each of the corresponding indicators.

“CMS Child Core Set” refers to CMS’ Child Core Set National Median. This is the calculated 50th percentile of the total statewide rates reported by 28 states.

*For measurement year 2020, HSAG only compared the *Well-Child Visits in the First 15 Months—Six or More Well-Child Visits* stratification of the *Well-Child Visits in the First 30 Months of Life* indicator to NCQA Quality Compass benchmarks.

^Given that CMS transitioned to the Quality Measure Reporting (QMR) system, state reporting for measurement year 2020 was delayed; therefore, FFY 2021 benchmarks are unavailable. As a result, HSAG will compare measurement year 2021 rates for this indicator to the FFY 2020 benchmarks.

N/A indicates that national benchmarks are unavailable for the corresponding indicator.

Indicators	Methodology	Age Groups	Benchmarks
MCP-Calculated Indicators			
<i>Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits (W30–6) and Well-Child Visits for Age 15 Months to 30 Months—Two or More Well-Child Visits (W30–2)</i>	A	15 Months; 30 Months	Measurement years 2021 NCQA Quality Compass*
<i>Child and Adolescent Well-Care Visits—Total (WCV)</i>	A	3 to 11 Years; 12 to 17 Years; 18 to 21 Years	Measurement year 2021 NCQA Quality Compass

¹⁵ Quality Compass® is a registered trademark of NCQA.

Indicators	Methodology	Age Groups	Benchmarks
<i>Childhood Immunization Status—Combination 10 (CIS–10)</i>	H	2 Years	Measurement years 2020 and 2021 NCQA Quality Compass
<i>Chlamydia Screening in Women—16 to 20 Years (CHL–1620)</i>	A	16 to 20 Years	Measurement years 2020 and 2021 NCQA Quality Compass
<i>Developmental Screening in the First Three Years of Life—Total (DEV)[^]</i>	A	1 Year; 2 Years; 3 Years	FFY 2020 CMS Child Core Set
<i>Follow-Up After Emergency Department Visit for Mental Illness—6 to 17 Years—30-Day Follow-Up (FUM–30)</i>	A	6 to 17 Years	Measurement years 2020 and 2021 NCQA Quality Compass
<i>Immunizations for Adolescents—Combination 2 (Meningococcal; Tetanus, Diphtheria Toxoids, and Acellular Pertussis [Tdap]; and Human Papillomavirus [HPV]) (IMA–2)</i>	H	13 Years	Measurement years 2020 and 2021 NCQA Quality Compass
<i>Screening for Depression and Follow-Up Plan (CDF)</i>	A	12 to 17 Years; 18 to 21 Years	N/A
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Body Mass Index (BMI) Percentile Documentation—Total (WCC–BMI), Counseling for Nutrition—Total (WCC–N), and Counseling for Physical Activity (WCC–PA)</i>	H	3 to 11 Years; 12 to 17 Years; Total	Measurement years 2020 and 2021 NCQA Quality Compass

For the MCP-calculated indicators listed in Table D.1, HSAG received the CA-required patient-level detail file from each Medi-Cal MCP for each HEDIS reporting unit. The measurement year 2021 patient-level detail files followed HSAG’s patient-level detail file instructions and included the Medi-Cal client identification number, date of birth, and member months for members included in the audited MCP-calculated indicator rates. Additionally, the patient-level detail files indicated whether a member was included in the numerator and/or denominator for

each applicable MCP-calculated indicator. HSAG validated the patient-level detail files to ensure the numerator and denominator counts matched what was reported by MCPs in the audited HEDIS Interactive Data Submission System files and non-HEDIS Excel reporting files. Please note, it is possible that some or all MCPs included non-certified eligible members in the measurement year 2021 rates. HSAG used these patient-level detail files, along with supplemental files (e.g., demographic data provided by DHCS), to perform the measure analysis. HSAG obtained the following demographic information from DHCS' Management Information System/Decision Support System data system:

- ◆ CA-required demographic file
 - Member's Medi-Cal client identification number
 - Date of birth
 - ZIP Code
 - Gender
 - Race/Ethnicity
 - Primary language
 - County

To stratify the MCP-calculated indicator rates, HSAG first combined the patient-level detail files provided by MCPs with the demographic file provided by DHCS. The following outlines HSAG's process for matching members in the indicator files:

Step 1: Records with missing demographic information for every field were deleted from the demographic file.

Step 2: For records missing some demographic values (e.g., race/ethnicity, language, gender, or county) in the most recent record, HSAG obtained the demographic values from another record in the demographic file using the following logic:

- ◆ HSAG prioritized records from the same reporting unit as the patient-level detail file. If there were no records within the same reporting unit, then HSAG used records from other reporting units to retrieve missing information.
- ◆ HSAG prioritized the most recent non-missing observation within the measurement year using the following logic:
 - HSAG first tried to recover the missing demographic values from the most recent non-missing observation within calendar year 2021.
 - If HSAG could not recover the missing demographic values from a record within calendar year 2021, then the most recent non-missing observation from calendar year 2020 was used.
- ◆ If HSAG could not obtain data for the missing demographic values, then a value of "Unknown/Missing" was assigned.

Step 3: HSAG combined the demographic file with the patient-level detail file by Medi-Cal client identification number and prioritized matches within the same reporting unit first, using

records from other reporting units when necessary using the same logic as in Step 2. If a client identification number had multiple records in the demographic file with a date of birth within 10 years of each other, then the most recent non-missing demographic information was used. Additionally, to avoid combining a parent record with a child record that contained the same client identification number, HSAG only considered a client identification number to match if the date of birth in the demographic file was within 10 years of the date of birth recorded in the patient-level detail file. If HSAG could not obtain county data from the demographic file, then HSAG did the following:

- ◆ If the county code was missing or “Unknown,” then HSAG imputed the county based on the ZIP Code from the demographic file. If the ZIP Code and the county were missing, then HSAG assigned a county of “Unknown/Missing.”

HSAG-Calculated Indicators and Data Sources

Table D.2 displays the HSAG-calculated indicators included in the Preventive Services Utilization analysis, the reporting methodology for each indicator (“A” indicates administrative), age groups for each indicator, and the benchmark source used for comparisons for each applicable indicator. Please refer to the “HSAG and DHCS Measure Specifications” heading for the detailed measure specifications for the three HSAG-calculated indicators.¹⁶

Table D.2—HSAG-Calculated Indicators, Methodology, Age Groups, and Benchmarking Source

N/A indicates that national benchmarks are unavailable for the corresponding indicator.

Indicators	Methodology	Age Groups	Benchmarking Source
HSAG-Calculated Indicators			
<i>Alcohol Use Screening (AUS)</i>	A	11 to 17 Years; 18 to 21 Years	N/A
<i>Dental Fluoride Varnish (DFV)</i>	A	6 Months to 5 Years	N/A
<i>Follow-Up After Hospitalization for Mental Illness—6 to 17 Years—7-Day Follow-Up (FUH-7)</i>	A	6 to 17 Years	Measurement years 2020 and 2021 NCQA Quality Compass
<i>Tobacco Use Screening (TUS)</i>	A	11 to 17 Years; 18 to 21 Years	N/A

¹⁶ The remaining HSAG-calculated indicator was calculated in accordance with the CMS Child Core Specifications.

For the HSAG-calculated indicators listed in Table D.2, HSAG received claims/encounter data; member enrollment, eligibility, and demographic data; and provider files from DHCS. Upon receipt of the data from DHCS, HSAG evaluated the data files and performed preliminary file validation. HSAG verified that the data were complete and accurate by ensuring correct formatting, confirming reasonable value ranges for critical data fields, assessing monthly enrollment and claim counts, and identifying fields with a high volume of missing values. HSAG maintained an issue log to document any data issues identified throughout the review process. Upon completion of this review, HSAG communicated with DHCS and discussed the extent to which the identified data issues may affect the integrity of the analyses.

Once DHCS confirmed HSAG had complete and valid data, HSAG proceeded with calculating the HSAG-calculated indicators. Using the approved applicable specifications for the HSAG-calculated indicators, HSAG developed programming code in SAS. Each HSAG-calculated indicator was assigned a lead programming analyst and a validating analyst. The lead programming analyst developed the primary code based on the approved specifications. After the lead programming analyst completed the analyses, the validating analyst independently validated the results, which ensured that the results generated were accurate and complete. Specifically, the validating analyst used the approved specifications to develop his or her own program code and compared the results with those generated by the lead programming analyst. This separate program run process allowed for a more comprehensive and thorough validation to identify any issues with the lead programming analyst's results. The validating analyst maintained a validation log and communicated to the lead programming analyst any issues or discrepancies. Once the indicator rates were validated, the lead programming analyst also compared the indicator rates to any applicable benchmarks or similar indicator results for reasonability.

HSAG also produced patient-level detail files for the HSAG-calculated indicators as part of the calculation. The patient-level detail files included the Medi-Cal client identification number and date of birth and indicated whether a member was included in the numerator and/or denominator for each applicable HSAG-calculated indicator. Since DHCS provided demographic data for each member, HSAG also included the following data elements in the HSAG-calculated patient-level detail files:

- ◆ Date of birth
- ◆ ZIP Code
- ◆ Gender
- ◆ Race/Ethnicity
- ◆ Primary language
- ◆ County

DHCS-Calculated Indicators and Data Sources

Table D.3 displays the DHCS-calculated *Blood Lead Screening* indicators included in the Preventive Services Utilization analysis, the reporting methodology for each indicator (“A” indicates administrative), age groups for each indicator, and the benchmark source used for comparisons for each applicable indicator. DHCS calculated all *Blood Lead Screening* indicators using administrative and supplemental registry data. Of note, the *Lead Screening in Children* indicator was calculated following the Medicaid HEDIS technical specifications using administrative and supplemental registry data. Please refer to the “HSAG and DHCS Measure Specifications” heading for the detailed measure specifications for the DHCS-calculated indicators.

Table D.3—DHCS-Calculated Indicators, Methodology, Age Groups, and Benchmarking Source

“NCQA Quality Compass” refers to NCQA’s Quality Compass national HMO 50th percentile for the corresponding indicator.

N/A indicates that national benchmarks are unavailable for the corresponding indicator.

Indicators	Methodology	Age Groups	Benchmarking Source
Title 17 Blood Lead Screening Indicators			
<i>Blood Lead Screening—Test at 12 Months of Age (BLS–1)</i>	A	1 Year	N/A
<i>Blood Lead Screening—Test at 24 Months of Age (BLS–2)</i>	A	2 Years	N/A
<i>Blood Lead Screening—Two Tests by 24 Months of Age (BLS–1 and 2)</i>	A	2 Years	N/A
<i>Blood Lead Screening—Catch-Up Test by 6 Years of Age (BLS–316)</i>	A	6 Years	N/A
HEDIS Blood Lead Screening Indicator			
<i>Lead Screening in Children (LSC)</i>	A	2 Years	Measurement years 2020 and 2021 NCQA Quality Compass

For the DHCS-calculated indicators listed in Table D.3, HSAG received a member-level file that provided the Medi-Cal client identification number and numerator and denominator flags for each *Blood Lead Screening* indicator. HSAG applied continuous enrollment criteria to the member-level file, combined the file with DHCS-provided demographic data, and calculated statewide and stratified rates for each *Blood Lead Screening* indicator.

Analyses

Using the MCP-calculated, HSAG-calculated, and DHCS-calculated indicator rates, HSAG performed statewide-level, regional-level, and MCP reporting unit-level analyses for measurement year 2021. For all applicable indicators, HSAG presented comparisons to measurement year 2020 results for the statewide and regional analyses within horizontal bar charts. Similarly, HSAG presented measurement year 2020 and measurement year 2021 MCP reporting unit results in tabular format. HSAG produced a formal report that presented statewide, regional, and MCP reporting unit results for the MCP-calculated, HSAG-calculated, and DHCS-calculated indicators. Additionally, using the DHCS-calculated *Blood Lead Screening* measurement year 2021 results, HSAG performed a benchmarking analysis to determine if there were any changes from the measurement year 2020 benchmarking analysis results. HSAG will provide the Blood Lead Screening Benchmarking Analysis separately from the 2022 Preventive Services Report. Since the 2022 Preventive Services Utilization Report is public-facing, HSAG suppressed results with small denominators (fewer than 30) or small numerators (fewer than 11).

Statewide-Level Analysis

HSAG calculated statewide rates for the 12 MCP-calculated indicators listed in Table D.1 and the four HSAG-calculated indicators listed in Table D.2. HSAG used the member-level data for the five DHCS-calculated indicators listed in Table D.3 to derive statewide rates. HSAG also stratified the statewide indicator rates by the demographic stratifications outlined in Table D.4.

Table D.4—Statewide Stratifications

*Primary language stratifications were derived from the current threshold languages for Medi-Cal Managed Care counties as of April 2021. All non-threshold languages were included in the “Other” primary language group.

Stratification	Groups
Demographic	
Race/ethnicity	Hispanic or Latino, White, Black or African American, Asian, American Indian or Alaska Native, Native Hawaiian or Other Pacific Islander, Other, and Unknown/Missing (see Table D.5 for more detail)
Primary language*	English, Spanish, Arabic, Armenian, Cambodian, Chinese (Mandarin or Cantonese), Farsi, Hmong, Korean, Russian, Tagalog, Vietnamese, Other, and Unknown/Missing

Stratification	Groups
Age	Vary depending on indicator specifications (see Table D.1, Table D.2, and Table D.3 for more detail)
Gender	Male and Female

Table D.5 displays the individual racial/ethnic groups that comprise the Asian and Native Hawaiian or Other Pacific Islander racial/ethnic demographic stratifications. Racial/ethnic stratifications were based on data collection guidance from the federal Office of Management and Budget as well as the U.S. Department of Health and Human Services.

Table D.5—Asian and Native Hawaiian or Other Pacific Islander Racial/Ethnic Stratification Groups

*Some “Other Pacific Islanders” who would not be considered part of the Asian racial/ethnic group were included in the Asian racial/ethnic group due to limitations of existing data fields (i.e., the data do not allow HSAG to parse out racial/ethnic groups that may not be considered Asian).

Stratification	Groups
Asian	Filipino, Amerasian, Chinese, Cambodian, Japanese, Korean, Asian Indian, Laotian, Vietnamese, Hmong, and Other Asian or Pacific Islander*
Native Hawaiian or Other Pacific Islander	Hawaiian, Guamanian, and Samoan

For the statewide-level analysis, HSAG presented the measurement year 2021 statewide rates with comparisons to measurement year 2020 statewide rates, where applicable, in horizontal bar charts. HSAG displayed a separate horizontal bar chart for all applicable demographic stratifications with the denominator and rate displayed for each applicable stratification, along with comparisons to the statewide aggregate and national benchmarks, where applicable.

Regional-Level Analysis

HSAG also calculated regional-level rates for the 12 MCP-calculated indicators listed in Table D.1 and the four HSAG-calculated indicators listed in Table D.2. HSAG used the member-level data for the five DHCS-calculated indicators listed in Table D.3 to derive regional rates. The regional stratifications are listed in Table D.6.

Table D.6—Regional Stratification Groups

*The Imperial and San Benito delivery models are not included in the delivery type model analysis since the rates for those models are represented in the county stratifications.

Stratification	Groups
County	Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Fresno, Glenn, Humboldt, Imperial, Inyo, Kern, Kings, Lake, Lassen, Los Angeles, Madera, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Orange, Placer, Plumas, Riverside, Sacramento, San Benito, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tulare, Tuolumne, Ventura, Yolo, Yuba
Delivery Type Model*	County Organized Health Systems, Geographic Managed Care, Two-Plan (i.e., Local Initiative or Commercial Plan), Regional
Population Density	Urban, Rural

For the regional analysis, HSAG presented the measurement year 2021 delivery type model-level and population density-level rates with comparisons to measurement year 2020 rates, where applicable, in horizontal bar charts. HSAG displayed a separate horizontal bar chart for all applicable regional stratifications with the denominator and rate displayed for each applicable stratification, along with comparisons to the statewide aggregate and national benchmarks, where applicable.

HSAG presented the measurement year 2021 county-level rates using a map of California which includes shading to indicate performance. To highlight regional performance differences, HSAG shaded each county using a color gradient based on how the rate for each county compared to the performance quintiles. For each indicator, HSAG calculated performance quintiles based on county performance (i.e., 20th percentile, 40th percentile, 60th percentile, and 80th percentile). HSAG then determined into which quintile each county fell (e.g., below the 20th percentile, between the 20th and 40th percentiles). HSAG shaded each county based on the corresponding quintiles as displayed in Table D.7.

Table D.7—Quintile Thresholds and Corresponding Colors

Quintile	Performance Thresholds and Corresponding Colors
NA	Small denominator or suppressed rate
Quintile 1 (least favorable rates)	Below the 20th percentile
Quintile 2	At or above the 20th percentile but below the 40th percentile
Quintile 3	At or above the 40th percentile but below the 60th percentile
Quintile 4	At or above the 60th percentile but below the 80th percentile
Quintile 5 (most favorable rates)	At or above the 80th percentile

MCP Reporting Unit-Level Analysis

HSAG used the MCP reporting unit-level rates for the 12 MCP-calculated indicators listed in Table D.1 and calculated measurement years 2020 and 2021 MCP reporting unit-level rates for the four HSAG-calculated indicators listed in Table D.2 and the five DHCS-calculated indicators listed in Table D.3. HSAG also calculated the percentage point difference between measurement years 2020 and 2021 rates, where applicable.

HSAG included a member in an MCP reporting unit's rate calculation if the member met the indicator's continuous enrollment criteria with the MCP reporting unit. For the four HSAG-calculated indicators and five DHCS-calculated indicators, HSAG calculated rates for the 56 MCP reporting units as displayed in Table D.8.

Table D.8—MCP Reporting Units

MCP Name	Reporting Units
Aetna Better Health of California	Sacramento, San Diego
Alameda Alliance for Health	Alameda
Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan	Alameda, Contra Costa, Fresno, Kings, Madera, Region 1 (Butte, Colusa, Glenn, Plumas, Sierra, Sutter, and Tehama counties), Region 2 (Alpine, Amador, Calaveras, El Dorado, Inyo, Mariposa, Mono, Nevada, Placer, Tuolumne, and Yuba counties), Sacramento, San Benito, San Francisco, Santa Clara, Tulare

MCP Name	Reporting Units
Blue Shield of California Promise Health Plan	San Diego
California Health & Wellness Plan	Imperial, Region 1, Region 2
CalOptima	Orange
CalViva Health	Fresno, Kings, Madera
CenCal Health	San Luis Obispo, Santa Barbara
Central California Alliance for Health	Merced, Monterey/Santa Cruz
Community Health Group Partnership Plan	San Diego
Contra Costa Health Plan	Contra Costa
Gold Coast Health Plan	Ventura
Health Net Community Solutions, Inc.	Kern, Los Angeles, Sacramento, San Diego, San Joaquin, Stanislaus, Tulare
Health Plan of San Joaquin	San Joaquin, Stanislaus
Health Plan of San Mateo	San Mateo
Inland Empire Health Plan	Riverside/San Bernardino
Kaiser NorCal (KP Cal, LLC)	KP North (Amador, El Dorado, Placer, and Sacramento counties)
Kaiser SoCal (KP Cal, LLC)	San Diego
Kern Health Systems, DBA Kern Family Health Care	Kern
L.A. Care Health Plan	Los Angeles
Molina Healthcare of California	Imperial, Riverside/San Bernardino, Sacramento, San Diego
Partnership HealthPlan of California	Northeast (Lassen, Modoc, Shasta, Siskiyou, and Trinity counties), Northwest (Del Norte and Humboldt counties), Southeast (Napa, Solano, and Yolo counties), Southwest (Lake, Marin, Mendocino, and Sonoma counties)
San Francisco Health Plan	San Francisco
Santa Clara Family Health Plan	Santa Clara
UnitedHealthcare Community Plan	San Diego

Blood Lead Screening Benchmarking Analysis

HSAG performed a separate Blood Lead Screening Benchmarking Analysis for measurement year 2021 using the MCP reporting unit rates calculated by DHCS using three benchmarking methodologies:

- ◆ For each *Blood Lead Screening* indicator, HSAG calculated performance quintiles based on MCP reporting unit performance (i.e., 20th percentile, 40th percentile, 60th percentile, and 80th percentile). HSAG then determined into which quintile each MCP reporting unit's performance fell (e.g., below the 20th percentile, between the 20th and 40th percentiles). HSAG also compared MCP reporting unit quintile performance to that of the county/regional aggregate rate, population densities (i.e., urban and rural), and known blood lead levels (i.e., higher and lower) in order to assess factors beyond the MCP's control that may impact MCP reporting unit performance on the *Blood Lead Screening* indicators. HSAG determined higher and lower known blood lead level areas based on the California Department of Public Health's blood lead levels dataset,¹⁷ which contains known blood lead levels for children younger than 6 years of age by county, using data from calendar year 2015. For each MCP reporting unit, HSAG determined if the percentage of members with higher known blood lead levels in the MCP reporting unit was higher or lower than the statewide median. If the MCP reporting unit was greater than or equal to the statewide median, then the MCP reporting unit was considered to have higher known blood lead levels, and if the MCP reporting unit was less than the statewide median, then the MCP reporting unit was considered to have lower known blood lead levels.
- ◆ HSAG compared MCP reporting unit rates for the *Lead Screening in Children* indicator to NCQA's Quality Compass national Medicaid HMO 50th percentile. HSAG compared MCP reporting unit *Lead Screening in Children* indicator performance to MCP reporting unit performance for the four California Title 17 *Blood Lead Screening* indicators. HSAG used this approach to determine if performance for the California Title 17 indicators aligns with the *Lead Screening in Children* indicator performance.
- ◆ For each indicator, HSAG calculated a statewide benchmark, based on a modified version of the Achievable Benchmarks of Care™ benchmarking methodology,¹⁸ using MCP reporting unit-level indicator rates. For each indicator, the statewide benchmark is the weighted average of the highest performing MCP reporting units that account for at least 50 percent of the overall Medi-Cal population. This type of methodology was chosen as it is useful in comparing performance between groups of varying sizes, like MCP reporting units.

¹⁷ California Department of Public Health. California blood lead data, 2015. Available at: https://www.cdph.ca.gov/Programs/CCDPHP/DEODC/CLPPB/CDPH%20Document%20Library/BLL_Counts_2015_by_LHD_XLS.xlsx. Accessed on: Feb 14, 2023.

¹⁸ Kiefe, CI, Weissman, NW, Allison, JJ, et al. Identifying achievable benchmarks of care: Concepts and methodology. *International Journal for Quality in Health Care*. doi:10.1093/intqhc/10.5.443. Available at: <https://academic.oup.com/intqhc/article/10/5/443/1818047?login=false>. Accessed on: Feb 10, 2023.

To determine the association between MCP reporting unit-level *Lead Screening in Children* indicator performance and performance for each of the California Title 17 *Blood Lead Screening* indicators, HSAG used Pearson's correlation coefficient (r). HSAG also compared the measurement year 2021 results for each benchmarking methodology to the measurement year 2020 benchmarking results. HSAG provided the results of these analyses to DHCS, along with items for DHCS' consideration, in a separate, formal report that may be made publicly available.

Coronavirus Disease 2019 (COVID-19) Analysis

DHCS provided HSAG with summary data from its COVID-19 module, which included COVID-19 case and vaccination rates for the pediatric MCMC population, stratified by demographics (i.e., race/ethnicity, primary language, age, and gender), county, and region, if available, to better understand the prevalence of COVID-19 within the pediatric MCMC population.

Determination of Key Findings

HSAG will work with DHCS to determine which results will be considered key findings for inclusion in the body of the 2022 Preventive Services Report. At a minimum, HSAG will test the following criteria for inclusion:

- ◆ Indicators with large rate changes from year-to-year
- ◆ Indicator rates with overall low performance
- ◆ Racial/ethnic, primary language, gender, and age groups with disparate performance for indicators
- ◆ Indicator rates with regional variations in performance
- ◆ Domains with overall poor performance

Once complete data are available, HSAG will test the criteria above and share the results with DHCS. Additionally, HSAG will provide its recommendations to DHCS regarding which results should be considered key findings for the 2022 Preventive Services Report.

Caveats

Administrative Data Incompleteness

For the *Alcohol Use Screening*, *Lead Screening in Children*, and *Tobacco Use Screening* indicators, the administrative rates may be artificially low due to a lack of reporting within administrative data sources (i.e., medical record review or electronic health record data could be necessary to capture this information). Of note, alcohol or tobacco screenings and the administration of dental fluoride varnish that occur during a visit to a Federally Qualified Health Center are not captured in administrative data; therefore, rates for these indicators may be incomplete due to provider billing practices.

Benchmark Comparisons

National benchmarks for the *Lead Screening in Children* indicator are derived from data collected using the hybrid methodology (i.e., administrative and medical record review data); however, the *Lead Screening in Children* indicator rates calculated by DHCS relied on administrative and supplemental registry data. Therefore, exercise caution when comparing *Lead Screening in Children* indicator rates presented in the Preventive Services Report to national benchmarks.

COVID-19 Rate Impacts

The COVID-19 pandemic and subsequent public health emergency likely impacted measurement year 2020 rates given stay-at-home orders and other statewide and national efforts taken to mitigate the spread of COVID-19. Given this, please exercise caution when comparing measurement years 2020 and 2021 rates.

Demographic Characteristic Assignment

Members' demographic characteristics may change as their records are updated over time. For instance, a member may relocate and change ZIP Codes during the reporting year. HSAG assigned demographic characteristics using the most recent non-missing record for each member. Therefore, members' assigned demographic characteristics may not always reflect their demographic characteristics at the time of the indicator events.

Discrepancies with the External Quality Review (EQR) Technical Report

HSAG used the patient-level detail files reported by the MCPs to calculate the MCP reporting unit rates for the MCAS indicators presented in this report; however, HSAG removed members from the indicator rates if they did not meet the age or gender requirements for the indicator. As a result, the MCP reporting unit rates presented in this report may not align with those presented in the EQR technical report since the MCPs' reported rates were used as reported. Additionally, HSAG did not weight the statewide aggregate rates for hybrid indicators presented in this report. As a result, the statewide aggregate rates for hybrid indicators (i.e., *CIS-10*, *IMA-2*, *WCC-BMI*, *WCC-N*, and *WCC-PA*) presented in this report will not match the rates reported in the EQR technical report since that report presents weighted statewide rates derived from MCPs' reported MCAS rates.

Hybrid Indicators

For hybrid indicators reported by the MCPs, NCQA recommends the submission of a sample of 411 members per reporting unit to limit bias and to allow for results from the sample to be generalizable to the entire eligible population. As the rates for individual strata were based on fewer than 411 members, it should be noted that the stratified rates may not be generalizable to the total eligible population. Due to this caveat, the stratified rates produced for hybrid

indicators should be interpreted with caution. Additionally, HSAG did not weight the statewide rates for hybrid indicators by the total eligible population, so all MCPs, regardless of size, count equally toward the statewide rates. As such, performance may not be representative of actual statewide performance.

HSAG and DHCS Measure Specifications

Overview

DHCS contracted with HSAG to develop administrative performance measure specifications to assess the utilization of services by pediatric MCMC members. HSAG will use the measure specifications outlined in this document to calculate the rates for the following indicators:

- ◆ *Alcohol Use Screening*
- ◆ *Dental Fluoride Varnish*
- ◆ *Tobacco Use Screening*

Please note, HSAG will calculate the *Follow-Up After Hospitalization for Mental Illness—6 to 17 Years* indicator in alignment with the CMS' FFY 2022 Core Set of Children's Health Care Quality Measures for Medicaid and CHIP Child Core Set technical specifications.

Additionally, DHCS, in conjunction with HSAG, developed measure specifications for the following *Blood Lead Screening* indicators:

- ◆ California Title 17 Indicators
 - *Blood Lead Screening—Test at 12 Months of Age*
 - *Blood Lead Screening—Test at 24 Months of Age*
 - *Blood Lead Screening—Two Tests by 24 Months of Age*
 - *Blood Lead Screening—Catch-Up Test by 6 Years of Age*
- ◆ HEDIS
 - *Lead Screening in Children*

This document provides the detailed measure specifications for four HSAG-calculated and five DHCS-calculated indicators that will be presented in the Preventive Services Utilization Report. All specifications were developed to calculate MCP reporting unit rates.

Alcohol Use Screening

Description

The *Alcohol Use Screening* indicator measures the percentage of children ages 11 to 21 years who had one or more screenings for alcohol use during the measurement year. The specifications for this indicator align with DHCS' value-based payment program specifications.

Eligible Population

Age

Members who are 11 to 21 years old as of December 31 of the measurement year.

Continuous Enrollment

Members must be continuously enrolled during the measurement year, with no more than one gap in enrollment during the measurement year where the gap is no longer than one month.

Anchor Date

December 31 of the measurement year.

Administrative Specifications

Denominator

The eligible population as defined above.

Numerator

Members in the denominator who had one or more screenings for alcohol use during the measurement year. Any of the following codes are considered screenings for alcohol use:

- ◆ Current Procedural Terminology (CPT) Codes: 99408, 99409, G0396, G0397, G0442, G0443, H0049, or H0050

Exclusions

None.

Dental Fluoride Varnish

Description

The *Dental Fluoride Varnish* indicator measures the percentage of children 6 months of age as of January 1 of the measurement year to 5 years of age as of December 31 of the measurement year who had one or more applications of dental fluoride varnish administered by a medical provider during the measurement year. HSAG calculated the *Dental Fluoride Varnish* indicator rates using three different methodologies: (1) using only the CPT code and excluding dental data, (2) using both CPT and Code on Dental Procedures and Nomenclature (CDT®)¹⁹ codes and excluding dental data, and (3) using both CPT and CDT codes and including dental data. HSAG will present the statewide rates for all methodologies for informational purposes; however, for the purposes of the statewide, regional, and MCP reporting unit stratifications, HSAG will use methodology (3) above.

Eligible Population

Age

Children who turn 6 months of age as of January 1 of the measurement year to 5 years of age as of December 31 of the measurement year.

Continuous Enrollment

Members must be continuously enrolled during the measurement year, with no more than one gap in enrollment during the measurement year where the gap is no longer than one month.

Anchor Date

December 31 of the measurement year.

Event/Diagnosis

None.

Administrative Specifications

Denominator

The eligible population as defined above.

¹⁹ CDT® is a registered trademark of the American Dental Association (ADA).

Numerator 1: CPT Code Only and Excluding Dental Data

Members in the denominator who have evidence that dental fluoride varnish was applied. The following code indicates a dental fluoride varnish was applied:

- ◆ CPT Code: 99188

Note: Only managed care encounters are used to identify dental fluoride varnish for numerator compliance. Dental data are not used to identify numerator compliance.

Numerator 2: CPT and CDT Codes and Excluding Dental Data

Members in the denominator who have evidence that dental fluoride varnish was applied. The following codes indicate a dental fluoride varnish was applied:

CPT Code: 99188

CDT Code: D1206

Note: Only managed care encounters are used to identify dental fluoride varnish for numerator compliance. Dental data are not used to identify numerator compliance.

Numerator 3: CPT and CDT Codes and Including Dental Data

Members in the denominator who have evidence that dental fluoride varnish was applied. The following codes indicate a dental fluoride varnish was applied:

CPT Code: 99188

CDT Code: D1206

Note: Both managed care encounters and dental data are used to identify dental fluoride varnish for numerator compliance

Exclusions

None.

Tobacco Use Screening

Description

The *Tobacco Use Screening* indicator measures the percentage of children ages 11 to 21 years who had one or more screenings for tobacco use during the measurement year. The specifications for this indicator align with DHCS' value-based payment program specifications.

Eligible Population

Age

Members who are 11 to 21 years old as of December 31 of the measurement year.

Continuous Enrollment

Members must be continuously enrolled during the measurement year, with no more than one gap in enrollment during the measurement year where the gap is no longer than one month.

Anchor Date

December 31 of the measurement year.

Administrative Specifications

Denominator

The eligible population as defined above.

Numerator

Members in the denominator who had one or more screenings for tobacco use. Any of the following codes are considered tobacco screenings if the screening occurring during an outpatient visit:

- ◆ CPT Codes: 99406, 99407, G0436, G0437, G9902, G9903, G9904, G9905, G9906, G9907, G9908, G9909, 4004F, or 1036F

Exclusions

None.

Blood Lead Screening

DHCS calculated the *Blood Lead Screening* indicators in accordance with California Title 17 requirements²⁰ as well as following the national Medicaid HEDIS technical specifications. The indicators measure the percentage of children who have had one or more blood tests for lead poisoning, for children who turned 12 months, 24 months, or 6 years old during the measurement year. Statewide and MCP reporting unit rates are reported. Statewide rates are reported by racial/ethnic, primary language, gender, delivery type model, population density, and county-level stratifications. Continuous enrollment criteria for statewide rates are based on MCMC enrollment. Continuous enrollment criteria for MCP reporting unit rates are based on MCP reporting unit-specific enrollment.

◆ California Title 17 Indicators

- *Blood Lead Screening—Test at 12 Months of Age*—Individuals who turned 1 year old during the measurement year, who had a screening within six months (before and after) their first birthday. Individuals must be continuously enrolled for 12 months (six months before and six months after first birthday) with no more than one gap in enrollment during the 12-month period where the gap is no longer than one month.
- *Blood Lead Screening—Test at 24 Months of Age*—Individuals who turned 2 years old during the measurement year, who had a screening within six months (before and after) their second birthday. Individuals must be continuously enrolled for 12 months (six months before and six months after the second birthday) with no more than one gap in enrollment during the 12-month period where the gap is no longer than one month.
- *Blood Lead Screening—Two Tests by 24 Months of Age*—Individuals who turned 2 years old during the measurement year, who had a screening within six months (before and after) their second birthday and also had a screening within six months (before and after) their first birthday. Individuals must be continuously enrolled for 24 months (18 months before and six months after the second birthday) with no more than one gap in enrollment during the 24-month period where the gap is no longer than one month.
- *Blood Lead Screening—Catch-Up Test by 6 Years of Age*—Individuals who turned 6 years old during the measurement year who were not screened at 1 or 2 years of age, to determine if they were screened between 31 months old and their sixth birthday. Individuals must be continuously enrolled for 12 months prior to their sixth birthday with no more than one gap in enrollment during the 12-month period where the gap is no longer than one month. Exclusion of individuals who had at least one blood lead test prior to 31 months of age. (Note: For this measure, DHCS assessed claims for CPT codes 83655 [blood lead test] and Z0334 [counseling and blood draw]; Z0334 was retired May 1, 2018).

◆ HEDIS

- *Lead Screening in Children*—Individuals who turned 2 years old during the measurement year who had a screening by their second birthday. Individuals must be enrolled on their second birthday and continuously enrolled for 12 months prior to their

²⁰ Title 17, California Code of Regulations Section 37100 (b)(2)

second birthday (with no more than one gap in enrollment during the 12-month period where the gap is no longer than one month). The LSC indicator aligns with DHCS' value-based payment program specifications, which are based on the specifications for the HEDIS *Lead Screening in Children* indicator. The LSC indicator does not meet California regulatory requirements; for those specifications, see the California Title 17 indicators listed above.