



ENHANCING QUALITY FOR MEDI-CAL MEMBERS

As California climbs out from under the effects of the pandemic and its impact on the health care delivery system, the Department of Health Care Services (DHCS) is continuing to promote access to and the quality of all medically necessary health care services covered by Medi-Cal. DHCS is prioritizing quality and equitable care through targeted data-driven goals, member engagement, and close collaboration with community partners. Throughout the COVID-19 public health emergency (PHE), DHCS continued to provide technical assistance to Medi-Cal managed care plans (MCPs) promoting safe access to preventive services through informative best-practice highlights and postcards, collaborative meetings to discuss data-driven strategies to improve quality of care, and direct informative meetings to discuss quality improvement tools. To promote better health outcomes and preventive services, DHCS requires MCPs to report annually on a set of quality measures, known as the Medi-Cal Managed Care Accountability Set (MCAS) performance measures, comprised of various health-related outcomes to include measures that represent children's preventive services, women's health preventive services, chronic medical conditions, and behavioral health conditions (See Table 1).

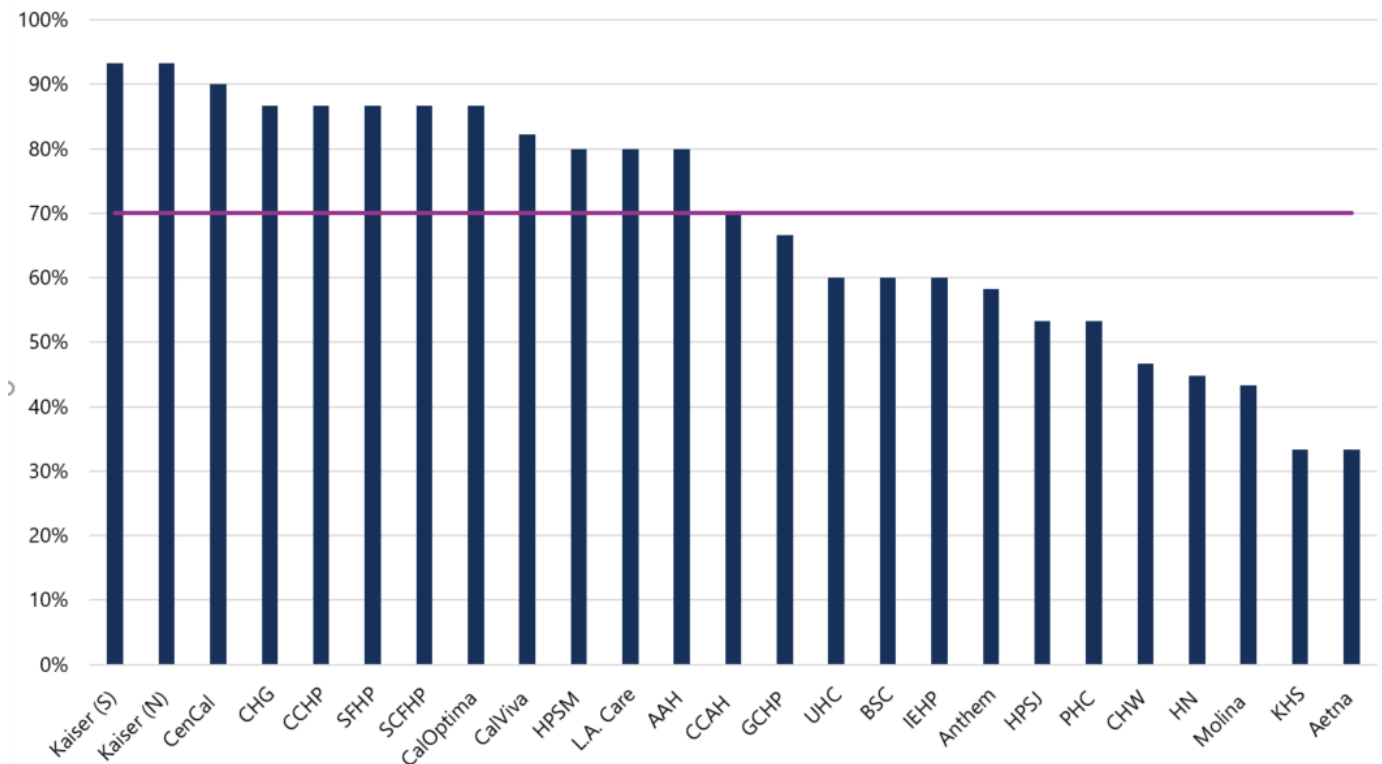
DHCS establishes a Minimum Performance Level (MPL) on qualifying performance measures based on the National Committee for Quality Assurance's (NCQA) national Medicaid 50th percentile. The MPL represents a quality standard that MCPs contracting with DHCS are required to meet or exceed, while the High Performance Level (HPL), set at the 90th percentile, is the ultimate quality goal for all contracted MCPs. For Measurement Year (MY) 2021, the number of performance measures above the HPL doubled compared to MY 2020, signifying the increasing number of MCPs achieving this aspirational target for certain measures.

Table 1: MCAS Performance Measures

Domain	Measures
Child & Adolescent Preventive Health	<ul style="list-style-type: none"> • Child and Adolescent Well-Care Visits (WCV) • Childhood Immunization Status: Combination 10 (CIS-10) • Immunizations for Adolescents: Combination 2 (IMA-2) • Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents: BMI Assessment for Children/Adolescents (WCC-BMI) • Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents: Nutrition (WCC-N) • Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents: Physical Activity (WCC-PA) • Well-Child Visits in the First 30 Months of Life - Well-Child Visits in the First 15 Months (W30) • Well-Child Visits in the First 30 Month of Life - Well-Child Visits for Age 15 Months - 30 Months (W30)
Women's & Maternity Health	<ul style="list-style-type: none"> • Breast Cancer Screening (BCS) • Cervical Cancer Screening (CCS) • Chlamydia Screening in Women (CHL) • Prenatal and Postpartum Care: Postpartum Care (PPC-Pst) • Prenatal and Postpartum Care: Timeliness of Prenatal Care (PPC-Pre)
Chronic Diseases	<ul style="list-style-type: none"> • Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%) (CDC-H9) • Controlling High Blood Pressure (CBP)

Medi-Cal MCPs Overall Performance: Meeting the Minimum Performance Level (MPL) Across all Domains for MY 2021

The graph below represents the number of measures per MCP reporting unit (the smallest region for which a quality rate is calculated for all MCPs) that met the MPL in terms of % of measures that met the MPL across all domains (children, women, and chronic disease). For reference, a median across all MCPs of all measures that met the MPL is represented for comparison. A higher percent indicates better quality performance of the MCP. MCPs above the 70 percent median had more measures above the MPL compared to their peers.



All MCPs were categorized into one of three tiers, green, orange, or red depending on quality performance rates that fell below the MPL.

Tiers	Green Tier	Orange Tier	Red Tier
Triggers	One (1) measure below MPL, per domain	Two (2) or more measures below MPL in any one (1) domain	Three (3) or more measures in two (2) or more domains

Medi-Cal Managed Care Plan: Quality Enforcement Action

The total quality sanction amounts that DHCS will be issuing for all orange and red tier plans that did not meet MPL targets for MY 2021 are detailed in Table 2. The table also displays the number of measures below the MPL for each reporting unit. Sanction amounts were determined based on various factors that included eligible population impacted by lower quality rates, degree below the MPL, and trending difference from the previous measurement year. Only the orange and red tiers were sanctioned, which includes 15 and 7 MCPs respectively.

Table 2: Enforcement Action: Quality Sanction Amount per Reporting Unit

TIER Color	MCP	Total Sanction Amount \$	Reporting Unit	Number below the MPL
Red	Aetna	25,000.00	Sacramento County	10
			San Diego County	10
Orange	Alameda Alliance for Health	25,000.00	Alameda County	3
Red	Anthem Blue Cross	265,000.00	Alameda County	5
			Contra Costa County	7
			Fresno County	8
			Kings County	6
			Madera County	2
			Region 1 ¹	7
			Region 2 ²	8
			Sacramento County	7
			San Benito County	6
			San Francisco County	8
			Santa Clara County	7
Tulare County	4			
Orange	Blue Shield of Ca Promise	29,000.00	San Diego County	6
Red	CHW	115,000.00	Imperial County	5
			Region 1 ¹	10
			Region 2 ²	9
Orange	CalOptima	25,000.00	Orange County	2
Orange	CalViva Health	33,000.00	Fresno County	4
			Kings County	4
			Madera County	0
Green	CenCal Health	0.00	San Luis Obispo County	2
			Santa Barbara County	1
Orange	Central California Alliance of Health	57,000.00	Merced County	8
			Monterey/Santa Cruz Counties	1
Orange	Community Health group	0.00	San Diego County	2
Orange	Contra Costa Health Plan	25,000.00	Contra Costa County	2

TIER Color	MCP	Total Sanction Amount \$	Reporting Unit	Number below the MPL
Orange	Gold Coast Health Plan	87,000.00	Ventura County	5
Red	Health Net	437,000.00	Kern County	10
			Los Angeles County	8
			Sacramento County	8
			San Diego County	5
			San Joaquin County	11
			Stanislaus County	14
Orange	Health Plan of San Joaquin	81,000.00	San Joaquin County	5
			Stanislaus County	9
Orange	Health Plan of San Mateo	25,000.00	San Mateo County	3
Orange	Inland Empire Health Plan	243,000.00	Riverside/San Bernardino Counties	6
Green	Kaiser NorCal	0.00	KP North ³	1
Green	Kaiser SoCal	0.00	San Diego County	1
Red	Kern Health Systems	169,000.00	Kern County	10
Orange	LA Care	88,000.00	Los Angeles County	3
Red	Molina Health Plan	117,000.00	Imperial County	10
			Riverside/San Bernardino Counties	11
			Sacramento County	11
			San Diego County	2
Red	Partnership Health Plan	80,000.00	Northeast ⁴	10
			Northwest ⁵	10
			Southeast ⁶	4
			Southwest ⁷	4
Orange	San Francisco Health Plan	25,000.00	San Francisco County	2
Orange	Santa Clara Family Health Plan	25,000.00	Santa Clara County	2
Orange	United Healthcare Community Plan	25,000.00	San Diego County	6
Green (3), Orange (15), Red (7)	Total Amount:	2,001,000.00	56	327

1. Region 1 consists of Butte, Colusa, Glenn, Plumas, Sierra, Sutter, and Tehama counties
2. Region 2 consists of Alpine, Amador, Calaveras, El Dorado, Inyo, Mariposa, Mono, Nevada, Placer, Tuolumne, and Yuba counties
3. KP North consists of Sacramento, Amador, El Dorado, and Placer counties
4. Northeast consists of Lassen, Modoc, Shasta, Siskiyou, and Trinity counties
5. Northwest consists of Del Norte and Humboldt counties
6. Southeast consists of Napa, Solano, and Yolo counties
7. Southwest consists of Lake, Marin, Mendocino, and Sonoma counties

DHCS' Commitment to High-Quality Care

DHCS is prioritizing improving quality of care and health outcomes for all Medi-Cal members. Through close collaboration with MCPs, targeted goal setting, audited reporting, and strong enforcement actions (Table 2), the Department is working on improving health outcomes. DHCS' [Comprehensive Quality Strategy \(CQS\)](#) outlines the pathway for achieving improvement through the Bold Goals 50X2025 initiative, which aims to enhance quality measures across children's preventive services, maternal health care outcomes, and behavioral health integration. Additionally, the CQS details an Equity Framework focusing on better data collection and stratification, diversifying workforce with promotion of cultural understanding, and reducing overall health disparities throughout California. Lastly, as outlined in the CQS' guiding principles, DHCS is committed to improved transparency and accountability across the Medi-Cal program. In support of this, DHCS will leverage monetary sanctions and other enforcement actions, as well as public reporting on this effort, as critical tools for improving quality in Medi-Cal managed care delivery systems.

Based upon performance on all MY 2021 MCAS quality measures, MCPs are categorized in one of three escalating tiers (green, orange, and red) as described in Table 2, below. The three domains of quality measures are children's domain, women's health domain, and chronic disease domain. Plans receive progressive levels of support, as well as enforcement actions, depending on their tier (green tier is better performing than red tier). All red tier plans are also placed on Corrective Action Plans and have regular meetings with DHCS executive leadership to review progress.