



Preparing for MAC QRS Reporting: A Streamlined Approach for Health Plans

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Meet Our Presenters



Tom Curtis

Director, State Affairs



Wendy Talbot

*Vice President,
Measure & Data
Operations*



Garcene Duckett

*Director, Data
Collection*

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Understanding MAC QRS Policy & Requirements

Preparing for MAC QRS Reporting: A Streamlined Approach for Health Plans

What is Medicaid and CHIP Quality Rating System (MAC QRS)?

Policy overview

MAC QRS is a quality reporting program that allows beneficiaries to compare plans across a variety of quality measures.

Established by the 2024 Medicaid and CHIP Managed Care Access, Finance, and Quality Final Rule (89 FR 41002, published May 10, 2024).

States must report on a mandatory measure set.

Of the 19 mandatory measures, 16 are **HEDIS®** or **CAHPS®**.

By **December 31, 2028**, states must launch a public website displaying standardized quality ratings for Medicaid and CHIP managed care plans. for mandatory measure set.

Intended to increase transparency, support beneficiary choice and drive quality improvement across health plans.

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

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Initial Technical Resource Manual

MAC QRS first annual subregulatory guidance



Medicaid and Children's Health Insurance Program (CHIP) Quality Rating System (MAC QRS) Measurement Year (MY) 2026 Initial Technical Resource Manual

July 31, 2025 (Updated August 27, 2025)

<https://www.medicaid.gov/medicaid/quality-of-care/downloads/my2026-tech-res-manual.pdf>

Key Contents

- Measurement Year (MY) 2026 Measure Set
- Stratification Guidance (optional for MY 26)
- Guidance on Calculating Multiple Performance Rates (covered by HEDIS reporting)

Important Definitions / Things to Know

- Performance rate refers to the numeric value calculated.
- Quality rating refers to the numeric value calculated for a MAC QRS quality measure.
- Validation of all measures may be achieved through the Health Plan HEDIS™ audit.

MAC QRS Measure Set – MY 2026

Measure Stewards

- 11 HEDIS Measures (NCQA)
- 5 CAHPS Measures (AHRQ)
- 3 non-HEDIS Measures

NCQA Health Plan Reporting

All required HEDIS and CAHPS measures are included.

Added 3 non-HEDIS measures.

MCO/PIHP/PAHP

States evaluate applicability of each measure to plan type (e.g., CAHPS).^{**}

Measure Steward	Measure Name
NCQA	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)
NCQA	Initiation and Engagement of Substance Use Disorder Treatment (IET)
CMS	Preventive Care and Screening: Screening for Depression and Follow-Up Plan (CDF)
NCQA	Follow-Up After Hospitalization for Mental Illness (FUH)
NCQA	Well-Child Visits in the First 30 Months of Life (W30)
NCQA	Child and Adolescent Well-Care Visits (WCV)
NCQA	Breast Cancer Screening (BCS-E)
NCQA	Cervical Cancer Screening (CCS, CCS-E)
NCQA	Colorectal Cancer Screening (COL-E)
DQA (ADA)	Oral Evaluation, Dental Services (OEV)
OPA	Contraceptive Care - Postpartum Women (CCP)
NCQA	Prenatal and Postpartum Care (PPC)
NCQA	Glycemic Status Assessment for Patients with Diabetes (GSD)
NCQA	Controlling High Blood Pressure (CBP)
AHRQ ^b	CAHPS – How people rated their health plan
AHRQ ^b	CAHPS – Getting care quickly
AHRQ ^b	CAHPS – Getting needed care
AHRQ ^b	CAHPS – How well doctors communicate
AHRQ ^b	CAHPS – Health plan customer service

*NCQA received approval from DQA and CMS/HHS to collect results for their measures

**438.515(a)(3-4) gives states discretion in assessing whether a plan's contract covers a service or action assessed by the measure.

Calculating Multiple Performance Rates

MAC QRS “subrates” and distinct stratifications

C. MAC QRS Mandatory Measures with Multiple Rates

Per 42 CFR § 438.515(a)(3), for each MAC QRS mandatory measure states must calculate a performance rate for each of their managed care plans whose contract covers a service or action assessed by the measure. Measure specifications for some mandatory measures include multiple rates. Table 2 lists the required rates for MAC QRS mandatory measure reporting for MY 2026.

Summary

- HEDIS collection already includes all required subrates.
- APP R/E stratification is not currently specified in HEDIS.
- Stratification by sex is not currently specified for any HEDIS measures.

Table 2. Required Rates for MAC QRS Mandatory Measures, MY 2026

CMIT ^a	Measure Steward	Mandatory Measure	Required Rate(s)
743	NCQA	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	1 rate • Total (Ages 1–17)
394	NCQA	Initiation and Engagement of Substance Use Disorder Treatment (IET)	4 rates • Initiation of SUD Treatment: Ages 13–17 • Initiation of SUD Treatment: Ages 18–64 • Engagement of SUD Treatment: Ages 13–17 • Engagement of SUD Treatment: Ages 18–64
672	CMS	Preventive Care and Screening: Screening for Depression and Follow-Up Plan (CDF)	2 rates • Ages 12–17 • Ages 18–64



Streamlining Measure Data Collection & Reporting

Preparing for MAC QRS Reporting: A Streamlined Approach for Health Plans

Why NCQA Is Supporting MAC QRS Reporting

Reducing duplicate work for plans and states.

MAC QRS Reporting is Mandatory for States

Most Plans Already Report Mandatory HEDIS Measures to NCQA

Duplicative Reporting Programs Create Unnecessary Burden for Plans and States

Actionable Quality Ratings Require Accurate Data

How NCQA Processes Align With MAC QRS

Measures, data
collection and audit all
point at the same
requirement.

Measures

NCQA develops and maintains the HEDIS measures that make up most of the MY 2026 mandatory set.

Data Collection

NCQA already receives Medicaid health plan results, including on behalf of state agencies.

Audit

The HEDIS Compliance Audit provides the independent validation of measure data the program relies on.

Brought Together

One measure source, one collection path and one validation standard supporting the ratings states publish.



Next Steps for Reporting

Preparing for MAC QRS Reporting: A Streamlined Approach for Health Plans

NCQA Reporting Offerings

HOQ and IDSS Systems

- Request submissions.
- Submit HEDIS and non-HEDIS data.
- One submission use to fulfill requirements.

Communications and Assistance

- Account managers support provided.
- Up to date information during season.



Resources

- MAC QRS documentation. Technical specs.
- IDSS files for reporting.

Data Reporting and Use

- IDSS Exports available for MAC QRS.
- Submission used for multiple programs.

Health Plan Scenarios

Common reporting experiences



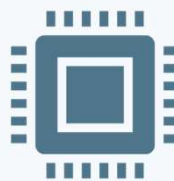
Already reporting Medicaid HEDIS and CAHPS

Add the MAC QRS component to your existing submission, with no separate submission required.



New to health plan reporting

Create a new submission in HOQ for HEDIS, CAHPS and MAC QRS component.



Reporting CHIP

State requires separate CHIP reporting.



Contact our Data Collection team to discuss other scenarios

Next Steps for Health Plans

How to engage the NCQA Data Collection team



Confirm with your state which MAC QRS measures apply to your managed care programs.



Review the CMS MY 2026 Technical Resource Manual, [NCQA resources](#) and the applicable measure specifications.



Confirm MAC QRS coverage with your [HEDIS Compliance Auditor](#) and [Vendor](#).



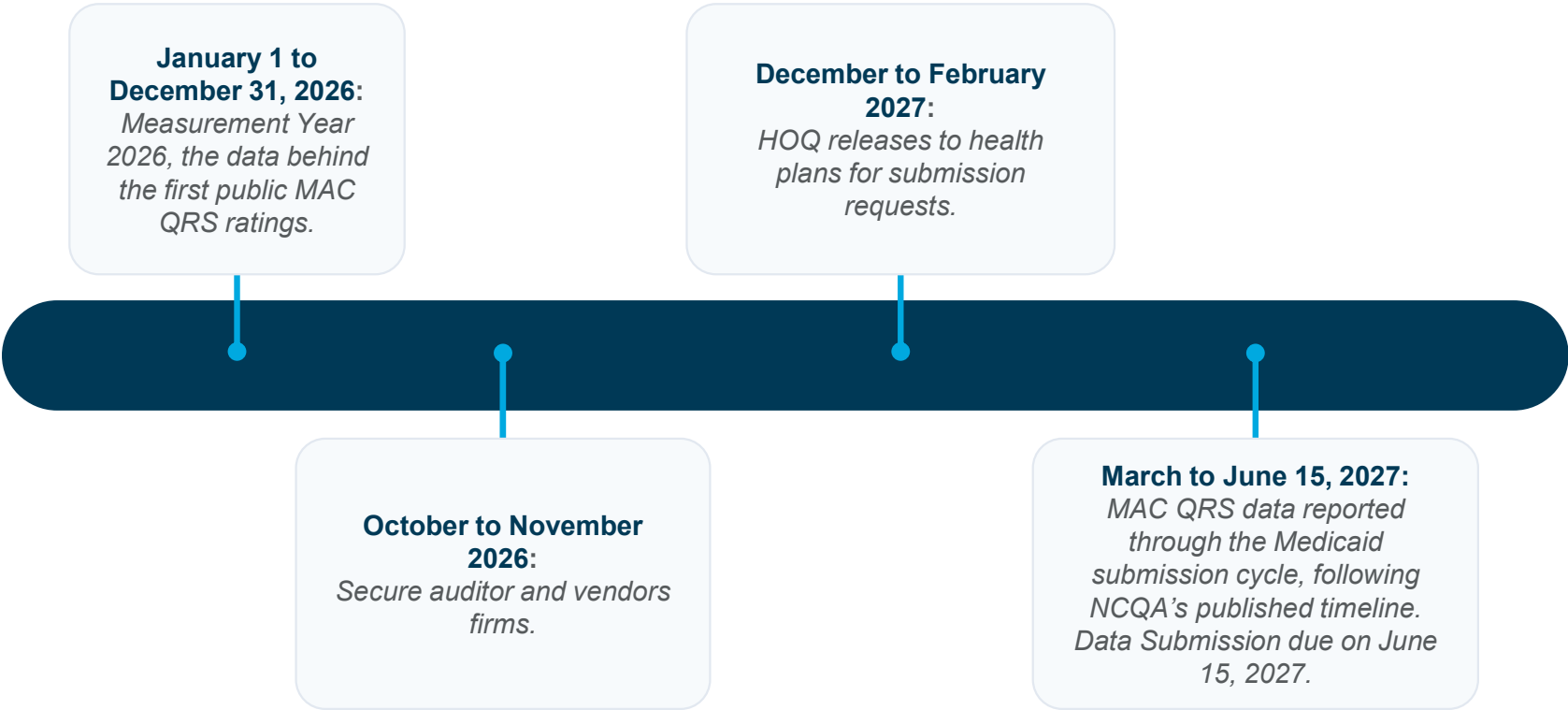
Select the MAC QRS component when you complete your Healthcare Organization Questionnaire (HOQ).



Contact the NCQA Data Collection team through my.ncqa.org with questions.

Key NCQA Dates & Deadlines

What your organization needs to know right now



NCQA Healthcare Innovation Summit

Meet The Experts: NCQA Supports Medicaid and CHIP Quality Rating System (MAC-QRS)

Tuesday, October 6 | 1:30 – 2:00 pm ET

GWCC: Hall C1: Health Innovation Pavilion - Meet the Expert Stage



Tom Curtis

*Director, State
Affairs*



Wendy Talbot

*Vice President,
Measure & Data
Operations*



Raesah Ettawil

*Director, Quality
Solutions Group*

NCQA
HEALTH ———
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Atlanta, GA | October 4-7

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