

PMCC Recommendations for 2025 Review of WSCMS

as of October 13, 2025

Recommendation for Core Set

The Core Set includes measures that (state purchasers), payers and providers should use in their Value-Based Purchasing (VBP) contracts (agreements).

1. Breast Cancer Screening (BCS-E)
2. Child and Adolescent Well-Care Visits (WCV)
3. Childhood Immunization Status (CIS-E) Combination 10
4. Colorectal Cancer Screening (COL-E)
5. Controlling High Blood Pressure (CBP)
6. Depression Remission or Response for Adolescents and Adults (DRR-E)
7. Follow-Up After ED Visit for Substance Use (FUA)
8. Glycemic Status Assessment for Patients with Diabetes (GSD)
9. Plan All-Cause Readmissions (30-day) (PCR)
10. Prenatal/Postpartum Care (PPC)

Recommendation for Supplemental Set

The Supplemental Set includes additional/alternative measures from which payers and providers may choose to supplement the Core measures in their Value-Based Purchasing contracts (agreements).

1. Adult Immunization Status (AIS-E)
2. Cervical Cancer Screening (CCS)
3. Chlamydia Screening (CHL)
4. Depression Screening and Follow Up for Adolescents and Adults (DSF-E)
5. Follow-up After Emergency Department Visit for Mental Illness (FUM)
6. Follow-Up After Hospitalization for Mental Illness (FUH)
7. Follow-Up Care for Children prescribed ADHD Medication (ADD-E)
8. Immunization for Adolescents (IMA)
9. Kidney Health Evaluation for Patients with Diabetes (KED)
10. Patient Safety for Selected Indicators (composite measure)
11. Statin Therapy for Patients with Cardiovascular Disease (SPC)
12. Well Child Visits in the First Thirty Months of Life (W30)

Legislatively Mandated Measures

Measures required by Washington legislation to be included in the WSCMS.

1. Arrest Rate for Medicaid Beneficiaries with an Identified Behavioral Health Need
2. Timely Receipt of Substance Use Disorder Treatment for Medicaid Beneficiaries Released from a Correctional Facility
3. Timely Receipt of Mental Health Treatment for Medicaid Beneficiaries Released from a Correctional Facility
4. Homelessness (Broad and Narrow) (HOME-B and HOME-N)

Recommendation for Monitoring Measures

Measures that are not recommended for VBP contracts at this time but are still important to monitor performance over time.

1. Falls with Injury
2. Potentially Avoidable Use of the Emergency Room (WHA)
3. Substance Use Disorder Treatment Rate (Medicaid only)
4. Use of Imaging Studies for Low Back Pain (LBP)
5. Use of Opioids at High Dosage (HDO) or Patients Prescribed High-Dose Chronic Opioid Therapy (Bree)

Recommended for Removal from WSCMS:

1. 30-Day All-Cause Risk-standardized Mortality Rate Following Acute Myocardial Infarction (AMI) Hospitalization
2. Adult Obesity (Self-reported BMI) (state level only)
3. Adult Tobacco Use (Survey) (state level only)
4. Asthma Medication Ratio (AMR) (NCQA has confirmed retirement in 2026)
5. Appropriate Testing for Pharyngitis (CWP)
6. Antibiotic Utilization for Respiratory Conditions (AXR)
7. Audiological Evaluation No Later Than 3 months of age
8. Blood Pressure Control for Patients With Diabetes (BPD)
9. Catheter-Associated Urinary Tract Infections

10. Cesarean Birth (NTSV C-Section)
11. Contraceptive Care – Most & Moderately Effective Methods
12. Eye Exam for Patients with Diabetes (EED)
13. HIV Viral Load Suppression (HVL-AD)
14. Influenza Immunization (This is included in Adult Immunization Status (AIS-E) and Childhood Immunization Status (CIS))
15. Mental Health Service Rate (Broad Version)
16. New Opioid Patient Days Supply of First Opioid Prescription (Bree measure)
17. New Opioid Patients Transitioning to Chronic Opioids (Bree)
18. Patients Prescribed High-Dose Chronic Opioid Therapy (Bree)
19. Primary Caries Prevention Offered by a Medical Provider (Medicaid only)
20. Psychiatric Inpatient Readmissions (30-day) (Medicaid only)
21. Stroke Care (STK-04): Thrombolytic Therapy
22. Unintended Pregnancies (state level only)
23. Use of Opioids at High Dosage (HDO)
24. Youth Obesity (Self-reported BMI) (state level only)
25. Youth Substance Use (Survey) (state level only)

Other considerations

Patient Experience: (Committee will revisit as a group. Initial recommendation is to select one that focuses on access to care and one that focuses on effective communication.)

1. Member Experience (HP-CAHPS): Health Plan Survey Composite - How Well Providers Communicate with Patients
2. Patient Experience with Primary Care (CG-CAHPS): How Well Providers Communicate with Patients
3. Patient Experience with Primary Care (CG-CAHPS): How Well Providers Use Information to Coordinate Patient Care
4. Patient Experience with Hospital Care (H-CAHPS): Discharge Information and Communication About Medicines

Cost Measures: (HCA will check to see if we can leverage the work of the Health Care Cost Transparency Board (Cost Board) and bring back to PMCC.)

1. Annual State-Purchased health Care Spending Growth Relative to State GDP
2. Medicaid Per Enrollee Spending
3. Public Employee and Dependent per Enrollee Spending