

2026 Quality Guide – Summary of Changes

DMS is distributing this summary of changes by section, along with the 2026 Quality Guide to highlight what has changed from 2025 to 2026 Quality Guide.

Wisconsin Quality Reporting (WIQR)

Summary of Changes:

- No substantive changes to WIQR initiative.
- Clarification added regarding timing of HEDIS Roadmap.

Pay for Performance (P4P)

Summary of Changes:

- BC+ P4P measure list has been updated to replace the Asthma Medication Ratio (AMR) measure with Colorectal Cancer Screening-Total.
- Reduction in Error (RIE) sample calculation chart has been updated with new dates, measures, and one revision made to the calculation for FUH 30.
- SSI P4P measure list has been updated to remove the Asthma Medication Ratio (AMR) measure and redistribute the weight among the remaining 6 measures.
- Clarification on trend breaks related to RIE with new ECDS measures has been added.
- HMOs with a small denominator for any P4P measure will forfeit the earnback amount for that measure(s), starting with MY2029 after the 3-year grace period has ended.

HMO Report Card

Summary of Changes:

- Additional language added to methodology regarding small denominators.
- Clarified methodology regarding state vs. national comparisons. HMO report card overview statement, purpose statement, and the methodology have been clarified in the quality guide to reflect that the HMO report card scores are HMO performance compared to national benchmarks.
- For the 2026 report card, issued in fall 2027 given the time lag, we included which measures we plan to use in each area of care rating. Given the fluidity of NCQA HEDIS measure changes and trend breaks, these measures cannot be guaranteed as available for use when the Report Card is developed. If we need to revise the Report Card list to account for those infrequent changes, we'll communicate to HMOs at that time.

Potentially Preventable Readmissions (PPR)

Summary of Changes:

- No substantive changes to PPR initiative.

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SSI Care Management

Summary of Changes:

- Removed the care management review tool information from the body of the SSI section and instead included the revamped tool as a new Appendix I.
- Updated wording of the SSI-CM EQRO section to reflect the current method of scoring.

Performance Improvement Projects (PIPs)

Summary of Changes:

- No changes are being made to the PIP structure.
- Information about multi-year and collaborative PIPs is being added for clarification.
- Template for PIP proposals and final reports is being updated to reflect the new process for submitting proposal information.
- The following policy items are not new, but they are being moved from the contract to the Quality Guide:
 - DMS and CMS have the authority to select topics for PIPs, and
 - HMOs are not allowed to submit baseline studies designed to determine whether a disparity exists.

Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey

Summary of Changes:

- Clarified language regarding survey requirements by population.
- Added a FAQ section to provide additional clarification on frequently asked questions.

OB Medical Home

Summary of Changes:

- No substantive changes to OBMH at this time.