



WASHINGTON
**Medical
Commission**

Licensing. Accountability. Leadership.



Performance Report

Fiscal Year 2024



Summary

The Washington Medical Commission's (WMC) performance measures (PM) demonstrate to the health care community and the general public what we are doing to achieve WMC's goals in nine separate measures. This report should be used to illustrate where we have been and where we are now in regards to these performance measures, and to be transparent about areas of potential improvements. Highlighted in this annual report are noteworthy milestones the WMC has achieved over the last year toward a single, overarching goal; Protect the public by ensuring quality healthcare is provided by physicians and physician assistants.

This Fiscal Year (FY) 2024 performance measures demonstrates variation across the departments with regards to workloads, improvements, and obstacles.

Performance measure data, when available, will be compared to the previous fiscal year(s). Demographic information will be provided when available and appropriate.

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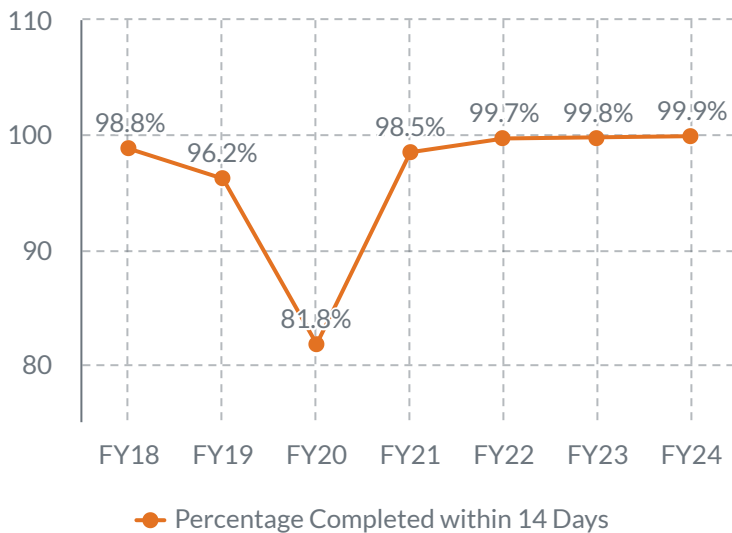


Licensing

Performance measure **1.1** tracks health care credentials issued within 14 days of receiving all documents. The target for this measure is to have at least 77 percent issued within 14 days.

In FY24 99.9 percent of the 4,429 applications processed had their respective credentials issued within 14 days of receiving the complete application. Only 6 applications took over 14 days to approve.

Percentage of Licenses Processed Within 14 Days FY Comparison



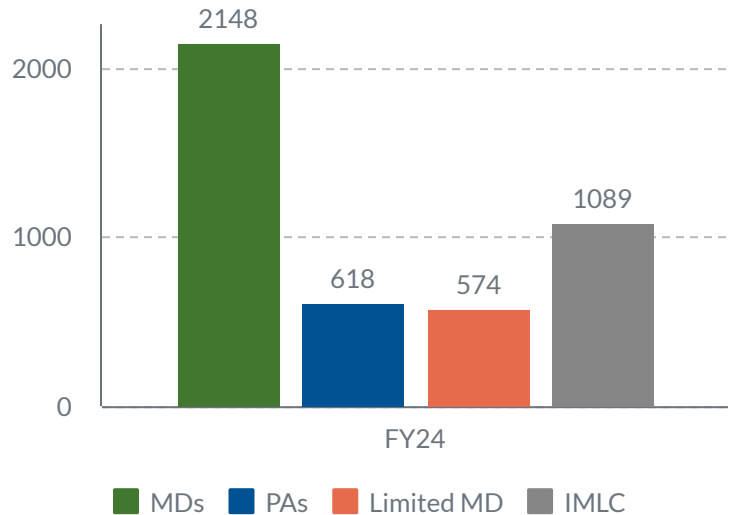
FY24 1.1 PM

99%



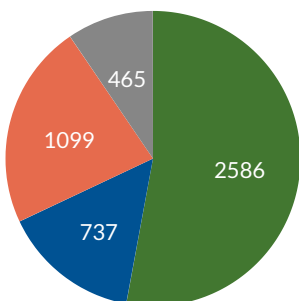
Target Met

Licenses Issued in FY24



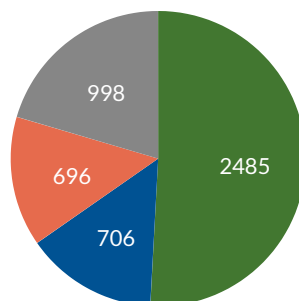
Applications Received

FY22



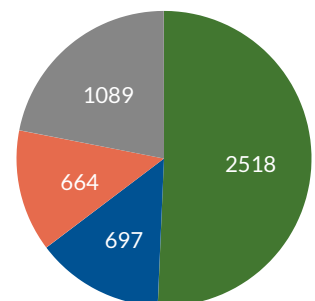
MD (52.92%) PA (15.08%)
Limited MD (22.49%) IMLC (9.52%)

FY23



MD (50.87%) PA (14.45%)
Limited MD (14.25%) IMLC (20.43%)

FY24

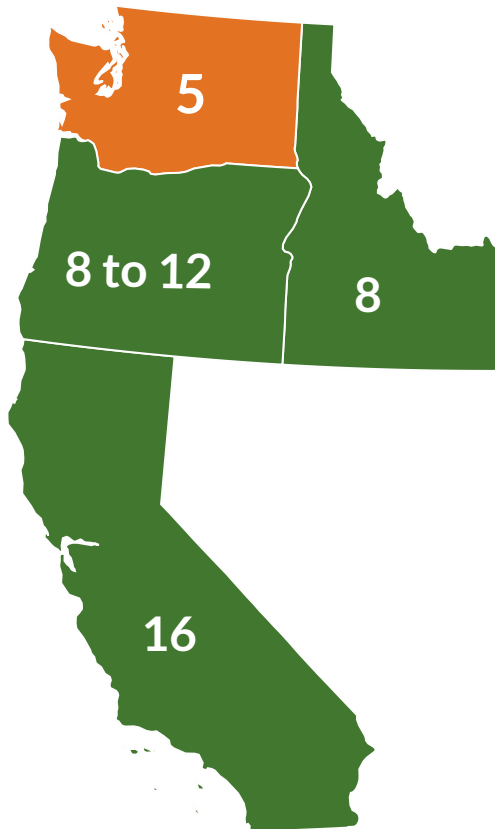


MD (50.68%) PA (14.03%)
Limited MD (13.37%) IMLC (21.92%)

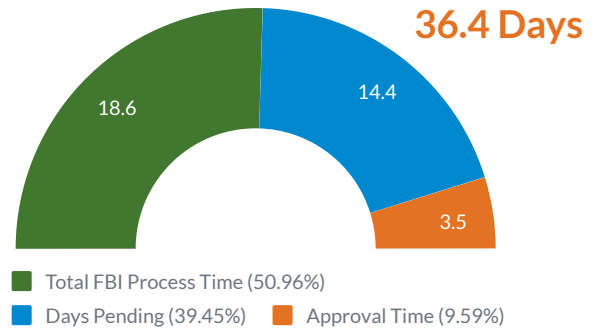


Average Licensing Time Information

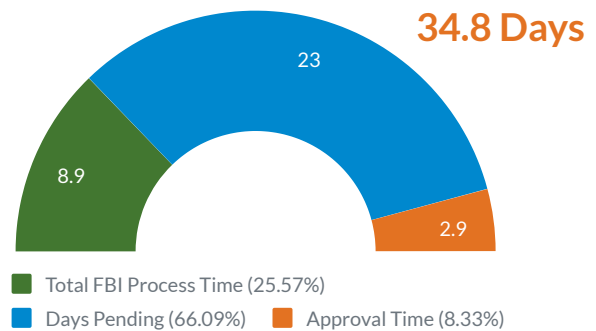
Weeks to Issue a Credential WA vs. Neighboring States



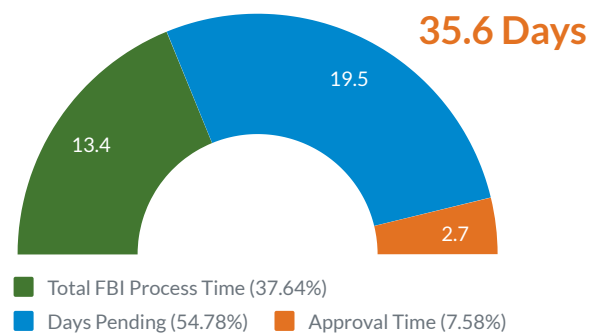
FY22 Average Licensing Time



FY23 Average Licensing Time



FY24 Average Licensing Time



Important Numbers



The time (5 weeks) the WMC takes to issue a license is significantly less (55%) than the neighboring states in the Pacific Northwest (an average of 11 weeks) and is 37% less than the national average (8 weeks) per the American Medical Association.

**Days pending includes time WMC Licensing Specialists spend reviewing and verifying application documents and time for DOH to enter FBI Background Check results into the licensing database.



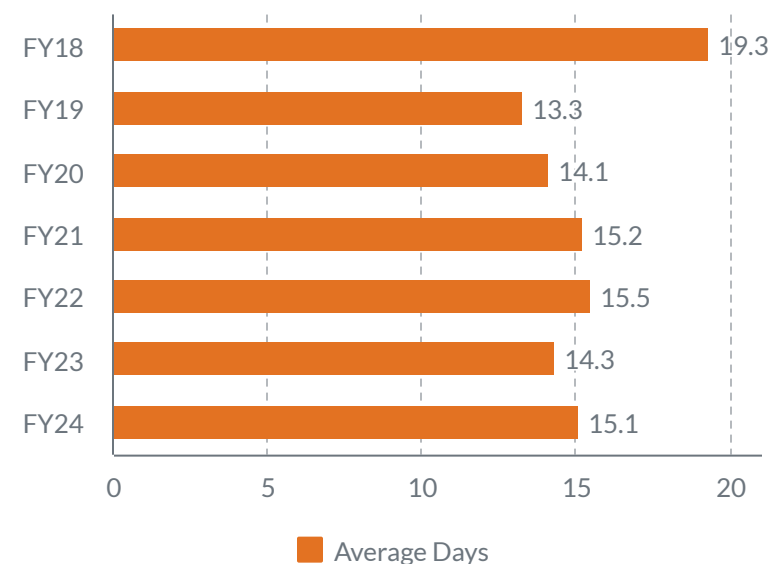
Intake & Assessment

The intake and assessment step tracks the number of days it takes to receive a report (complaint) and to then make a determination as to whether or not a report will be authorized for an investigation.

Performance measure **2.1** indicates the percentage of cases in which the intake and assessment step is completed within 21 days. The target percentage for cases processed within 21 days is 77 percent.

In FY24 99.9 percent of the complaints received completed this step within 21 days, which is consistent with the previous four fiscal years.

Average Number of Days to Complete Intake & Assessment Step



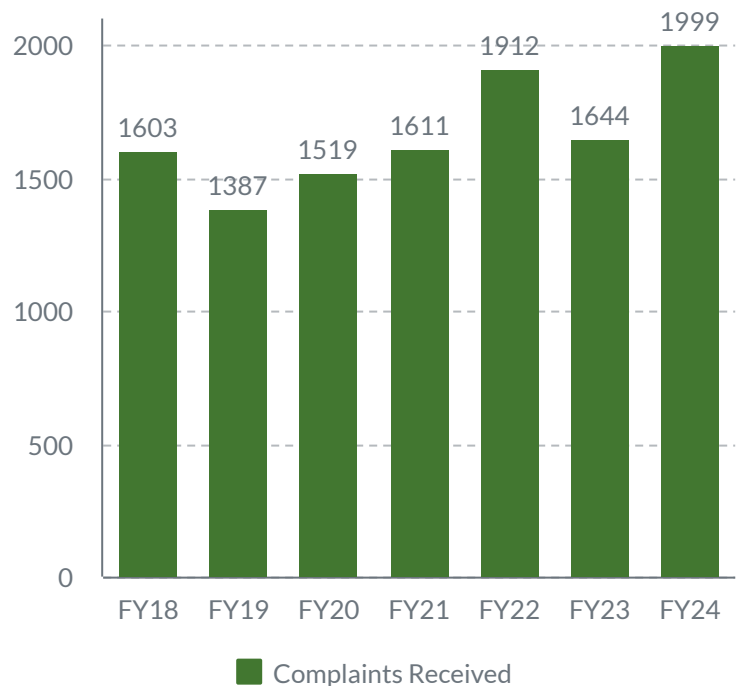
FY24 2.1 PM

99%



Target Met

Number of Complaints Received



Important Numbers



28% of complaints presented to the Case Management Team (CMT) were **authorized** for investigation in FY24. This is a slight increase from the 25% that were authorized in FY23.



Investigations

Performance measure **2.2** states that 77 percent of our investigations need to be completed within 170 days.

In FY24 90 percent of the 474 investigations that were closed were completed within 170 days.

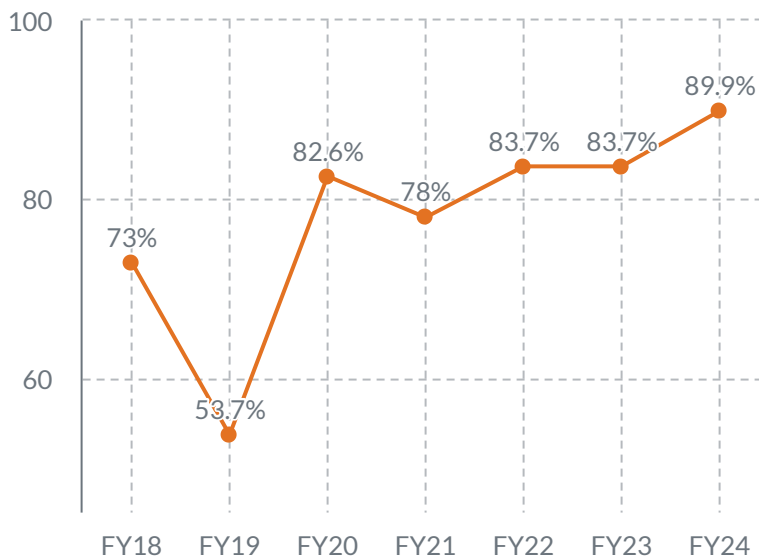
FY24 2.2 PM

90%

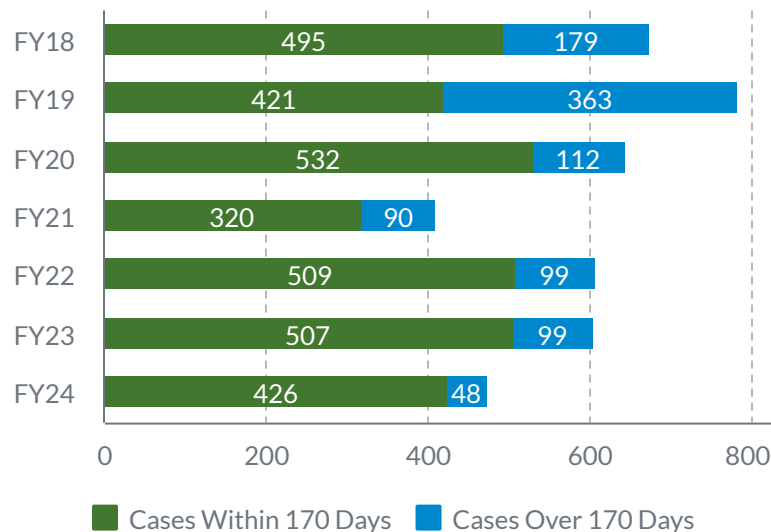


Target Met

Percent of Investigations Completed Within 170 Days

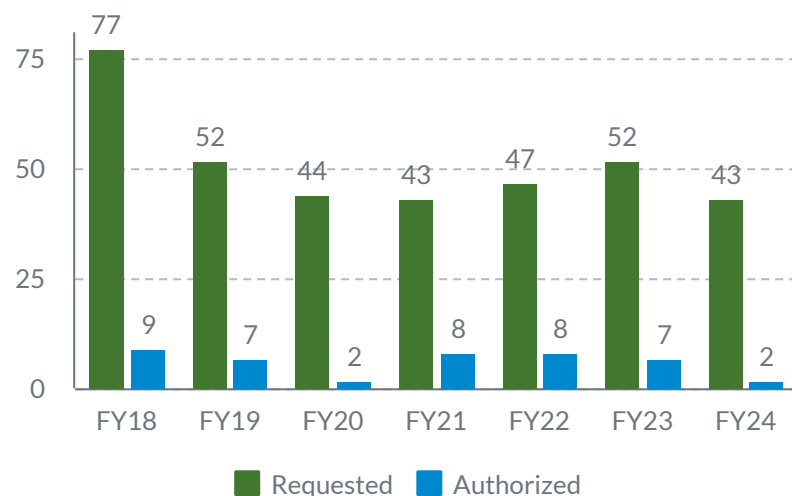


Completed Investigations Case Count



Complaint Reconsiderations Requested

Requested v. Authorized



If a complaint is closed without being investigated, the complainant has 30 days to file a request for the WMC to reconsider their decision, if there is additional information that was not included in the original complaint.

In FY24, 4.7 percent of the requested reconsiderations were authorized for an investigation.



Investigations

FY24 2.4 PM

2.6%

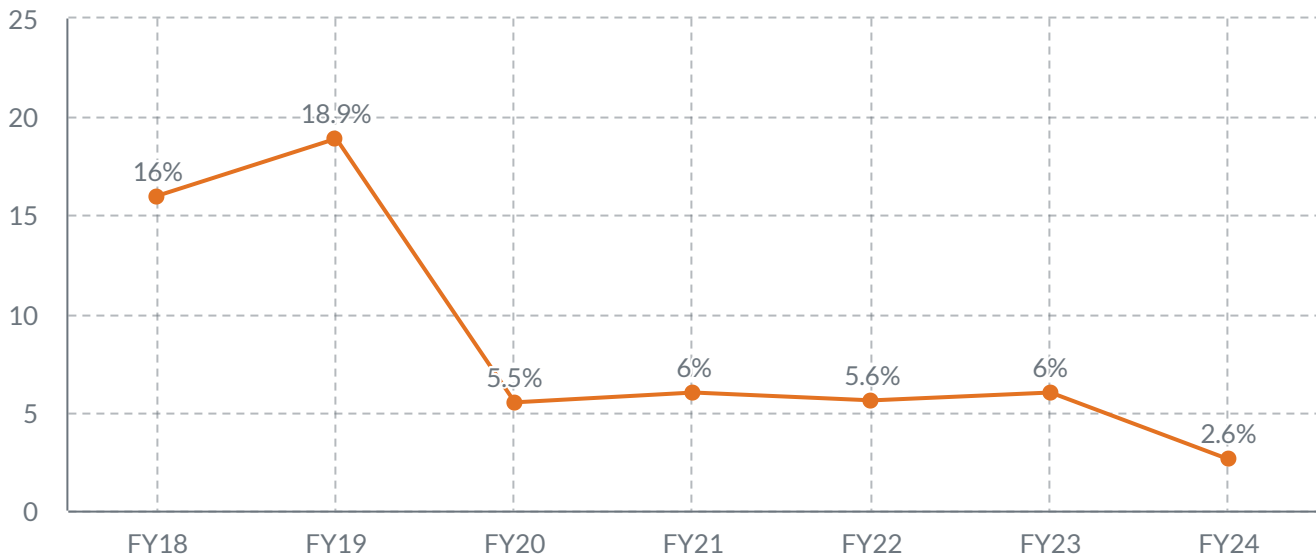


Target Met

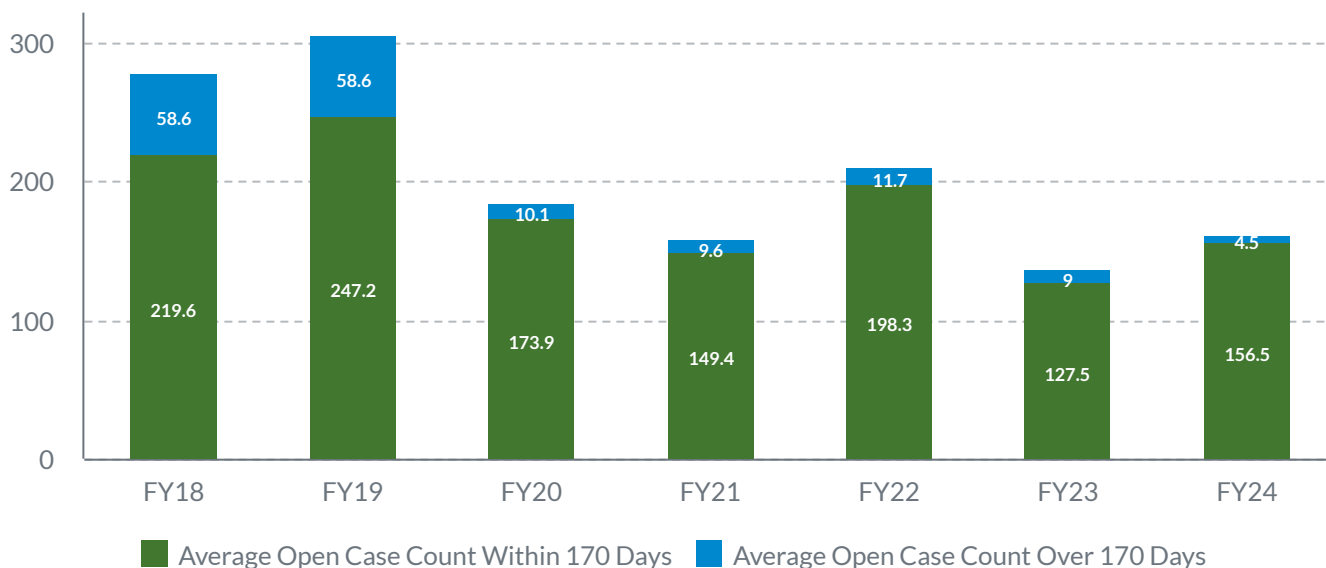
Performance measure **2.4** tracks the number of open investigations that are over 170 days, the target being that no more than 23 percent of open investigations exceed 170 days.

On average in FY24 only 2.6 percent of investigations were over 170 days, well under the cap of 23 percent.

Percentage of Open Investigations Over 170 Days



(Monthly) Average Open Investigations Per FY



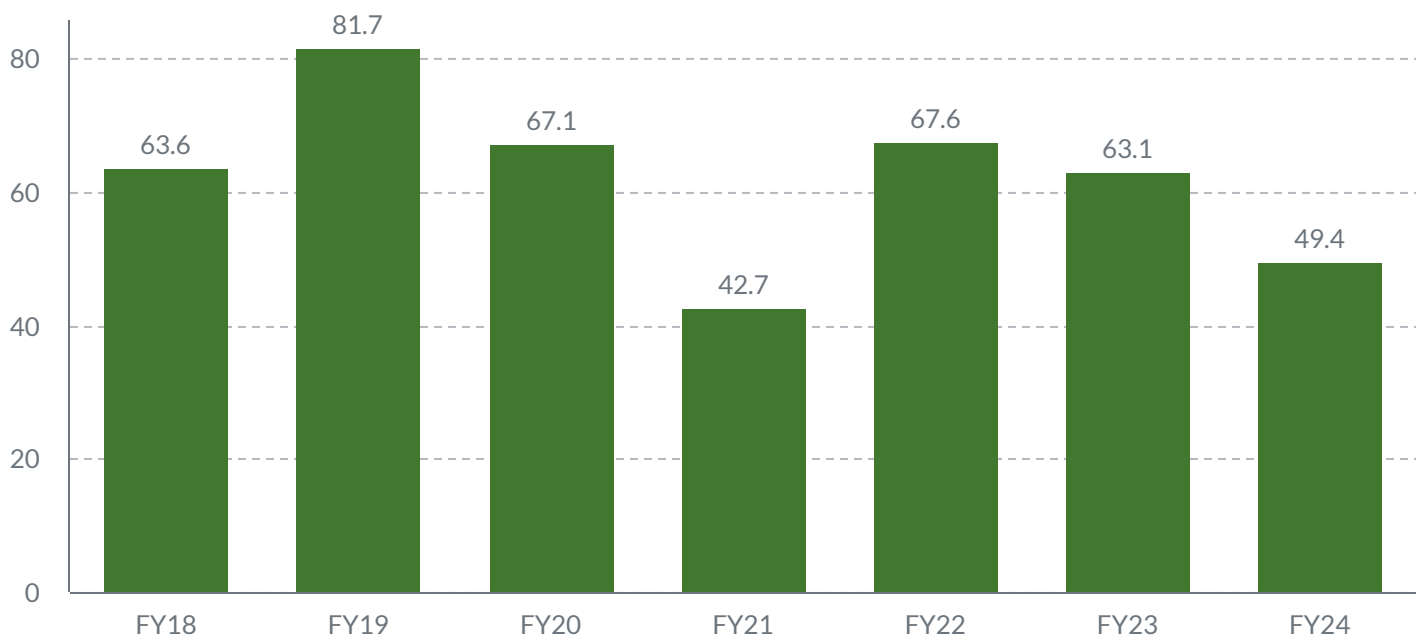


Investigations

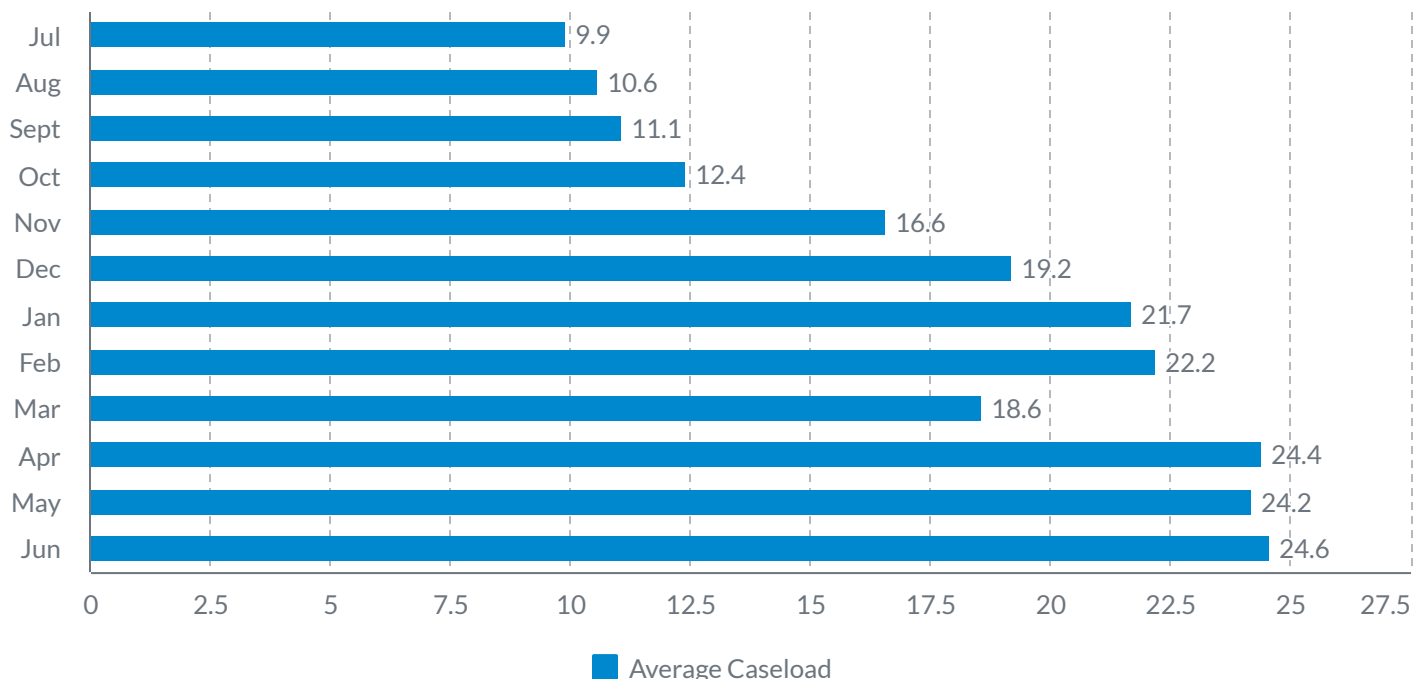
Performance measure **3.1** measures the number of completed investigations with respect to the number of investigators.

In FY24 each investigator closed an average of 4.1 cases a month, a slight decrease from 5.4 cases per month in FY23.

Average Number of Investigations Completed per Investigator



(FY24) Average Caseload Per Investigator





Case Disposition

Performance measure **2.3** states that 77 percent of cases need to have completed the case disposition step within 140 days.

In FY24 87 percent of the 536 cases in case disposition were completed within 140 days.

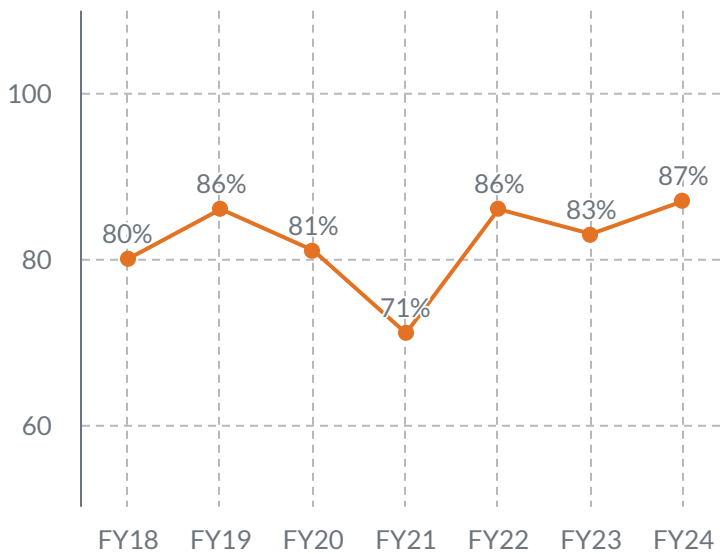
FY24 2.3 PM

87%

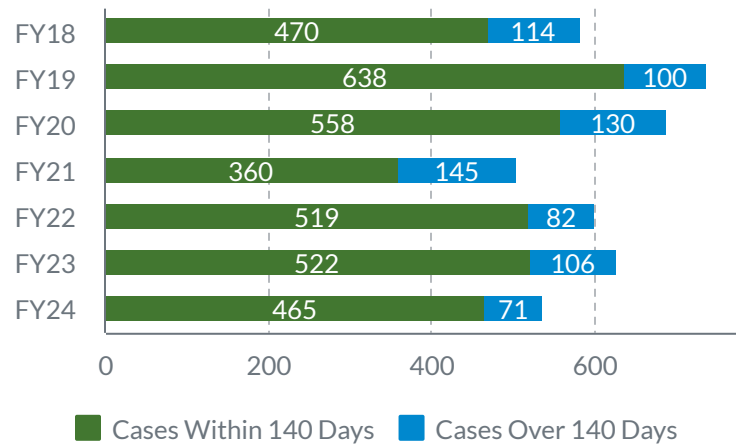


Target Met

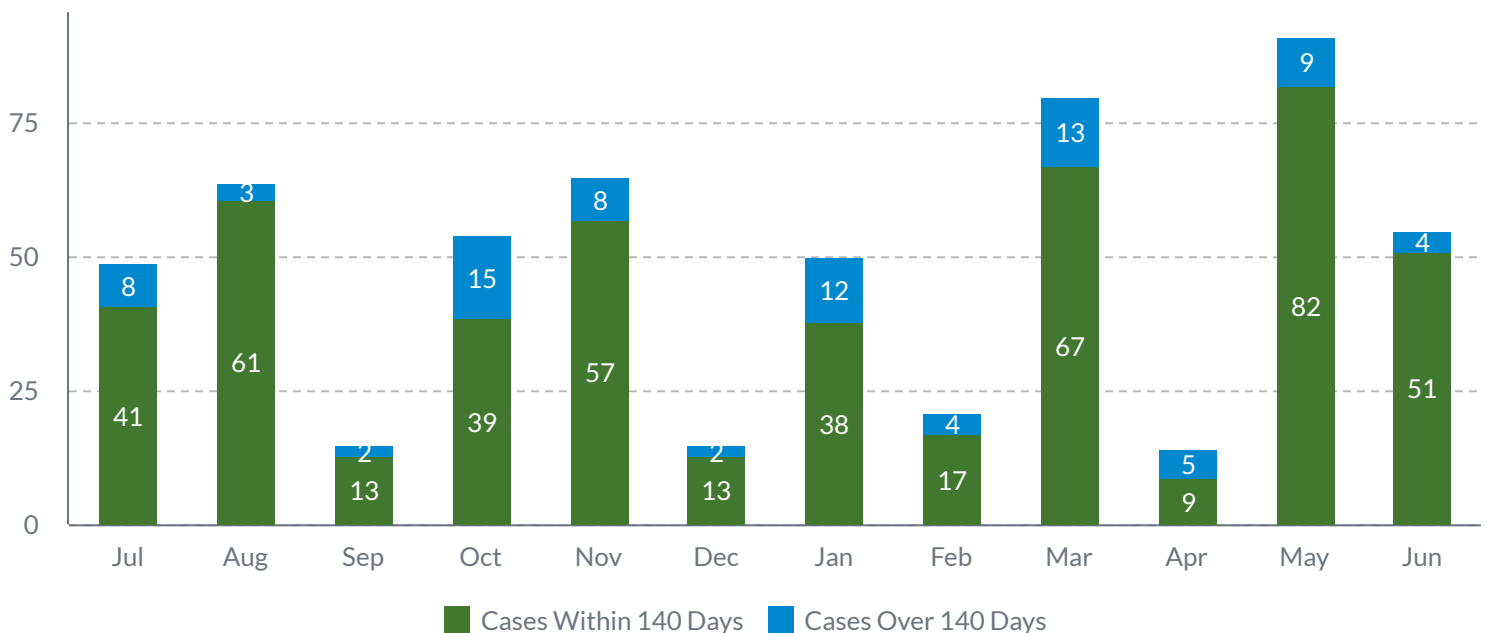
Percent of Cases Completed in 140 Days



Completed Case Dispo Cases



2.3 FY24 Monthly Breakdown





Case Disposition

FY24 2.5 PM
19%

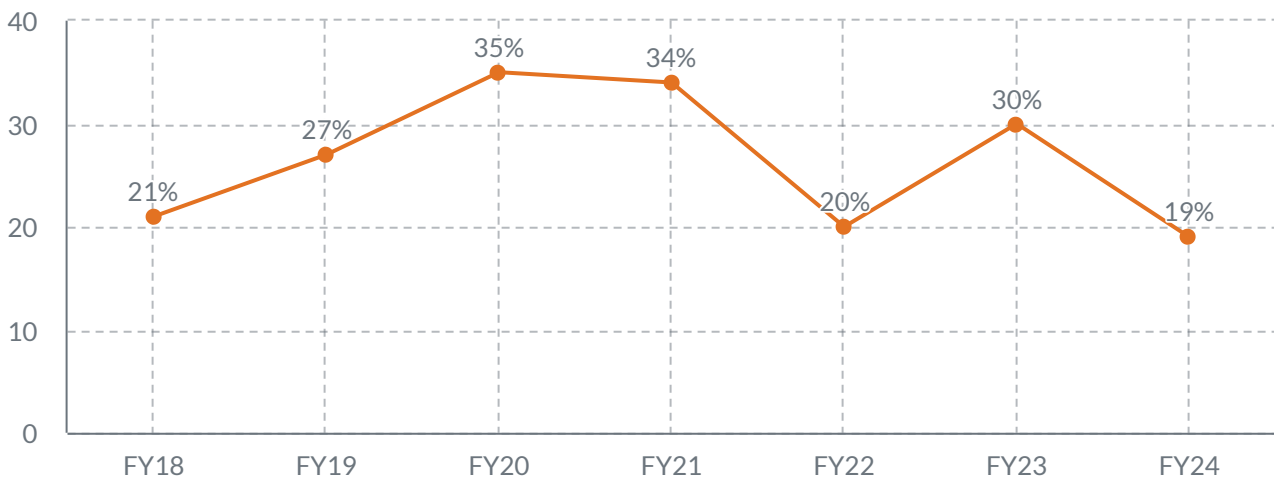


Target Met

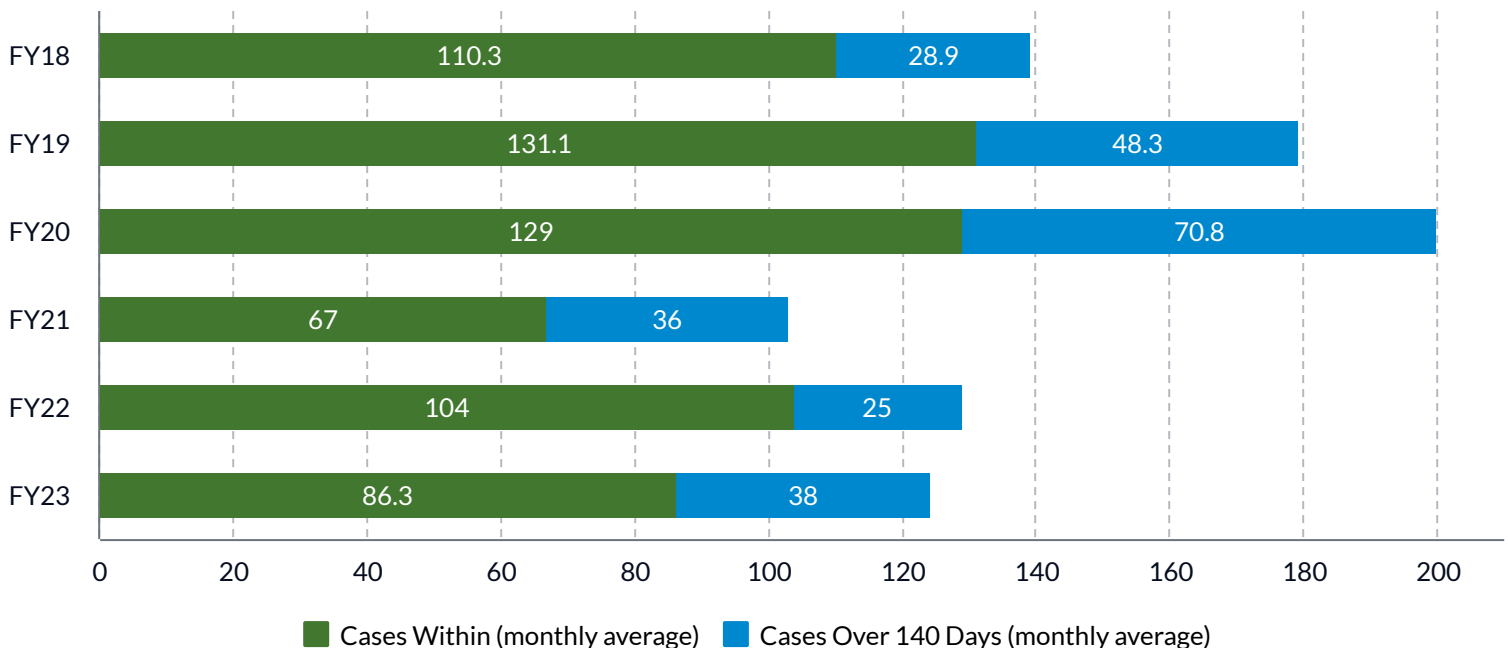
Performance measure **2.5** requires that no more than 23 percent of open cases be older than 140 days.

During FY24, the case disposition step had an average monthly caseload of 77. Of these cases, a relatively small portion, 18.9 percent, took longer than 140 days to resolve.

Percentage of Cases Over 140 Days



Open Cases in Case Disposition





Case Disposition

Performance measure **2.6** measures the consistency of disciplinary orders by measuring how often a disciplinary authority complies with the sanction rules. PM 2.6 requires that 93 percent of orders are in compliance with the sanction schedule.

Out of the 81 cases where charges were issued in FY24, 99 percent complied with the rule.

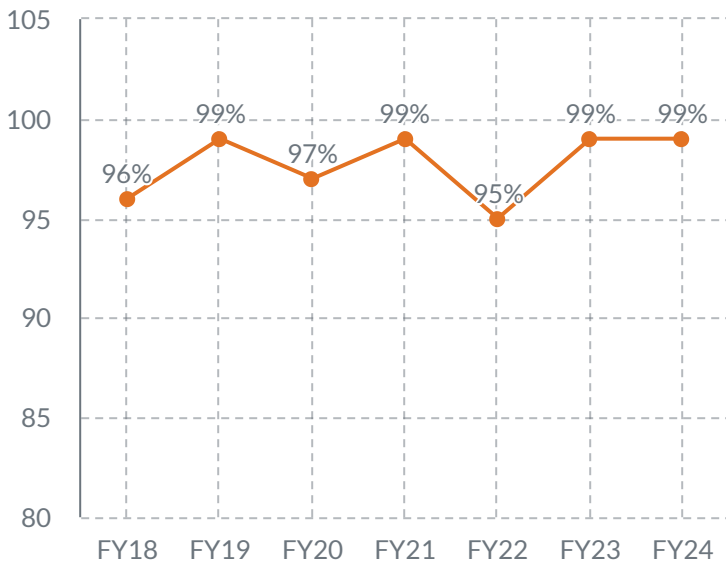
FY24 2.6 PM

99%

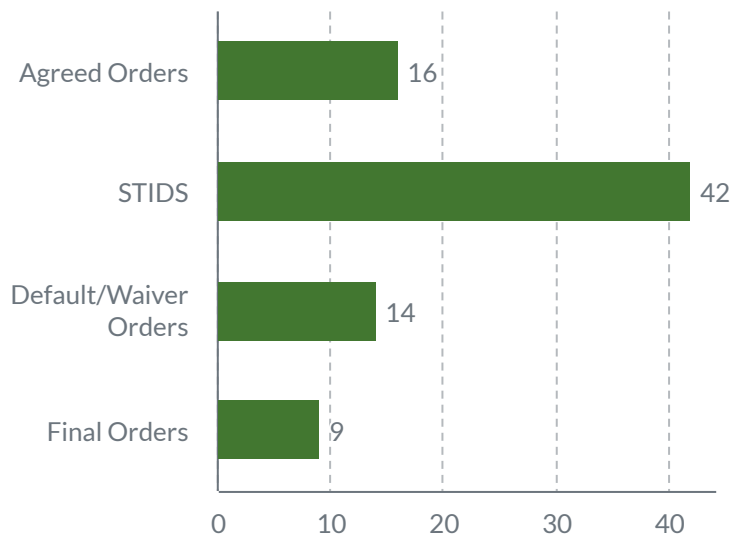


Target Met

Percent of Orders and STIDS that Comply with Sanction Schedule



FY24 Discipline Type Breakdown



Important Numbers

FY23- **74** Disciplinary Actions

FY24- **81** Disciplinary Actions





Cases Closed

Performance measure **2.8** looks at how many cases were resolved within 360 days.

PM 2.8 is broken up into three time periods:

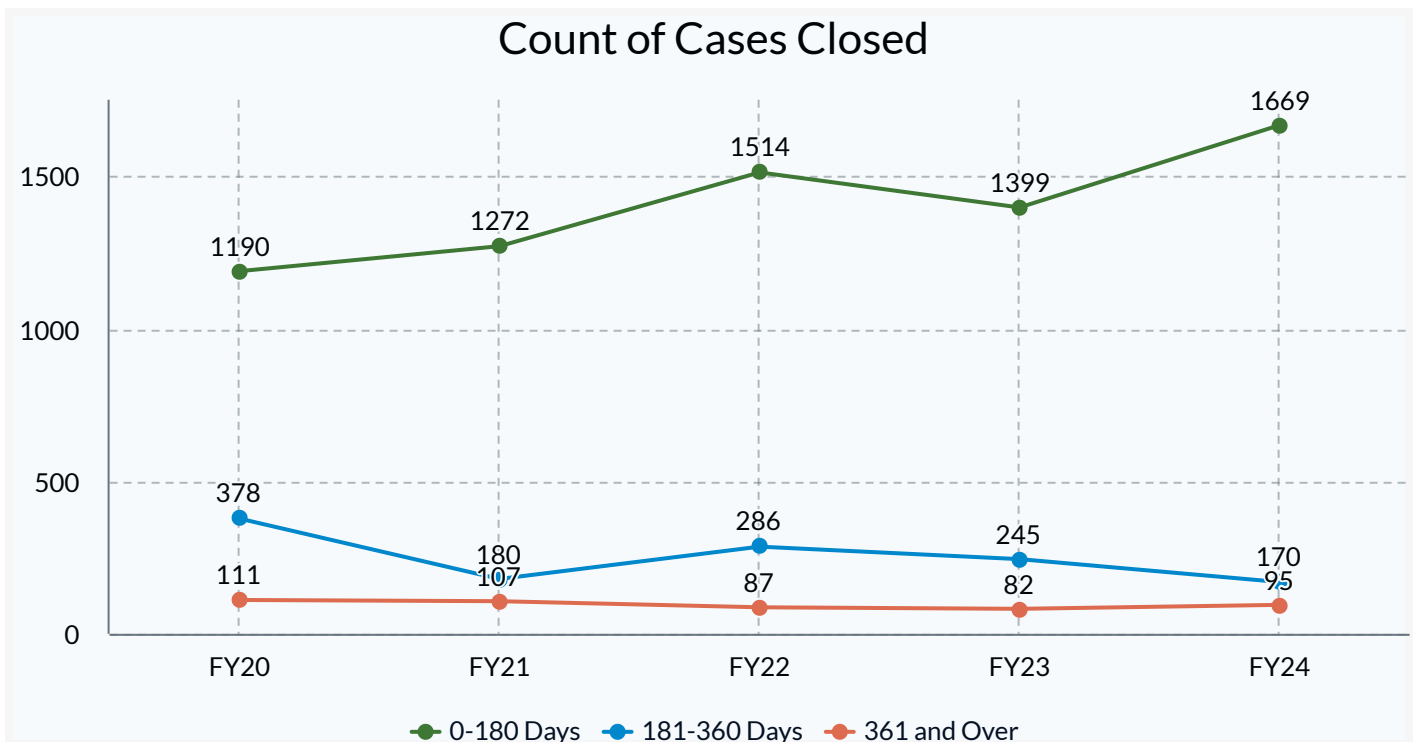
- Cases closed within **180** days
- Cases closed within **181-360** days
- Cases over **360** days

FY24 2.8 PM

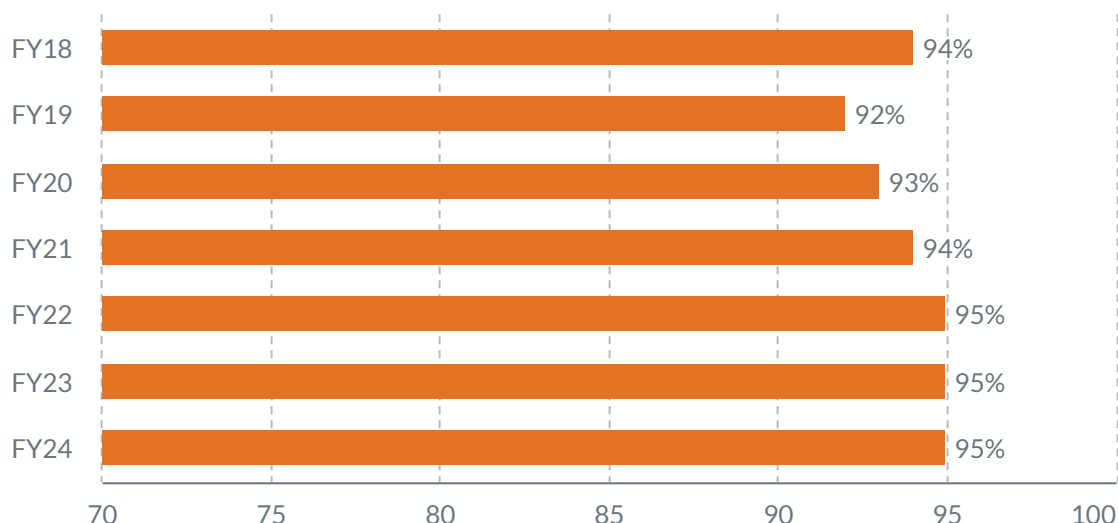
95%



Target Met



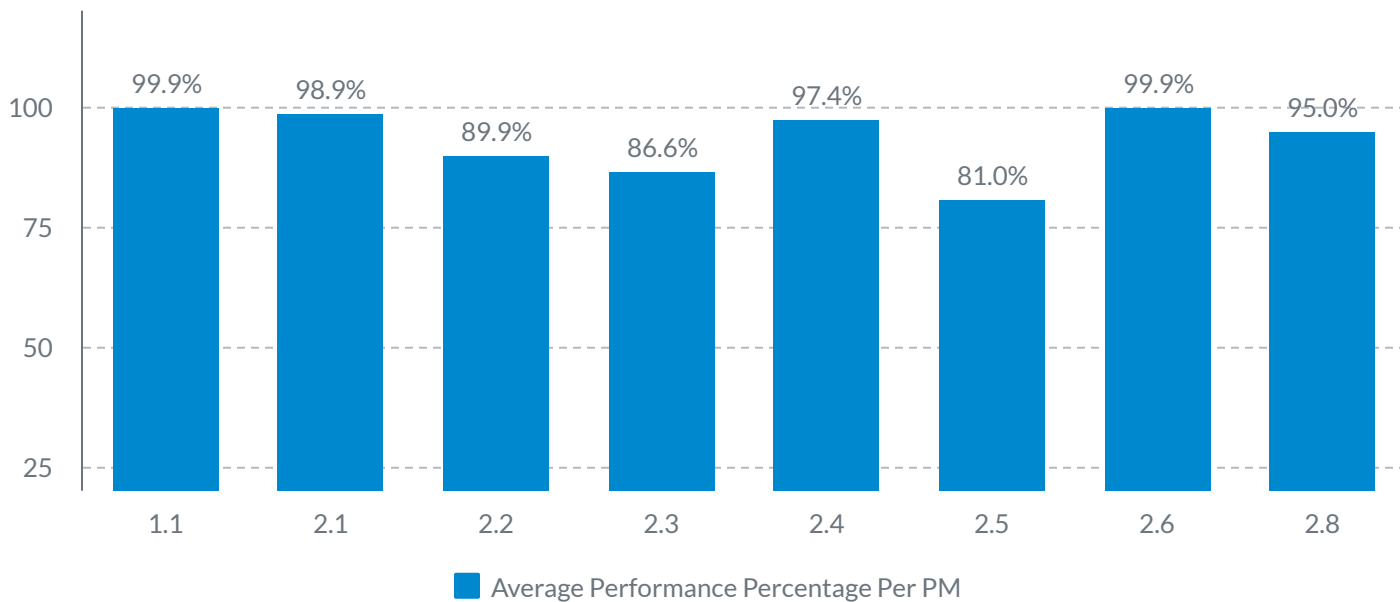
Percent of Closed Cases Completed within 360 Days



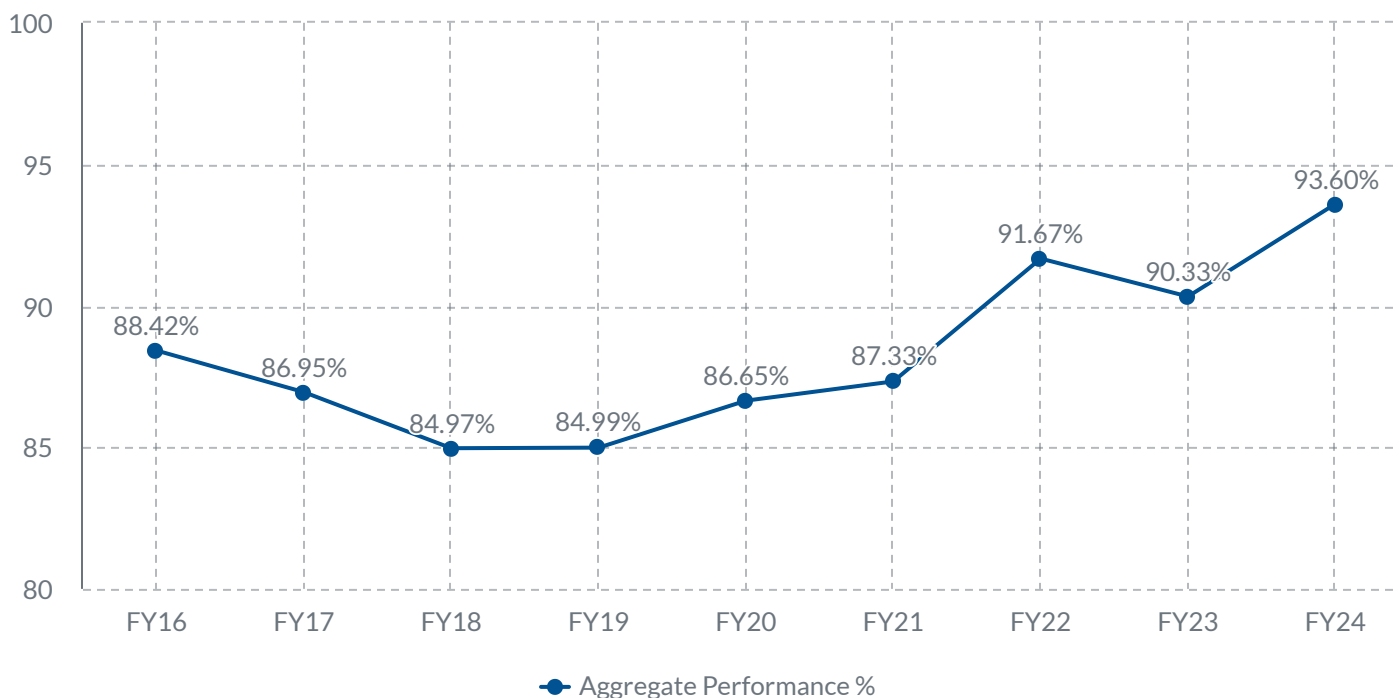


Aggregate Performance Measures

FY24 Aggregate Performance 93.6%



Historical Aggregate Performance





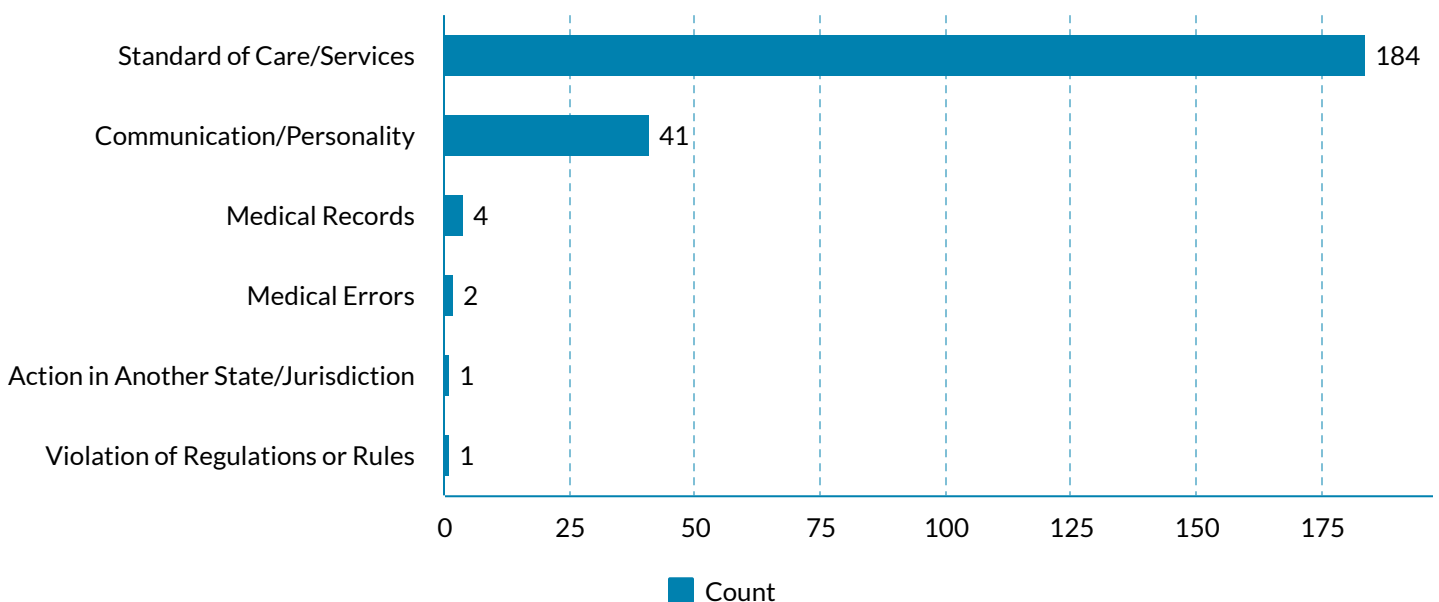
Practitioner Support Program

The WMC recognizes that some complaints, while not rising to the legal level of investigation or discipline, may still indicate potential areas for improvement. To address these concerns proactively, the WMC has established the Practitioner Support Program (PSP). The PSP aims to prevent future complaints by offering voluntary educational resources tailored to specific areas where concerns have been raised. By addressing these issues proactively, the WMC hopes to support practitioners in maintaining high standards of care.

When a complaint is deemed appropriate for the PSP, the WMC sends a letter to the practitioner suggesting relevant continuing medical education (CME) and/or support programs. These resources are intended to address the behavior that resulted in a complaint. For example, if the complaint involved communication challenges, the PSP letter might recommend a CME course on effective communication skills. Participation is voluntary and practitioners can pursue the CME at their discretion. The goal is to help practitioners improve without WMC-mandated requirements.

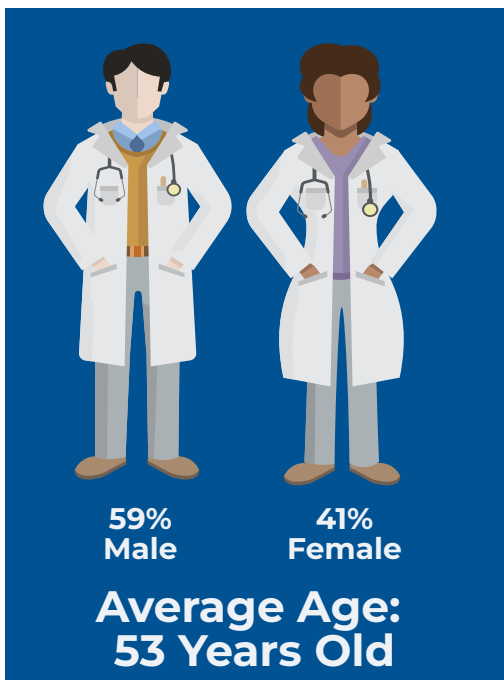
As a new initiative, the WMC will be closely monitoring the effectiveness of the PSP over the coming fiscal years. In FY24, 161 cases were closed under PSP, with 154 being resolved before an investigation was initiated. 75 percent of the PSP cases involved concerns related to the standard of care or services provided by the practitioner.

FY24 PSP Case Natures

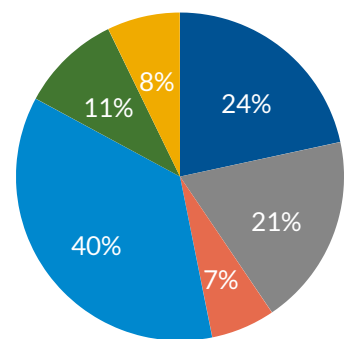




These numbers reflect the census numbers
between July 1, 2017 and June 30, 2024



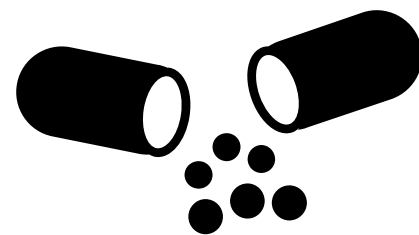
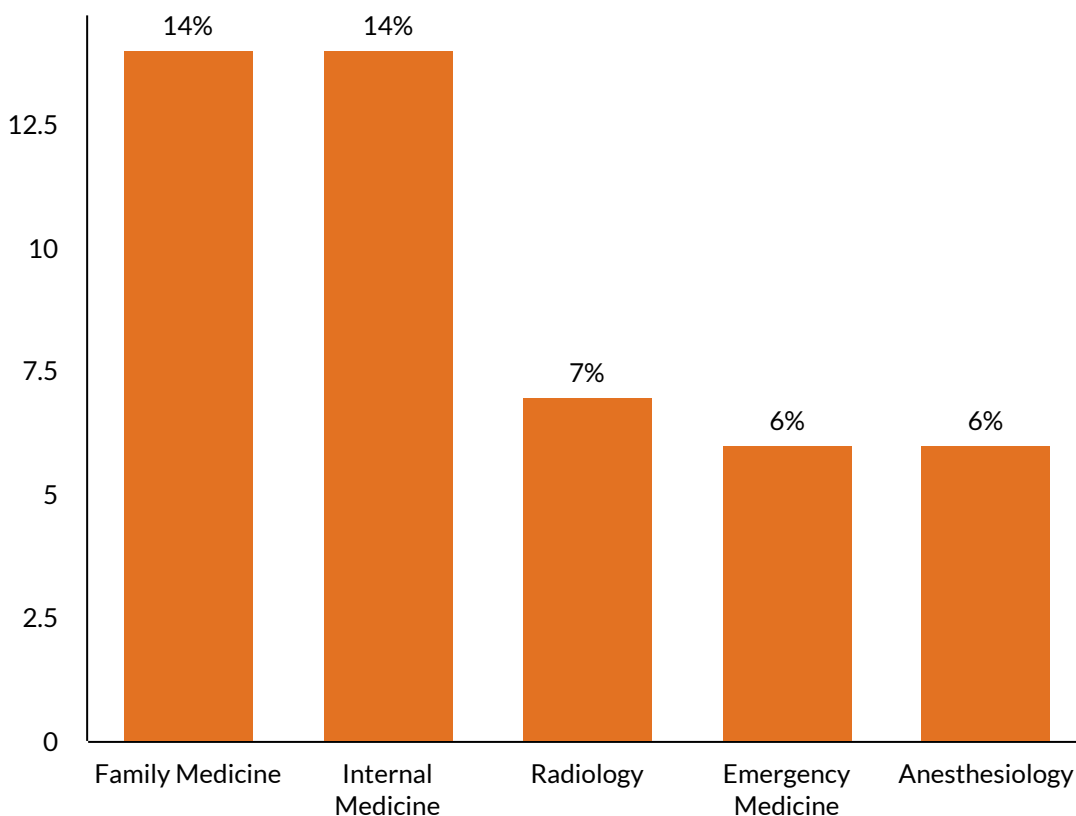
Practice Type



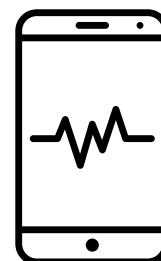
- Single Specialty Group
- Multi-Specialty Group
- Solo Practitioner
- Hospital or Clinic Employee
- State or Federal
- Other

Top 5 Specialties

(% of all specialties)



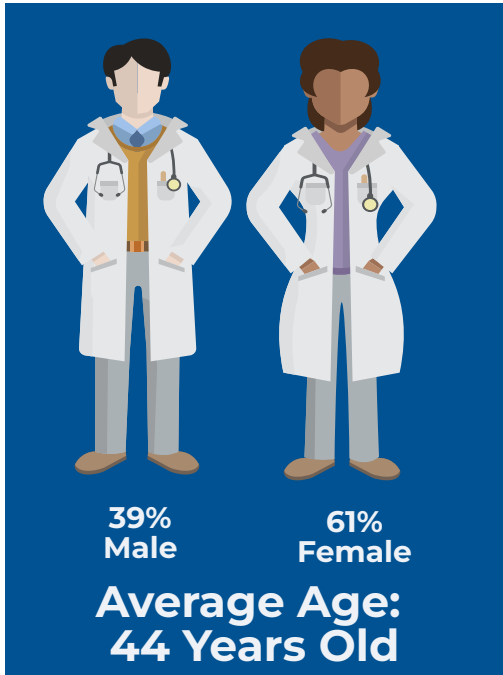
**23% Prescribe
Opioids**



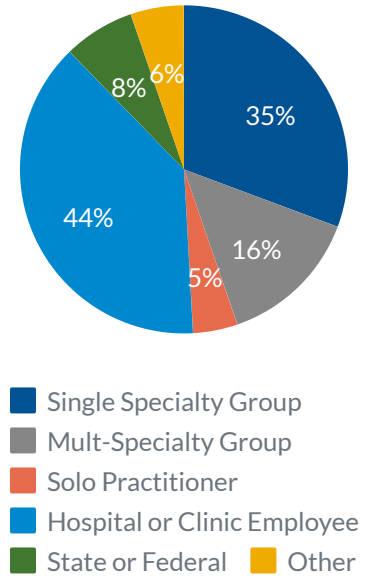
**55% Practice
Telemedicine**



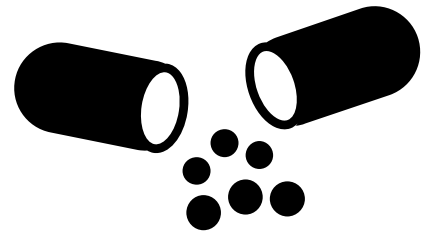
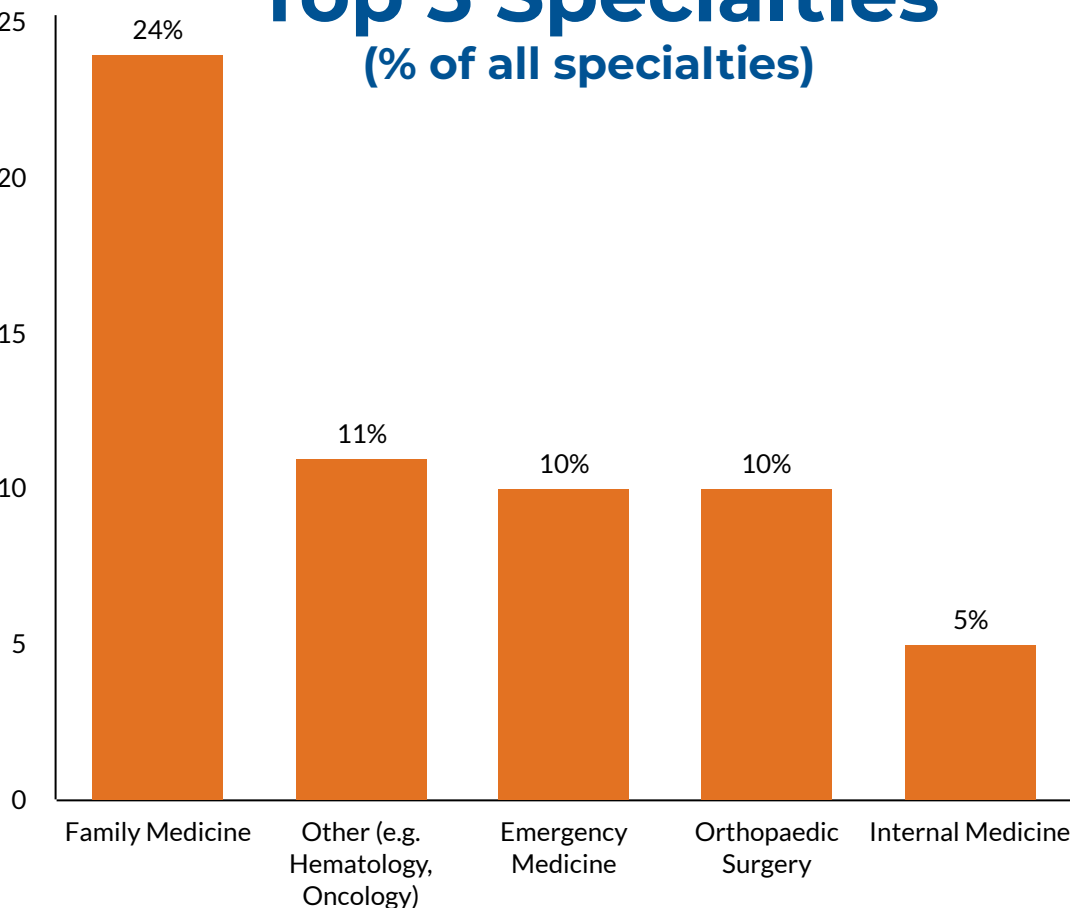
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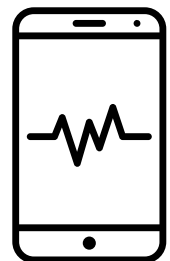
Practice Type



Top 5 Specialties (% of all specialties)



29% Prescribe Opioids



57% Practice Telemedicine