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**Performance Improvement Project (PIP) Report Template**

***For Pre-Paid Inpatient Health Plan (PIHP) PIP Proposal and Final Validation Reports***

**Instructions:**

* This template is for use by pre-paid inpatient health plans (PIHPs).
* Reference the PIP section of the PIHP contract and PIHP’s Quality Guide for additional information on requirements.
* PIP Proposal: Complete standards 1-6 and 8 in this template.
* Final PIP Report Validation: Complete standards 7 and 9 in this template. Make any updates to standards 1-6 and 8 if changes were made after the proposal was approved, including changes made as a result or EQRO recommendations or changes made to facilitate project implementation.

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| **PIHP Name:** | **Report Prepared by:** |
| Click here to enter text. | Click here to enter text. |
| **Date Proposal Submitted:** Click here to enter a date. | **Date Final Report Submitted:** Click here to enter a date. |
| **Project Title:** Click here to enter text. |
| **Project Implementation Date**: Click here to enter a date. |
| **Please check the following items as applicable to this PIP report** |
| **PIP Proposal Type:** [ ]  Clinical [ ]  Nonclinical |
| **Primary PIHP Contact Regarding PIP Project** Click or tap here to enter text. |
| **Email:** Click or tap here to enter text. | **Phone:** Click or tap here to enter text. |
| **PIHP Project Team** |
| **Name** | **Title/Department** |
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| **STANDARD 1: PIP Topic*****Standard 1 applies to PROPOSAL and VALIDATION*** * 1. The PIP topic was selected through a comprehensive analysis of PIHP member needs, care and services.
	2. The PIP topic considered performance on the CMS Child and Adult Core Set measures (if applicable).
	3. The selection of the PIP topic considered input from members or providers who are users or concerned with specific service areas.
	4. The PIP topic addresses care of special populations or high priority services.
	5. The PIP topic aligns with priority areas identified by DHS and/or CMS.
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| **Standard 1 PIP Topic:**Click or tap here to enter text. |
| **STANDARD 2: PIP Aim Statement*****Standard 2 applies to PROPOSAL and VALIDATION**** 1. The PIP aim statement clearly specifies the improvement strategy *(relevant to Standards 8.1 -8.4)*
	2. The PIP aim statement clearly specifies the population for the PIP
	3. The PIP aim statement clearly specifies the time period for the PIP
	4. The PIP aim statement is concise
	5. The PIP aim statement is answerable

2.6 The PIP aim statement is measurable |
| **Standard 2 PIP Aim Statement:**Click or tap here to enter text. |
| **STANDARD 3: PIP Population*****Standard 3 applies to PROPOSAL and VALIDATION*** * 1. The project population is clearly defined in terms of the identified PIP question
	2. If the entire PIHP population is included in the PIP, the data collection approach captures all members to whom the PIP aim or question applies
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| **Standard 3 PIP Population:**Click or tap here to enter text. |
| **STANDARD 4: Sampling Method*****Standard 4 applies to PROPOSAL and VALIDATION****Standard 4 is NA if the entire eligible population was studied or HEDIS measures and sampling methodology are used after confirming sampling is allowed for the measure.* * 1. The sampling frame contains a complete, recent, and accurate list of the target PIP population.
	2. The sampling method considers and specifies the true or estimated frequency of the event, the confidence interval to be used, and the acceptable margin of error
	3. The sample contains a sufficient number of members taking into account non-response
	4. The method assesses the representativeness of the sample according to subgroups, such as those defined by age, geographic location, or health status
	5. Valid sampling techniques were used to protect against bias
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| **Standard 4 Sampling Method:**Click or tap here to enter text. |
| **STANDARD 5:** **PIP Variables and Performance Measures*****Standard 5 applies to PROPOSAL and VALIDATION**** 1. The variables are adequate to answer the PIP question
	2. The performance measures assess an important aspect of care that will make a difference to members’ health or functional status
	3. The performance measures are appropriate based on the availability of data and resources to collect the data
	4. The measures are based on current clinical knowledge or health services research
	5. The performance measures will monitor, track, and compare performance over time; and inform the selection and evaluation of quality improvement activities
	6. The PIHP considered existing measures such as CMS Child and Adult Core Set, Core Quality Measure Collaborative, certified community behavioral health clinics (CCBHC) measures, HEDIS®, or AHRQ measures
	7. The PIHP developed new measures based on current clinical practice guidelines or health services research if there were gaps in existing measures
	8. The measures captured changes in member satisfaction or experience of care
	9. The measures include a strategy to ensure inter-rater reliability (if applicable)
	10. The process measure is meaningfully associated with outcomes (if applicable)
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| **Standard 5 PIP Variables and Performance Measures:**Click or tap here to enter text. |
| **STANDARD 6. Data Collection Procedures*****Standard 6 applies to PROPOSAL and VALIDATION**** 1. The PIP design specifies a systematic method for collecting valid and reliable data that represents the population in the PIP
	2. The PIP design specifies the frequency of data collection
	3. The PIP design clearly specifies the data sources
	4. The PIP design clearly defines the data elements to be collected
	5. The data collection plan links to the data analysis plan to ensure that appropriate data would be available for the PIP
	6. The data collection instruments will allow for consistent and accurate data collection over the time periods studied
	7. Qualitative data collection methods are well-defined and designed to collect meaningful and useful information from respondents (if applicable)

*Administrative Data Sources (if applicable)** 1. If inpatient data will be used, the data system captures all inpatient admissions/discharges
	2. If primary care data will be used, primary care providers submit encounter or utilization data for all encounters
	3. If specialty care data will be used, specialty care providers submit encounter or utilization data for all encounters
	4. If ancillary data will be used, ancillary service providers submit encounter or utilization data for all services provided
	5. If LTSS data will be used, all relevant LTSS provider services are included
	6. If EHR data will be used, patient, clinical, service, or quality metrics are validated for accuracy and completeness as well as comparability across systems

*Medical Record Review (if applicable)** 1. A list of data collection personnel and their relevant qualifications is provided
	2. For medical record review, interrater and intra-rater reliability is described
	3. For medical record review, guidelines for obtaining and recording the data were developed
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| **Standard 6 Data Collection Procedures:**Click or tap here to enter text. |
| **STANDARD 7. Data Analysis and Interpretation of PIP Results** ***Standard 7 applies to VALIDATION.***7.1 The analysis was conducted in accordance with the data analysis plan. 7.2 The analysis included baseline and repeat measurements of project outcomes. 7.3 The analysis assessed the statistical significance of any differences between the initial and repeat measurements7.4 The analysis accounted for factors that may influence the comparability of initial and repeat measurements7.5 The analysis accounted for factors that may threaten the internal or external validity of the findings7.6 The PIP compared the results across multiple entities, such as different patient subgroups, provider sites, or PIHPs7.7 PIP results and findings were presented in a concise and easily understood manner7.8 To foster continuous quality improvement, the analysis and interpretation of the PIP data included lessons learned about less-than-optimal performance |
| **Standard 7 Data Analysis and Interpretation of PIP Results:** Click or tap here to enter text. |
| **STANDARD 8. Improvement Strategies*****Standard 8 applies to PROPOSAL and VALIDATION***8.1 The selected improvement strategy was evidence-based, that is, there was existing evidence (published or unpublished) suggesting that the test of change would be likely to lead to the desired improvement in processes or outcomes (as measured by the PIP variables)8.2 The strategy was designed to address root causes or barriers identified through data analysis and quality improvement processes8.3 The rapid-cycle PDSA approach was used to test the selected improvement strategy. 8.4 The strategy was culturally and linguistically appropriate8.5 The implementation of the strategy was designed to account or adjust for any major confounding variables that could have an obvious impact on PIP outcomes (e.g., member risk factors, Medicaid program changes, provider education, clinic policies or practices)8.6 Building on the findings from the data analysis and interpretation of PIP results, the PIP assessed the extent to which the improvement strategy was successful and identify potential follow-up activities  |
| **Standard 8 Improvement Strategies:**Click or tap here to enter text. |
| **STANDARD 9. Significant and Sustained Improvement** ***Standard 9 applies to VALIDATION.***9.1 The same methodology was used for baseline and repeat measurements. 9.2 There was quantitative evidence of improvement in processes or outcomes of care. 9.3 The reported improvement in performance was likely to be a result of the selected intervention. 9.4 There is statistical evidence (e.g., significance tests) that any observed improvement is the result of the intervention. 9.5 Sustained improvement was demonstrated through repeated measurements over time.  |
| **Standard 9 Significant and Sustained Improvement:**Click or tap here to enter text. |

**In the space below:**

* **Please list any references relevant to this PIP final report.**
* **Attach any relevant documents (or include attachments in the report submission packet)**

Click or tap here to enter text.