

## **980 PERFORMANCE IMPROVEMENT PROJECTS**

REVISION DATE: 6/7/2023, 9/15/2021

EFFECTIVE DATE: October 1, 2019

REFERENCES: 42 CFR 438.330, Section F3, Contractor Chart of Deliverables

### **PURPOSE**

This policy applies to the Division of Developmental Disabilities' (Division) Administrative Services Subcontractors (AdSS) and delineates the purpose, design, implementation, and reporting of Division or AHCCCS-mandated and AdSS self-selected Performance Improvement Projects (PIPs).

### **DEFINITIONS**

1. "Baseline Data" means data collected at the beginning of a PIP that is used as a starting point for measurement and the basis for comparison with subsequent remeasurement(s) in demonstrating significant and sustained improvement.
2. "Benchmark" means the process of comparing a practice's performance with an external standard to motivate engagement in quality improvement efforts and understand where

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performance falls in comparison to others. Benchmarks may be generated from similar organizations, quality collaboratives, and authoritative bodies.

3. "Grievance" means a member's expression of dissatisfaction with any matter, other than an adverse benefit determination.
4. "Methodology" means the planned documented process, steps, activities, or actions taken to achieve a goal or objective, or to progress towards a positive outcome.
5. "Monitoring" means the process of auditing, observing, evaluating, analyzing, and conducting follow-up activities, and documenting results via desktop or on-site review.
6. "Objective" means a measurable step, generally one of a series of progressive steps, to achieve a goal.
7. "Outcomes" means changes in patient health, functional status, satisfaction, or goal achievement that result from health care or supportive services [42 CFR 438.320].
8. "Performance Improvement Project (PIP)" means a planned process of data gathering, evaluation and analysis to determine

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interventions or activities that are projected to have a positive outcome. A PIP includes measuring the impact of the interventions or activities toward improving the quality of care and service delivery.

9. "Plan Do Study Act (PDSA) Cycle" means a scientific method for testing a change or intervention, designed to result in improvement in a specific area. The cycle is completed by planning the change/intervention, trying it, observing the results, and acting on what is learned. When these steps are conducted over a relatively short time period, i.e., over days, weeks, or months, the approach is known as Rapid Cycle Improvement.
10. "Plan Do Study Act (PDSA) Method" means a four step model to test a change that is implemented. Going through the prescribed four steps utilizing one or more PDSA Cycles guides the thinking process into breaking down the task into steps and then evaluating the outcome, improving on it, and testing again.
11. "Quality" as specified in 42 CFR 438.320, pertains to external

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quality review, means the degree to which an MCO increases the likelihood of desired outcomes of its members through:

- a. Its structural and operational characteristics.
  - b. The provision of services that are consistent with current professional, evidence-based knowledge.
  - c. Interventions for performance.
12. “Statistically Significant” means a judgment of whether a result occurs because of change. When a result is statistically significant, it means that it is unlikely that the result occurs because of chance or random fluctuation. There is a cutoff for determining statistical significance. This cutoff is the significance level. If the probability of a result (the significance value) is less than the cutoff (the significance level), the result is judged to be statistically significant.
13. “Validation” means the review of information, data, and procedures to determine the extent to which they are accurate, reliable, free from bias and in accord with standards for data

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collection and analysis.

## **POLICY**

### **A. PERFORMANCE IMPROVEMENT PROJECT (PIP) REQUIREMENTS**

1. The AdSS shall participate in PIPs selected by the Division and AHCCCS.
2. The AdSS shall select and design, with Division approval, additional PIPs specific to needs identified through internal monitoring of trends and data.
3. The AdSS shall consider all populations and services covered when developing quality assessments and PIPs.
4. The AdSS shall participate in performance measures and PIPs that are mandated by the Centers for Medicare and Medicaid Services (CMS).

### **B. PERFORMANCE IMPROVEMENT PROJECTS (PIPS) DESIGN**

1. The AdSS shall conduct PIPs, including any PIPs required by CMS, that focus on either clinical or non-clinical areas.
  - a. Clinical focus topics may include:

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- i. Primary, secondary, and/or tertiary prevention of acute conditions;
  - ii. Primary, secondary, and/or tertiary prevention of chronic conditions;
  - iii. Primary, secondary, and/or tertiary prevention of behavioral health conditions;
  - iv. Care of acute conditions;
  - v. Care of chronic conditions;
  - vi. Care of behavioral health conditions; and
  - vii. Continuity and coordination of care.
- b. Non-clinical focus topics may include:
- i. Availability, accessibility, and adequacy of Contractor's service delivery system;
  - ii. Cultural competency of services;
  - iii. Interpersonal aspects of care (e.g., quality of provider/member encounters); and
  - iv. Appeals, grievances, and other complaints.
2. The AdSS shall identify and implement clinical and non-clinical focused PIPs that are meaningful to the population(s) served and based on self-identified opportunities for improvement. This will be supported by:
- a. Root cause analyses,

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- b. External and internal data,
  - c. Surveillance of trends, or
  - d. Other information available to the AdSS.
3. The AdSS shall adhere to the protocol in 42 CFR 438.330 when developing PIPs.
4. The AdSS shall also adhere to and align with the protocol specified in AMPM Policy 980 – Attachment A, Protocol for Conducting Performance Improvement Projects, when selecting, designing, developing, and implementing self-selected PIPs.
5. The AdSS shall use the PDSA Method to test changes (interventions) quickly and refine them, as necessary.
6. The AdSS shall utilize several PDSA Cycles within the PIP lifespan.
7. The AdSS shall implement the PDSA Cycles in as short a time frame as practical, based on the PIP topic.
8. The AdSS shall include the following steps in the PDSA Cycle:
- a. Plan the change(s) or intervention(s), including a plan

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for collecting data. State the objective(s) of the intervention(s).

b. Try out the intervention(s) and document any problems or unexpected results.

c. Analyze the data and study the results. Compare the data to predictions and summarize what was learned.

d. Refine the change(s) or intervention(s), based on what was learned, and prepare a plan for retesting the intervention(s).

e. Continue the cycle as new data becomes available until improvement is achieved.

9. The AdSS shall include all PDSA Cycles conducted as part of the PIP within the AdSS' PIP Report submissions.

### **C. PERFORMANCE IMPROVEMENT PROJECT (PIP) TIMEFRAMES**

1. AHCCCS-Mandated PIPs



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- a. The AdSS shall initiate mandated PIPs on the date established by the Division or AHCCCS.
- b. The AdSS shall collect and analyze data at the beginning of the PIP.
- c. During the Intervention year, the AdSS shall implement innovative and/or evidence-based interventions to improve performance.
- d. The AdSS shall base this on an evaluation of barriers and root cause analysis.
- e. The AdSS' interventions shall consider any unique factors such as:
  - i. The AdSS' membership,
  - ii. The provider network, and
  - iii. The geographic area(s) served.
- f. The AdSS shall utilize annual measurements to evaluate their performance; however, AHCCCS may require interim measurements, depending on the resources required to collect and analyze data.



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1. The AdSS shall align their data collection methodology, including project indicators, procedures, and timelines, with the guidance and direction provided for all AHCCCS-mandated PIPs.
2. The AdSS shall evaluate their performance on the selected PIP indicators based on systematic, ongoing collection and analysis of accurate, valid, and reliable data, as collected and reported by AHCCCS or as validated by the AHCCCS External Quality Review Organization (EQRO).
3. The AdSS shall ensure collected data are accurate, valid, and reliable through internal processes for self-selected PIPs that are not based on standardized performance measures.

### **E. INTER-RATER RELIABILITY**

1. For PIPs that are not based on standardized performance measures as well as performance measures not included within AHCCCS Contract, the AdSS shall:
  - a. Submit specific documentation to verify that indicator criteria were met in accordance with AHCCCS instruction,
  - b. Have qualified personnel collect data,

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- c. Ensure inter-rater reliability if more than one person is collecting and entering data.
2. The AdSS shall ensure that data collected from multiple parties/individuals for PIP indicators is consistent and comparable through an implemented inter-rater reliability process.
3. The AdSS' documented inter-rater reliability process shall include:
  - a. A detailed description of the AdSS' methodology for conducting inter-rater reliability including:
    - i. Initial training (and retraining, if applicable);
    - ii. Oversight;
    - iii. Validation of data collection; and
    - iv. Other activities deemed applicable.
  - b. The required minimum score that each individual shall obtain in order to continue participation in the data collection and reporting process;

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- c. A mechanism for evaluating individual accuracy scores (and any subsequent accuracy scores, if applicable); and
  - d. The actions taken should an individual not meet the established accuracy score.
- 4. The AdSS shall monitor and track the inter-rater reliability accuracy scores and associated follow up activities.
  - 5. The AdSS shall provide evidence of implementation of the inter-rater reliability process as well as the associated monitoring upon AHCCCS request.

**F. MEASUREMENT OF SIGNIFICANT DEMONSTRABLE IMPROVEMENT**

- 1. The AdSS shall implement interventions to achieve and sustain statistically significant improvement, followed by sustained improvement for one consecutive year, for each PIP indicator.
- 2. The AdSS shall initiate interventions that result in significant improvement, sustained over time, in its performance for the PIP indicators being measured.
- 3. The AdSS shall show evidence of improvement in repeated measurements of the PIP indicators specified for each active PIP.

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4. The AdSS shall demonstrate significant improvement when the improvement in the PIP indicator rate(s) from one measurement year to the next measurement year is statistically significant.
5. The AdSS shall demonstrate sustained improvement when it:
  - a. Establishes how the significant improvement can be reasonably attributable to interventions implemented by the Contractor (i.e., improvement occurred due to the project and its interventions, not another unrelated reason); and
  - b. Maintains, or increases, the improvements in performance for at least one year after the significant improvement in performance is first achieved.

### **G. PERFORMANCE IMPROVEMENT PROJECTS (PIPS) REPORTING REQUIREMENTS**

1. The AdSS shall refer to the AHCCCS Quality Management/Performance Improvement (QM/PI) Reporting Templates & Checklists section of the AHCCCS website to locate the associated tools the AdSS shall utilize, as outlined in this

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section, when preparing and submitting the required deliverables.

2. The AdSS shall include baseline and annual remeasurements, inclusive of rates and results used as the basis for analysis, both quantitative and qualitative, and the selection/modification of interventions, within the AdSS's PIP report submissions.
3. The AdSS shall submit reports that contain population/line of business-specific data, reflective of the AdSS' performance during the current and previous reporting periods in alignment with the associated PIP timeline.
4. The AdSS shall ensure the inclusion of subpopulation data and disparity analyses within its reporting, with the identification of targeted interventions to be implemented specific to findings, in alignment with the AHCCCS PIP Report Template and Attachment instructions.
5. AHCCCS-mandated PIPs
  - a. The AdSS shall submit PIP reports for all AHCCCS-mandated PIPs, as specified in Contract.

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- b. The AdSS shall utilize the AHCCCS PIP Report Template and Attachment that is applicable to the population/line of business being reported.
- c. The AdSS shall report rates and results, reflective of combined Title XIX and Title XXI populations, as applicable to the population/line of business.
- d. The AdSS shall indicate if the interventions are applicable to Title XIX, Title XXI, or both populations.
- e. The AdSS shall submit a final PIP report, as specified in Contract, following the year in which significant and sustained improvement is demonstrated.
- f. The AdSS shall evaluate significant and sustained improvement based on PIP indicator rates that have been validated by AHCCCS' EQRO or considered as the AHCCCS official PIP indicator rates, as specified in Contract and the associated AHCCCS PIP Methodology.





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- b. The AdSS shall submit PIP reports for self-selected PIPs, active during the previous calendar year, as specified in Contract.
- c. The AdSS shall utilize the AHCCCS PIP Report Template and Attachment, specific to population/line of business.
- d. The AdSS shall indicate if measurements/rates and results are reflective of combined Title XIX and Title XXI populations, as applicable to population/line of business.
- e. The AdSS shall indicate if the interventions are applicable to the Title XIX, Title XXI, or both populations.
- f. The AdSS shall submit a final self-selected PIP report, as specified in Contract, following the year in which significant and sustained improvement is demonstrated.
- g. The AdSS shall evaluate significant and sustained improvement based on PIP indicator rates that have been validated by AHCCCS' EQRO or considered as the AHCCCS official performance measure rates, as specified in Contract.

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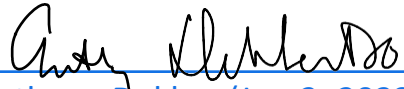
- h. The AdSS shall evaluate significant and sustained improvement based on the AdSS' internally collected and validated data for self-selected PIPs that are not based on standardized performance measures and calendar year performance.
- i. The AdSS shall utilize its Remeasurement Year two (or subsequent year, if required) PIP report to serve as their final PIP report submission contingent upon the following:
  - i. The AdSS has met the AHCCCS contract and policy criteria related to significant and sustained improvement to support PIP closure, and
  - ii. The sections required as part of the final PIP report have been completed.
- j. The AdSS shall keep AdSS self-selected PIPs open until the AdSS has met criteria related to significant and sustained improvement.

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- k. The AdSS shall submit a PIP Closure Request for each PIP they are requesting to close for AHCCCS' review and approval.
- l. The AdSS shall indicate the rationale for closing a PIP in cases where the AdSS has not met criteria related to significant and sustained improvement to support PIP closure.
- m. The AdSS shall close the PIP when formal notification of approval for PIP closure has been received from AHCCCS.
- n. The AdSS shall resubmit their final PIP report if the AHCCCS PIP Checklist requirements are not met.

Signature of Chief Medical Officer:

  
Anthony Dekker (Jun 2, 2023 15:35 PDT)  
Anthony Dekker, D.O.